

# Case Review Requirements For C2 Certification Course

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Note: Case Review due with application or within 30 days of receipt of application in order to hold spot at the course.

Case Reviews are required by all C2 applicants, regardless of whether or not you are bringing your own patient to the course. If you are bringing a patient to the course, you may choose to use that patient or a different patient for your case review. You may prefer to use the patient you are bringing to the course for your Case Review, because we will need background information on any patients being brought to the course anyway. You may use any Case Review format you prefer, or an open template, but the Case Review should include a minimum of the following information:

1. Medical history of the patient (Date of onset, age, other PMH)
2. History of treatment including brace
3. Clinical measurements taken at the initial evaluation (scoliometer, chest wall circumference, breath volume, inclinometer, other measurements as found on your standard evaluation form)
4. Radiological (x-ray) measurements of Cobb angle, degree of rotation (Raimondi and/or Nash-Moe), Risser, with copy of actual x-ray (out of brace) at start of treatment
5. Patient photographs in standing (anterior, posterior, lateral) and forward bending (posterior and lateral)
6. If patient is braced, include in-brace patient photo and in brace patient x-ray if available
7. Curve classification (3C, 4C, N3N4 or single L or single TL)
8. Treatment plan given after evaluation based upon risk of progression, physician prescription, and other guidelines (SOSORT)
9. Frequency/duration/date range of therapy done
10. Completed templates describing scoliosis-specific exercises done with key completed for curve pattern, position, pad placement, activation
11. Photographs of patient doing scoliosis-specific exercises (minimum 3 positions such as supine, sidelying, semihanging, prone on knees)
12. List of other treatments done (orthopedic exercise, manual therapy)
13. Objective outcomes of the treatment to date, including radiological and clinical re-evaluation (as above), copies of follow up x-rays and patient photographs (as above)
14. Conclude with a brief statement assessing overall treatment your assessment of outcome, and plan of care for future (or discharge plan)

Please submit your Case Review electronically to the host clinic. Be sure to obtain a signed consent from the patient to release information for the purposes of the Case Review.