



新界西醫院聯網 病人啟力基金  
Patient Empowerment Programme, New Territories West Cluster

# 職業治療 照顧者 錦囊



授人以魚不如授人以漁《老子》  
Give a man a fish and you feed him for a day.  
Teach a man to fish and he feeds himself for a life time.

『職業治療』中的『職業』泛指一切對個人有意義的活動。職業治療的主要目標是使人們能夠參與日常生活的活動，為生活重拾色彩。

職業治療師訓練患者自我照顧能力、社區生活技巧、肢體功能、思維和感知概念；另透過輔助器具、家居改建和照顧者訓練，令患者重投社群。

本小冊子旨在介紹各種日常生活的基本照顧技巧及家居訓練活動，提升自理能力，減低疾病對日常生活的影響，助人自助，改善生活質素。

Occupational therapy engages patients in meaningful activities (occupations), regains life roles and improves quality of life.

Occupational Therapists train self care activities, community living skills, sensori-motor and cognitive functions. We will also provide advice on assistive technology, home modification and care-giver training on need basis to help patient reintegrate into community.

This leaflet empowers patients and care-givers to manage self-care activities and minimize the impact of disease on daily living through education on caring skills and home program.

日常技巧多活用  
重整生活新模式

教導學習相互動  
適應融入社群中

We empower our clients to return to their valued life roles at home, work and leisure by making the best use of their functional capabilities.

## 梳洗輔助工具 Grooming aids



鬚刨 / 電動牙刷  
Shaver or Electric Tooth Brush



長柄梳  
Long-handled Brush



改裝指甲鉗  
Adapted Nail Cutter



牙膏擠壓器  
Toothpaste Squeezer

如有任何疑問，可諮詢本院職業治療師  
For any enquires, please contact Case Occupational Therapist

### 聯絡Contact

職業治療師Occupational Therapist: \_\_\_\_\_ (姑娘Ms./先生Mr.)

電話Tel : \_\_\_\_\_

# 進食及梳洗篇

## Feeding & Grooming

### 背景

病人因疾病或身體功能欠佳導致無法完成日常活動。職業治療師會統合分析，為病人提供功能訓練，採用特別技巧，輔助工具及改裝家居環境，提高自理能力，從而提升生活素質。

梳洗和進食都是較基本的自理活動，鼓勵病人多參與，有助提升自我形象和自理能力。Encourage patients to participate in basic self care activities such as feeding and grooming so as to enhance self image and reduce sick role.

1. 保持良好坐姿：坐於安穩有背靠的椅子，承托背部，腰背挺直，髖部、膝部及腳踝保持直角，雙腳踏在地上。Sit upright in sturdy chair with back rest and appropriate seat height. Hips, knees and ankles are in right angle.
2. 把用具放置在穩固表面，或病人觸手可及範圍之內。Put tools within patient's reach.
3. 按病人能力，鼓勵完成步驟/部分活動。有需要時提供協助。Encourage participation. Assist only when needed.



進食時..

減少嘈音和滋擾，讓病人可專心進食。



## 進食輔助器具 Feeding & Drinking Aids

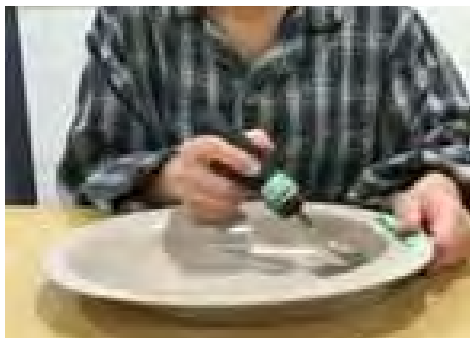
特別設計的碗碟、杯子和餐具，較易抓握，方便勺舀，減少濺漏。適合上肢功能欠佳或需較長時間進餐人士使用。

Plates, bowls, cups and cutlery with special design make holding and scooping easier for patients with inadequate upper limb control.



高邊碗 Scooper Bowl

特點：吸盤固定位置



高邊碟 Scooper Plate

特點：高邊方便勺舀



特製杯 Cup with Cut Out

特點：飲水時杯子有更大的傾斜角度，減少頭部或身體仰後



特製杯 Adapted Cup

特點：雙手抓握，啜咀減少濺漏



保溫盛器

Insulated Mug/Bowl



曲柄餐具

Curved Cutlery



筷子輔助器

Chopsticks Adaptor



轉柄餐具

Swivel Spoon



加粗手柄

Enlarged Handle



通用抓握器

Universal Cuff for Utensil



## 安裝扶手 Installation of handrails



可因應病人需要，安裝直/橫扶手  
Install vertical or horizontal handrail,  
depending on patient's needs



可摺式扶手佔用較少空間，用時才放下  
Folding hand rail

## 改善門檻 Threshold modification



1. 可加斜台方便便椅出入  
Place a ramp at the entrance for  
access of commode
2. 可貼上與地下顏色對比大的防滑貼，  
以便患者清楚看見門檻  
Non-slip strap with color contrast  
makes threshold more visible

職業治療師會按患者能力和家居環境作合適的建議。  
如有任何疑問，可諮詢本院職業治療師  
For any enquires, please contact Case Occupational Therapist

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# 如廁篇 Toileting



病人因疾病或身體機能下降，令活動能力下降並影響自理能力，例如：如廁。以下介紹如廁技巧和廁所家居改裝，提升病人如廁的能力和安全性。

To improve patient's performance and safety in toileting, the following tips may be considered.

