



Resources for students
from The American
Occupational Therapy Association

Your career in Occupational Therapy

Life on the Job as an Occupational Therapist

Recent Graduates Talk About Their Work

■ Meeting the challenges of brain injury

Lindsay Ross, MOT, OTR

*Graduate of the University of Texas Health Science
Center, San Antonio, Texas*

Transitional Learning Center (TLC), a post-acute brain
injury rehabilitation center

I treat clients ages 18 and older who have experienced a brain injury, both traumatic and non-traumatic. My case load includes, but is not limited to, clients who have had a stroke, been in a motor vehicle accident, been assaulted, or had a gunshot wound to the head. TLC is a community re-entry program. The occupational therapy department addresses dysfunction at both the impairment and activity and participation levels. TLC is a comprehensive, inpatient facility, so the clients receive therapy all day. An average day at TLC includes both individual and group therapy sessions. A client's day begins at 6:00 am with getting up and performing dressing and grooming tasks, with the assistance of an occupational therapy assistant if necessary. When the clients are scheduled for occupational therapy, they may be working to improve impairments, such as those affecting perceptual and cognitive tasks, or they may be scheduled to work towards independence in activities and participation in meal planning and preparation, mobility, household management, or money management. These activities are performed in either a simulated or community-based environment. The days at TLC vary a great deal during the week and flexibility is important. Working with clients with brain injuries can be both challenging and rewarding.

■ Making a connection at camp

Stacey Lehrer, OTR/L

Graduate of University of New Hampshire, Durham, New Hampshire

Bay Cliff Health Camp, a 7-week residential summer therapy camp in Big Bay, Michigan

Bay Cliff serves children aged 3 to 17, and all campers receive some combination of intensive occupational therapy, physical therapy, and speech and language pathology. This summer there were 6 occupational therapists and 2 Level II fieldwork occupational therapy students. There is a very wide range of diagnoses among campers, ranging from mild speech impairment to severe physical disability. My caseload of 14 kids had disabilities including traumatic brain injury, spina bifida, learning disability, ADHD, spinal-cord injury, and cerebral palsy.

The great thing about the camp setting is that you have the opportunity to interact with your children each day at meals, in their cabins, and at various activities in addition to their scheduled therapy times. On weekdays, therapy is from 9:00 to 11:45 a.m. and 2:30 to 5:00 p.m. There are various therapy groups, from money management to weightlifting, from cooking to dance, as well as aquatic therapy.

The salary for a new grad is \$2,500 for 7 weeks (including lodging and meals). Camp may not make you rich, but it's a wonderful opportunity to try out different therapy ideas and to really get to know some great kids.

■ Caring for children in the community

Christine Catanzariti, MS, OTR/L

Graduate of the Sage Colleges, Troy, New York

Specialty inpatient children's hospital, New York metropolitan area

I work at an urban children's hospital that provides inpatient and community services to children from the ages 0 to 18. The hospital specializes in infant (post neonatal intensive care unit) and toddler care up to working with teenagers with a variety of diagnoses—prematurity, cerebral palsy, HIV/AIDS, mental retardation, genetic disorders, gastrointestinal/feeding disorders, coma recovery/traumatic brain injury, weight management, musculoskeletal disorders, orthopedic problems, burns, etc. We also provide home care services and community early intervention and pre-school programs, as well as after-school care for medically fragile children.

I see outpatient children from 0 to 5 years in age, focusing on traditional occupational therapy services (sensory integration, gross and fine-motor skills, cognitive and perceptual skills, and activities of daily living skills) and a few school-aged children 6–18 after school with a focus on either traditional occupational therapy services as a supplement to services they receive in school or pre-vocational skills when appropriate.

I also participate weekly in “Kids Kicking Illness” karate and monthly in aquatic therapy with inpatient children. I help out with inpatient evaluations and treatment when necessary. I also perform community evaluations at our facility and in the community for children ages 3 to 5, to determine eligibility for pre-school services. In addition, I participate in delivering and consulting on constraint-induced movement therapy, which is a main focus of clinical research at our facility. Average salary for a new graduate is \$45,000.

■ A focus on cancer patients

Mackenzi Sneddon, MS, OTR/L

Graduate of the Sage Colleges, Troy, New York

Acute-care oncology at Memorial Sloan Kettering Cancer Center, Manhattan, New York

I treat patients of all ages throughout the hospital. All patients must have a diagnosis of cancer to be admitted to the hospital. I evaluate and treat patients with various diagnoses such as brain cancer, orthopedic problems, deconditioning (overall weakness), after a bone-marrow transplant, and children with emotional, environmental, and developmental delays. I screen and treat patients with deficits in cognitive processing (memory, problem solving, money management, vision, and perception) and upper-extremity function, as well as patients with difficulties with activities of daily living.

An average day includes evaluating and treating about eight patients at bedside, educating family members, playing with children, and attending lectures, all of which promote learning in this teaching hospital. My position's salary range is between \$50,000 to \$55,000.

■ Teamwork in a fast-paced setting

Rebecca J. Root, MOT, OTR

Graduate of the University of Texas Health Science Center at San Antonio, Texas

Inpatient acute care at Brackenridge Hospital, Austin, Texas

The acute-care setting is extremely fast-paced and constantly changing. Patients with a wide variety of ages and diagnoses are encountered on a daily basis. I have treated patients ranging from as young as 15 years old

up to individuals in their late 90s. Diagnoses treated include neurological, trauma, orthopedic, and general medicine conditions. In this type of setting you truly have to expect the unexpected. Patient stays range from 1 day up to 2 to 3 months depending on the condition and funding. Treatment must be individualized to each person's unique situation. One aspect about this setting that I truly enjoy is the teamwork. Co-treating with physical therapists and speech and language pathologists is a common occurrence. Not only does the patient benefit from this interaction, but I am able to gain a better understanding of the specific roles of the other therapy disciplines.

