

PT 773 Case Conference: Comprehensive Clinical Reasoning

Course objectives:

By the completion of this COURSE, the student will be able to:

Examination

1. Independently examine and re-examine a patient or client by obtaining a pertinent history from the patient or client and from other relevant sources.
2. Determine the need for further examination or consultation by a physical therapist or for referral to another health care professional.

Clinical Decision-making skills

3. Demonstrate clinical decision-making skills, including clinical reasoning, clinical judgment and reflective practice.
4. Synthesize patient information to plan the physical therapy evaluation.
5. Engage in the diagnostic process to establish differential diagnoses for patients across the life span
6. Critically evaluate published studies related to physical therapy practice, research and education.
7. Secure and critically evaluate information related to new and established techniques and technology, legislation, policy and environmental related to patient or client care.

Prognosis

8. Determine patient prognoses based on evaluation of results of examinations and medical and psychosocial information and current literature.

Plan of Care

9. Determine a plan of care that is realistic and acceptable to the patient, family and therapist.
10. Justify implementation strategies with the use of current literature.
11. Establish a physical therapy plan of care that is safe and effective.

Communication

12. Expressively and receptively communicate with all individuals when engaged in physical therapy practice, research, and education, including patients, clients, families, care givers, practitioners, consumers, payers, and policy makers.

Prevention and Wellness

13. Identify and assess the health needs of individuals, groups, and communities, including screening, prevention and wellness programs that are appropriate to physical therapy.

Professional Practice expectations

14. Adhere to legal practice standards, including all federal, state (province or jurisdiction), and institutional regulations related to patient or client care, and to fiscal management.
15. Practice ethical decision making that is consistent with applicable professional codes of ethics, including the APTA's Code of Ethics.
16. Educate others using a variety of teaching methods that are commensurate with the needs and unique characteristics of the learner
17. Demonstrate professional behaviors in all interactions with patients, clients, families, care givers, other health care providers, students, other consumers, and payers.

Individual and Cultural Differences

18. Incorporate an understanding of the implications of individual and cultural differences when engaged in physical therapy practice, research, and education.

Case Example

Case Objectives: At the completion of this case review students will be able to:

1. Discuss the normal kinesiology of circulation and ventilation both at rest and with activity.
2. Discuss the etiology, pathology, pathophysiology and current management of Idiopathic Pulmonary Fibrosis (IPF).
3. Correlate IPF to other medical issues presented in this case study.
4. Identify the pattern on pulmonary function tests as normal, obstructive or restrictive.
5. Discuss the effects of musculoskeletal or neuromuscular impairments on the pulmonary system.
6. Discuss the etiology, pathology, pathophysiology and current management of Coronary Artery Disease.
7. Discuss the relationship of coronary artery disease and diabetes.
8. Discuss the difference between myocardial ischemia and infarction.
9. Explain the cardiac dysfunction (TR, PHTN and corpulmonale) as it relates to the pulmonary dysfunction.
10. Synthesize this patient's medical information (lab values, radiology results, echocardiogram, pulmonary function tests, exercise tests, medications) in order to plan the physical therapy examination.
11. Justify the components of the physical therapy examination with the use of current literature.
12. Demonstrate/discuss the procedures used for the tests and measures used in the Physical therapy examination.
13. Determine the patient prognosis based on the examination findings and current literature.
14. Determine a plan of care based on the physical therapy and medical examinations.
15. Justify the physical therapy plan of care with the use of current literature.
16. Discuss the implications of BG and the timing/ effect of insulin for exercise.

Ms. Elizabeth Boze

HPI: Elizabeth Boze is a 57 year old African American female admitted 7/6 for chest pain, fever, worsening shortness of breath, dyspnea on exertion, orthopnea and lower extremity edema. She reports a worsening productive cough which is occasionally blood streaked. Patient complained of thoracic pain with coughing and deep breathing. She reported a decrease in energy level and a decreased ability to function throughout the day.

PMHx: HTN, migraine headaches, Interstitial pulmonary fibrosis, Rheumatoid Arthritis, s/p R THR 8 years ago, L THR 12 years ago, Cor Pulmonale with pulmonary hypertension, Diabetes Type II, grade 3+ TR

Labs: WBC 15.3, RBC 4.67, Hgb 12.5, Hct 38.9, Plts 358, Glucose 102, CK 210, 196, 93, CK-MB 7,7,4 troponin >0.3, >0.3, >0.3.

Radiology/tests: CXR: 7/6 (PA & LAT), EKG: 7/6, Microbiology SPUTUM gram stain, C & S 7/7, ECHO: 7/7, PFTs: 7/7, Exercise tests: Dobutamine MIBI 7/8

Medications: albuterol 2 puffs prn, amitriptyline 25 mg at bedtime, azathioprine 150 mg /day, celebrex 100 mg after meals as needed, combivent 2 puffs qid, folic acid 1 mg qd, nicotine transdermal 7 mg/24hrs, nicotrol 10 mg, prednisone 5 mg qd, Diabinese, verapamil, 2 liters of supplemental O2

Social Hx: Lives with her Mother (73) and son (37). Mother has medical issues (CAD, CRI, dementia) and is not able to assist patient in her needs. Patient has 6 siblings who visit the apartment often, but are not helpful to either her needs or those of her mother's. Patient is unemployed, on disability due to RA. She has three sons, and is separated from her husband of 15 years. + tobacco 30 pk/yr, currently smokes 5 to 10 cigarettes/day, remote ETOH (none in past 5 years), - IVDU

Living environment: Lives with her mother and son. Both patient and mother smoke tobacco. Patient has a gas stove. 1 flight of stairs to enter apartment with railing. No stairs within apartment.

Prior functional level: Independent in ADLs. Reports that she requires assistance with driving, shopping, house cleaning. Able to negotiate stairs with pacing and railings. Uses supplemental O2 at home.

Ms. Boze has been transferred to rehab facility for inpatient pulmonary rehabilitation. She has completed a dobutamine stress test.