

EVIDENCE-BASED CLINICAL REASONING FORM

Part A.

Patient Summary

Age	History of PC / Medical Diagnosis

1. After reviewing the pts chart or at the end of the subjective complete the table below

Symptom <i>patient reported</i>	Possible Causes	How can this be confirmed during the objective examination <i>(What must, should, could you do)?</i>	Why and how will you do them

2. Were your findings after the subjective assessment as expected ? explain

3. If not what changes will you do in the objective eval listed in table above?

4. List the contextual factors that may be contributing to the patient's condition (personal and environmental)

Patient report	Theme extracted (knowledge/ beliefs/ attitude/ other)

5. Outline any precautions **and/or** contraindications (red flag) to objective examination and treatment.

6. What subjective markers (*) will you choose to assess the patient's response during the objective examination and treatment? (eg grimacing/ crying out/ refusal)

7. Please comment on the standardisation/ reliability / validity of your choice of objective measurements

ICF domain	Measurement used	Reliability	Validity (specifically for translated scales)	Remarks
Body structure				
Body function				
Activity				
Participation				

List your Hypotheses

Part B

1. Does your findings after the objective assessment confirm any hypothesis ?
explain

2. List any new findings identified from the objective assessment

3. a) What outcome measures will you choose to assess the effectiveness of your treatment?

 b) Please comment on the reliability / validity of your choice

Domain	Measurement used	Reliability	Validity (specifically for translated scales)	Remarks
Satisfaction				
QOL				
Beliefs and knowledge				
Functional				
Self efficacy				

4. What is your clinical impression/ physiotherapy diagnosis?

5. In order of priority. List the patients main problems

1.	
2.	
3.	

6. Classify these problems according to the International Classification of Functioning, Disability and Health (WHO, 2001):

Impairment (Body Structure and Function)	Activity Limitations	Participation Restrictions	Personal	Environmental

7. What impairments (body structure and function) could be causing each activity limitation?

Activity Limitation	Caused by which impairments

PART C-

EVIDENCE BASED TREATMENT PLANNING AND GOAL SETTING

1. Justify your management plan for this patient using current evidence / Guidelines?

Treatment	Justification for this treatment

2. List the patient agreed short term goals (STG) and long term goals (LTG) made. (Goals should be SMART)

Short Term Goals	Long Term Goals

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3. Prognosis- Use the table below to outline factors contributing to favourable or unfavourable prognosis for this patient (e.g. disease process, compliance with treatment)

Favourable / Facilitator	Unfavourable / Barrier

4. How will you **progress/ modify** treatment if the next time you see them they are:

SAME	
BETTER	
WORSE	

5. Comment on the patient's performance in various domains in relation to your evaluation findings (capacity)

Domain	Capacity	Performance	Possible reasons

5. What are your criteria for discharge from physiotherapy?

6. Does this patient require further physiotherapy on discharge from this service and if so what are your options for this patient?

Part D
Reflection

1. On reflection discuss 3 aspects of your assessment +/-management that went well and one that you could improve.

2. What have you learned from treating this patient?

Student Signature Clinical supervisor Signature