

DEFICITS OF ACQUIRED BRAIN INJURY

PHYSICAL	COMMUNICATION	COGNITIVE	BEHAVIOURAL / EMOTIONAL
<p>MOTOR DEFICITS:</p> <ul style="list-style-type: none"> • PARALYSIS • ABNORMAL MUSCLE TONE • ATAXIA / COORDINATION <p>SENSORY DEFICITS:</p> <ul style="list-style-type: none"> • VISION • HEARING LOSS • SMELL • TASTE <p>DYSPHAGIA - (swallowing difficulties)</p> <p>SEIZURES</p> <p>OTHER:</p> <ul style="list-style-type: none"> • HEADACHE • FATIGUE • PAIN 	<p>LANGUAGE DEFICITS:</p> <ul style="list-style-type: none"> • EXPRESSION - (finding the right words) • COMPREHENSION (understanding) <p>DYSARTHRIA - (Difficulty speaking)</p> <p>DYSLEXIA</p> <p>DYSGRAPHIA - (inability to write)</p>	<p>IMPAIRMENT OF:</p> <ul style="list-style-type: none"> • MEMORY • ATTENTION • PERCEPTION • PROBLEM-SOLVING • INSIGHT • SAFETY AWARENESS / RISK TAKING • SELF-MONITORING • SOCIAL JUDGEMENT 	<p>EMOTIONAL LABILITY (unstable emotions / emotional over-reaction)</p> <p>POOR INITIATION</p> <p>MOOD CHANGE</p> <p>ADJUSTMENT PROBLEMS</p> <p>AGGRESSIVE OUTBURSTS</p> <p>DISINHIBITION</p> <p>POOR MOTIVATION</p> <p>INAPPROPRIATE SEXUAL BEHAVIOUR</p> <p>PSYCHOSIS</p>

(NEURO)-REHABILITATION

Aims to reduce the impact of (brain) injury by restoration of damaged function, or compensation for lost function within the limitations of underlying disease;

To optimise physical, cognitive, psychological and social function

Seeley & Hutchinson, 2006