PHT 6730: Differential Diagnosis in Physical Therapy
Summer, 2014 (Year 2)

Credits: 3

Class Schedule: Monday: 12:30 – 3:15 p.m.
Thursday: 12:30 – 3:15 p.m.
**Thursday: 9:30 -12:30 a.m (see schedule for labs)

Instructors: To be determined in 2004
Mary T. Thigpen, PT, PhD was the previous instructor providing syllabus content

Course Description: The primary goal of this course is to prepare you to recognize client problems that are beyond the expertise of a physical therapist, and to then make the appropriate decision regarding the next step of referral. This level of differential diagnosis requires you to effectively compare and contrast neuromuscular signs and symptoms with those of possible systemic origin. We will review the clinical manifestations of the more common disorders of organ systems and discuss how they might mimic dysfunction of the neuromuscular system. You will develop proficiency in: systems screening, differential interviewing strategies, risk factors and red flag recognition. Pattern recognition and algorithmic approaches to clinical problem solving will be presented and practiced using case presentations. Emphasis will also be placed on the development of more advanced interviewing and observation skills.

Mr. Derrico returns: Mr. Derrico will be back leading you in a physical exam lab for abdominal assessment.

Dr. George brings the evidence: As a noted researcher in the area of pain, Dr. George will present a 3-lecture series reviewing the current research on the neurophysiology, perception, and assessment of pain.

Dr. Smith takes your pulse: Dr. Barbara Smith will be joining us to assess your ability to recognize abnormal cardiac signs, and to assess your clinical decision-making abilities when certain signs arise. We will also have a lab experience to learn more advanced cardiac and pulmonary auscultation skills.

Vicki Luckert PT provides insight into pelvic pain management: Ms. Vicki Luckert will provide lecture/lab at the end of the semester regarding an overview of pelvic pain and pelvic function disorders.

Instructional Methods:
We will use case presentations as the cornerstone of the course. You will present cases of clients: 1) whom you have treated or observed on your clinical internships, 2) that you have created for the class to problem-solve, or 3) that you have found in the literature. Real cases will be presented each class and applied to the body system being reviewed, as well as cases not directly related to the current topic. Clinical problem solving strategies will be applied and practiced. Role playing will be used to further develop these clinical decision-making skills as well as to promote advanced communication skills. Lectures, interactive methods, presentations, group problem solving and discussion will all be used.

**You will be expected to be prepared for class discussion.** This includes reading the chapters and being able to demonstrate mastery of the content of the chapter including: major diseases of the system, the primary signs and symptoms of the major diseases, and the red flags associated with these conditions.

**Course Prerequisites:** PHT 6302C Principles of Disease

**Required Text:**
Boissonnault, *Primary Care for the PT – Examination & Triage*, Elsevier.

**Recommended Text:**

**Website:**
We will use the Sakai system found at [http://lss.at.ufl.edu/](http://lss.at.ufl.edu/). Lecture notes, laboratory assignments, announcements, grades, etc., will be located here. Please check the website prior to attending class.

**Grading Scale:**

<table>
<thead>
<tr>
<th>Grade Scale</th>
<th>Letter Grade</th>
<th>Grade Point Average</th>
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</thead>
<tbody>
<tr>
<td>93-100</td>
<td>A</td>
<td>4.00</td>
</tr>
<tr>
<td>90-92</td>
<td>A-</td>
<td>3.67</td>
</tr>
<tr>
<td>87-89</td>
<td>B+</td>
<td>3.33</td>
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<tr>
<td>83-86</td>
<td>B</td>
<td>3.00</td>
</tr>
<tr>
<td>80-82</td>
<td>B-</td>
<td>2.67</td>
</tr>
<tr>
<td>77-79</td>
<td>C+</td>
<td>2.33</td>
</tr>
<tr>
<td>73-76</td>
<td>C</td>
<td>2.00</td>
</tr>
<tr>
<td>70-72</td>
<td>C-</td>
<td>1.67</td>
</tr>
<tr>
<td>Below 70</td>
<td>Must Repeat Course</td>
<td></td>
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</table>

**Summary of Grading:**

<table>
<thead>
<tr>
<th>Test</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam 1</td>
<td>40%</td>
</tr>
<tr>
<td>Final Exam (*cumulative)</td>
<td>55%</td>
</tr>
</tbody>
</table>
Homework  
5%

*To earn an A, you are expected to complete all homework assignments.

**You must pass the 2nd Year Cumulative Clinical Skills Test to pass the course.

Course Requirements:

2nd Year Clinical Skills Test
The Cumulative Skills Test will occur in the Harrell Assessment Center during the first week of class. You must score 80% to pass the test. If a score of at least 80 is not achieved, an opportunity for remediation and re-test will be given. Details of the process will be provided by Ms. Creel

Readings/Homework:
This course requires you to read quite a bit. For your scheduling purposes, please plan for 4-6 hours/week for your readings and assignments. You will always have 4 days to prepare for the next class, and will always be provided with assignments when you are in class.

