AMERICAN CHIROPRACTIC REHABILITATION BOARD® FIELD STUDY

ASSESSMENT:

1. Intake Information

Knowledge Statement:

• What is standard for appropriate patient intake information and proper use of that information, such as demographics, case history, HIPAA and informed consent?

Skill Statements:

- Be able to screen/evaluate intake information to better prepare for the history and physical
- Be able to adapt treatment strategies to maximize treatment outcomes and/or referral appropriately based on intake information

2. Financial Policy

Knowledge Statements:

- What is a business and insurance policy and how should it be implemented for clinical use?
- How should financial agreements be made with patients and what are the legalities associated with these financial considerations?
- What is the appropriate documentation for patient understanding regarding various insurance and financial policies?
- What is required to participate with insurance plans, such as HMO, Medicare, etc.?

- Be able to discuss patient finances and financial agreements
- Be able to explain responsibilities to the patient
- Be able to discuss and show documents pertaining to all aspects of insurance and financial agreements in your office

3. Consent Forms

Knowledge Statements:

- What is informed consent?
- Is it patient or condition specific?
- How does one obtain informed consent?
- What are the different types of informed consent?
- What are the risks for not obtaining informed consent?
- How is informed consent documented?
- When is consent to treat a minor necessary?

Skill Statements:

- Be able to obtain informed consent and, when appropriate, consent to treat a minor
- Be able to assess risk factors versus benefits for different conditions and treatments
- Be able to determine and obtain the appropriate form of informed consent that is specific to the patient and their present condition
- Be able to update informed consent with the same patient as new conditions arise

4. Case History/Interview

Knowledge Statements:

- What important information should be gathered regarding a patient's history?
- What are some potential red and yellow flags and issues/concerns during the history?

Skill Statements:

- Be able to formulate a clinical impression of a patient's condition from their history
- Be able to recognize red and yellow flags given during a case history/interview

5. Outcome Assessment

Knowledge Statements:

- What are examples of different outcome tools and categories?
- How is an outcome recorded or documented?
- At what frequencies and clinical changes should outcome assessments be used?
- How is the outcome clinically relevant to the patient?

- Be able to select outcome assessments that can be both clinically relevant and patient specific
- Be able to grade various outcome assessment tools and interpret their changes
- Be able to alter a treatment plan, based on changes in outcome assessment

6. Pain Scales

Knowledge Statements:

- How can a patient's pain be recorded or documented?
- How often should this process be repeated?
- What are accepted methods for interpreting pain drawings?
- What is the clinical relevance of pain drawings?

Skill Statement:

Be able to interpret pain drawings for clinical significance

7. Psychosocial Assessment

Knowledge Statements:

- What are yellow flags?
- What are examples of the appropriate use of initial yellow flag screenings?
- What are methods to identify and score yellow flags?
- Who are referral sources that may assist with yellow flags?
- How do treatment goals and outcomes change with the presence of yellow flags?

Skill Statements:

- Be able to recognize yellow flag behaviors
- Be able to explain the presence of yellow flags to the patient
- Be able to alter a treatment strategy to maximize treatment effectiveness, given the presence of yellow flags

8. Goals/Desires of the Patient

Knowledge Statements:

What tools/methods can be used to objectify goals/desires of the patient?

• Why should the goals of the rehabilitation program coordinate with the goals of the patient?

Skill Statements:

- Be able to identify the goals/desires of the patient using various approaches
- Be able to develop a rehabilitation program to achieve the goals/desires of the patient
- Be able to modify the rehabilitation program as the goals of the patient change
- Be able to develop workplace reintegration goals, based on job requirements

9. Complicating Rehabilitative Factors/Pre-Active Care Assessments

Knowledge Statements:

- What are complicating rehabilitative factors (CRF) and their possible symptoms?
- How can a clinician screen/document for CRF?
- What types of diagnostic tests may be ordered to rule out certain CRF?
- How does the presence of CRF change treatment?
- What other health care disciplines may be needed to address specific CRF?
- What role does the patient's employer play with the presence of CRF?

