

## **Functional Goals following SCI - Basic**

### **SCI - Functional Goals for Specific Levels of Complete Injury**

#### **Level**

#### **Abilities**

#### **Functional Goals**

#### **C1-C3**

**C3-limited movement of head and neck**

**Breathing: Depends on a ventilator for breathing.**

**Communication: Talking is sometimes difficult, very limited or impossible. If ability to talk is limited, communication can be accomplished independently with a mouth stick and assistive technologies like a computer for speech or typing. Effective verbal communication allows the individual with SCI to direct caregivers in the person's daily activities, like bathing, dressing, personal hygiene, transferring as well as bladder and bowel management.**

**Daily tasks: Assistive technology allows for independence in tasks such as turning pages, using a telephone and operating lights and appliances.**

**Mobility: Can operate an electric wheelchair by using a head control, mouth stick, or chin control. A power tilt wheelchair also for independent pressure relief.**

#### **C3-C4**

**Usually has head and neck control.**

**Individuals at C4 level may shrug their shoulders**

**Breathing: May initially require a ventilator for breathing, usually adjust to breathing full-time without ventilatory assistance.**

**Communication: Normal.**

**Daily tasks:** With specialized equipment, some may have limited independence in feeding and independently operate an adjustable bed with an adapted controller.

## **C5**

Typically has head and neck control, can shrug shoulder and has shoulder control. Can bend his/her elbows and turn palm

**Daily tasks:** Independence with eating, drinking, face washing, brushing of teeth, face shaving and hair care after assistance in setting up specialized equipment.

**Health care:** Can manage their own health care by doing self-assist coughs and pressure reliefs by leaning forward or side -to-side.

**Mobility:** May have strength to push a manual wheelchair for short distances over smooth surfaces. A power wheelchair with hand controls is typically used for daily activities.

Driving may be possible after being evaluated by a qualified professional to determine special equipment needs

## **C6**

Has movement in head, neck, shoulders, arms and wrists. Can shrug shoulders, bend elbows, turn palms up and down and extend wrists.

**Daily tasks:** With help of some specialized equipment, can perform with greater ease and independence, daily tasks of feeding, bathing, grooming, personal hygiene and dressing. May independently perform light housekeeping duties.

**Health care:** Can independently do pressure reliefs, skin checks and turn in bed.

**Mobility:** Some individuals can independently do transfers but often require a sliding board. Can use a manual

wheelchair for daily activities but may use power wheelchair for greater ease of independence.

#### **C7**

Has similar movement as an individual with C6, with added ability to straighten his/her elbows.

Daily tasks: Able to perform household duties. Need fewer adaptive aids in independent living.

Health care: Able to do wheelchair pushups for pressure reliefs.

Mobility: Daily use of manual wheelchair. Can transfer with greater ease.

#### **C8-T1**

Has added strength and precision of fingers that result in limited or natural hand function.

Daily tasks: Can live independently without assistive devices in feeding, bathing, grooming, oral and facial hygiene, dressing, bladder management and bowel management.

Mobility: Uses manual wheelchair. Can transfer independently.

#### **T2-T6**

Has normal motor function in head, neck, shoulders, arms, hands and fingers. Has increased use of rib and chest muscles, or trunk control

Daily tasks: Should be totally independent with all activities.

Mobility: A few individuals are capable of limited walking with extensive bracing. This requires extremely high energy and puts stress on the upper body, offering no functional advantage. Can lead to damage of upper joints.

#### **T 7-T12**

**Has added motor function from increased abdominal control.**

**Daily tasks: Able to perform unsupported seated activities.**

**Mobility: Same as above.**

**Health care: Has improved cough effectiveness.**

**L1-L5**

**Has additional return of motor movement in hips and knees.**

**Mobility: Walking can be a viable function, with the help of specialized leg and ankle braces. Lower levels walk with greater ease with the help of assistive devices.**

**S1-S5**

**Depending on level of injury, there are various degrees of return of voluntary bladder, bowel and sexual functions.**

**Mobility: Increased ability to walk with fewer or no supportive devices.**