Written Exams:
Three written exams are scheduled. The exams will cover reading assignments, class lectures/discussions, your presentations and journal articles. Grading will follow the new grading scale listed above. Final exam is partially comprehensive (70% new material, 30% material covered earlier in semester. The exams will be multiple choice, short answer, short discussion, and essay-style questions. The exams are designed to evaluate your clinical decision-making abilities while having mastery of the content.

Cases
1. Personal Experience: You will be asked to write a short case description regarding a patient, family member, friend with whom you were actively involved. The clinical case should be a problem of interest to you that represented a diagnostic challenge. We will randomly select from these cases to present in class.

2. Synthesis of Case: As we cover each body area, you will be asked to create a short case in which neuromuscular signs and symptoms might be confused with the particular system's pathologic signs and symptoms.

Why Case Studies?
**Rationale:** Case studies provide you with an opportunity to apply and integrate what you are learning in the classroom with what will need to know in the clinical setting.

**Qualities of a good case study:**
• Tells a “real” story of a person, not a diagnosis
• Raises thought-provoking issues of patient problems, diagnosis, and interventions
• Encourages you to think like a clinician
• Develops and exposes sound clinical decision-making processes
• Promotes clinical curiosity

**Homework:** The homework is designed to accomplish several goals:
1) To prepare you for the upcoming class;
2) To promote advanced critical thinking skills related to topics covered in class;
3) To increase your depth and breadth of knowledge in a particular area;
4) To review topics that you have had in previous classes, but need review;
5) To cover materials that class time does not allow for.

This is not busy work – I have carefully selected the readings and learning activities to promote excellence in your clinical decision making and clinical performance.

**Class Discussions:**

**Rationale:** Discussions provide you with opportunities to acquire knowledge, insight, and skills through face-to-face exchange of your rationale, information and ideas. Through discussion you gain practice in thinking through problems and organizing concepts, formulating arguments and counterarguments, testing out your ideas in a “safe” setting, and responding thoughtfully and critically to diverse points of view. Discussions teach you to think “on your feet”, provide rationale for your opinions, and develop a more confident and effective professional persona.

**Discussion Principles (Deemer, 1986):**

• I am critical of ideas, not people. I challenge and refute the ideas . . . but I do not indicate that I personally reject them.
• I focus on coming to the best decision possible, not on winning.
• I encourage everyone to participate.
• I listen to everyone’s ideas even if I don’t agree.
• I restate what someone has said if it is not clear to me.
• I first bring out all ideas and facts supporting all sides, and then I try to put them together in a way that makes sense.
• I try to understand all sides of the issue.
• I change my mind when the evidence clearly indicates that I should do so.

**Group Skills (Tiberius, 1990):**

• Seek the best answer rather than try to convince other people.
• Don’t let your previous ideas or prejudices interfere with your freedom of thinking.
• Speak whenever you wish (if you are not interrupting someone else, of course!), even though your idea may seem incomplete.
Practice listening by trying to formulate in your own words the point that the previous speaker made before adding your own contribution.

Avoid disrupting the flow of thought by introducing new issues; instead wait until the present topic reaches its natural end; if you wish to introduce a new topic, warn the group that what you are about to say will address a new topic and that you are willing to wait to introduce it until people are finished commenting on the current topic.

Stick to the subject and talk briefly.

Avoid long stories, anecdotes, or examples.

Give encouragement and approval to others.

Seek out differences of opinion; they enrich the discussion.

Be sympathetic and understanding of other people’s views.

How Should I Study for this Class?

1. Read the assignments before class, with particular attention to the text’s case studies. This will put you in a position to comfortably be involved in the discussions and problem solving of other case studies presented in class.

2. For each topic that we cover, **ABSOLUTELY KNOW:** the signs and symptoms, the underlying pathophysiology, the characteristic pain patterns, the Red Flags, Guidelines for Referral, and Guidelines for immediate Medical Attention.

3. Read cases, think about cases, talk about cases, generate case examples.

4. Be able to address written objectives for each chapter.

5. Be engaged in the class discussions.

And **most importantly,**

my goal, and the goal of this course, is to have you do well and enjoy learning. If you have any concerns or problems, please speak with me (the earlier in the course the better!) and we will come up with a way for you to make the most of this course.
PHYSICAL THERAPY PROGRAM POLICIES FOR ALL COURSES

Attendance is expected for all class sessions, labs, and examinations. The Physical Therapy Program at the University of Florida strongly believes that professional behavior patterns begin during the student’s academic preparation. According to the PT Student Handbook, students are expected to notify the department by phone (273-6085) in the event of unexpected absence from a scheduled class session. Students are expected to inform the instructor of planned absences at least two days in advance.