Skill Statements:

- Be able to recognize and interpret the severity of CRF
- Be able to convey the presence of CRF to the patient
- Be able to alter treatment protocols to gain maximal effect for CRF
- Be able to integrate multi-disciplines for CRF intervention
- Be able to discuss appropriate diagnostic tests for conditions that complicate recovery
- Be able to assess workplace factors that may escalate CRF
- Be able to develop a workplace plan to minimize or better manage such factors

10. Diagnostic Triage of "Red Flags" of Serious Disease

- What is a red flag?
- What are serious diseases that would constitute a red flag and what are their signs and symptoms?
- What is diagnostic triage?
- How is diagnostic triage utilized in practice?

- What diagnostic testing is best utilized to confirm the presence of serious disease?
- What is the most appropriate referral for a patient with a given red flag?

- Be able to screen for red flags in the history/exam
- Be able to determine the appropriate diagnostic testing to further confirm the presence of a given serious disease

11. Examination

Knowledge Statements:

- What are the components of an appropriate examination (vitals, palpation, percussion, active and passive range of motion (ROM), orthopedic/neurologic assessment)?
- What are vitals and what is each of their normal values?
- What is the clinical significance of observation, palpation and percussion?
- What is the clinical significance of active and passive ROM and what are normal values for the spine and extremities?
- What is the clinical significance of deep tendon and pathological reflexes?
- What is the clinical significance of sensory and motor testing and how are they evaluated?
- What relevant orthopedic tests can be performed given a specific clinical condition?
- How does an examination set the stage for initiating a rehabilitative plan?

Skill Statements:

- Be able to take vitals
- Be able to perform observation, palpation and percussion testing
- Be able to perform active and passive ROM of a given region
- Be able to perform deep tendon and pathological reflex testing
- Be able to perform sensory and motor testing
- Be able to formulate a working diagnosis for given results from a physical examination
- Be able to recognize red flags, given the results of a physical examination
- Be able to formulate an initial treatment plan, based on given clinical findings
- Be able to perform a comprehensive neuromusculoskeletal examination and determine its clinical relevance from the findings

12. Diagnostics

Knowledge Statements:

- What indications would be needed for various types of imaging, specific lab work and/or special studies?
- What diagnostic findings would indicate an immediate referral?
- What is the appropriate use of diagnostic studies based on the history and physical examination?
- Given specific findings from diagnostic testing, how would testing results drive treatment?
- When is it appropriate to use urinalysis, blood work, x-ray, CT, MRI/MRA, bone scans, EMG/NCV?

Skill Statements:

- Be able to determine the appropriate diagnostic test, based on a specific history and physical examination findings
- Be able to accurately interpret diagnostic findings to develop a working diagnosis
- Be able to develop treatment parameters, based on a given set of diagnostic findings
- Be able to correlate positive diagnostic tests with possible patient's signs and symptoms and/or condition
- Be able to identify red flags from diagnostic testing

13. Functional Testing and Physical Capabilities

Knowledge Statements:

- What are functional and physical capacities testing?
- What are various functional and physical capacities tests for stability, cardiovascular, motor control, strength, endurance, flexibility and proprioception?
- What screening guidelines and protocols should be administered before beginning functional and physical capacities testing (PAR-Q, cardio, etc.)?
- How is specific functional and physical capacities testing clinically pertinent in the assessment of a given patient?
- Under what conditions is it appropriate to functionally test and retest a patient?
- How are functional tests and physical capacities results utilized?
- How sensitive are the functional and physical capacities tests to clinical change?

- Be able to determine functional and physical capacities tests relevance to a given set of patient goals/desires
- Be able to administer appropriate functional and physical capacities tests for stability, cardiovascular, motor control, strength, endurance, flexibility and proprioception
- Be able to interpret and score the specific functional and physical capacities tests
- Be able to develop and modify a treatment plan, based on functional and physical capacities test results

PATIENT CARE / MANAGEMENT

1. Basic Theory

Knowledge Statements:

- What are basic theories which support musculoskeletal rehabilitation, such as
 hypertonicity vs. tightness, inhibition vs. weakness, co-activation, reciprocal inhibition,
 post-isometric relaxation, developmental kinesiology, Panjabi's model of motor control
 and specific adaptation to imposed demand?
- What are the phases of healing?
- How does healing of the CNS differ from healing of musculoskeletal injuries?

