

Subject Description Form

Subject Code	BME42124
Subject Title	Knee and Above-Knee Orthotics
Credit Value	3
Level	4
Prerequisite and Co-Requisite	<p><u>Prerequisites</u> ABCT2331 Human Biology for Biomedical Engineering I; and ABCT2332 Human Biology for Biomedical Engineering II; and BME21119 Fundamentals of Biomechanics; and BME32131 Pedorthics, Foot, and Ankle-Foot Orthotics</p> <p><u>Co-Requisite</u> BME31125 Biomechanics</p>
Objectives	<p>This subject provides students with the principles and practical laboratory experiences in knee and above-knee orthotics. The series progressively integrate the health and engineering studies, which the students have taken as part of their academic studies. Those academic studies will form the basis for the derivation of the scientific principles used in the practice of knee and above-knee orthotics.</p>
Intended Learning Outcomes	<p>Upon completion of the subject, students will be able to carry out the following procedures, in a safe manner, according to the patients' conditions.</p> <ol style="list-style-type: none">a. To assess the patientsb. To prescribe lower limb orthotic interventionsc. To take measurement on the patientsd. To design appropriate orthosese. To perform the technical processf. To fit the orthosesg. To evaluate the interventionh. To communicate with the patients effectively

<p>Contribution to Programme Outcomes (Refer to Part I Section 10)</p>	<ul style="list-style-type: none"> ▪ Programme Outcome 1: Demonstrate an ability to apply knowledge of mathematics, science, and engineering appropriate to the Biomedical Engineering (BME) discipline. (Teach and Practice) ▪ Programme Outcome 3: Demonstrate an ability to design a system, component, or process relevant to BME to meet desired needs within realistic constraints, such as economic, environmental, social, political, ethical, health and safety, manufacturability and sustainability. (Teach and Practice) ▪ Programme Outcome 4: Demonstrate an ability to identify, formulate, and solve BME problems. (Teach, Practice, and Measure) ▪ Programme Outcome 7: Demonstrate an ability to use the techniques, skills, and modern engineering tools necessary for BME practice. (Teach and Practice) ▪ Programme Outcome 9: Demonstrate an ability to function in multi-disciplinary teams. (Teach) ▪ Programme Outcome 11: Demonstrate an ability to communicate effectively and advise clients, professional colleagues, and other members of the community. (Practice and Measure)
<p>Subject Synopsis/ Indicative Syllabus</p>	<p>Detailed review of the relevant anatomy; relevant pathologies and lower limb disorders; biomechanics of lower limb orthotics; orthotic material and component options; assessment, prescription, measurement, design, plaster model rectification, fabrication, fitting, checkout and evaluation of lower limb orthotics including knee orthotics, knee-ankle-foot orthotics, hip orthotics, hip, knee-ankle-foot orthotics, walking aids and standing and walking orthoses for patients with paraplegic paralysis.</p>
<p>Teaching and Learning Methodology</p>	<p>The subject is to integrate the theoretical knowledge and the technical skills in a way that is important to patient care and management. In this module, students would have opportunities to interact directly with some professional patients. Students will need to go through step by step the clinical process of patient assessment, patient measurement, casting, plaster model rectification, fabrication, patient fitting, checkout and evaluation. Besides the development of technical skills, emphasis is placed on the development of clinical judgement and the process of clinical problem solving. Direct feedback from the professional patients/subjects at various stages, as well as from the instructors throughout the process, would constitute important inputs to the learning experience. In the process, subjects will learn how to interact with the patients and will be guided to critique the work of fellow students under the facilitation of the instructor. This is done to maximize the learning experience by learning not only from one's own mistakes but also from those of the fellow students.</p>

Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)							
			a	b	c	d	e	f	g	h
	Student presentation	10%		√		√				
Practical assignment	40%	√	√	√	√	√	√	√	√	
Quiz	10%	√	√	√	√			√		
Final examination	40%	√	√	√	√			√		
Total	100%									
<p>Note: To pass this subject, students must obtain grade D or above in both continuous assessment and final examination.</p> <p><i>Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:</i></p> <p>Each of the individual learning outcomes will be assessed as part of the integrated outcome demonstrated by the student in patient care. Individual orthotics design and fitting projects will be assessed with direct feedback from the professional patients/subjects at various stages, as well as from the instructors throughout the process. In the process, students will also learn how to interact with the patients. At the completion of assigned individual projects, students will be guided to critique the work of other fellow students under the facilitation of the instructor. This is done to maximize the learning experience by learning not only from one's own experience but also from those of the fellow students. A final examination will be used to establish that the student has understood and can integrate the factual materials required to provide knee and above-knee orthotics service.</p>										
Student Study Effort Expected	Class contact:									
	▪ Lecture								18 Hrs.	
	▪ Tutorial								3 Hrs.	
	▪ Laboratory								39 Hrs.	

	Other student study effort:	
	▪ Open laboratory practice	39 Hrs.
	▪ Written assignment and revision	39 Hrs.
	Total student study effort	138 Hrs.
Reading List and References	<ul style="list-style-type: none"> ▪ Hsu, J. D. et al. (eds.) AAOS. Atlas of Orthoses and Assistive Devices. 4th Ed. Philadelphia: Mosby, 2008. ▪ Aisen M.L. Orthotics in Neurologic Rehabilitation Demos, New York, 1992. ▪ Weber D. Clinical Aspects of Lower Extremity Orthotics, CAPO, Ontario, 1993. ▪ Nawoczenki D.A. and Epler M.E. Orthotics in Functional Rehabilitation of the Lower Limb, W.B. Saunders, 1997. ▪ Seymour R. Prosthetics and Orthotics: Lower Limb and Spinal. Philadelphia: Lippincott Williams & Wilkins, 2002. ▪ Lusardi M. M., and Nielsen C. C. (eds.) Orthotics and Prosthetics in Rehabilitation. 2nd Edition. St Louis, Mo.: Saunders/Elsevier, 2007. ▪ Merriman LM and Turner W. Assessment of the Lower Limb. Churchill Livingstone, 2002. 	
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