

**FACT SHEET**  
**Individuals with Orthopedic Disabilities**

**Diagnostic Categories**

Cerebral Palsy

By type of motor impairment

Spastic  
Athetoid  
Ataxic  
Tremor  
Rigidity  
Mixed  
Atonic

By part of the body affected

Monoplegia  
Hemiplegia  
Paraplegia  
Diplegia  
Triplegia  
Quadraplegia

Spina Bifida

Congenital deformities and amputations

Rheumatoid Arthritis

Poliomyelitis

Muscular Dystrophy

Osteogenesis imperfecta

Trauma and injury

**Characteristics**

Varying degrees of impairment in motor functioning

Arrest in general motor development  
Impairment in locomotion/poor gait  
Inability to rotate body parts  
Limited range of motion  
Poor head control/posture  
Balance problems  
Lack of general motor coordination  
Hand dysfunction/inability to manipulate objects  
Increased motor difficulty with voluntary movement  
Poor fine motor control  
Partial or complete paralysis  
Joint dysfunction

Pain/stiffness

Speech disorders

Possible vision and hearing problems

Possible seizure disorders

Possible intellectual dysfunction  
Frustration and impatience  
Poor self-image  
Poor social and interaction skills

**Considerations and Cautions**

Ask client what they can and cannot do in motor area  
Give supportive assistance to movement  
Be aware clients may tire easily  
Expect client to be slow in physical response/give them time  
Don't assist movement too quickly  
Start with unstructured motor response  
    Add rhythmic and structured response later  
Check with physical therapist/occupational therapist about desired movement  
    patterns/movements to be avoided  
Find ways to initiate movement with minimal thought on client's part