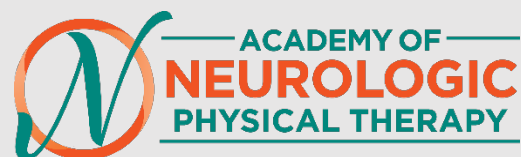




MOSC REFLECTIVE CASE INSTRUCTIONS



Specialization and Advanced
Proficiency Committee




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Introduction

The American Board of Physical Therapist Specialties (ABPTS) requires continued competency through the Maintenance of Specialist Certification (MOSC) program for all ABPTS certified specialists. As part of the MOSC requirements of Neurologic Certified Specialists, applicants must complete a reflective portfolio case submission.

The Specialization and Advanced Proficiency committee of the Academy of Neurologic Physical Therapy compiled the following instructions for completing the reflective portfolio case submission. The instructions are provided directly from ABPTS within the MOSC submission website but are presented here in a format that allows applicants to view detailed instructions from all sections simultaneously. These instructions are very thorough and are complemented by a Checklist for Writing Case Studies, also created by the Specialization and Advanced Proficiency committee.

While these instructions were provided directly from the ABPTS MOSC Reflective Portfolio Case Submission, applicants **MUST** ensure they independently review the instructions for each section and sub-section directly from the ABPTS MOSC website to ensure a complete and accurate application as the instructions may have been updated.

If you have any questions regarding submission, please contact the [ABPTS](#).

General Instructions

- The reflective portfolio case submission can be retrospective or a current patient case.
- Each section of the patient case template designated with an "*" must be completed.
- Appropriate sections of the patient case template also provide specialists with the opportunity to include a reflective element, allowing specialists to reflect on their clinical decisions and reasoning in patient/client management. Each submitted case does **NOT** have to incorporate reflections in all six sections, but must include reflections in at least two focused sections most pertinent to the case, practice setting, or specialty area:
 - Examination
 - Evaluation
 - Plan of care
 - Interventions
 - Reexamination
 - Outcomes
- To assist specialists with completing the portfolio's reflection requirement, examples of reflective guiding questions are provided within each reflection section's field-level help link within the MOSC website.
- All submissions must include a completed ICF chart (*see Evaluation Section to download ICF chart template, and to review a sample chart*) or unedited patient report for clinical electrophysiologic specialists, which includes NCS data, EMG data, and NCS waveforms.
- Applicants must end with a summary reflection on how this case influenced their clinical practice.

Health Condition:

Section Instructions:

1. Age
2. Gender
3. Diseases
4. Disorders and injuries
5. Medical diagnosis

Section I: Initial Data Gathering/Interview

Section Instructions:

1. Patient history
2. Patient symptom history and course of care
3. Patient present function and subjective limitation

Suggested questions to guide specialist with addressing initial data gathering and interview:

- Assess how the patient's medical diagnosis affects your interview.
- How might your personal biases/assumptions affect your interview?
- Assessing the information you gathered, what do you see as a pattern or connection between the symptoms?
- What is the value of the data you gathered?
- What are some of the judgments you can draw from the data? Are there alternative solutions?
- What is your assessment of the patient's/caregiver's knowledge and understanding of their diagnosis and need for PT?
- Have you verified the patient's goals and what resources are available?
- Based on the information gathered, are you able to assess a need for a referral to another health care professional?

Section II: Generation of Initial Hypothesis/Physical Therapy Diagnosis

Section Instructions:

1. Body structures/functions
2. Impairments
3. Activity limitations
4. Participation restrictions

Suggested questions to guide specialist with generating an initial hypothesis/physical therapy diagnosis:

- Can you construct a hypothesis based on the information gathered?
- What is that based on (biases, experiences)?
- How did you arrive at the hypothesis? How can you explain your rationale?
- What about this patient and the information you have gathered might support your hypothesis?
- What do you anticipate could be an outcome for this patient (prognosis)?
- Based on your hypothesis, how might your strategy for the examination be influenced?
- What is your approach/planned sequence/strategy for the examination?
- How might the environmental factors affect your examination?
- How might other diagnostic information affect your examination?

Section III: Examination

Section Instructions:

1. Tests and Measures - List Test and Measures and Clinical Findings

Suggested guiding reflective question, for specialists completing this section's reflective component:

- Appraising the tests and measures you selected for your examination, how and why did you select them?
- Reflecting on these tests, how might they support/negate your hypothesis?
- Can the identified tests and measures help you determine a change in status? Are they able to detect a minimum clinically important difference?
- How did you organize the examination? What might you do differently?
- Describe considerations for the psychometric properties of tests and measures used.
- Discuss other systems not tested that may be affecting the patient's problem.
- Compare your examination findings for this patient with another patient with a similar medical diagnosis.
- How does your selection of tests and measures relate to the patient's goals?

