

# Daily Routine after Disorders of Consciousness



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Here are some activity suggestions as you begin your next steps:

1. Use an assessment tool that you have been shown, such as the Coma Recovery Scale-Revised, to continue to monitor your loved one's progress.
2. Always give choices when you can. Encourage your loved one to pick between two items, words, people, pictures, etc. Some opportunities for this might be: picking out clothes to wear, picking out CD's to listen to, pointing to people in pictures, identifying objects for correct use during daily living activities, yes/no choices, etc. Present two things at a time; then gradually increase to more, if able.
3. Use index cards with words written on them to try to communicate yes-no responses or identify personal information/choices. Try vertically presented or horizontally presented to determine which is the best for your loved one. Make sure the choices are in your loved one's visual field and the print is big enough for them to see.
4. Encourage your loved one to use their voice. There may be times where your loved one makes sounds; reinforce with them how that feels and encourage turning it into words or encourage sounds on command, not just reflexive sounds. Start with simple, familiar words first. Try to name the objects you use every day, and try to say family and friends' names, yes/no, etc.
5. Follow a daily schedule to promote routine. See below for a sample schedule.
6. Encourage friends to come and visit. If they can't come by, see if they will record messages about what is going on with their life to listen to later.

7:30 - 8:30	Bathe, groom, and dress for the day. Get out of bed.
8:30 – 9:00	Morning feeding routine
9:00 – 9:30	Read headlines and other information from the local newspaper

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9:30 – 10:00	Watch TV
10:00 – 11:00	Practice therapeutic routines (i.e. choices, identifying objects, yes/no communication, visual/auditory tracking, hand-over-hand object use).
11:00 – 11:30	Go back to bed for a mid-morning rest
11:30 – 12:15	Passive range of motion in bed for arms and legs
12:15 – 1:00	Rest
1:00 – 1:30	Get out of bed
1:30 – 2:00	Mid-morning feeding routine and oral care
2:00 – 2:30	Look through photo albums and talk about past experiences
2:30 –	Groom dog/cat with hand-over-hand help

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3:00	
3:00 – 4:30	Visit from friends / family members, sit outside if possible
4:30 – 5:30	Put on headphones and listen to favorite playlist while sitting in chair and resting
5:30 – 6:30	Late afternoon/evening feeding routine and oral care
6:30 – 7:00	Go back to bed
7:00 – 8:00	Passive Range of motion in bed and apply splints for the night

Here are some sample questions to ask yourself and help you in describing and promoting your loved one's progress:

## Advanced Level:

Using and selecting objects appropriately and consistently

Are they brushing their own teeth? Are they using the spoon or fork appropriately? Are they putting their shirt/shoes on? Do they use a pen appropriately? Will they throw a ball back and forth? Do they put the telephone up to their ear? Are they trying to use the remote control? Do they pick the correct object when asked (out of 2 or 3 choices) by looking, reaching or touching?

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Effectively communicating and/or understanding consistently

Are they answering with yes/no responses (head nods, words, eye blinks, thumbs up/down)? Are their answers correct and consistent? Do they follow commands/directions when you are giving them (kicking/throwing the ball when asked, smiling, sticking out their tongue, raising their arm on command for putting on their shirt, etc)? How are they letting you know they are in pain? Is it reliable? Do they look at the person you request upon command (mom vs. dad vs. sister vs. cousin vs. aunt, etc.)? Are they verbally answering your questions or requesting wants/needs?

If you find your loved one demonstrating more consistent responses in the above areas, please communicate with your physician for a possible re-evaluation of admittance to an inpatient rehabilitation program.

## **Basic Level:**

### Visual and Auditory Function

Are they tracking you across the room? Do they follow your voice with their eyes? Are they sometimes selecting requested objects with choices of two or three? Do they startle or localize to where your voice is coming from? Do they look at and/or follow their reflection in the mirror? Do they keep their eyes open? If not, what is required to help them keep their eyes open (constant physical massage, voice, etc)?

### Motor Function

Do they withdraw from pain? Do they localize to the source of the pain (specifically move your hand away)? Are their hands or legs drawn in and tight or too relaxed? Do they attempt to open their mouth when presented with a straw or a spoon? Do they try and kiss you back when you lean in?

For additional tools to schedule your day please download a copy of the “**Daily Planner**”.