The Art and Science of the Physical Examination
Presented live Friday, June 26 – Saturday, June 27, 2015

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A sea of change in health care is constraining physician access. Mid-level and Allied Health providers are increasingly called upon to serve as first-point and follow-up spine subspecialty evaluators. The effective evaluation and triage of spine patients can be complex and requires nuanced examination and differential diagnostic skills intrinsic to care planning. Effective treatment and rehabilitation and associated psychosocial, med-legal, occupational, disability, pain management and co-morbid health issues must also be considered.

Technology advancements in imaging, interprofessional communication and medical records have become valuable tools to time-challenged clinicians managing high patient volume and related clinical responsibilities.

Potentially compromised in this new health care milieu are the time honored fundamentals of hands-on evaluation and the interpersonal and communication skills that have historically defined excellence in patient care.

There is increasing recognition that no technology is of greater importance than real-time, face-to-face evaluation as the basis for clinical decision-making, including appropriate diagnostic work-up and value-based care planning.

This course is intended to help optimize spine subspecialty mid-level and allied health providers’ basic history taking and physical exam skill set and to stress its importance to clinical efficiency, effective resource utilization and best possible patient outcomes.

Course Objectives – Overview
• Comorbid health problems have been shown to significantly impact the prognosis, clinical course and return-to-work potential of, and ultimately the costs associated with caring for, patients with spinal disorders. Early recognition of this important interrelationship (through effective patient systems review and identification of co-existing disease) has significant ramifications for patients and the health care system. This course is intended to enhance the participant’s awareness of the reciprocal nature of co-existing spine and general health disorders and to facilitate the differential
diagnosis, decision-making and coordination of care skills necessary to best-practices spine specialty evaluation and management.

- Extensive research (and related evidence-based guidelines) has shown a critical relationship between psychosocial factors and recovery in axial pain patients. The biopsychosocial model is now essentially central to best-practices spine specialty patient evaluation and management. Early recognition of psychosocial factors, or clinical “yellow flags”, has important ramifications for patients and their families, providers, payers and other stakeholders in the health-care arena. This course will also address the latest evidence on tools and exam methods in screening for nonphysical factors and their importance to developing patient care plans in spine specialty practice.

**Upon completion of this course, participants should gain strategies to:**

- Articulate the importance of the history and physical exam to the patient presenting to the spine clinic;
- Gain insight into of the interrelationship of musculoskeletal, neurological, systemic and functional findings to differential diagnosis of spine patients;
- Demonstrate physical exam techniques for the musculoskeletal and neurologic systems, including directional preference, adjacent joint assessment, non-organic screening through hands-on instruction;
- Formulate a differential diagnoses based on real-world case scenarios of patients presenting for spinal evaluation;
- Explain the basic skills and imaging findings to evaluate common axial pathology for both presurgical and instrumented spinal imaging;
- Address the potential role of interventional procedures in the differential diagnosis of primary spinal pain generators.
Agenda

- Welcome and Introduction
  Gregory L. Whitcomb, DC and Rick J. Placide, MD, PT
- Introduction to an Effective HPI
  John Metzler, MD
- Review of Systems and Comorbidities
  John Metzler, MD
- Psychosocial Factors and Non-Organic Screening
  Gregory L. Whitcomb, DC and Sherri Weiser, PhD
- Musculoskeletal Exam: Cervical and Thoracic Spine
  David Woznica, MD
- Musculoskeletal Exam: Lumbar Spine and Pelvis
  David Woznica, MD
- Spine Imaging I
  John Kamysz, MD
- Lunch and Learn: Musculoskeletal Spinal Masqueraders
  Rick Placide, MD, PT
- Highlights Neuroanatomy and Neurophysiology
  Rick J. Placide, MD, PT
- Neurologic Exam: CNS
  Rick J. Placide, MD, PT
- Evidence Basis for Mechanical Diagnosis and Basic Assessment Strategies
  Ryan Tauzell, MA, PT, MDT
- Spine Imaging II
  Mark M. Mikhael, MD
- Neurologic Spinal Masqueraders & Neurologic Exam: PNS
  Evan K. Johnson, PT, DPT, OCS
- Interventional Procedures: Overview and Evidence Review on Utility in Differential Diagnosis
  John Metzler, MD
- Lunch and Learn: Organ System Spinal Masqueraders
  Rick J. Placide, MD, PT
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This activity has been planned and implemented in accordance with the Essential Areas and Standards of the Accreditation Council for Continuing Medical Education (ACCME). The North American Spine Society is accredited by the ACCME to provide continuing medical education for physicians and takes responsibility for the content, quality and scientific integrity of this CME activity. NASS designates this live activity for a maximum of 15.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. The American Medical Association has determined that physicians not licensed in the US to participate in this CME activity are eligible for AMA PRA Category 1 Credits™.

Meeting Evaluation/CME/CEU Certificates
Evaluations will be submitted electronically and course attendees will have the capability to print out a CME certificate once the evaluation has been completed. The link for the evaluation and certificate is www.spine.org/CME. Once you have completed your evaluation, you will be able to print your CME certificate.

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Level D. $25,001 to $50,000
Level E. $50,001 to $100,000
Level F. $100,001 to $500,000
Level G. $500,001 to $1M
Level H. $1,000,001 to $2.5M
Level I. Greater than $2.5M

Conflict of Interest Statements
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Reed, Michael: Nothing to Disclose
Tauzell, Ryan A.: Nothing to Disclose
Weiser, Sherri: Nothing to Disclose
Woznica, David: Nothing to Disclose

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