Skill Statement:

• Be able to identify the basic science theories behind specific rehabilitation strategies

2. Evidence-Based Care

- What is evidence-based care?
- How should evidence-based care be utilized in a clinical setting?

 Be able to integrate evidence-based care practices into a rehabilitative treatment/strategy

3. Passive Treatment

Knowledge Statements:

- What are the physiological effects and proposed clinical outcomes for various passive modalities?
- What are potential detriments of various passive care modalities, both physiologically and behaviorally?
- What are the contraindications to various passive modalities?
- When would passive modalities be utilized in an effective care plan?

Skill Statements:

- Determine clinical goals for various passive modalities
- Be able to develop a care plan, along with transition points when utilizing passive modalities and procedures given a clinical scenario

4. Risk Analysis

Knowledge Statements:

- What risk factors should be assessed before implementing an active care plan?
- · What is a PAR-Q and how is it scored?
- What are various cardiac screening and tests and what is needed to perform them?
- What is medical clearance and how is it determined?

Skill Statements:

- Determine the appropriate clinical steps, given the outcome of a PAR-Q and various cardiac screens
- Develop a care plan taking into account various risk findings

5. Baseline Assessment

- How is baseline testing pertinent to patient care?
- What is functional testing and when is it best utilized?
- What are standard tests used to baseline motor control, muscular endurance, stability, flexibility, cardiovascular endurance and proprioception?

- Be able to administer and score the functional baseline test motor control, muscular endurance, stability, flexibility, cardiovascular endurance and proprioception
- Be able to determine a functional baseline test's relevance to the patient's goals/desires
- Be able to develop a rehabilitation plan, based upon functional test outcomes

6. Motor Control

Knowledge Statements:

- What are the stages of motor learning?
- What are methods for teaching motor control?
- What are the key muscles that tend toward inhibition?
- When is it appropriate to give home motor control exercise to a patient?
- What are the negative clinical aspects of not improving motor control deficits?

Skill Statements:

- Demonstrate how to train proper motor control
- Demonstrate how to facilitate an inhibited muscle

7. Stabilization Training

Knowledge Statements:

- What is stabilization training and the basic theories supporting it?
- What patient populations are appropriate for stability training?
- What dictates the appropriate prescription of stability exercises?
- What are bracing stability approaches?

- Recognize given stability exercises and their techniques for impacting neutral spine postures, abdominal bracing and appropriate breathing
- Outline an appropriate progression of stability exercises, based on the goals of a patient
- Based on a given performance to a stability exercise, be able to determine whether a
 patient exercise should progress or peel-back

8. Muscular Endurance Training

Knowledge Statements:

- When is endurance training indicated?
- What are generally accepted muscular endurance training protocols and technique considerations?

Skill Statement:

 Be able to design a rehabilitative program using muscular endurance protocols to ensure safety and effectiveness, given a specific goal

9. Speed Training

Knowledge Statements:

- When is speed training indicated?
- What are generally accepted speed training protocols and technique considerations?

Skill Statement:

• Be able to design a rehabilitative program using different speed protocols to ensure safety and effectiveness, given a specific goal

10. Strength Training

Knowledge Statements:

- What are different theories of strength training and when would they be indicated?
- What are accepted protocols for strength training (McQueen, Pyramid, Super slow, plyometric training, etc.) and technique considerations (breathing, body position, appropriate motor control)?

- Be able to design a strength training program that meets different patient needs
- Be able to assess proper strength training techniques
- Be able to design a strength training program utilizing different strength training protocols

11. Functional Performance Training

Knowledge Statements:

- What is functional performance training (FPT)?
- Who is a candidate for FPT?
- When would FPT be prescribed?

Skill Statements:

- Recognize appropriate FPT techniques
- Outline a progression of FPT that is specific to the goals of a patient
- Be able to determine whether a patient exercise should progress or peel-back, based on a given performance to FPT

12. Flexibility Training

Knowledge Statements:

- What is the definition of flexibility?
- Why is flexibility important to the patient?
- Who is a candidate for flexibility training?
- When is the best/worst time to stretch?
- What are various flexibility methods/approaches?
- What is the difference between PIR and a fast stretch and when is each indicated?
- What happens physiologically when muscle tissue is stretched?

