CLINICAL REASONING – OBJECTIVE PLANNING.

To be completed after the subjective prior to the objective assessment

1. Name all the possible structures which could be a source of the symptoms:

   Symptomatic Area –

   Structure Under Area –

   Structures which can refer to the area –

2. What needs to be examined today and why?

3. Will a neurological examination be required and why?

4. Behaviour of symptoms
   a) Is the condition severe? Explain why.

   b) Is the condition irritable? Explain why.

   c) Are there any precautions or contraindications?
5. How is the severity, irritability or nature of the condition going to affect your physical examination and treatment?

6. Will the comparable sign be easy or hard to find? Explain why.

7. What subjective findings indicate likely physical findings?

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<th>Subjective</th>
<th>Physical</th>
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8. What other factors need to be examined as reasons why the structure has become symptomatic?

9. What is your clinical diagnosis?
To be completed after the objective assessment:

1. Were your hypotheses supported or negated? Why?

2. What is your main hypothesis now with regard to the primary disorder and the dominant pain mechanism?

3. Is there anything about your physical exam that would indicate caution in your management?

4. How will you manage this patient?

5. What comparable signs will you check on return?

6. Indicate your treatment progression over time.

7. What is the patient's prognosis? Justify:
8. What goals do you expect to achieve?

9. Would you expect the patient to have residual signs and symptoms at the end of the course of treatment?

10. How many treatments would be required?