### 如廁方法1:

由健側步近坐廁  
Approach the toilet  
with the unaffected  
side



盡量保持廁所地面乾爽，移除通道的雜物，例如：沐浴用品或地布  
Keep the floor dry and remove  
the obstacles / loose rug

### 如廁方法2:

平衡力欠佳的病人，  
轉身和整理衣服時握  
著扶手  
Hold the handrail  
when turning /  
arranging pants



## 使用助行器具進入廁所 Entering toilet with frame or other walking aids



先把助行架或其他助行器具放過門檻；再一步步跨過門檻  
Put the walking aids in and then cross the threshold

## 使用有轆沖涼便椅進入廁所 Entering toilet with wheeled shower commode chair



照顧者將患者轉移在便椅上  
Transfer patient onto the wheeled commode

再推入洗手間如廁或洗澡  
Then position the commode over the toilet

照顧者錦囊一如廁篇

## 其他如廁輔助用具 Other aids

### 1. 無轆便椅 / 尿壺 / 便盆 Static commode / Urinal / Bed pan



放在床邊位置，方便病者晚間如廁，避免跌倒  
Put at bedside for toileting at night for fall prevention

### 2. 廁所架Toilet frame



有扶手，而且座高較一般坐廁高，方便患者坐下或起身  
With armrest and higher seat height to facilitate sit to stand action

### 3. 座廁加高器 Raised toilet seat



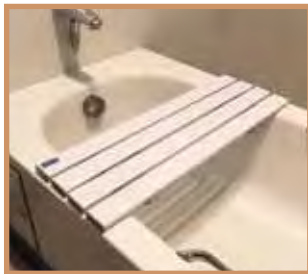
升高一般座廁，方便患者坐下或起身  
With higher seat height to facilitate sit to stand action



## 各式沐浴輔助器具 Bathing aids



沖涼椅  
Shower chair



浴缸板  
Bath board



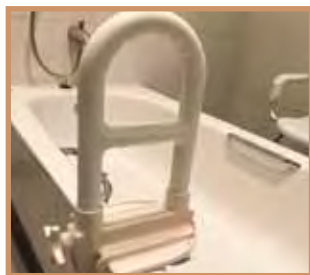
有轆沖涼便椅  
Wheeled shower commode



活動掛牆淋浴椅  
Foldable wall-mounted shower seat



固定浴室扶手  
Fixed handrail



浴缸扶手  
Grab bar



長柄擦  
Long handled sponge



擦背毛巾  
Looped towel



防滑墊  
Non-slip mat

如有任何疑問，可諮詢本院職業治療師  
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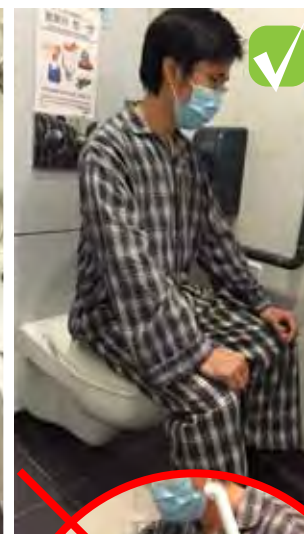
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## 沐浴篇 Bathing

### 淋浴 Shower

- 建議患者坐在沖涼椅 / 座廁 / 沖涼便椅  
Have shower in a seated position.



### 注意

不要坐在矮凳上  
淋浴/洗澡  
Do NOT sit on low stool.

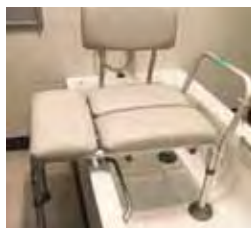
## 2. 進入浴缸淋浴 Bath Tub Transfer



- 1 照顧者先協助患者坐下（\*注意沖涼板是否穩妥）  
Secure bath board, let patient sit on the edge
- 2 協助患者把一隻腳放入浴缸，然後放好另一隻腳  
Put one leg in the bath tub, then the other
- 3 坐好  
Sit properly

### 注意

- \* 注意單腳在浴缸外時 **不要站立**  
**Do NOT** stand with single leg
- \* 有需要時，可用跨缸式沖涼椅進出浴缸，步驟同上  
Use bath bench if needed



## 3. 進入企缸淋浴 In / Out Shower Tray



- 1 協助患者安全地進入企缸（如有需要，可使用扶手）  
Assist patient to get into the shower tray (Support at handrail if needed)
- 2 讓患者坐好  
Get seated properly
- 3 淋浴  
Take shower

