

## SYLLABUS

**NAME OF COURSE:** Correlative Diagnostic Procedures (DIAG-317)

**LENGTH OF COURSE:** 55 hours (3 hrs lecture, 2 hrs lab/week)

**COURSE DESCRIPTION:** This course has been designed to correlate and integrate material that will prepare the student for development of his/her clinical and professional skills and obligations.

**PREREQUISITES:** TECH-129, DIAG-327, DIAG-827, DIAG-226

**COURSE OFFERED BY:** Diagnosis Department

**REQUIRED TEXT:** All the class notes will be found on the Canvas web site under the *Correlative Diagnostic Procedures* file. The professor may provide the students with some hard copy materials (also found on the website) such as scripts, instructional guides and algorithms.

**RECOMMENDED TEXTS:** Books and materials from ALL diagnosis, technique, examination, and radiology courses

**REFERENCE TEXTS:** *Differential Diagnosis and Management for the Chiropractor, 6<sup>th</sup> ed*, Souza, 2009. *Bates' Guide to Physical Examination and History Taking, 10<sup>th</sup> ed* Bickley et al, 2008. Any standard textbooks, research studies, or reliable Internet resources may be utilized to develop each case. Be prepared to provide sources and duplicate copies of patient educational material as well as x-ray and laboratory reports as necessary.

**INSTRUCTION METHOD:** lecture/discussion, case studies, group/individual assignments

**EVALUATION/GRADING CRITERIA:**

<b>Initial Narrative and CMR:</b>	based on rubric;	40% of grade
History part of narrative:	10 pts, due week 2;	
Complete narrative:	100 pts, due week 6;	
CMR Action Page:	10 pts, due week 7.	

Grade is based on first narrative turned in. Must include graded rubric to be considered as submitted. The narrative will need to be corrected before it can be signed off. The grade will decrease by 3 pts each day it is late.

**Re-eval Narrative and CMR:** based on rubric; 30% of grade  
Re-eval Narrative: 80 pts, due week 9;  
CMR Action Page: 10 pts, due week 10.

Grade is based on first narrative turned in. Must include graded rubric to be considered as submitted. The narrative will need to be corrected before it can be signed off. The grade will decrease by 3 points for each day it is late.

**Case Management:** 20% of grade  
The last 2 Managed Cases will be graded. The first one is worth 50 pts and the second one is worth 100 pts.

**Quizzes and Assignments:** 10% of grade  
Up to 4 quizzes/assignments will be given during the quarter. The percentage grading system of the college will be used

Students are encouraged to take tests when they are scheduled. **Make up exams will be 100% written. The use of a blue book or green book is required.**

A: 90-100%  
B: 80-89%  
C: 70-79 %  
F: below 70%

**PLEASE NOTE: in order to have access to grades, quizzes and other crucial class information, the student MUST enroll in the class web page on the CANVAS website.**

**Grades and the Grading System Final Grades** are available online through the CAMS student portal. If there are any questions on grading procedures, computation of grade point average, or the accuracy of the grade report, please contact the Registrar's Office or the Office of Academic Affairs. Grades will be reported and evaluation will be based on the Academic Policies, Procedures, & Services. Please refer to Evaluation Policy (**Policy ID: OAA.0007**)

In order to maintain **Satisfactory Academic Progress**, a student must maintain a 2.0 or better in each and every course. **Any grade less than a C must be remedied by repeating the class.** Please refer to Satisfactory Academic Progress (**Policy ID: OAA.0006**)

**Attendance:** Please refer to Attendance Policy (**Policy ID: OAA.0002**)

#### **Conduct and**

**Responsibilities:** Please refer to the Personal Conduct, Responsibility and Academic Responsibility Policy (**Policy ID: OAA.0003**)

**Make-up Exams:** Please refer to Make-up Assessment Policy (**Policy ID: OAA.0001**)

#### **Request for**

**Special Testing:** Please refer to Request for Special Testing (**Policy ID: OAA.0004**)

**Accommodation  
for Students with Disabilities:**

If you have approved accommodations, please make an appointment to meet with your instructor as soon as possible. If you believe you require an accommodation, but do not have an approved accommodation letter, please see the Academic Counselor Lori Pino in the Office of Academic Affairs. Contact info: [Lpino@lifewest.edu](mailto:Lpino@lifewest.edu) or 510-780-4500 ext. 2061. Please refer to Service for Students with Disabilities Policy (**Policy ID: OAA.0005**)

