Cervical spine:

- Students should be able to identify the key components of history taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as cervical spine ranges of motion, myotomes and dermatomes as it relates to the cervical spine.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the cervical spine:
  - Cervical chiropractic subluxation
  - Cervical strain vs sprain
  - Cervical foraminal encroachment
  - Cervical discal disease
  - Cervical fractures
  - Thoracic outlet syndromes
    - Anterior Scalene
    - Hyperabduction Syndrome
    - Postural Compression
    - Cervical Rib
    - Costoclavicular compression
- Students should be able to discuss the different causes of TMJ along with the appropriate testing protocols for such problems as:
  - Closed lock
  - Open lock
  - Capsular irritation
  - Disc derangement
- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

Thoracic Spine:

- Students should be able to identify the key components of history taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as thoracic spine ranges of motion and dermatomes as it relates to the thoracic spine.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the thoracic spine:
  - Thoracic subluxation
  - Osseous anomaly
  - Thoracic fracture
  - Intercostal neuralgia
  - Pleural disease
  - Ankylosing spondylitis
  - Scoliosis
  - Scheuermann's disease
  - Thoracic discal disease
- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

**Shoulder:**

- Students should be able to identify the key components of history taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as shoulder ranges of motion, as it relates to the spine.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the shoulder
  - Bursitis
    - Subacromial and Subdeltoid
  - Subluxation of the shoulder
  - Dislocation of the shoulder
  - Biceps tendonosis
  - Bicipital tenosynovitis
  - Transverse Humeral ligament instability
  - Biceps tear
  - Rotator cuff injury
- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

**Elbow:**

- Students should be able to identify the key components of history taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as elbow ranges of motion
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the elbow:
  - Epicondylitis
  - Collateral ligament sprain
  - Elbow fracture
  - Ulnar nerve lesion
  - Olecranon bursitis
  - Triceps tendonosis
  - Posterior joint impingement
  - Nursemaids elbow
  - Panner's disease:
- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.
Wrist and Hand:

- Students should be able to identify the key components of history taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as wrist and hand ranges of motion, myotomes and dermatomes as it relates to the cervical spine/wrist and hand.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the wrist and hand:
  - Strain and sprains
  - Nerve lesions:
    - Ulnar
    - Median
    - Radial
  - Arthritides
    - O.A
    - R.A.
    - P.A.
  - Tenosynovitis
  - Ganglion
  - Fractures
    - Colle's
    - Smith's
  - Madelung deformity
  - Carpal tunnel syndrome
  - Dupuytren contracture

- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

The above objectives will be evaluated by a combination of written and practical examinations that will be comprehensive in nature. When the students pass these exams, they will have shown that the objectives have been met.

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Lumbar Spine:

- Students should be able to identify the key components of History taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as lumbar spine ranges of motion, myotomes and dermatomes as it relates to the lumbar spine.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the lumbar spine:
  - Lumbar subluxation
  - Osseous anomaly
    - Hemivertebrae
    - Butterfly vertebrae
    - Spina bifida occulta
  - Fracture
  - Discal disease
  - Infection of the lumbar spine
  - Ankylosing spondylitis
- Scoliosis
- Osteoporosis
- Sciatica
- Neoplasm
- D.I.S.H.

- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

Sacroiliac & Hip:

- Students should be able to identify the key components of History taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as sacroiliac and hip ranges of motion, myotomes and dermatomes as it relates to the sacroiliac and hip regions.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the sacroiliac and hip regions:
  - Sacroiliac subluxation
  - Anterior and posterior sacroiliac strain
  - Ankylosing spondylitis
  - Femoral nerve lesions
  - Meralgia paresthetica
  - Iliotibial band syndrome
  - Hamstring contracture
  - Hip flexor contracture
  - Hip arthritides
  - Hip joint fracture
  - Infant hip dislocation
- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

Knee:

- Students should be able to identify the key components of History taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as knee ranges of motion, myotomes and dermatomes as it relates to the knee.
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the knee:
  - Anterior and posterior cruciate injury
  - Medial and lateral collateral ligament injury
  - Meniscal injury
  - Chondromalacia patella
  - Osteochondritis dessicans
  - Arthritides
- Students should be able to discuss the proper orthopedic testing for the above conditions. This discussion should not be limited to just the Classical finding expected for
a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

Ankle and Foot:

- Students should be able to identify the key components of History taking from an O.P.Q.R.S.T. model.
- Students should be able to discuss observation skills as well as ankle and foot ranges of motion, myotomes and dermatomes as it relates to the ankle and foot
- Students should be proficient in discussing the sign, symptoms, causes and treatment (allopathic and chiropractic) for the following conditions in the ankle and foot:
  - Ankle sprains
  - Talar dome lesions
  - Arthritis
    - O.A.
    - R.A.
    - P.A.
    - G.A.
  - T.B. of the ankle
  - Stenosing tenosynovitis of the ankle
  - Tarsal tunnel syndrome
  - Phalangeal defects
    - Claw toe
    - Hallux rigidus
    - Mallet toe
    - Hammer toe
    - Mortons foot
    - Hallux varus
    - Primary and secondary metatarsalgia
    - Pes planus and cavus
    - Talipes equinovarus
    - Avascular necrosis
      - Kohler's disease
      - Sever's disease
      - Freiberg's disease
    - Calcaneal spurs
    - Rocker bottom foot
    - Fracture
      - Calcaneal fracture
      - March fracture
- Lab Testing: (Objective is to teach the Orthopedic Tests for the following areas Note: 1 area per week with demonstration, discussion and then participation by the student)
  - Cervical Orthopedic Tests
  - Thoracic Outlet Tests
  - Shoulder Tests
  - Elbow Tests
  - Wrist and Hand Tests
  - Thoracic Tests
  - Lumbar Tests
  - Sacroiliac and HipTests
- Knee Tests
- Ankle Tests
- Vascular and Malingering Tests

- Students should be able to discuss the proper orthopedic testing for the conditions noted above. This discussion should not be limited to just the Classical finding expected for a specific orthopedic test, but include the rationale for doing the specific test and also give other reasons (clinical importance) for the unexpected finding as well as a follow up approach to include another orthopedic test.

The above objectives will be evaluated by a combination of written and practical examinations that will be comprehensive in nature. When the students pass these exams, they will have shown that the objectives have been met.

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