Section IV: Evaluation

Section Instructions:

1. **ICF Chart Should be inserted here**
 - a. [Click Here](#) for blank ICF chart to complete
 - b. [Click Here](#) for sample completed ICF charts
2. Interpretation of clinical findings
3. Diagnosis
4. Prognosis

Suggested guiding reflective question, for specialists completing this section's reflective component:

- How did you determine your diagnosis? What about this patient suggested your diagnosis?
- How did your examination findings support or negate your initial hypothesis?
- What is your appraisal of the most important issues to work on?
- How do these relate to the patient's goals and identified issues?
- What factors might support or interfere with the patient's prognosis?
- How might other factors such as bodily functions and environmental and societal factors affect the patient?
- What is your rationale for the prognosis, and what are the positive and negative prognostic indicators?
- How will you go about developing a Therapeutic Relationship?
- How might any cultural factors influence your care of the patient?
- What are your considerations for behavior, motivation, and readiness?
- How can you determine capacity for progress toward goals?

Section V: Plan of Care

Section Instructions:

1. Identify short-term and long-term goals
2. Identify outcome measures
3. PT prescription (frequency/intensity of service, include key elements)

Suggested guiding reflective question, for specialists completing this section's reflective component:

- How have you incorporated the patient's and family's goals?
- How do the goals reflect your examination and evaluation (ICF framework)?
- How did you determine the PT prescription or plan of care (frequency, intensity, anticipated length of service)?
- How do key elements of the PT plan of care relate back to primary diagnosis?
- How do the patient's personal and environmental factors affect the PT plan of care?

Section VI: Interventions

Section Instructions:

1. Describe how you are using evidence to guide your practice
2. Identify and justify overall approach/strategy
3. Describe and prioritize specific procedural interventions
4. Describe your plan for progression
5. Describe educational interventions

Suggested guiding reflective question, for specialists completing this section's reflective component:

- Discuss your overall PT approach or strategies (e.g., motor learning, strengthening).
 - How will you modify principles for this patient?
 - Are there specific aspects about this particular patient to keep in mind?
 - How does your approach relate to theory and current evidence?
 - As you designed your intervention plan, how did you select specific strategies?
- What is your rationale for those intervention strategies?
- How do the interventions relate to the primary problem areas identified using the ICF?
- How might you need to modify your interventions for this particular patient and caregiver?
- What are your criteria for doing so?
- What are the coordination of care aspects?
- What are the communication needs with other team members? What are the documentation aspects?
 - How will you ensure safety?
 - Patient/caregiver education:
 - What are your overall strategies for teaching?
 - Describe learning styles/barriers and any possible accommodations for the patient and caregiver.
 - How can you ensure understanding and buy-in?
 - What communication strategies (verbal and nonverbal) will be most successful?

Section VII: Reexamination

Section Instructions:

1. When and how often?

Suggested guiding reflective question, for specialists completing this section's reflective component:

- Evaluate the effectiveness of your interventions. Do you need to modify anything?
- What have you learned about the patient/caregiver that you did not know before?
- Using the ICF, how does this patient's progress toward goals compare with that of other patients with a similar diagnosis?
- Is there anything that you overlooked, misinterpreted, overvalued, or undervalued, and what might you do differently? Will this address any potential errors you have made?
- How has your interaction with the patient/caregiver changed?
- How has your therapeutic relationship changed?
- How might any new factors affect the patient outcome?
- How do the characteristics of the patient's progress affect your goals, prognosis, and anticipated outcome?
- How can you determine the patient's views (satisfaction/frustration) about his or her progress toward goals? How might that affect your plan of care?
- How has PT affected the patient's life?

Section VIII: Outcomes

Section Instructions:

1. Describe outcomes of physical therapy
2. Discharge plan (include follow-up, equipment, school/work/community re-entry, etc.)

Suggested guiding reflective question, for specialists completing this section's reflective component:

- Was PT effective, and what outcome measures did you use to assess the outcome?
Was there a minimum clinically important difference?
 - Why or why not?
- What criteria did you or will you use to determine whether the patient has met his or her goals?
- How do you determine the patient is ready to return to home /community /work /school/sports?
- What barriers (physical, personal, environmental), if any, are there to discharge?
- What are the anticipated life-span needs, and what are they based on?
- What might the role of PT be in the future?
- What are the patient's/caregiver's views of future PT needs?
- How can you and the patient/caregiver partner together for a lifetime plan for wellness?

Overall Summary Reflection and References:

Section Instructions:

1. Applicant is to discuss their overall impressions from working with this patient.
2. How has working with this patient effected your clinical practice?
3. What will you continue to do or do differently with future patients?
4. How did this patient case inspire you to advance your expertise in your specialty area?