### 其他安全要點

- \* 避免一次塗搽太多肥皂 / 沐浴露在身上，以免滑倒  
Avoid applying too much soap at one time to prevent slip and fall
- \* 可考慮在地面上 / 浴缸內加防滑墊  
Use non-slip mat





# 穿衣篇 Dressing



如病人活動能力較佳，可屈曲雙膝，腳踏在床上，提起臀部，照顧者再將褲頭拉高至腰部  
If patient can raise their buttock, carer can pull the pants up



## 穿衣輔助器具 Dressing aids



扣鈕器  
Button hook



鞋抽  
Shoe horn



長柄撿物器  
Long handled reacher



穿襪器  
Sock aid

如有任何疑問，可諮詢本院職業治療師  
For any enquiries, please contact Case Occupational Therapist

## 聯絡Contact

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電話Tel: \_\_\_\_\_

病人因身體機能欠佳或腦部受損，令活動能力下降並影響自理能力，例如：穿脫衣服。以下介紹穿脫不同衣物的基本技巧。

Patients may need assistance in self care activities. Here are some techniques for dressing.

## 穿襯衣 Front opening garment



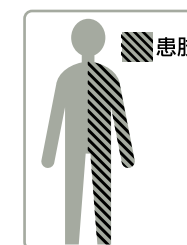
1. 把衣袖套上患肢並拉高至肩膊  
Put sleeve on affected limb & pull up to shoulder



2. 沿肩膊把衣服拉至健側  
Pull the garment across shoulder



3. 穿上另一邊衣袖  
Dress another sleeve



脫襯衣一病人先脫健肢衣袖，再脫另一邊患肢手袖  
Undress - Take off the sleeve of the non-affected side limb first

## 穿汗衫 Dressing pullover / T-shirt



1. 把衣袖套上患肢並拉高至手臂  
Thread sleeve to the affected limb & pull up above elbow



2. 穿上健肢衣袖  
Put unaffected limb to the other sleeve



3. 用健肢將領口穿過頭部，將衣服拉下  
Thread collar through the head

脫汗衫：頭稍低垂，健肢執著後頸部領口，拉過頭部  
Undress: Flex neck, grasp posterior portion of the collar and unthread the trunk piece from the head and then unthread the sleeves

## 穿脫褲 Dressing pants

坐著穿脫褲子，比較安全。避免單腳站立或依靠在牆邊，以免因失去平衡或下肢無力而跌倒

Sit down for fall prevention. Do not dress in single leg standing or lean on wall for support.



1. 先穿患腳，把褲管套入患腳  
Dress affected side of lower limb first



2. 再穿健肢，並將褲頭拉至大腿  
Put on unaffected leg and pull up to thigh



3. 站穩 (可扶著穩固的物件或助行器)，把褲頭拉高至腰部  
Stand up (hold on steady object or walking aid for support) and then pull the pants up to waist level

## 床上穿脫襯衣 Dressing upper garments on bed



1. 先穿患肢，把衣袖拉高至肩膀  
Pull garment up to shoulder on affected side



2. 將病人轉向健側，拉好背部衣服，再把另一衣袖推向健側  
Roll patient to unaffected side. Pull the clothes across back



3. 將病人回復平臥，穿上健肢衣袖，再扣鈕  
Turn patient back to supine position. Put on another sleeve. Button up

脫襯衣：病人先脫健肢衣袖，再脫另一邊患肢手袖

Undress: Take off the sleeve of the non-affected upper limb first

## 床上穿脫褲 Dressing lower garments on bed



1. 先將褲管套上雙腳 (患腳先) 並拉高至大腿  
Put legs (affected leg first) into the pants and pull up to thigh



2. 病人轉向健側，將褲頭拉至腰部  
Turn patient to the unaffected side and pull the pants up to waist level



3. 再將病人轉向患側，將另一邊褲頭拉至腰部  
Turn to the affected side and pull the pants up



## 輪椅使用注意事項



不用推動輪椅時，鎖緊輪椅  
Always lock the wheelchair  
when not in motion



雙腳平放地上才可站起來  
Stand with both feet flat  
on floor



應抓握輪椅支架部分，  
不可提著可活動或可拆  
除部分  
Grasp the frame /  
non-removable parts of  
wheelchair when  
transferring / lifting  
wheelchair



切勿嘗試於腳踏板上站立  
Do not stand on footrests

### 備註

有關簡單的輪椅保養或室外使用輪椅，請參閱醫院管理局職業治療統籌委員會編印的小冊子（2007年版）

個別輪椅之選擇、使用方法及轉移方法或有所不同，如有任何疑問，可諮詢本院職業治療師  
Consult Occupational Therapist for selection & handling of wheelchair and transfer techniques.

### 聯絡 Contact

職業治療師Occupational Therapist: \_\_\_\_\_(姑娘Ms./先生Mr.)