**Electronic Course Management:**

**Canvas** is LCCW's Learning Management System (LMS). Canvas will be used throughout the quarter during this course. Lectures, reminders, and messages will be posted. In addition, documents such as the course syllabus and helpful information about the class project will be posted. Students are expected to check Canvas at least once a week in order to keep updated. The website address for Canvas is <https://lifewest.instructure.com/login/canvas> Please refer to the Educational Technologies Policy (**Policy ID: OAA.0009**)

**COURSE GOALS:**

The purpose of this course is to help the student intern learn the best methods for assimilating the information gathered during the doctor/patient interaction. The student will be able to assimilate this data into a cohesive narrative report complete with case management plan, prognosis, and goals of care. The skill set developed here is the record keeping format and communicative devices utilized through the entire clinical experience.

**COURSE OBJECTIVES:**

(Note that lecture and laboratory objectives reflect one another. That is, lectures provide an overview of the work that is done in the laboratory setting. Each intern will perform a complete history, examination, narrative, and case-management plan for their patient as well as a re-evaluation and narrative following the narrative template used at LCCW.)

**Week One:**

1. Present overview of procedures for correlating diagnostic procedures required in the Life Chiropractic College West Health Center (LCCW-HC)
2. Introduce related paperwork that documents the correlation of diagnostic procedures in the LCCW-HC
3. Review and initiate the history taking process including reviewing Wellness Questionnaire and Review of Systems and recording of appropriate information.
4. Review the Initial Clinical Impression, the proper recording of the Complaint with Modifiers and how the Initial Clinical Impression relates to the examination

LAB: Complete patient history and determine Initial Clinical Impression. Have history paperwork signed off by instructor.

**Week Two:**

1. Review the Introduction part of the narrative.
2. Review the clinical importance of various aspects of different exams and how it applies to developing a working diagnosis.
3. Demonstrate efficient examination techniques.
4. HISTORY NARRATIVE DUE Friday night

LAB: Complete Chiropractic Screening Exam except for Subluxation and Muscle Assessment section

**Week Three:**

1. Correlate the uses of physical examination data to support possible diagnoses and delineate most likely clinical impression scenario and introduce the parameters and guidelines for the Final Clinical Impression (Diagnoses/Problems List) in the LCCW-HC file
2. Teach the steps and necessary requirements for the X-ray Narrative report
3. Review the components of x-ray reading necessary for a proper radiology report: alignment, bone, cartilage, soft tissue

LAB: Complete Ortho/Neuro section and review with instructor to solidify Diagnoses. Begin Cranial Nerve section of the Examination.

**Week Four: Please bring your computer to class**

1. Progress the student through the Clinic Impression and Case Management section of narrative
2. Teach the summarization of history and physical examination process and documentation and how it applies to the Imaging Evaluation and Request and Summary Form
3. Begin critical thinking process required for diagnoses

LAB: Continue examination of reciprocal. Have instructor sign off on Exam paperwork if examination is complete (X-ray Request and Summary page)

**Week Five: Please bring your computer to class**

1. Progress the student through the Prognosis and Goals section of the narrative
2. Discuss goal setting for patients and how to establish specific and measurable goals
3. Continue critical thinking practice

LAB: Complete examination of reciprocal including extremity exams. Have instructor sign off on Exam paperwork if examination is complete (X-ray Request and Summary page)

**Week Six:**

1. Introduce the guidelines and instructions for instructor generated complex cases (problem-based learning)
2. Provide first complex case (problem-based instruction) with post-testing evaluation

LAB: Begin the process of signing off CMR Action Page. Work on completing narrative

**Week Seven:**

1. Discuss Report of Findings and process of treating Reciprocal in the Health Center
2. Continue complex case presentations with review of process

LAB: Finish signing off CMR Action page for narratives

**Week Eight:**

1. Provide third complex cases (problem-based instruction) with post-testing evaluation
2. Discuss re-eval procedure and paperwork. Re-eval of reciprocal will be done during Student Clinic Hours

LAB: Review Spinal Orthopedic Examination Procedures and Protocols for Entrance Examinations

**Week Nine:**

1. Provide fourth complex case (problem-based learning) with post-testing evaluation
2. RE-EVAL NARRATIVE DUE

LAB: Drill examination procedures for speed and competency towards clinic entrance exam

