

University of Chicago Orthopedic Physical Therapy Residency

Course Syllabus: Clinical Reasoning and Essentials of Examination

General Description: This course reviews the differences between clinical reasoning of novice clinicians versus experienced clinicians. Content will review difference pattern recognition, forward reasoning, reflection in action metacognitive processes, hypothetical-deductive reasoning processes, hypothesis driven approach, and patient centered versus therapist centered approaches to examination and treatments. In addition this course will provide a systematic approach to the examination process which encompasses effective communication skills, clinical reasoning, critical judgment, creative decision making, knowledge and competence. These skills will set a foundation for clinical practice which will be perfected throughout the year with mentoring sessions.

Faculty:

Jennifer Gilbertson PT, OCS
Molly Malloy PT, MPT, OCS,

Teaching methods: Didactic teaching, Clinical Investigation, Specialty Practice Observation, Mentoring

Required Reading prior to didactic and journal club:

- Hayward et al. The first two years of practice: A longitudinal perspective on the learning and professional development of promising novice physical therapists. Physical Therapy March 2013
- Wainwright et al. Factors that influence the clinical decision making of novice and experienced physical therapists. Physical Therapy January 2011
- Christensen et al. Current Concepts of Orthopedic Physical therapy clinical reasoning module. 4th edition

Homework – Please write out a list of 5 things your best mentor or instructor did which helped you learn and 5 things people have done that hurt your learning or uninspired you.

Objectives

Upon completion of this course, the course participant will be able to understand and demonstrate in patient mentoring sessions:

1. Discuss the relationship between clinical reasoning and evidence-based practice.
2. Identify and compare clinical reasoning characteristics of expert and novice physical therapists as described in research literature.

3. Differentiate between deductive and inductive reasoning within the clinical reasoning strategies model.
4. Accurately identify examples of deductive and inductive reasoning in the context of various clinical reasoning strategies.
5. Recognize appropriate application of research evidence into clinical reasoning and clinical decision making.
6. Analyze examples of clinical reasoning strategies and apply research evidence to clinical decision-making.
7. Recognize optimal strategies to facilitate learning from clinical reasoning experiences in practice.

Schedule Overview

Clinical Practice = 26 hours

Didactic = 3 hours/ week (Tuesday mornings 7:30 -10AM) J103

Clinical Investigations = **2 hours a week**

Sports Conference Mondays 4:30-5:30 PM– (1 hour)

Journal Club Mondays 3:30-4:30PM– (1 hour)

Specialty Practice Observation – 4 hours/week Observation of ABPTS certified faculty members

Mentoring = **5 hours a week**

Clinical reasoning skills and examination techniques will be assessed with all mentoring sessions throughout the year. It is expected that residents will be receiving Satisfactory scores in these sessions by midterm

Method of Evaluation:

- Competency completion with scores of satisfactory or higher in all areas
- Resident will demonstrate satisfactory or above performance for all mentoring sessions by midterm of the program

Grading Policy: 2 Superior/ 1 Satisfactory/ 0 Unsatisfactory

(Please refer to grading rubric)