A typical day at Brackenridge begins with checking for new orders to evaluate patients, balancing out the caseload, and then we are off. I average around 2 to 3 evaluations of new patients a day, and treat a total of 8 to 15 patients per day depending on the hospital census. Treatment times range from 15 minutes up to over an hour if necessary.

As a new grad, you can expect to earn around \$45,000 a year, but salaries vary by facility and location. As my first job after graduating from occupational therapy school, I love the variety and exposure that this type of facility offers.

■ A spectrum of hospital services

Karlyn M. Goodman, OTR/L

Graduate of Sargent College of Health and Rehabilitation Sciences at Boston University, Massachusetts

Acute-care setting, Boston, Massachusetts

Patients are typically 18 years or older with acute medical needs. Currently I am on a general medicine rotation where I evaluate and treat patients with a variety of diagnoses including congestive heart failure, stroke, coronary artery disease, chronic obstructive pulmonary disease, failure to thrive, malnourishment, etc. Primarily I evaluate patients and determine appropriate discharge recommendations, typically among home and rehab at an acute or skilled nursing facility.

Treatment includes family and patient education, activities of daily living (i.e. self-care, cooking, cleaning, money and medication management), and functional mobility progression. Often I work in conjunction with physical therapists and speech language pathologists, as well as nurses, respiratory therapists, medical students, residents, fellows, and attending physicians.

Along with my general medicine position, I am the occupational therapist assigned to the Oncology/Bone Marrow Transplant Unit. On this unit, I assist families,

patients, and staff to improve patients' quality of life by educating and providing meaningful activities within their everyday lives. Occupational therapists at this facility are also responsible for splinting injuries of the upper and lower extremities. Although I mostly provide services to patients within my assigned rotation, I also assist occupational therapists in other units of the hospital including trauma, surgical, orthopedics, neurology, pediatrics, vascular/plastics, and cardiology. This environment is fast-paced and requires knowledge of medicine and medical procedures an occupational therapist must incorporate into evaluation and treatment of each patient. Entry-level salary at my facility is \$42,640.

■ The power of independence

Jessica L. Happick, OTR/L

Graduate of James Madison University in Harrisonburg, Virginia

Franklin Woods Center, a sub-acute rehabilitation facility in Baltimore, Maryland

We treat adult patients, ranging in age from 65 to 99. My patients typically present with various types of medical conditions, such as orthopedic procedures (i.e. hip fractures or replacements, and total knee replacements), stroke, myocardial infarction, heart surgery, congestive heart failure, and respiratory failure.

My day consists of evaluations, patient treatments, documentation, and collaboration with other health professionals such as occupational therapy assistants, physical therapists, physical therapist assistants, doctors, nurses, social workers, and administrators. Most patients receive treatment in the areas of dressing and bathing, strengthening, safe mobility, home management tasks such as laundry and kitchen activities, using adaptive equipment, and improving activity tolerance. New graduates in this setting can expect to earn a salary ranging from \$40,000 to \$50,000.

I love my new job because I get to help people become stronger, more functional, and more independent every day so they may get back to their daily lives. These are people that have worked many years to enjoy their golden years. I get to have wonderful relationships with individuals who possess so many unique experiences and knowledge gleaned over a lifetime. These patients and their families are often so grateful to have occupational therapy enabled them to return the independence, health, and enjoyment to their lives. One might never realize the power of being able to take oneself to the bathroom until one is dependent on someone for even this most basic of needs!

■ Strategies that serve aging-in-place

Dory Sabata, OTD, OTR/L

*Graduate of Washington University School of Medicine,
Program in Occupational Therapy, St. Louis, Missouri*

Program specialist at the University of Southern
California, Andrus Gerontology Center, National
Resource Center on Supportive Housing and Home
Modifications, Los Angeles, California

My area of practice is in promoting aging-in-place. My clients are organizations rather than individuals and are typically service providers of older adults or their caregivers. Needs assessments are used to evaluate my clients. I assist my clients in developing strategies to utilizing home modifications for better serving their constituents. The organizations can include a variety of disciplines including occupational therapy practitioners, building contractors, and aging network service providers. The organizations may have well-established home modification programs and systems in place, or they may be newly developing programs, or entrepreneurial organizations. Organizational policies and funding sources contribute to their environment. I look at the mission and functions of the organizations as their occupations.

My interventions involve education, training, problem solving, developing networks, and coalition building. I work to provide practitioners, service providers, and contractors with the latest evidence-based practice and trends which affect their organizations' home modification services to older adults. I assist in establishing networks for organizations to learn from each other. I provide these interventions through distance education such as the Home Modifications Executive Certificate program and other online courses. Through the work of the National Resource Center, I also provide technical assistance, teleconferencing, and presentations. I also occasionally provide occupational therapy services at an individual level. I conduct in-home assessments and provide recommendations for home modifications on a per-diem or pro-bono basis.

New graduates can seek post-doctoral fellowships or research associate positions similar to mine at a range of about \$35,000 to \$55,000.

If you have specific questions about a career in occupational therapy, please contact educate@aota.org.

Visit www.aota.org for more information about the profession and the activities of the American Occupational Therapy Association.



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