



SHEPHERD STEP



Shepherd Step is an intensive walking program coupling Body Weight Supported Locomotor Training (BWSLT) over a treadmill with over-ground activities to assist participants in achieving the most functional level of walking possible.

This outpatient physical therapy program offers a high level of intensity with treatment sessions offered 2-5 times per week for 1.5 hour each session. Additional modalities and treatments are utilized to optimize outcomes as necessary, per the clinical judgment

of the treating physical therapist and doctor.

The Shepherd Step program at Shepherd Center is staffed with a group of dedicated professionals who have received specialized training to deliver the walking interventions.

WHAT IS LOCOMOTOR TRAINING?

Locomotor training uses specialized bodyweight support treadmill systems. In locomotor training sessions, the participant is suspended in a harness over a treadmill, while specially trained therapists move their legs to simulate walking. As the individual regains walking function, they progress from the treadmill to walking over ground.

Locomotor training derives from recent advances in scientific understanding about neural plasticity (the ability of the neurons in the nervous system to develop new connections and “learn” new functions) and the role the spinal cord plays in controlling stepping and standing. It's believed that locomotor training may work to “awaken” dormant neural pathways by repetitively stimulating the muscles and nerves in the lower body.

POTENTIAL OUTCOMES INCLUDE:

- Improved quality of walking
- Increased walking speed
- Increased walking endurance
- Decreased use of assistive devices

CRITERIA FOR ADMISSION TO SHEPHERD STEP

Individuals selected for Shepherd Step must meet the following guidelines:

- Not actively participating in an inpatient rehabilitation program.
- Stable with no deteriorating medical condition. No pacemaker present.
- Non-progressive spinal cord lesion at level T10 or above; T11 and T12 may be considered in the absence of lower motor neuron signs.
- Must safely tolerate upright position and weight-bearing
- Have defined and realistic functional ambulation goals
- Must have prescription from physician
- Cannot be dependent on a ventilator

THE FOLLOWING DIAGNOSTIC GROUPS MAY BE INCLUDED

- Traumatic spinal cord injury
- Transverse myelitis
- Spinal cord infarct
- Surgically decompressed primary tumor (excluding radiation and chemotherapy)

MORE INFORMATION

To get additional information, contact Neile Manning at 404-350-3102 or email her at neile_manning@shepherd.org