Skill Statements:

- Be able to design a flexibility program that meets different patient needs and goals
- Be able to assess proper flexibility techniques
- Design a flexibility training program utilizing different flexibility training protocols

13. Cardiovascular Training

- What is cardiovascular training?
- Who is appropriate for cardiovascular training?
- What is a target heart rate and how do you calculate it?

- How do you progress / peel-back during cardio training?
- What are the risk factors for cardiovascular training?
 Skill Statements:
- Be able to screen those who need cardiovascular training
- Be able to design a rehabilitative program using cardiovascular protocols to ensure safety and effectiveness, given specific goals and profiles

14. Sensory-Motor Training

Knowledge Statements:

- What is sensory-motor training (SMT)?
- What patients are candidates for SMT?
- When should SMT be prescribed?
- What is the end goal of a sensory-motor program?

Skill Statements:

- Be able to identify those who need SMT
- Be able to design SMT specific to the goals of the patient
- Be able to determine whether a patient exercise should progress or peel-back, based on a given performance to SMT

15. Manual Techniques

Knowledge Statements:

- What are manual therapies and how are they used appropriately?
- Why is it important to transition from passive manual care to active care?
- Why is post-treatment audit important with manual therapy?

- Be able to evaluate progress or lack of progress via manual approaches
- Be able to alter a treatment plan, if indicated by the post-treatment audit of manual approaches

16. Self-Care Intervention

Knowledge Statements:

- What are various self-care interventions?
- What aspects make self-care important?
- How is self-care utilized in care (frequency, intensity, duration)?
- Who should receive self-care advice?

Skill Statements:

- Be able to design a self-care program based upon a patient's needs and goals
- Be able to screen patients who are appropriate for self-care advice
- Be able to recognize proper techniques of various self-care approaches

17. Cognitive-Behavioral Training

Knowledge Statements:

- What is cognitive-behavioral training (CBT)?
- What patient populations may benefit from CBT?
- When should CBT be prescribed?
- What other health disciplines may assist with CBT?
- When should referral be made for assistance with CBT?
- How is CBT tracked and documented?

Skill Statements:

- Be able to screen patients who may benefit from CBT
- Design a CBT program to meet a patient's specific needs

18. Special Populations

- What are examples of special populations?
- How are special populations identified?
- What considerations change rehabilitation for special populations?

- Be able to identify characteristics of special populations
- Be able to design a rehabilitation program to accommodate the needs of special populations

19. Goal-Based Management/Graded Exposure

Knowledge Statements:

- What is goal-based management (GBM)?
- How is GBM prescribed?

Skill Statements:

- Be able to design a rehabilitation program utilizing GBM
- Be able to alter a treatment plan, based on a given patient's ability or inability to obtain a specific goal

20. Outcomes Assessment / Post-Treatment Audit

Knowledge Statements:

- What is a post-treatment audit and why is it used?
- When should a post-treatment audit be performed?
- How are post-treatment audits objectified?

Skill Statements:

- Be able to utilize and accurately assess subjective and objective outcomes
- Be able to determine whether to progress or peel-back a patient, based on treatment tolerance
- Be able to perform a post-treatment audit

21. Decision Points in Care

- What are decision points in care?
- Who makes the decisions?
- When is a referral indicated?

- When is diagnostic imaging indicated?
- When is a second opinion consult needed?
- When should a referral for medications management/consult be indicated?
- When is a psychological consult indicated?
- When is reactivation advice needed?
- When is pain relief (via manipulation, passive modalities, etc.) best indicated?
- When is intensive rehabilitation indicated?
- What additional documentation procedures might be needed for certain special populations?
- What indicates the need for continuation of care?
- When should a program of home exercise be given?
- When should a patient be discharged?
- When should a referral for interventional pain management occur?
- · How is interventional pain management utilized

- Be able to determine when to adjudicate a second opinion consult
- Be able to determine when to adjudicate medications management
- Be able to determine when to adjudicate an injection consult
- Be able to determine when to adjudicate a psychological consult
- Be able to identify those patients who require a "stepped-up" approach with their care
- Be able to determine when to continue care or discharge a patient