Case Study Format

Each case study will consist of four portions:

- History of the case
- Physical therapy evaluation
- Description of all of the physical therapy treatments
- Summary of the case

1. Each individual will be expected to write up three to five case studies, depending upon the length and complexity of the case.

2. Case study presentations should be similar to the cases presented in Canine IV.

3. Photographs, pictures of radiographs, reports of diagnostic testing, and a signed referral from a veterinarian will be required on each case.

4. Case study formats must be in Microsoft word or a convertible file in order to facilitate correspondence via email.

5. The participant will be expected to present one of the submitted cases at the Canine VII examination.
History of the Case

Name:
Age:
Breed:
Sex: Altered:

➢ Dog’s lifestyle/occupation:

➢ Brief history of dog’s family history (i.e. adopted from Humane Society, owner has owned since puppy, etc):

➢ Brief history of problem in which dog is referred for (i.e. date of injury or onset of problem, how owners’ noticed a problem, type of problem noticed):

➢ Interventions (i.e. medication, restrictions, exercise, rest, etc.):

➢ Referring veterinarian’s diagnosis:

➢ Test Results (please include a photograph or digital picture of the appropriate test):
  - Radiographs
  - Laboratory results
  - CT Scan/MRI

➢ Surgery (if appropriate):
  - Type of procedure
  - Date
  - Special surgical precautions

➢ Past medical history:
Evaluation

- Observation

- Gait Assessment (if lameness present [0-4] indicate degree and limbs – utilize the lames scale you commonly use and site the source).
  - Walk:
  - Trot:

- PROM – Affected joints with a comparison to uninvolved joints.

- Neurological testing (all appropriate neurological testing, results, and meaning of the outcomes):

  - Assessment:
  - Problems

- Goals

- Treatment Plan (examples):
  - Home exercise program
  - Program within clinic or hospital
  - Instructions for technicians/assistants
  - Turning schedule
  - Gait schedule
Actual History of Treatment

Please provide descriptions of the individual treatments in S.O.A.P. format. In addition, please include photographs of the dog during treatment.

- **Subjective**

- **Objective**
  - Treatment and parameters
    - Modalities
    - Therapeutic exercise
    - Manual intervention
  - Owner education
  - Home exercise program
  - Program within the hospital
  - Measurable outcomes
  - Observation of gait pattern, function, etc.

- **Assessment**
  - Progress
  - Deficits remaining from initial plan
  - Assessment of barriers
  - Remaining problems and goals

- **Plan** – plan of care for next visits
Discussion

How many visits?

Veterinarian feedback:

Owner compliance:

How do you feel physical therapy made a difference in this particular case?

What is your speculation of the case if the patient did not receive physical therapy?

What could have been altered in the physical therapy care of this case?

Where there any barriers to the outcome of the case?

How was billing performed in this case?