




Parameters	Phase 1: Strength in non-provocative position	Phase 2a: Strength in functional position	Phase 2b: Motor Control
Indication	≥50% deficit in middle trapezius or lower trapezius strength as compared to contralateral side or bilateral weakness and pain with resisted horizontal abduction in prone or failure to improve with scapular strengthening without NMES	≥50% deficit in middle trapezius or lower trapezius strength and pain-free horizontal abduction in prone or failure to improve with scapular strengthening without use of NMES	Presence of a painful arc with a (+)modified scapular assistance test (defined as a 2 point pain reduction or increased elevation AROM) and/or (+)scapula reposition test (defined as a 2 point reduction in pain with Jobe empty can test) in the absence of significant trapezius or serratus anterior weakness
Patient Position	Standing or seated, shoulders neutral with isometric resisted scapular retraction using resistance bands	Prone T, Y or 'field goal'	Standing with active shoulder elevation in flexion, scaption or abduction
Electrode Placement ⁴¹	Middle trapezius muscle belly	Middle trapezius/lower trapezius muscle belly	Lower trapezius muscle belly between the inferior angle of the scapula and the 7th thoracic spinous process. Serratus Anterior at the intersection of the 6th rib and the midaxillary line
Phase Duration	400μs	400μs	400μs
Pulse Frequency	75pps	75pps	25-55pps ³⁷
Duty Cycle	1:5 (5 sec on, 25 sec off)	1:5 (5 sec on, 25 sec off)	1:3 progressing to 1:1 with 1 sec on and 1 sec off to be used with dryland stroke simulation actively or with resistance
			

Placement In Rehabilitation

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Placement in Rehabilitation David Vandergoot, John D. Worrall, 1979 *Clinical Placement Manual For Enrolled Nurses* Catherine Joustra, Ali Moloney, 2018-12-01 Clinical Placement for the Diploma of Nursing is an exciting new resource that facilitates easier delivery of learning for HLT54115 A practical manual it incorporates both knowledge evidence and performance evidence supported by learning material Written to the training package all learning objectives and clinical skills are covered and activities assessments and materials you need are provided for each unit Educators and clinical facilitators now have transparency for mapping course delivery and streamlined placement Textbook layout suits course progression and clinical placement blocks as the order of coverage follows block delivery Opening vignettes and real life case studies and tips from nurses and students in clinical settings gives context to the theory and assist the student before placement to identify key knowledge elements which are applied to a practical setting Cross referencing is included and Clinical Placement for Diploma of Nursing can be value packed with Tollefson s Essential Clinical Skills and Clarke Gray s Foundations of Nursing to create a complete reference package for trainees **Employment Security Review** ,1956

Research Report of the Interdepartmental Workers' Compensation Task Force United States. Interdepartmental Workers' Compensation Task Force, 1979 *The Vocational Guidance Quarterly* ,1982 *Annotated Bibliography on Transition from School to Work* ,1987 *Employment Security Review* United States. Bureau of Employment Security, 1956

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In a fast-paced world fueled by information and interconnectivity, the spellbinding force of linguistics has acquired newfound prominence. Its capacity to evoke emotions, stimulate contemplation, and stimulate metamorphosis is truly astonishing. Within the pages of "**Placement In Rehabilitation**," an enthralling opus penned by a highly acclaimed wordsmith, readers attempt an immersive expedition to unravel the intricate significance of language and its indelible imprint on our lives. Throughout this assessment, we shall delve into the book's central motifs, appraise its distinctive narrative style, and gauge its overarching influence on the minds of its readers.

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