電話Tel: \_\_\_\_\_

# 輪椅使用篇

## Wheelchair Handling & Transfer

### 常見輪椅種類

#### 標準輪椅

Self-Propelling Wheelchair  
用者自行推動



#### 助推式輪椅

Attendant-Propelling Wheelchair

後輪尺寸較小，  
整體寬度較窄，  
需由照顧者推動



另有重型輪椅/ 輕型輪椅/ 後傾輪椅等其他種類，職業治療師會按病人需要，建議合適的款式和配件

### 輪椅部份





## 轉移方法：床上 - 輪椅轉移



- 1 用手掌按在輪椅座位兩旁的邊緣內側，雙肘伸直向下壓以張開輪椅，避免輪椅張開時夾傷手指  
Open the wheelchair by pressing the seat frame. Mind your fingers



- 2 把較近床邊的腳踏及扶手移除，並把輪椅斜向約45度停泊在床邊，靠近病人身體健側，並將輪椅鎖緊  
Put the wheelchair on patient's non-affected side. Brake it. Remove armrest & leg rest to prepare for transfer



- 3 協助病人在床上坐起，稍為向床邊移出，方便轉移  
Help patient sit up. Support the weak side



- 4 病人身體向前傾，把手放在較遠之扶手上，並稍微踏出較近輪椅邊的腳，發力把身體轉至輪椅  
Patient lean forward and hold the armrest for support. Support patient's weak side, stand up and move towards the wheelchair



- 5 協助病人緊靠椅背後，把扶手安裝至原位，並把腳踏扣緊  
Install the footrest and the armrest

- 6 把病人雙腳安放腳踏上，手放在大腿上，勿伸出輪椅外，以免受傷。推動輪椅前必須扣好安全帶  
Put patient's feet on footrest, hands on lap. Fasten safety belt



照顧者在使用輪椅或協助病人轉移時應注意身體姿勢，保持腰部挺直，使用腿部力量協助推動輪椅或轉移，避免扭動或屈曲腰部  
Follow ergonomic principles to avoid injury



使用輪椅後，收摺時需先翻起腳踏，雙手在座位中央向上拉，切勿站立於輪椅前方，以避免被腳踏夾傷

To fold the wheelchair, lift the seat upholstery. Do NOT stand in the front

# 單側忽略

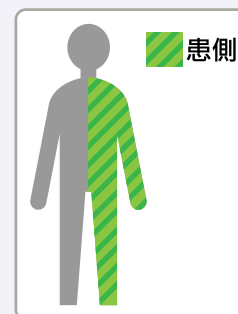
## Unilateral Neglect

單側忽略是腦中風偏癱患者中常見的現象，患者會忽略或不注意偏癱的一側。嚴重單側忽略對康復和功能的痊癒有嚴重影響。

Unilateral neglect or inattention to hemiplegic side affects rehabilitation and daily activities.

### 影響日常生活自理 Affects daily activities

刷牙、穿衣服、梳頭、剃鬚等活動，只做好健側的一邊，忽略患側的一邊  
Fail to complete activities (e.g. brushing teeth, wearing clothes, combing hair, shaving, etc.) on affected side



### 其他提高注意患側方法 Other methods to improve attention to affected side



把電視機、電視遙控器、鐘、日曆等等放靠患者患側的一邊  
Place daily objects on the affected side



鼓勵雙手活動，如用健手塗搽潤手霜於患手上，以提高對患肢的注意  
Encourage bilateral activities (e.g. applying hand cream)



放鏡子在患者面前，提高自我注意  
Use mirror to increase awareness



與患者說話時，開始時可站在患者前面，然後逐步移靠患側，提高患者注意  
Approach from midline and gradually move to the affected side

- \* 如患者需要臥床，照顧者可盡量在患者受影響的一邊進行護理和溝通
- \* 職業治療師會因應病人情況作出適當的安全和練習建議

如有任何疑問，可諮詢本院職業治療師  
For any enquires, please contact Case Occupational Therapist

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## 構成日常生活的安全問題 Affects safety