Punctuality is important in both the clinic and classroom. Students are expected to arrive to class on time (i.e. prior to the instructor initiating class) and to return from breaks on time. The clock in the classroom will be considered the “official” clock. You are encouraged to notify your instructor(s) when appointments/ unavoidable commitments will cause arrival to class after start time, or require you to leave early. It is also the responsibility of the instructor to begin and end class at agreed upon times, and to notify you when changes of schedule may occur.

Course Accommodations:
If for any reason you feel you will have difficulty meeting the objectives and expectations of this course, please notify me within five (5) weekdays of the start of class so that accommodations may be implemented where indicated.

Individuals who require reasonable accommodations must contact the Dean of Students Office, 202 Peabody Hall, phone: 392-1261, as soon as possible. This office will provide necessary documentation. The student who is requesting accommodation must then provide this documentation to the instructor.

Professional Behavior:
Professional behavior is critical for a successful transition from the classroom to the clinical setting. The faculty recognizes the importance of this by incorporating the development and evaluation of professional behavior into each academic course. All students must attain developmentally appropriate levels of professionalism on the University of Florida’s Professionalism Development Tool (PDT). Student performance on the PDT will be determined by behaviors in the classroom and lab. Additional feedback will be provided by peers, instructors, and teaching assistants.

Academic Honest / Honor Code
The University of Florida Honor code was voted on and passed by the Student body in the Fall 1995 semester.
The Honor Code reads as follows:

Preamble: In adopting this Honor Code, the students of the University of Florida recognize that Academic honesty and integrity are fundamental values of the University community. Students who enroll at the University commit to holding themselves and their peers to the high standard of honor required by the Honor Code. Any individual who becomes aware of a violation of the Honor Code is bound by honor to take corrective action. A student-run Honor Court and faculty support Are crucial to the success of the Honor Code. The quality of a University of Florida education is Dependent upon the community acceptance and enforcement of the Honor Code.

The Honor Code: We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity. On all work submitted for credit by students at the University of Florida, the following pledge is either required or implied:

“On my honor, I have neither given nor received unauthorized aid in doing this assignment.”

In this professional program we are particularly sensitive to students submitting independent work and to using complete and accurate referencing in complying with the University of Florida Rules – 6CI-4.017 Student Affairs: Academic Honesty Guidelines. Academic misconduct refers to dishonesty, knowingly furnishing false information to the University, plagiarism (e.g., presenting the ideas of someone else or the writing of someone else as one’s own work), or cheating of any kind. All written assignments are to be completed independently by each student.

*Further details regarding UF’s honesty policy are in your student handbook.

This course can be failed in any one of 4 ways:

1) Your final grade point average is below 70.

2) You cheat.

3) Your behavior is unbecoming of a professional physical therapist.

4) You do not pass the 2nd year Cumulative Skills Test after remediation.
COURSE OBJECTIVES
Upon completion of this course, the student will:

1. Recognize, identify, and analyze signs, symptoms, and pain patterns associated with various systems of the body and the implications thereof, including identification of whether physical therapy is indicated or whether a client requires referral to appropriate healthcare practitioner.

2. Evaluate published case studies of physical therapy practice, research, and education related to differential diagnosis or pathological disorders.

3. Verbalize or write a logical and appropriate line of questions for client assessment to obtain a history and to establish a working diagnosis.

4. Conduct an effective interview with mock patients resulting in the identification of the source of their clinical problem(s).

5. Modify performance of physical therapy examination and intervention either in a role playing situation or in a written case discussion based on recognition and incorporation of client individual and cultural differences.

6. Recognize and list signs and symptoms of emergency medical conditions and describe intervention including procedures for obtaining appropriate medical assistance.

7. Identify and differentiate between the clinical patterns associated with the following disorders

   a. cardiovascular conditions
   b. pulmonary conditions
   c. hematologic disorders
   d. gastrointestinal disorders
   e. renal or urologic disorders
   f. hepatic and biliary disorders
   g. endocrine and metabolic disorders
      i. diabetes
      ii. hypoglycemia
   h. metabolic bone diseases
   i. cancer - with emphasis on
      i. benign, malignant, and metastatic
      ii. early warning signs
   j. neuromusculoskeletal disorders
   k. immunologic disorders
   l. dermatologic disorders
8. For the above disorders, describe the appropriate type of intervention (including necessary modifications and procedures for referral to, and assistance from, other members of the healthcare community) and timing of the intervention.

9. Describe the implications of the following factors on the client problems listed in #7:

   a. application of relative anatomical, physiological and developmental components
   b. principles of exercise physiology/exercise science
   c. principles of nutrition
   d. effects and potential side effects of pharmaceutical intervention
   e. necessary infectious control procedures.

10. Given a case study, establish an appropriate physical therapy examination, evaluation, diagnosis, prognosis and intervention including procedures for obtaining appropriate referral to, and assistance from other members of the healthcare community.