

Unit Specification (Collaborative/Postgraduate/Flexible Framework Use Only)

Unit Details & Outline

Unit Title	ASSESSMENT AND MANAGEMENT OF NEUROMUSCULOSKELETAL DYSFUNCTION IN THE LOWER QUADRANT		
Unit Code	2CP3D546		
Unit Occurrence(s)	9/1		
Unit Abbreviation	MT-LQ		
Level of Study	7		
Credit Value	20	ECTS Value	10
Home Department	HEALTH PROFESSIONS		
Home Faculty	HEALTH, PSYCHOLOGY & SOCIAL CARE (HPSC)		

Unit	Ruth Macdonald
Co-ordinator	Ruth Sephton – Clinical advisor
Key Words	Assessment and treatment of patients with neuromusculoskeletal dysfunction of the lower quadrant. Enhanced therapeutic skills, handling and clinical reasoning.

Unit Description

Brief Summary	This unit is intended to develop both cognitive and psychomotor skills of the practitioner specialising in the assessment, diagnosis and treatment of neuromusculoskeletal dysfunction.
Indicative Content	<p>Functional anatomy and biomechanics .</p> <p>Subjective and objective patient examination.</p> <p>Differential diagnosis.</p> <p>Manual treatment techniques and other strategies.</p> <p>Clinical reasoning applied to management of neuromusculoskeletal dysfunction of the lower quadrant including lumbar spine, pelvis, hip, knee, foot and ankle.</p>

Learning Outcomes

Unit Learning Outcomes	On successful completion of this unit students will be able to:
-------------------------------	---

	<ol style="list-style-type: none"> 1. Critically explain mechanical and non-mechanical dysfunction of the lower quadrant with reference to structure, function and biomechanics of the neuromusculoskeletal system. 2. Critically evaluate and apply scientific and clinical evidence to the management of patients with neuromusculoskeletal dysfunction of the lower quadrant. 3. Demonstrate skilful assessment, management and clinical reasoning of patients with neuromusculoskeletal dysfunction of the lower quadrant with reference to indications, contraindications and indicators for caution that encompasses a biopsychosocial framework. 4. Demonstrate an advanced level of manual therapy skills including mobilisation and manipulation techniques, exercise and patient education and other modalities relevant to the management of neuromusculoskeletal dysfunction of the lower quadrant. 5. Demonstrate advanced use of interpersonal and collaborative communication skills in patient assessment and management including written communication, record keeping and documentation of informed consent.
--	--

Assessment

Summative Assessment	Element	Type	Weighting	Learning outcomes assessed
	1	Practical examination	50%	1, 2, 3, 4,
	2	Written Assignment: LQ case study (final element of assessment)	50%	1, 2, 3, 5

Employability & Sustainability Outcomes	Outcomes	Element of Assessment
	Employability	
	Apply skills of critical analysis to real world situations within a defined range of contexts.	1,2
	Demonstrate a high degree of professionalism.	1,2
	Express ideas effectively and communicate information appropriately and accurately using a range of media including ICT.	1,2
	Develop working relationships using teamwork and leadership skills, recognising and respecting different perspectives.	1,2
	Manage their professional development reflecting on progress and taking appropriate action.	1,2
	Find, evaluate, synthesise and use information from a variety of sources.	1,2
	Articulate an awareness of the social and community contexts within their disciplinary field.	1,2
	Sustainability	
	Use systems and scenario thinking.	1,2
	Engage with stakeholder/interdisciplinary perspectives.	1,2
Description of each element of Assessment	<p>Summative assessment:</p> <ol style="list-style-type: none"> 1. A practical and oral examination combined to demonstrate anatomy, biomechanics, clinical presentations, techniques and differential testing (50%) (10 min preparation time, 40 minutes exam) 2. Lower Quadrant case study (50%) (2250 word limit). Students select a patient from their clinical practice with lower limb 	

	<p>neuromusculoskeletal dysfunction. They will be assessed on their ability to analyse the assessment findings and support their working hypothesis/es, to critically reflect and clinically reason the patient's treatment selection and progression in relation to the underpinning theoretical construct and current evidence, and to demonstrate evidence of critical reflection and evaluation of personal and professional learning, including the implications to future practice.</p> <p>Formative assessment</p> <p>Students will have a timetabled session within the unit for formative assessment of the practical examination.</p> <p>Students will have a timetabled session within the unit to prepare formatively for the case study assignment. The students will prepare a plan of a case study and in small groups, they will peer assess their work.</p>
Mandatory Learning & Teaching Requirements	
Minimum Pass Mark	

Learning Activities

Breakdown of Student	Type of Activity	%
	Summative Assessment	25%

Learning Activity		
	Directed Study	25%
	Student-centred Learning	50%

Learning Resources

Books recommended for purchase by students	<p>Petty, N.J. (2011) Neuromusculoskeletal examination and assessment: a handbook for therapists. 4th ed. Edinburgh: Churchill Livingstone.</p>
Essential Reading/ Resources	<p>Butler, D. (2006) Sensitive Nervous System Adelaide: Noi Group</p> <p>European Spine Journal</p> <p>Greenhalgh, S. and Selfe, J. (2010) Red flags II: a guide to solving serious pathology of the spine Edinburgh: Churchill Livingstone Elsevier</p> <p>Hengeveld, E. and Banks, K. Maitland, G.D. (2013) Maitland's peripheral manipulation (5th ed) Edinburgh : Elsevier Butterworth-Heinemann</p> <p>Hengeveld, E. and Banks, K. Maitland, G.D. (2013) Maitland's Vertebral Manipulation (8th ed) Oxford: Butterworth Heinemann</p> <p>Higgs J., Jones MA., Loftus S., Christensen, N. (2008) Clinical Reasoning in the Health Professions. 3rd Edition. Philadelphia. Elsevier</p>

	<p>Journal of Manual and Manip Therapy</p> <p>Manual Therapy</p> <p>National Collaborating Centre for Primary Care and Royal College of General Practitioners</p> <p>Orthopaedics and Trauma</p>
Further Reading/ Resources	<p><i>Australian Journal of Physiotherapy</i></p> <p>Hicks C (2009) Research methods for clinical therapists. 5th ed. Edinburgh. Churchill Livingstone</p> <p>Levangje P, K. & Norkin C, C. (2011) Joint Structure and Function- A Comprehensive Analysis. 5th ed Philadelphia: F A Davis</p> <p>McCarthy, C. (2010) Combined Movement Theory; Rational mobilisation and manipulation of the vertebral column. Edinburgh:Churchill Livingstone Elsevier</p> <p>Manual Therapy</p> <p>Spine</p> <p>The Spine Journal</p>

Specialist ICTS Resources	None
Additional Requirements	None specific to this unit

Administration

JACS Code	
HESA Academic Cost Centre	
Date of Approval	
Date of Most Recent Consideration	
Unit External Examiner	
Unit Assessment Board	