過馬路時，忽略從患側駛來的車輛  
Ignore vehicles coming from the affected side



忽略患側的一邊的火種或障礙物  
Neglect danger / obstacles on the affected side

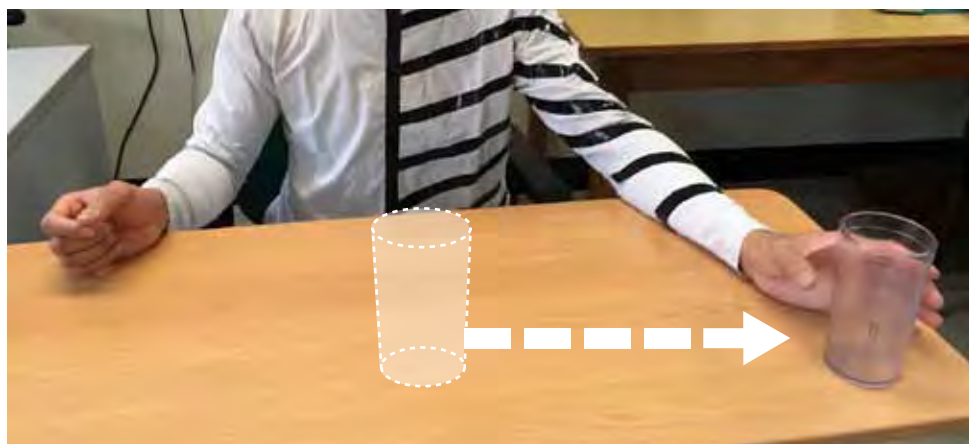


忽略保護患側，例如把患側手臂放在了輪椅外面，引致受傷  
Fail to observe and protect the affected limbs

## 訓練 Practice

訓練初期，可利用視覺/聲音的提示，從病人的正中方向去接觸及訓練他們。當有進展時，可逐步移往患側。  
Arouse attention by visual / auditory stimuli, initially presented to the midline, then to the affected side.

### 1. 由健側的一方/中線轉移物件去患側的一方



照顧者錦囊－單側忽略

### 2. 紙筆練習（例如：找出所有8字）

Visual scanning with paper-and-pencil exercises

8		8		8	6	9	8
	2			8	7	0	
4		8	4		4	8	1
	8		8	3		1	8
			2		5		7
		8	1	8	4	9	7
	5		8	6	6		6
1		8	1		1	8	8

### 3. 在日常生活中特別放置物件靠於患側，使患者多使用患肢 Encourage active use of affected limbs



取食物



取毛巾



取衣服



## 皮膚的自我檢查 Check skin condition regularly

定期檢查皮膚，看有否出現發紅或破損，這些都是壓瘡將會出現的跡象

Check skin condition regularly to see if there is any redness or skin breakdown which may be early sign of pressure ulcer



## 一般性的預防原則 General principles

- 改善病人營養狀況，需要時可向營養師查詢  
Improve nutrition (consult Dietitian if needed)
- 盡量讓病人多參與日常活動  
Keep patients actively participate in daily activities as much as possible
- 保持床單和衣服乾爽。床單要鋪平，避免起皺  
Keep bedding & clothing dry. Avoid wrinkles
- 替失禁病人勤換尿片，以保持清潔及乾爽，也可使用預防性藥膏保護皮膚  
Check and change napkin regularly to keep skin clean and dry. Apply protective skin lotion
- 洗澡時，避免使用過熱的水及刺激性的沐浴露/肥皂；洗澡後（如有需要），可塗上適量的潤膚劑  
Use warm water and hypo-allergic soap for bathing. Apply protective skin lotion if indicated

如有任何疑問，可諮詢本院職業治療師  
For any enquires, please contact Case Occupational Therapist

## 聯絡 Contact

職業治療師Occupational Therapist: \_\_\_\_\_(姑娘Ms./先生Mr.)

電話Tel : \_\_\_\_\_

# 預防壓瘡： 均壓方法和用品

## Pressure Ulcer: Pressure Relieving Strategies

## 甚麼是壓瘡？

壓瘡又稱褥瘡，是因為皮膚受到壓力、壓迫或摩擦導致皮膚損傷。嚴重的壓瘡影響範圍可深至皮下組織、肌肉及骨骼。

Pressure Ulcers are wounds caused by localized pressure or friction.

## 減少局部壓力 Reduce localized pressure

1. 保持床單、被褥的平整，以免皺摺構成壓力點  
Straighten bedding or clothing to avoid pressure points
2. 長期臥床時，應定時轉身（例如每兩小時一次）  
Regular turning (e.g. every 2 hours)
3. 臥床時用枕頭支持上肢及彎曲的腿以減輕壓力，也可以用一個小軟墊置於小腿下方來減輕腳踝的壓力  
Use pillow to support limbs and heels
4. 轉移病人時，避免在床鋪表面拖拉病人而產生摩擦。需要時使用輔助器具如過床板或吊機  
Use proper transfer methods or devices to avoid friction



過床板  
Transfer Board



吊機  
Hoist

5. 定時做減壓動作  
Change positions/postures



6. 使用適當坐椅/輪椅  
Use proper sitting devices

座椅必須為臀部、大腿、雙腳及背部提供適當的支持。病人的髖、膝關節、及腳踝應保持90度，使體重平均分佈，並按病人需要，定時改變坐姿

Support back, buttock and thighs with hips /knees /ankles in 90°. Keep appropriate seat height to allow feet on floor



7. 使用減壓的床墊和椅墊，可平均分佈壓力  
Use proper pressure relieving devices



足踝護套  
Heel protector



座墊  
Seat cushion



減壓床墊  
Pressure relieving  
mattress



# 正確處理 中風患肢

## Management of Hemiplegic Limbs

- iii. 依職業治療師建議，正確使用矯形架和承托裝置。  
Occupational Therapist's instructions to apply  
splints / support devices.

