OT Mastery

Hippotherapy

1. According to the American Equestrian Alliance and the American Hippotherapy Association, how many years of experience should a provider have to use hippotherapy with clients?

A. 2
B. 5
C. 10
D. 1

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2. Which of the following provider is NOT a standard part of a hippotherapy session?

A. Equine professional
B. Behavior therapist
C. Horse handler
D. Side walker

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3. What is one of the most essential tenets of hippotherapy that providers can use to guide their sessions?

A. The unpredictability of a horse's movements is said to help patients develop adaptability.
B. Assuming a seated position on the horse is the only way a patient can benefit from hippotherapy.
C. The horse serves as a natural base of support for the client.
D. The horse must be used without any equipment to be beneficial to the client.

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4. Which of the following is NOT a skill area that hippotherapy can directly assist with?

A. ADL function
B. Range of motion
C. Sensory processing
D. Community integration/re-integration

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5. What is NOT an example of a common fine motor-based hippotherapy activity patients may participate in?

A. Feeding the horse its pills
B. Manipulating fasteners to put on and adjust reins
C. Manipulating buckles to put on and adjust neck straps
D. Donning/doffing a helmet or gait belt

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6. What theory base might an OT chiefly use to structure a hippotherapy session for a patient with cerebral palsy?

A. Dynamic interactional theory
B. Motor relearning
C. Neurodevelopmental treatment (NDT)
D. Sensory integration theory

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7. Which statement is true based on the research regarding hippotherapy?

A. There is strong evidence supporting the impact of hippotherapy on academic performance.
B. There is evidence to support the use of hippotherapy as an alternative modality as well as a part of integrative treatment.
C. The evidence suggests hippotherapy is not effective for many of the populations it is purported to benefit.
D. There is no evidence supporting the use of hippotherapy with adults.

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8. What outcome measures are evidence-based for children with ADHD who receive hippotherapy?

A. Attention, self-esteem, learning, cognitive function, and motor skills
B. Reflex integration, socialization, rest/sleep, and productive leisure
C. Problematic behaviors, social skills, emotion regulation, and coping skills
D. Motor skills, coordination, postural control, and socialization

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9. Hippotherapy was found to be effective in improving gross motor function, ADL function, gait, and spasticity management for children with what diagnosis?

A. Hypertonia
B. Cerebral palsy
C. Down syndrome
D. ADHD

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10. A review that looked at the effects of hippotherapy on elderly individuals saw improvements in what outcome measures as a result of this intervention?

A. Rest, ADL function, fall frequency, productive leisure, and health-related quality-of-life
B. Problematic behaviors, social skills, emotion regulation, and coping skills
C. Motor skills, coordination, postural control, and socialization
D. Gait, muscular strength, flexibility, step cadence, functional mobility, static/dynamic balance, and postural balance

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