**Week Ten:**

1. Finish guiding interns through Re-evaluation CMR's
2. Trouble shoot individual intern issues and concerns
3. Finish up final paperwork and processing of interns into the health center

LAB: MOCK CLINIC ENTRANCE EXAM  
SIGN OFF ON CMR ACTION PAGE FOR RE-EVAL

**Week Eleven:**

1. Final examination—Managed Case; must have CMR Action Page for Re-eval signed off by instructor.

**STUDENT LEARNING OUTCOMES:**

1. The student intern will understand the basis of asking questions to ascertain pertinent information when taking a patient's history. (PLO: 1,4)
2. The student intern will understand the basis for developing an Initial Clinical Impression including probable diagnoses and differential diagnoses after taking the patient's history. (PLO: 1, 4)
3. The student intern will understand why certain examinations should be performed based on the information obtained during the history. (PLO: 1, 4)
4. The student intern will understand the basis for determining the Final Clinical Impression (Diagnoses/Problems List) after completing the patient's examination and reviewing x-rays. (PLO: 1, 2, 4)
5. The student intern will be able to demonstrate skills in writing an appropriate and

- viable case management plan. (PLO: 1, 2, 3, 4)
6. The student intern will demonstrate understanding of symptomatic, functional, and structural prognosis for their patient. (PLO: 1, 2, 3, 4)
  7. The intern will develop narrative writing skills, summarizing above information.

**Program Learning Outcomes (PLO):** Students graduating with a Doctor of Chiropractic degree will be proficient in the following:

1. **ASSESSMENT AND DIAGNOSIS:** An assessment and diagnosis requires developed clinical reasoning skills. Clinical reasoning consists of data gathering and interpretation, hypothesis generation and testing, and critical evaluation of diagnostic strategies. It is a dynamic process that occurs before, during, and after the collection of data through history, physical examination, imaging, laboratory tests and case-related clinical services.
2. **MANAGEMENT PLAN:** Management involves the development, implementation and documentation of a patient care plan for positively impacting a patient's health and well-being, including specific therapeutic goals and prognoses. It may include case follow-up, referral, and/or collaborative care.
3. **HEALTH PROMOTION AND DISEASE PREVENTION:** Health promotion and disease prevention requires an understanding and application of epidemiological principles regarding the nature and identification of health issues in diverse populations and recognizes the impact of biological, chemical, behavioral, structural, psychosocial and environmental factors on general health.
4. **COMMUNICATION AND RECORD KEEPING:** Effective communication includes oral, written and nonverbal skills with appropriate sensitivity, clarity and control for a wide range of healthcare related activities, to include patient care, professional communication, health education, and record keeping and reporting.
5. **PROFESSIONAL ETHICS AND JURISPRUDENCE:** Professionals comply with the law and exhibit ethical behavior.
6. **INFORMATION AND TECHNOLOGY LITERACY:** Information literacy is a set of abilities, including the use of technology, to locate, evaluate and integrate research and other types of evidence to manage patient care.
7. **CHIROPRACTIC ADJUSTMENT/MANIPULATION:** Doctors of chiropractic employ the adjustment/manipulation to address joint and neurophysiologic dysfunction. The adjustment/manipulation is a precise procedure requiring the discrimination and identification of dysfunction, interpretation and application of clinical knowledge; and, the use of cognitive and psychomotor skills.
8. **INTERPROFESSIONAL EDUCATION:** Students have the knowledge, skills and values necessary to function as part of an inter-professional team to provide patient-centered collaborative care. Inter-professional teamwork may be demonstrated in didactic, clinical or simulated learning environments.
9. **BUSINESS:** Assessing personal skills and attributes, developing leadership skills, leveraging talents and strengths that provide an achievable expectation for graduate success. Adopting a systems-based approach to business operations. Networking with practitioners in associated fields with chiropractic, alternative medicine and allopathic medicine. Experiencing and acquiring the hard business skills required to open and operate an on-going business concern. Participating in practical, real time events that promote business building and quantifiable marketing research outcomes
10. **PHILOSOPHY:** Demonstrates an ability to incorporate a philosophically based Chiropractic paradigm in approach to patient care. Demonstrates an understanding of both traditional and contemporary Chiropractic philosophic concepts and principles. Demonstrates an understanding of the concepts of philosophy, science, and art in chiropractic principles and their importance to chiropractic practice.