保持頭部及身軀正中，  
可利用頭枕承托支撐  
Head and trunk in midline

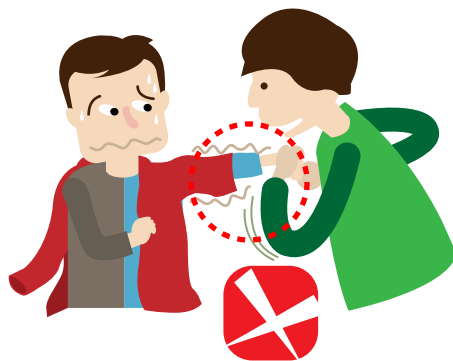
利用桌面板/枕頭/軟墊承  
托前臂，手腕及手掌  
Support forearm, wrist  
and fingers

雙膝和腳踝保持90度，  
雙腳平放腳踏或地上  
Knees and ankles flexed.  
Feet supported



## 日常照顧 Proper Handling in Daily Activities

進行日常活動（如穿衣，淋浴或轉移位置）  
時，適當地承托患側，避免拉扯患肢。  
Support the affected limb during daily  
activities such as dressing, bathing and  
transfer.



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中風初期，患側上肢肌肉缺乏張力，各組肌肉張力發展不協調。如處理不當，常令肩關節出現半脫位，甚至全脫的現象，引致肩膊疼痛，影響日常活動和自理、睡眠以及復康進度。職業治療師透過教導病人如何擺放患肢，以減輕肩膊痛和脫位現象之風險。  
Occupational Therapist teaches proper management of hemiplegic upper limb to reduce the risk of developing shoulder pain and/or subluxation.

## 正確的體位擺放 Proper Positioning

### 1) 睡姿 In Bed

患側臥

利用枕頭承托背部  
Support back with pillow

利用枕頭承托好腳，  
不應壓住患肢  
Support with  
unaffected lower limb  
with pillow

身體不應壓住患肢，  
將上臂外展，手掌  
向上  
Position hemiplegic  
upper limb with  
elbow extended and  
palm up





## 健側臥



前臂、手腕及手指用枕頭托好，手肘保持伸直，手部避免垂出枕邊  
Support affected upper limb with elbow and wrist extended

把枕頭放在雙腿中間  
Put pillow in-between knees

## 仰臥

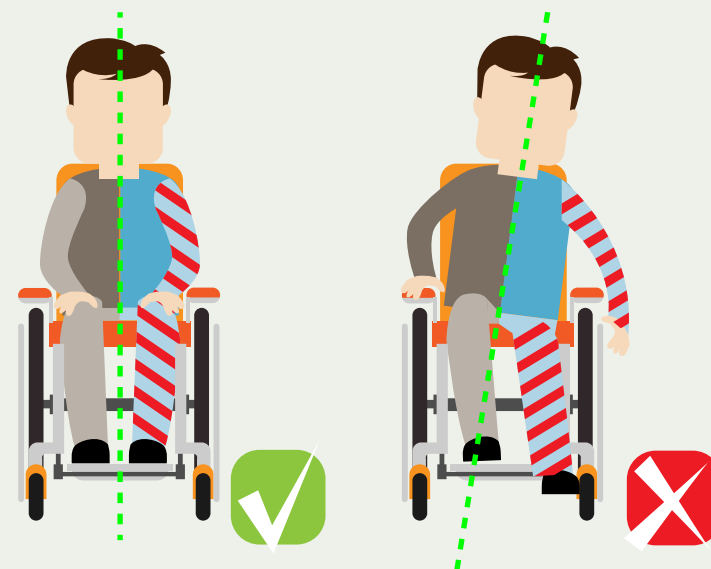


髖關節至腳踝用枕頭承托好，避免下肢向外旋  
Support affected lower limb, avoid external rotation

肩膊至手指用枕頭承托好，枕頭微向外傾斜，手掌朝天  
Support affected upper limb, with elbow extended and palm up

## 2. 坐姿 In Chair

- i. 體重要平衡分佈在兩邊臀部，不要偏坐一邊  
Body weight evenly distributed on both hips/thighs




- ii. 背要直，前臂平放桌面或其他承托裝置上  
Sit upright, support forearm on table, tray or arm trough



# 中風患者 家居訓練篇 1

## Home Program for Stroke Patients (1)

- ☐  拿起水樽，移向右邊、左邊或前方，然後鬆開手  
Move the bottle to the right, left or front and release the bottle

- ☐  患側手指屈曲或伸直，並輕輕壓在泥膠上。完成此項訓練後再做患肢承重活動  
Gently press on putty with fingers flex or extend, followed by weight bearing activity

- ☐  手握小球，並放進盒子裡  
Grasp the ball and put into the box

- ☐  扭毛巾  
Wring towel

〈以上各組活動每日做\_\_\_\_\_次，每次做\_\_\_\_\_下/ 每次做\_\_\_\_\_分鐘〉

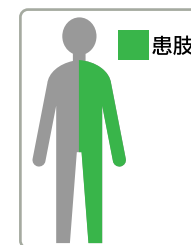
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中風的徵狀包括偏癱，影響肢體功能和日常生活。職業治療寓康復訓練於日常活動之中。職業治療師會按病人的能力建議家居訓練，讓病人在安全情況下，進行上肢功能訓練及適當地使用患肢參與自理活動，促進復原。

Stroke affects limb functions. Occupational therapists integrate therapeutic training in daily activities. Patients can actively use their affected limbs in daily activities to facilitate rehabilitation.




