

Clinic Exit Exam Manipulation Student has 7 minutes to complete this portion of the exam + ~5 min for feedback

Student:		

Proctor:	Date:

1. Contraindications - Ask candidate to give a list of relative or absolute contraindications - Pass or Fail								
	Misc.	Arthro	Osteo	Neuro	Vascular			
Relative	□ Mild sprain/strain □ Recent spinal trauma □ Prior 'bad experience' with manip.	□ Inflammatory arthritis (RA) □ Ankylosing spondylitis □ Atlanto- occipital OA	□ Hypermobility (mild instability) □ Benign bone tumor □ Demineralization (osteopenia, osteo porosis, long-term steroid use) □ Spondylolisthesis (lumbar) □ Scheurmann's disease	 □ Neurologic deficits (disc herniation, osteo- phytes) □ Lack of peripheral sensation 	□ Calcified abdominal aneurysm □ Anticoagulant therapy			
Absolute	□ Lack of consent □ Intoxication or drug influence □ Recent surgery	□ Atlanoaxial instability (Down's, Marfan's) □ Dislocation	□ Congenital malformation (posterior arch aplasia) □ Bone destruction (cancer, avascular necrosis, osteomyelitis, fracture, severe osteoporosis)	□ Cauda equina syndrome □ Recent TIAs or Stroke	□ Aneurysm □ VBI signs & symptoms (5D's And 3 Ns)			

Dizziness, Drop attacks (loss of consciousness), Diplopia (or other visual disturbances) Dysarthria, Dysphagia, Ataxia, Nausea, Nystagmus, Numbness

Region	Static/Motion Eval. (give listings)	Patient & doctor position	Contact & tis- sue pull/slack	Confidence & Explanation	Thrust (end-range, vector, speed, control)	Total
SI joint	0 0.5 1	0 0.5 1	0 0.5 1	0 0.5 1	0 0.5 1	
or joint	Comments:					
or						
Lumbar						
Spine	Options: PI ilium, AS ilium, Lumbar push-pull,	□ Sacral nutation push (Al sacrum), Hypothenar mammillary push, □ Hy	□ Sacral counter-nutation pu pothenar SP push	sh (PS sacrum)		1
Thoracic	0 0.5 1	0 0.5 1	0 0.5 1	0 0.5 1	0 0.5 1	
Spine	Comments:					
or						
Ribs	Options: □ Prone unilateral hypo	thenar push, □ Supine extension, □ sh, □ Supine costal	Cross bilateral hypothenar/t	henar push, \square CT Junction		,
	0 0.5 1	0 0.5 1	0 0.5 1	0 0.5 1	0 0.5 1	
Cervical Spine	Comments:					
or						
Occiput						
	Ontions: - index miller much - 4	numb pillar push, 🗆 occipital, C1 late	and an natational			

0 = inability to perform task; 0.5 partial ability to perform task; 1 acceptable ability to perform task

Feedback: (ask if it can be given together or they request it separately)

Start with 'what do you think needs improvement?' - student self assessment

/15 total:

Clinic Exit Exam Ortho

	spine, □ T-spine, □ L-s oow, □ wrist & hand, □ h		
listory:	give findings associated w	vith 1 condition(
□ Define Co	ondition (circle on list):		_ (1)
□ DDx:			_ (1)
Inspect/	Palp: 2 structures (introd	duction, consent, bilateral)	
□	(½), □	(½)	
Motion: p	perform 1 ROM assessmer	nt (tissues list)	
·	ro statement):	•	
	h end play):		
□ RROM (co	rrect instructions):		
Neurova	scular: perform 1 ex	am for region	
	st, DTR, sensation, temp, o		
		, , ,	
	onditions that can refer to r	•	
•	tests: perform 3 speci	•	
·	ion, contacts, ability, effectivenes	·	\
□ any test:		(I)

List 5 factors that improve or slow nealing (prognostic indicators)?
☐ Give 3 parts of a diagnosis & example? (stage, severity, pathoanatomy
□ Postural eval. plumb line falls through? (ant, lat. or post)
☐ Give an example of 2 end-play types (soft tissue stretch or approx, myospasm, empty, bone on bone, ligamentous, boggy)
□ Normal ROM degrees? or gait cycle demonstration?
□ Define the terms sensitivity and specificity
☐ Give the 7 principles of medicine? (do no harm, healing power of nature, treat the cause, doctor as teacher, treat whole person, prevention, follow evidence)

Treatment	options:	 	(/1)

☐ What is the therapeutic order? (rule of 9, progress least to most invasive)

Overall	impression:	/2
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	con	nmı	unio	catio	n. pe	rm	iss	ion	. hv	qi	ene')		

□ Lack of prompting & confidence

total:	/15

Student:

Shoulder

- AC sprain
- Bicipital tendinopathy
- Brachial neuritis
- Calcific tendinopathy
- Frozen shoulder
- Glenohumeral instability
- Glenoid labral tear
- GH dislocation
- Supraspinatus imping.
- Reflex symp. dystrophy
- Subscap. tendinopathy
- Supraspinatis tendonitis
- · Thoracic outlet syn.

