

EFSHT ECHT
SHORT CASE STUDY

Title:

Hand Therapy Treatment of a Patient with a Fracture of Metacarpal V

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1. Introduction:

Introduces the reader to the case and gives a brief overview of the case. The short -case study is limited to a maximum of 1,500 words (single spaced 2-3 pages, double spaced 4-6 pages of text). The long case study is limited to a maximum of 2500 words (single spaced 4-6 pages, double spaced 8-12 pages of text). For both case studies the word count must not exceed the prescribed length by more than 10%. The word count should not include front cover, content list, reference list, appendices or tables. You can find more information about the case study requirements on page 6 of the EFSHT ECHT Handbook.

This document provides a structural overview of how a case study might look. ECHT Candidates are free to structure the case study as they see fit. A table of contents and referencing is required. Use of headers to structure the case study for the reader is highly recommended. The following headers have been provided as an example.

2. Case Presentation

I. Short summary of injury or illness

Include:

- a. Demographic information (patient's age, gender, profession, hand dominance, family situation etc.)
- b. Diagnosis (include date of onset, date of surgical interventions) and relevant health history (other health conditions that need to be considered by the therapist when treating this patient's hand)
- c. Date that therapy was initiated and date that patient was discharged from therapy

II. Assessment and re-assessment

Overview of evaluation of patient and reasoning behind selection of assessment tools for the evaluation and re-evaluation of the patient. Indicate at what intervals the patient was evaluated and if the re-evaluation impacted treatment. Remember that information can be summarized in a table. Tables are not included in the word count. Be sure to include the patient's perception of his or her condition. Include the ICF framework and terminology as part of the assessment of the patient.

III. Identification of and prioritization of problems

Describe the problems identified through the assessment, justify their prioritization.

IV. Treatment goals:

Describe treatment goals that were set and indicate the time parameters for these goals. Be sure to indicate if the goals were met or adjustments needed to be made.

V. Treatment methods:

Indicate what treatment methods were used. Support treatment choices with references where appropriate. Reflect on what was effective and what could have been improved upon.

VI. Interdisciplinary interaction:

Include information about other professions that you interacted with as part of the treatment of this patient.

VII. Complications and management of complications:

Were there any complications? If so how were they managed?

VIII. Cost analysis:

A short cost analysis should be included.

IX. Outcome:

A summary of the outcome of treatment should include information about function and the patient as well as the therapist's perspective. Discuss implications for the patient as a result of this illness or injury.

3. Summary with therapist's reflection

Reflect on this case, what went well? What would you do differently in a similar situation? Were there particular patient characteristics that influenced the treatment or outcome? Make use of current literature to support your position.

4. References

Use the Vancouver formatting for the list of references. More information is available online about the Vancouver referencing style for example the handout found under: <http://michener.ca/students/library/research/vancouverstyle/> is quite helpful.

Summarized from the website mentioned above, a brief overview of how to handle referencing within the paper is as follows:

- **References are numbered** sequentially in the order they are first mentioned. Place each reference number in parentheses, throughout the text, tables, and legends. If a reference is used again, re-use the original number.
- **Direct quotes:** place quotation marks around the quote and number the reference as usual.
- **Tables are numbered** consecutively. Give each table a brief title and within the table each column should have a short heading. Be sure to mention the table in the text. If the data is taken from another source, include the source in the list of references at the end of the paper.
- **Internet pages** may, in time, be deleted, changed, or moved, so it is a good idea to keep a hard copy for your records and note the date and time of the download.

Referencing a journal article (example)

1. Feehan LM, Tang CS, Oxland TR. Early controlled passive motion improves early fracture alignment and structural properties in a closed extra-articular metacarpal fracture in a rabbit model. *J Hand Surg Am.* 2007;32(2):200-8.

Referencing a chapter in a book (example)

2. Rosén, B & Lundborg, G. Sensory Reeducation. In: Skriven, T, Osterman, A, Fedorcryk, J, Amadio, P, editors. *Rehabilitation of the Hand and Upper Extremity*, 6th Ed. Philadelphia: Elsevier; 2011. p. 634-635.

5. Appendices

- I. Pictures
- II. Diagrams
- III. Tables