下列上肢功能級別訓練只作參考，個別病人情況或有不同，請按職業治療師指示進行，應量力而為，適可而止。

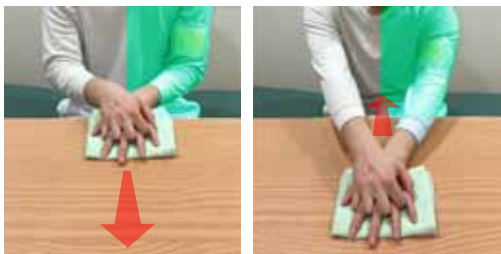
### 上肢功能第一至二級 FTHUE Level 1-2

患側肩膊/手肘未有任何活動能力或只具有有限度控制  
重點: (1) 加強對患肢的認知 (2) 重心轉移，增加關節承重感覺 (3) 預防肩關節半脫位/肩痛

Shoulder or elbow has no/limited active control. These training activities aim to increase awareness, weight shift & weight bearing and prevent shoulder subluxation / pain

- ☐  手掌平放於桌上，鼓勵以患側上肢支撐身體，以平衡肌肉張力。健肢拿著杯子移向患肢方向，轉移重心

Bear weight on affected side, transport object from one side to the other



患側手指張開平放，健手扣在患手上，雙手手指互扣放在毛巾上，腰背向前移，雙手向前推，然後回到起點處。在枱上加爽身粉可減低難度

Push forward with clasped hand. Putting baby powder on table makes task easier



自理活動建議：用餐時，患肢平放於桌上（可加上防滑墊）  
Position affected limb on table during meals. Use non-slip mat if needed



患者坐於床邊，把物件（如杯子）從健側送到患側。可利用上肢扎帶保持患側手肘伸直，手指則直接平放於床上，讓患肢承重  
Transfer objects (eg. cups) with elbow in extension and fingers flat on bed for weight bearing

#### 注意事項

1. 承托患側上肢，避免肩膊半脫位。  
Support the affected arm on table to prevent shoulder subluxation.
2. 避免拉扯患肢。  
Do not over-stretch.

〈以上各組活動每日做\_\_\_\_\_次，每次做\_\_\_\_\_下，每次做\_\_\_\_\_分鐘〉

### 上肢功能第三至四級 FTHUE Level 3-4

可控制患側肩膊活動；手肘可提起至胸前；手指能抓放，但有點困難。

重點：(1)訓練肩膀、手肘、前臂、手腕的活動和控制，手指抓握和放鬆 (2)日常活動中多使用患側 (3) 避免肌肉張力過高

Shoulder has some active control; elbow can be up to chest level, fingers barely grasp and release. These activities aim to (1) train the control of shoulder, elbow, wrist and hand (2) increase use of affected limbs in daily activities (3) reduce spasticity and synergy pattern.



穿衣練習- 提起患側手臂，讓健手將衣袖套上患肢  
Raise your affected arm and thread the sleeve onto the affected limb



患側肩膊提高約90度，伸直手肘和手指，推向牆身或門，患肢壓向牆身，輕輕發力，然後放鬆  
Flex shoulder at 90 degree, push against wall / door with elbow, wrist and fingers extended

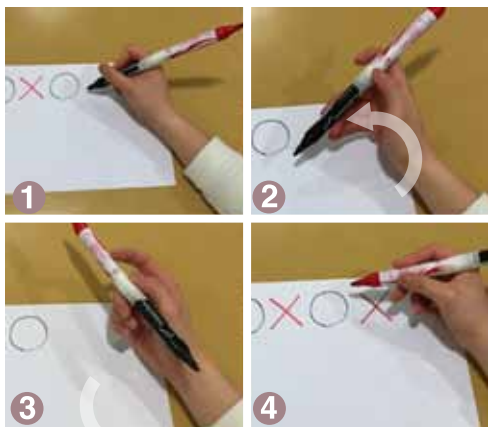


手肘屈曲約90度，以患手將棍棒推前，手肘盡量伸直，然後回到開始時的位置  
Flex elbow at 90 degree, push the rod with elbow extended, back to original position



