Course Name:
Medical Screening: The Sherlock Holmes Approach

Date & Time: Thursday, September 11, 2014
8:00-5:00 PM

Presenter: William Boissonnault, PT, DHSc, FAPTA

Course Description
Patient cases will “drive” this seminar in order to advance clinical decision-making skills related to the critical responsibility of recognizing when physician contact. The three pillars of evidenced-based practice will form the basis for exploring critical red flag questions including: what is the best next question to ask the patient, when is a red flag really a red flag, how many red flags are necessary for a referral to be made, what if a screening guideline doesn't exist for the patient, do I mention cancer to the patient etc.? Professional communication with patients and physicians will also be a central theme throughout the seminar.

Four real-life scenarios are provided below. One patient required an urgent referral; one a non-urgent referral; one was given a recommendation to see a physical therapist within the next couple of days, and the 4th patient- no action was necessary. Can you match the 4 patients with the 4 actions?

- Susan states she is having some unusual neck pain. She has spent hours and hours working at a Potter’s wheel the past 2-3 weeks. She is wondering, “could her neck posture during pottery-making be causing her neck pain”?
- Jeremiah describes L chest wall pain-started 6 months ago while doing some “heavy lawn mowing”. “think I pulled a muscle”. He has been improving slowly-noting he can swim and mow the grass, pain free, if he tapes his chest. He wants to know, “how much longer will it take for this to heal”? 
- Jim describes joint pain in his arms and wonders if strengthening exercises would be good for him?
- Amber states she woke up three days ago with intense burning in her L shoulder blade. She describes having a severe back injury 1 year ago—which PT helped. She is wondering, “could her back injury have set her up to have this shoulder pain”?

**Course Objectives**

Upon completion of the seminar participants will be able to:

- Compare and contrast the physical therapist's role and responsibilities with those of physicians, associated with the differential diagnosis/medical screening process.
- More efficiently and appropriately integrate medical screening questions and techniques into the patient examination.
- More accurately interpret history and physical examination findings (red flags) and decide whether communication with a physician is warranted regarding a patient's health status.
- Quickly determine the urgency of concerns regarding a patient's health status.
- Skillfully employ strategies to facilitate professional communication between therapist and physician and therapist and patient; including when, how and what to communicate as part of a patient referral.
- Describe the risk factors, pathogenesis and clinical manifestations of selected medical conditions representing the various body systems-differentiating between joint, limb and back pain conditions-those that can be managed by PTs and those that require physician oversight.
- Safely and effectively employ observation, palpation, auscultation and special tests to screen skin, head/neck/shoulder girdle lymph nodes and glandular tissues, peripheral vascular disease and non-displaced fractures.
- Effectively pursue additional information associated with differential diagnosis by the physical therapist.

**Speaker Bio**

William Boissonnault, PT, DPT, DHSc, FAAOMPT, FAPTA is Professor- University of Wisconsin-Madison, Program in Physical Therapy, Senior Physical therapist- University of Wisconsin Hospital, and is Curriculum Director – UW/Meriter Hospital Orthopedic Physical Therapy Clinical Residency Program.

Bill holds multiple adjunct physical therapy faculty positions- presenting nationally and internationally-teaching differential diagnosis, diagnostic imaging, and communication skills. He is editor of the textbook- *Primary Care for the Physical Therapist; Examination and Triage*, and past co-editor of *Pathology: Implications for the Physical Therapist*. He has multiple journal publications
related to differential diagnosis, thrust joint manipulation and entry-level education, physical therapist practice-outcomes assessment and direct access.

Dr. Boissonnault is the current president of the Foundation for Physical Therapy. He served as president (1995–2001) of the Orthopaedic Section of the APTA, and has chaired the APTA Manipulation Legislative Task Force and the American Academy of Orthopaedic Manual Physical Therapists Practice Committee.

Awards/Honors- Has received the Orthopaedic Section, APTA's Stanley V. Paris Distinguished Service Award, APTA's Baethke-Carlin Award for Excellence in Academic Teaching, and Lucy Blair Service Award; and the University of Wisconsin-Madison Medical School Dean's Teaching Award for Excellence and Innovation in Medical Education. He has been named a Catherine Worthingham Fellow of the APTA.