

Student Doctor:

Faculty Proctor:

## Station 1A: MFR (5min)

Perform a technique below after using and appropriate initial screen and/or assessment.

Technique	Initial screen and/or Segmental Assessment
Thoracolumbar MFR	Screen and TART changes
Forearm MFR	Screen b/l and TART changes
Long lever MFR T spine with UE	Screen and TART changes
Long lever MFR lumbar and lower T spine with LE	Screen and TART changes
Seated long lever MFR upper T spine or C spine w/ head/neck	Screen and TART changes
Supine psoas MFR	Thomas Test, Counterstrain Point, or TART
Release of anterior cervical fascia	TART changes
Crossed mediastinum MFR	Assess myofascial movement (sup/inf, clockwise/counterclockwise, right/left)
Supine pelvic diaphragm MFR	pelvic hemidiaphragm inhaled/exhaled on most restricted side after evaluating both

1. Biomechanics (table height, SD/patient comfort)		2	1	0
2. Assessed appropriately for given treatment (1 for correct assessment, 2 for accurate dx)	3	2	1	0
3. Accurate anatomic contact			1	0
4. Palpatory contact (pressure, gentle, thoughtful)	3	2	1	0
5. Treatment execution (at barrier/ease, forces appropriate, process correct)	3	2	1	0
6. Effectiveness (creates change in tissues)			1	0
7. Reassess			1	0
8. Overall understanding/efficiency			1	0

Deducted Points for Prompting -2 -1

Station 1 Total \_\_\_\_/15

### Station 1 Communication (ICS)

3 2 1 0

Communicates in proper non-physician language to partner (1 point), communicates in proper physician language to proctor (1 point), and asks consent before starting (1 point).

## Station 1B: BLT (5min)

Perform a technique below after using and appropriate initial screen and/or assessment.

Technique	Initial screen and/or Segmental Assessment
Tibiofemoral BLT	Assess for ease of med/lat glide, ant/post glide, IR/ER
Short lever BLT cervical	Screen and make triplanar Dx
Short lever BLT thoracic spine	Screen and make triplanar Dx
Long lever BLT C/T/L Spine	Screen and make triplanar Dx
Supine LS Decompression BLT	Spring test or LS decompression initiation
SI Decompression- long OR short lever	ACT & SI motion assessment (in/out, sup/inf shear, ant/post rotation)
Rib Release BLT	Screen ribs and diagnosis restriction in at least one plane
Seated Sutherland BLT Rib Technique (rib 3-10)	Screen for bumps/divots & palpate for lack of physiologic motion at dysfunctional rib
Mediastinal BLT	Assess tension at sternopericardial ligaments and note restriction in any of sup/inf, right/left, clockwise/counterclockwise)

1. Biomechanics (table height, SD/patient comfort)		2	1	0
2. Assessed appropriately for given treatment (1 for correct assessment, 2 for accurate dx)	3	2	1	0
3. Accurate anatomic contact			1	0
4. Palpatory contact (pressure, gentle, thoughtful)	3	2	1	0
5. Treatment execution (at balance point, forces appropriate, process correct)	3	2	1	0
6. Effectiveness (creates change in tissues)			1	0
7. Reassess			1	0
8. Overall understanding/efficiency			1	0

Deducted Points for Prompting -2 -1

Station 1 Total \_\_\_\_/15

### Station 1 Communication (ICS)

3 2 1 0

Communicates in proper non-physician language to partner (1 point), communicates in proper physician language to proctor (1 point), and asks consent before starting (1 point).

## Station 2: Intro OCMM (5min)

**Find 3 cranial landmarks.**

nasion	bregma	greater wing of sphenoid
nasal bones	sagittal suture	lambdoidal suture
ant nasal spine of maxilla	coronal suture	occipital squama
frontal process maxilla	frontal eminences	inion
zygoma	sup/inf temporal lines	superior nuchal line
glabella	pterion	asterion
supraorbital notch	zygomatic arch	temporal bone
frontal bone lateral angles	vertex	mastoid process
infraorbital foramen	parietal eminences	occipitomastoid suture
metopic suture	lambda	jugular foramen

1. Accuracy of landmark	3	2	1	0
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**Demonstrate a proper vault contact. Be able to name locations of all contacts.**

1. Biomechanics (SD/patient comfort, appropriate posture/tension)	2	1	0
2. Contact accuracy (location and pressure)	2	1	0
3. Static Findings (accuracy and terminology, examples: hard/soft, narrow/full, symmetry/asymmetry)	2	1	0

**Demonstrate 2 SBS strain patterns.**

Right or Left Lateral Strain  
Right or Left Torsion  
Right or Left Sidebending Rotation  
Superior Vertical Strain

Inferior Vertical Strain  
Flexion Strain  
Extension Strain  
SBS Compression

1. Correct pattern demonstration	2	1	0
2. Correct axis	2	1	0
3. Correct rotation	2	1	0

**Deducted Points for Prompting      -2   -1**

**Station 2 Total \_\_\_\_/15**

## 2025 OPP3 BLOCK 1 PRACTICAL EXAM: PATIENT CARE/OPP SKILLS

### Station 2 Communication (ICS)

**3      2      1      0**

Communicates in proper non-physician language to partner (1 point), communicates in proper physician language to proctor (1 point) and asks consent before starting (1 point).

### Overall Performance:

**5      4      3      2      1      0**

Leading (5): Integrated, fluid, exceptional performance

Strong (4): Integrated, fluid performance

Solid (3): Somewhat integrated, fluid

Building (2): Not well integrated or fluid

Not meeting expectations (1): Not well practiced

Not prepared (0)

<b>Overall Performance:</b>
<input type="checkbox"/> Leading (5): In addition to an integrated and fluid performance, student demonstrates exceptional thoughtfulness and skill in performance
<input type="checkbox"/> Strong (4): Integrated and fluid performance
<input type="checkbox"/> Solid (3): Somewhat integrated and fluid performance
<input type="checkbox"/> Building (2): Demonstrates understanding of basic concepts, but performance is not integrated or fluid
<input type="checkbox"/> Not meeting expectations (1): not demonstrating understanding of concepts, not well-practiced
<input type="checkbox"/> Not prepared (0)

**Station 1 Subtotal: \_\_/15**

**Station 2 Subtotal: \_\_/15**

**Overall: \_\_/5**

**Total: \_\_/35**

**Communication: \_\_/6**