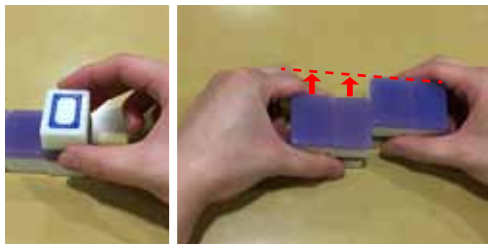
# 中風患者 家居訓練篇2

## Home Program for Stroke Patients (2)



把兩枝不同顏色的筆綁在一起，先用其中一枝筆畫“圓圈”，然後用患手把筆轉動，用另一端畫“交叉”

Bind 2 pens of different color together, use one pen to draw "circle", then rotate the pen with affected hand and draw "cross"



用姆指、食指及中指把麻將/積木疊起，然後用雙手把兩疊麻將/積木並排。

Use thumb, index finger and middle finger to stack mahjong/blocks, then use both hand to align the 2 stacked columns



雙手把衣服上的鈕逐一扣上後，解開

Fasten buttons on clothes, then unbutton

〈以上各組活動每日做\_\_\_\_\_次，每次做\_\_\_\_\_下，每次做\_\_\_\_\_分鐘〉

如有任何疑問，可諮詢本院職業治療師

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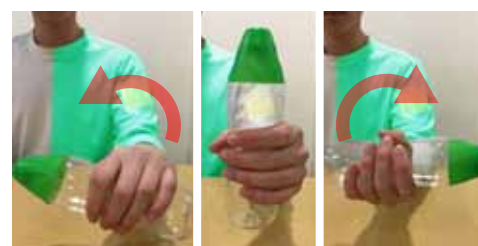
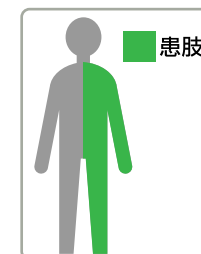
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### 上肢功能第五級 FTHUE Level 5

肩膀及手肘可舉高過頭，手指可進行較細微的抓放活動和開始有側捏力

重點：訓練手肘、前臂、手腕及手部抓握的協調和控制

Able to raise shoulder and elbow above head, have grasp and release and lateral pinch. These activities aim to train coordination and control of elbow, wrist and hand



拿着水樽重覆向右、垂直及向左轉  
Rotate bottle to both sides  
(supination & pronation)



用匙羹把海綿粒/波子從一個碗舀至另一個碗。可考慮使用加粗手柄湯羹

Scoop foam cubes/marbles with spoon from one bowl to another bowl. Can consider to use spoon with enlarged handle



患手放在報紙上，姆指向內屈曲並執緊一頁紙，旋轉前臂及肩關節來翻頁。其後以其餘四隻手指取代姆指作翻頁訓練

Place affected hand on newspaper. Pick one page with thumb and turn it with forearm and shoulder joint rotation. Repeat the activity with other four fingers



用繩把筆吊在紙筒上，雙手把紙筒提高至胸前，雙手輪流向前轉，令筆捲到紙筒上

Hang a pen on a paper cylinder with a rope. Hold with both hands up to chest level and roll the pen up



雙手於背後抓緊長毛巾，上下移動擦背，然後交換雙手上下位置  
Hold upper and lower ends of a long towel. Move up and down the back to simulate washing back. Then change hands to repeat the actions

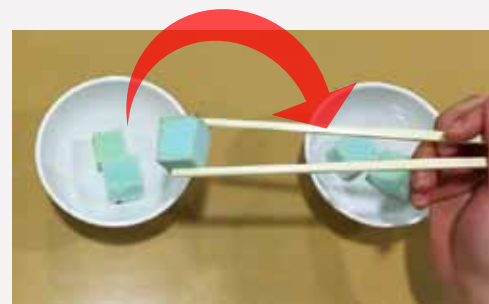
〈以上各組活動每日做\_\_\_\_次，每次做\_\_\_\_下/ 每次做\_\_\_\_分鐘〉

## 上肢功能第六至七級 FTHUE level 6-7

上肢各肌肉能活動自如，肩膊、手肘及手腕都能獨立地操控，可參與大部分日常活動。唯手指仍欠靈活，雙手協調略差，應付複雜或粗重工作時仍有不足。

重點：(1) 手部小肌肉訓練 (2) 針對日常生活所需的靈活度、準確性及兩手協調 (3) 耐力和強力訓練

Patient may use affected limb to participate in most daily activities with isolated and coordinated control of shoulder, elbow and wrist. Fine motor and small object manipulation remain difficult. These activities aim to train (1) fine motor control (2) dexterity & bilateral coordination (3) strength and endurance



用筷子把海綿粒從一個碗夾至另一個碗。可考慮使用筷子輔助器  
Transfer foam cubes with chopsticks from one bowl to another bowl. Consider to use chopstick adaptor



把幾個硬幣放於掌心，然後用手指把它們逐一從掌心推出  
Put some coins in palm. Push them out one by one



把幾件小物件（如硬幣、萬字夾、擦膠及鑰匙）放於掌心，然後以特定次序，用患手把它們逐一從掌心推出  
Put some small objects (like coin, clip, key and rubber) in palm. Push them out one by one with specific sequence using affected hand