Flhow

- Elbow osteochondritis
- Lateral epicondylitis
- Medial epicondylitis
- Olecranon bursitis · Toddler's elbow

Wrist

- Carpal instability
- Carpal tunnel syndrome
- de Quervain's
- Dupuytren contracture
- Ganglion cyst Lunate dislocation
- Scaphoid fracture
- Skier's Thumb (UCL)
- Triangular fibrocart. tear
- Wrist sprain

Hip & thigh

- Acetabular labral tear
- Avascular necrosis hip
- Femoral/Inquinal hernia
- Groin strain
- Hamstring strain
- Hip DJD
- Legg-Calve-Perthes
- Myositis ossificans
- Slipped femoral epiphysis
- Snapping hip
- Transient hip synovitis

Knee

- ACL Sprain or PCL Sprain
- Chondromalacia patellae
- Iliotibial band syndrome
- MCL Sprain or LCL Sprain
- Meniscus tear
- Osgood Schlatter's
- Osteochondritis dissecans
- Patella dislocation
- Tibila stress fracture

Leg, Ankle & Foot

- Achilles tendonitis
- · Compartment syndrome
- Deep vein thrombosis
- Inversion ankle sprain
- Metatarsal stress Fx
- Morton's neuroma
- Over pronation syndrome
- Plantar fascitis
- Varicose veins

Shoulder

- Brachial stretch test
- Cervical compression test
- Cervical distraction test
- Foraminal compression
- Jull's (supine neck flexion)
- Shoulder depression test
- Soto-Hall test (Brudinski)
- Swivel chair test

T-Spine

Adson's

L-Spine

Adam's sign

Dural Slump

- Transverse lig. stress test
- Vertebral Artery test (VBI)

Halstead's (rev. Adson)

Scapular approximation

· Wright's hyperabduction

- · Cozen's test

- · Varus stress test

Wrist & Hand

- Bechterew's (seated SLR)
- Belt test (SI vs lumbar) Braggard's test
- Burns Bench test
- Hoover test (malingering)
- Kemp's (Quadrant)
- Kernia's
- Lindner's test
- Milgram test (leg lift test)
- Minor's Sign
- Murphy's punch (kidney) Straight leg raise (Laseque)
- Valsalva

- · Pronator teres test
- Tinel's aelbow

- · Allen test or cap refill test
- Finkelstein's test
- Load test for TFCC
- Phalen's test
- Reverse Phalen's test Tinel's (median & ulnar)

Hip & SI

- Allis/Skyline view
- Gaenslen
- Leg length discrepancy
- Nachlas/Ely's/Hibb's test

Lumbar & Sacroiliac

- Abdominal aneurysm
- Ankylosing spondylitis
- Leg length inequality
- Lumbar disc herniation
- Lumbar DJD
- Lumbar facet syndrome
- Lumbar spondylolithesis
- Lumbar sprain/strain
- Pelvic instability Piriformis syndrome

Thoracic & Costal

- Compression fracture
- Herpes Zoster (shingles)
- Postural syndrome
- Rib subluxation
- Scheuermann's disease
- Scoliosis
- Vertebral subluxation

Cervical & TMJ

- Benign positional vertigo
- Burner/Stinger
- Cervical DJD
- Cervical facet syndrome
- Cervical radiculopathy
- Cervicogenic headache
- Cluster headache Migraine headache
- Pathologic headache

Noble's compression

Ober's test (modified)

Ortolani click (pediatric)

Scouring test (Quadrant)

SI joint play (AS & PI)

Anterior/posterior drawer

Apley's comp./dist. test

Apprehension test

Bounce home test

Disco/Thessaly Test

Trendelenburg test

- Sprain/strain (whiplash)
- Stroke or TIA
- TMJ syndrome

Patrick's test

Piriformis test

Thomas test

Yeoman's test

Knee

- C-Spine
 - Apley's Scratch test
 - Clunk, Crank, Bicep load
 - Drop arm test (Codman's)
 - GH apprehension test
 - Hawkins-Kennedy
 - Lippmans test
 - Neer's or Speed's
 - O'Brien's Roos' test (EAST)
 - · Yergason's test

Elbow

- Mill's test
- Valgus stress test

- · Froments Sign

- McMurray's test
 - Patellar apprehension

Lachman's test

Clark's test

Patellar grind test

Valgus/Varus stress test

Ankle & Foot

- Anterior/Posterior drawer
- Dorsiflexion test Homan's sign
- Metatarsal squeeze test Talar tilt test
- Thompson's Squeeze test
- **Tibial Torsion test** Tinel's (peroneal nerves)
- Supple vs rigid flat foot Arch height evaluation

Signature: