

Spine Fellowship Full Technical Report

Practice Analysis Team Members

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Survey Procedures

The practice analysis team established a list of 50 physical therapists who were considered subject matter experts in spine physical therapy to complete the pilot survey. Of those surveyed, 31 answered the survey, three were disqualified as they were not actively involved in spine physical therapy, which resulted in 28 complete responses to the pilot survey.

The full practice analysis survey was sent to all physical therapist members of the Academy of Orthopaedic Physical Therapy and the American Academy of Sports Physical Therapy. In total, 23,511 individuals were sent the practice analysis survey. Of these individuals, 17,558 opened the survey and 368 email addresses bounced. Of the individuals who opened the survey, 291 completed the survey with an additional 919 partial responses. Appendix 1 outlines the demographic data of survey respondents.

Pilot Survey

A copy of the pilot survey is provided within Appendix 2. The description of responses from the pilot survey is provided within Appendix 3. Please review Appendix 4 for a description of changes made to the pilot survey with the team's rationale for the changes.

Practice Analysis Survey

Description of the Final Survey

The final survey consisted of 199 questions related to orthopedic spine practice (Appendix 5) and 21 demographic questions regarding education, training, and practice experience of respondents. The content areas covered in the survey were (1) Knowledge Areas; (2) Professional Roles, Responsibilities, and Values; (3) Practice Expectations; and (4) Medical Conditions. The Knowledge Areas section of the survey included the subject areas of Foundation Sciences, Clinical Sciences, and Behavioral Sciences. The Professional Roles, Responsibilities, and Values section covered professional behavior, leadership, communication, advocacy, education, and critical inquiry for evidence. The Practice Expectations section included history taking, interpreting data from the history, systems review, tests and measures, evaluation, diagnosis, prognosis, intervention, re-assessment/re-evaluation, and outcomes assessment. The Medical Conditions section included conditions of the nervous system and musculoskeletal system relevant to orthopaedic spine physical therapy practice. Questions in the survey reflected knowledge or skills pertinent to practice. Respondents rated each knowledge or skill item on its importance, frequency of use, and level of judgment or mastery required. The raw data is provided within Appendix 6.

Data Cleaning and Screening

Survey data analysis included steps to ensure the integrity and appropriateness of the final data. Response data was screened for out-of-range values (i.e., values outside of the response range or other than the response options given), responses from those who were ineligible to participate, and abnormal response behaviors (e.g., flat responding). Survey attrition was assessed by summing the number of questions not answered for each participant. Of the 1,090 eligible individuals who started the survey, 450 exited the survey after answering the first question. The bulk of these individuals were eligible to complete the survey (n = 450) but did not do so. Of the remaining 640 respondents, 244 (38%) completed more than half of the survey, and 210 (33%) completed more than 90% of the survey. Table 1 provides participant counts by percent of the survey completed. This includes skipped questions, although there was a general dropout trend evidenced by the generally successive lower number of responses to each successive question in the survey (Appendix 7). Survey dropout is common and tends to increase with the length of a survey (e.g., Lozar Manfreda & Vehovar, 2002).

Table 1. Survey Response Counts by Percentage of Survey Completed

> 90%	76% - 90%	51% - 75%	26% - 50%	10% - 25%	< 10%
210	6	28	127	153	118

Note. The numbers here include only respondents who answered more than the first survey question.

Description of the Final Survey Data for Analyses

ABPTS requires representative random samples of both board-certified specialists and section members. Board-certified specialists will be limited to those with certification in Orthopaedics, Geriatrics, Pediatrics, Sports, and Women's Health. This sample was selected given the Orthopaedic Spine specialty area focuses on orthopedic spine conditions across the lifespan (e.g., geriatrics and pediatrics) and in diverse populations (e.g., women and athletes). In most cases, surveys should be fielded to 95% of certified specialists and an equivalent number of non-certified section members. For the larger specialty areas, ABPTS recommends that the survey be fielded to no fewer than eight hundred (800) individuals from varied geographic and demographic populations.

Table 2 presents descriptive demographic information about the final sample of survey respondents. Most respondents did not respond to the demographic questions. The table shows frequencies and percentages for all 640 respondents. Of the survey respondents, 80% were ABPTS board-certified clinical specialists in orthopaedic or sports physical therapy or were graduates of an ABPTRFE-accredited orthopaedic or sports

residency program and had a minimum of 1,000 hours in orthopaedic spine practice in the last two years. The remaining 20% of respondents were not board-certified or residency graduates but were members of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and had a minimum of 5 years of orthopaedic spine practice with at least 1,000 hours in the last two years.

As shown in Table 2, of the 223 respondents who answered the demographic questions, 81% were non-Hispanic white, 61% were male, and the most endorsed age group was 30-to-39 (34%). The same number of individuals responded to the set of questions about their background and experience. Of the 233 respondents who answered the background and experience questions, 184 (83%) were APTA members. One hundred fifty-nine respondents (or 71% of those who answered the demographic questions) reported they had been practicing in orthopaedic spine physical therapy for at least 10 years.

Table 2. Demographic Descriptive Statistics of Survey Respondents

<i>Race/ethnicity</i>	<i>N</i>	<i>%</i>
African American or Black (Not Hispanic)	6	0.9
Asian	23	3.6
Hispanic/Latino	3	0.5
Other	9	1.4
White (Not Hispanic)	180	28.0
None Selected	419	65.5
<i>Gender</i>	<i>N</i>	<i>%</i>
Male	136	21.2
Female	87	13.6
None Selected	417	65.2
<i>Age group</i>	<i>N</i>	<i>%</i>
20-29	7	1.1
30-39	76	11.8
40-49	61	9.5
50-59	53	8.3
60-69	21	3.3
70+	5	0.8
None Selected	417	65.2

<i>Professional Background</i>	<i>N</i>	<i>%</i>
Graduate of ABPTRFE-accredited orthopaedic or sports residency program with minimum of 1,000 practice hours in orthopaedic spine in the last 2 years.	46	7.2
ABPTS board-certified clinical specialist in orthopaedic or sports physical therapy with a minimum of 1,000 practice hours in orthopaedic spine in the last two years.	472	73.8
Not a board-certified clinical specialist or residency graduate, but a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy with a minimum of 5 years of experience in orthopaedic spine, with at least 1,000 practice hours in the last two years.	122	19.0
<i>APTA Membership</i>	<i>N</i>	<i>%</i>
Yes	184	28.8
No	38	5.9
None Selected	418	65.3
<i>Total Number of Years Practicing Physical Therapy</i>	<i>N</i>	<i>%</i>
31 or more years	41	6.4
21 - 30 years	57	8.9
16 - 20 years	24	3.8
11 - 15 years	37	5.8
6 - 10 years	44	6.9
3 - 5 years	17	2.7
1 - 2 years	4	0.6
None Selected	416	65.0
<i>Entry-level Physical Therapy Education</i>	<i>N</i>	<i>%</i>
Baccalaureate	48	7.5
Postbaccalaureate certificate	5	0.8
Entry-level master's	46	7.2
DPT	121	18.9
Other (please specify)	3	10.0

None Selected	417	65.2
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<i>Primary geographic area of practice</i>	<i>N</i>	<i>%</i>
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East North Central (IL, IN, MI, OH, WI)	24	3.8
East South Central (AL, KY, MS, TN)	7	1.1
Middle Atlantic (NJ, NY, PA)	40	6.3
Mountain (AZ, CO, ID, MT, NV, NM, UT, WY)	21	3.3
New England (CT, ME, MA, NH, RI, VT)	13	2.0
Pacific (AK, CA, HI, OR, WA)	34	5.3
South Atlantic (DE, DC, FL, GA, MD, NC, PR, SC, VA, WV)	34	5.3
West North Central (IA, KS, MN, MO, NE, ND, SD)	30	4.7
West South Central (AR, LA, OK, TX)	20	3.1
None Selected	417	65.2
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Table 3 provides descriptive statistics for respondents' practice settings, and patient demographics. On average, respondents spend the greatest amount of time in private outpatient settings or hospital-based outpatient facilities (62.9% and 53%, respectively). Respondents, on average, reported that most of their patients or clients were adults 22 to 59 years of age (49.6%). Sex of patients or clients for respondents generally reflected percentages in the population.

Table 3. Practice Settings and Patient Demographics for Survey Respondents

<i>Percentage of Time Spent in Treatment Setting</i>	<i>Mean %</i>	<i>SD %</i>
Acute Care Hospital	4.1	13.9
Hospital-based outpatient facility or clinic	53.0	46.1
Private outpatient office or group practice	62.9	43.5
Skilled nursing facility (SNF)/long-term care	1.2	10.3
Patient's home/home care	2.9	12.4
School system (preschool/primary/secondary)	0.2	1.1
Academic institution (postsecondary)	18.1	32.5
Health and wellness facility	3.5	15.5

Research center	0.8	4.7
Industry	0.9	5.4
Inpatient rehab facility (IRF)	0.4	2.3
Other	9.8	26.5

<i>Age Group of Patients/Clients</i>	Mean %	SD %
Pediatrics (0-21 years of age)	14.9	12.4
Adults (22-59 years of age)	49.6	16.8
Geriatrics (60 years of age to end of life)	37.6	16.4

<i>Sex of Patients/Clients</i>	Mean %	SD %
Male	47.7	10.6
Female	51.2	10.7
Ambiguous	3.6	10.4

Note. Mean % = the average percent across respondents. SD % = the standard deviation of the average percent across respondents.

Analyses and Results

The survey asked respondents to rate each knowledge or skill item on its importance to orthopaedic spine practice, the frequency with which the knowledge or skill was used in orthopaedic spine practice, and the level of mastery required in applying the knowledge or skill to orthopaedic spine practice. Means and standard deviations were calculated for frequency, importance, and level of judgment/mastery for each survey item. Table 4 provides the rating scales used in the survey and their assigned numerical values. Respondents were presented with the rating scales (e.g., “Moderately important”; “Weekly”) and these were converted to their corresponding numerical values (as shown in Table 4) during analyses. Level of Judgment ratings were used in the first survey section (Knowledge Areas) and Level of Mastery ratings were used in the subsequent survey sections.

Table 4. Ratings Used to Assess Inclusion of Items as Part of Specialty Practice

Frequency: How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?
0 – Never
1 – Less than once a month
2 – Monthly
3 – Weekly
4 - Daily

Importance: Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to the practice as an orthopaedic spine clinical subspecialist?
0 – Not important
1 – Of little importance
2 – Moderately important
3 – Very important
Level of Judgment: Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?
0 – Do not use in their work
1 – Recall: requires ability to recall or recognize specific information only
2 – Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations
3 – Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution
Level of Mastery: Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?
1 – Advanced beginner
2 – Competent
3 – Proficient
4 – Expert

Descriptive statistics were used for data analysis. The mean ratings and standard deviations for all respondents were ranked from highest to lowest with regard to frequency, importance, and level of judgment or mastery. For Level of Mastery, analysts recoded the responses to the same numerical scale as Level of Judgment (i.e., 0 to 3) to facilitate comparison across ratings. The difference in ratings between certified and non-certified practitioner responses was evaluated by non-parametric analysis (Wilcoxon signed rank) to test for statistical significance of differences in mean ratings between groups, as well as by calculating the standardized mean difference in ratings (using Cohen’s *d*) as an indicator of the magnitude of the difference. The Wilcoxon signed rank test is a test of group differences for ordinal data, as is the case with frequency and importance ratings. While Cohen’s *d* is not specifically designed for ordinal data, it provides a valuable estimate of the magnitude of difference in means, given in terms of standard deviations. We compared ratings from respondents who were ABPTS board-certified clinical specialists in orthopaedic or sports physical therapy or were graduates of an ABPTRFE-accredited orthopaedic or sports residency program, and had a minimum of 1,000 hours in orthopaedic spine practice in the last two years with ratings from respondents who were not board-certified or residency graduates (but were members of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and had a minimum of 5 years of orthopaedic spine practice with at least 1,000 hours in the last two years). Overall, xx% of the items were rated differently in

Importance and xx% were rated differently in Frequency by certified versus non-certified practitioners. Of the 41 items in the Knowledge Areas section, there were statistically significant mean differences in three Importance ratings and seven Frequency ratings. Out of the 20 items in the Professional Roles, Responsibilities, and Values section, there were statistically significant mean differences in three Importance ratings and in four Frequency ratings. Of the 102 items in the Practice Expectations section, 20 mean Importance ratings and nine mean Frequency ratings had statistically significant differences. And finally, of the 36 items in the Medical Conditions section, three mean Importance ratings and 13 mean Frequency ratings had statistically significant differences. Tables 5 and 6 lists the items for which the average rating in importance (Table 5) or frequency (Table 6) between certified and non-certified practitioners reached statistical significance.

Table 5. Items with statistically significant Importance rating differences between certified practitioners and non-certified practitioners

Item	Certified Practitioner mean rating	Non-certified Practitioner mean rating	Cohen's <i>d</i>
Knowledge Areas			
Integumentary system	1.86	2.06	-0.31
Biopsychosocial model	2.58	2.32	0.4
Movement systems impairments	2.70	2.86	-0.31
Professional Roles, Responsibilities, and Values			
Maintaining active participation in professional organizations	2.37	2.56	-0.48
Maintaining state-of-the-art knowledge and skills	2.63	2.77	-0.29
Identifying research needs within the field	2.32	2.58	-0.56
Practice Expectations			
Ergonomic considerations	2.53	2.69	-0.33
Utilization of adaptive and supportive devices	2.32	2.48	-0.34
Onset of condition	2.82	2.96	-0.40
Obtaining data regarding medication usage	2.44	2.60	-0.34
Ergonomics and body mechanics	2.55	2.75	-0.40
Gait, locomotion, and balance	2.67	2.86	-0.43
Sensory integrity	2.58	2.74	-0.34
Reflex integrity	2.60	2.79	-0.39

Joint integrity	2.75	2.93	-0.44
Posture	2.55	2.78	-0.47
Tissue-specific diagnostic tests	2.51	2.84	-0.69
Flexibility	2.50	2.76	-0.54
Soft tissue quality	2.58	2.78	-0.41
Task-specific activities	2.67	2.86	-0.42
Ergonomics	2.49	2.69	-0.42
Soft tissue mobilization	2.59	2.81	-0.46
Mobilization with movement	2.49	2.79	-0.61
Muscle energy techniques	2.38	2.71	-0.70
Directional preference exercises/activities	2.61	2.83	-0.47
Muscle performance exercises	2.78	2.92	-0.36
Medical Conditions			
Operative procedure on spinal structure	2.67	2.84	-0.36
Oncological Disorders	2.68	2.86	-0.44
Torticollis	2.41	2.65	-0.49

Note. For all items listed in this table, the Wilcoxon signed rank test is significant at $p < .05$. Cohen's d (standardized mean difference) values are shown to indicate the magnitude of the differences in average ratings between the two groups. Positive Cohen's d values indicate the average rating by certified practitioners was higher than the average rating by non-certified practitioners. Differences in average ratings when one or both subgroup N was less than 30 are not shown.

Table 6. Items with statistically significant Frequency rating differences between certified practitioners and non-certified practitioners

Item	Certified Practitioner mean rating	Non-certified Practitioner mean rating	Cohen's d
Knowledge Areas			
Cardiovascular and pulmonary systems	2.85	3.08	-0.24
Integumentary system	2.52	2.92	-0.36

Human growth and development across the lifespan	2.61	2.85	-0.21
Nonsurgical interventional spine procedures	2.89	3.16	-0.3
Spine surgical interventions	2.94	3.16	-0.24
Personal factors	3.88	3.77	0.27
Biopsychosocial model	3.47	3.14	0.35
Professional Roles, Responsibilities, and Values			
Maintaining state-of-the-art knowledge and skills	2.07	2.30	-0.24
Facilitating collaborative and multidisciplinary team management	2.81	3.07	-0.27
Advocating for orthopaedic spine physical therapy practice	1.41	1.78	-0.34
Evaluating the efficacy and effectiveness of tools	2.18	2.47	-0.25
Practice Expectations			
Circulation	2.81	3.30	-0.50
Posture	3.64	3.86	-0.37
Flexibility	3.65	3.84	-0.32
Protective, adaptive or supportive device or equipment	2.43	2.90	-0.47
Mobilization with movement	3.23	3.66	-0.53
Muscle energy techniques	2.81	3.22	-0.35
Traction/distraction	2.92	3.20	-0.29
Directional preference exercises/activities	3.45	3.62	-0.23
Hypnosis	0.12	0.49	-0.67
Medical Conditions			
Cervical Radiculopathy	3.30	3.63	-0.46
Lumbar Radiculopathy	3.47	3.73	-0.40
Thoracic Outlet Syndrome	1.72	2.13	-0.41
Cervical Myelopathy	1.55	2.15	-0.56
Cervical Disc Pathologies	3.39	3.75	-0.49

Lumbar Strain	3.29	3.63	-0.44
Piriformis Syndrome	2.02	2.48	-0.44
Sacroiliac Dysfunction	2.38	3.08	-0.65
Thoracic Sprain/Strain	2.33	2.79	-0.47
Thoracic Disc Pathologies	1.49	2.05	-0.58
Other Disorders of the Thoracic Spine	1.94	2.31	-0.35
Operative procedure on spinal structure	2.38	2.79	-0.41
Torticollis	0.82	1.44	-0.69

Note. For all items listed in this table, the Wilcoxon signed rank test is significant at $p < .05$. Cohen's d (standardized mean difference) values are shown to indicate the magnitude of the differences in average ratings between the two groups. Positive Cohen's d values indicate the average rating by certified practitioners was higher than the average rating by non-certified practitioners. Differences in average ratings when one or both subgroup N was less than 30 are not shown.

We compared ratings by certified practitioners to ratings averaged across the whole sample. There were no statistically significant differences found. This is likely because non-certified practitioners made up a relatively small proportion of the whole sample (about one quarter). Given the similarity between ratings from certified practitioner respondents and ratings in the entire sample, content experts reviewed the mean ratings for the entire sample. Standard deviations were provided as an indicator of rating variability for each item.

To facilitate and aid in organization of review, mean ratings for each item were categorized using the cut-off points shown in Table 6. Content experts were provided descriptive statistics for each item (number of respondents, mean response, standard deviation of the mean response) which were marked as belonging to one of the four rating categories described in Table 6.

Table 6. Initial Criteria for Categorizing Survey Results

Rating Criteria	Rating Category
High frequency (≥ 3.0), high importance (≥ 2.5)	Very likely to be critical
Low frequency (< 3.0), high importance (≥ 2.5)	May be critical
High frequency (≥ 3.0), low importance (< 2.5)	Less likely to be critical
Low frequency (< 3.0), low importance (< 2.5)	Very unlikely to be critical

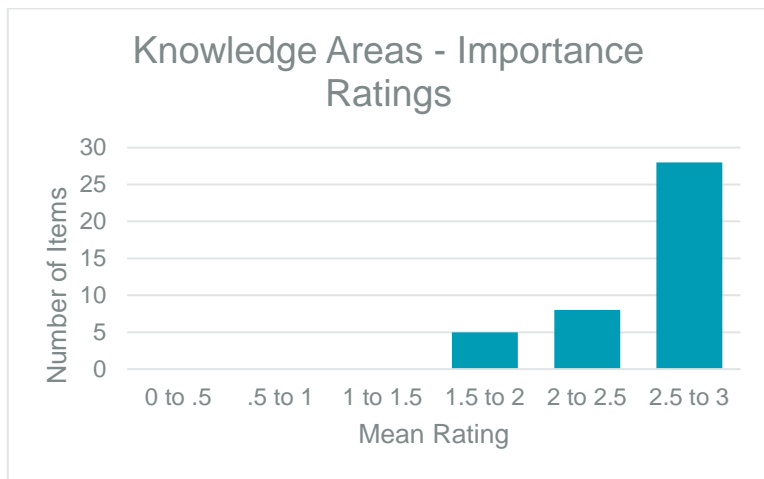
Before reviewing the survey items and their ratings, content experts established the following decision rules for their review. Items would be eliminated if their average importance rating was less than 1. Items would be eliminated after review if they had an average importance rating close to 1 and an average frequency rating less than or equal to 1.5. Items with average importance ratings between 1 and 2.5 would be discussed among the content experts and a consensus decision would be reached regarding retaining or eliminating the items. Items with average importance ratings equal to or greater than 2.5 would be retained. The content

experts concluded that for purposes of review, importance ratings would be given more weight than frequency ratings. Where importance and frequency ratings were borderline, level of judgment or mastery would be taken into consideration during review. Table 7 summarizes the decision rules the content experts used in their review.

Table 7. Content Expert Review Decision Rules

Average Rating	Decision
Importance rating < 1	Eliminate item
Importance rating = approximately 1 and Frequency < 1.5	Eliminate after review to confirm rating
Importance rating > 1 and < 2.5	Discuss for consensus decision
Importance rating >= 2.5	Retain item

Respondents endorsed the vast majority of items on the survey as at least Moderately Important (an average rating of 2), with 72.3% of the items having an average rating above 2.5. Figure 1 shows the distribution of mean Importance ratings across items within survey sections.



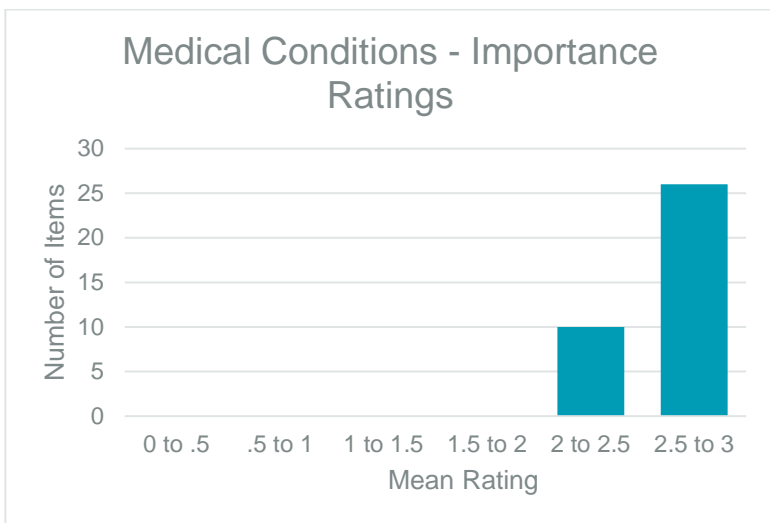
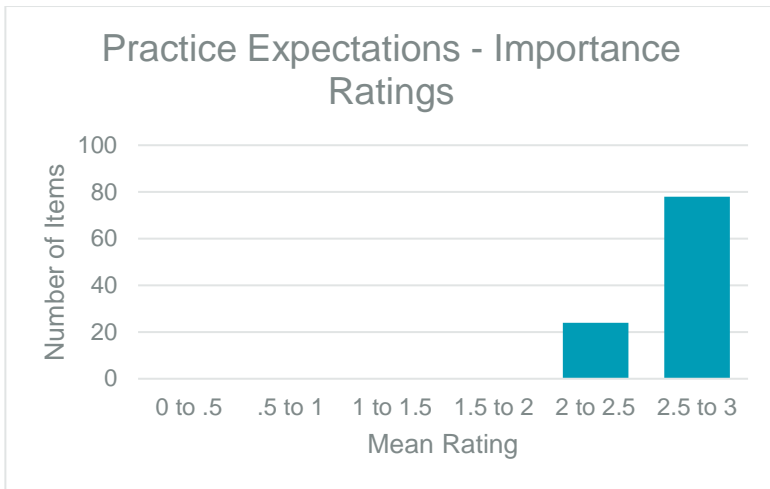


Figure 1. Mean Importance Ratings for Survey Items by Survey Section

Confidence in Survey Results

The results based on analysis of the survey data appear to be from a representative sample of practitioners of orthopaedic spine physical therapy. Given the representativeness of professional experience of respondents, the results are assumed to be representative of current orthopaedic spine practice. While standard deviations of responses indicated moderate variability in ratings of importance and frequency of use of content areas, the review of results conducted by a panel of practicing orthopaedic spine specialists provided additional perspective and further clarified current practice.

Recommendations for Future Practice Analysis Surveys

In future practice analyses, it is recommended to consider splitting the survey in half, so each survey contains fewer items and therefore take less time to complete. This may increase participation and potentially mitigate survey dropout. Another recommendation is to consider including prompts to complete any unanswered questions (particularly demographic questions) before leaving the survey. Adding such prompts when items are left blank may increase response rates for items, particularly near the end of the survey.

References

Lozar Manfreda, K., & Vehovar, V. (2002). *Survey design features influencing response rates in web surveys*. Paper presented at the International Conference on Improving Surveys, Copenhagen, Denmark.

Responses to Demographic Questions

1. Please select one of the following survey options

	Frequency	Percent
I am a graduate of an ABPTRFE-accredited orthopaedic or sports residency program, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	63	5.2
I am actively involved in orthopaedic spine physical therapy practice at the "subspecialist" level, but am unable to participate in this survey at this time.	75	6.2
I am an ABPTS board-certified clinical specialist in orthopaedic or sports physical therapy, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	754	62.3
I am not a board-certified clinical specialist, or residency graduate, in orthopaedic or sports physical therapy but I am a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and have a minimum of 5 years of experience of practice in orthopaedic spine, with at least 1,000 hours in the last two (2) years.	197	16.3
I am not actively involved in orthopaedic spine physical therapy practice and therefore I am not eligible to participate in this survey at this time.	121	10.0

4.1 Please indicate the percentage of time you spend in the following settings as an orthopaedic spine physical

	M %	SD %	Counts within Percentage Bands				
			0 to 5%	6 to 25%	26 to 50%	51 to 75%	76 to 100%
Acute Care Hospital	4.1	13.9	98	14	1	0	2

Hospital-based outpatient facility or clinic	53.0	46.1	63	5	8	6	80
Private outpatient office or group practice	62.9	43.5	38	12	14	3	92
Skilled nursing facility (SNF)/long-term care	1.2	10.3	94	1	0	0	1
Patient's home/home care	2.9	12.4	96	3	3	0	1
School system (preschool/primary/secondary)	0.2	1.1	96	1	0	0	0
Academic institution (postsecondary)	18.1	32.5	79	13	5	4	15
Health and wellness facility	3.5	15.5	94	5	2	0	2
Research center	0.8	4.7	93	3	1	0	0
Industry	0.9	5.4	93	3	1	0	0
Inpatient rehab facility (IRF)	0.4	2.3	96	2	0	0	0
Other	9.8	26.5	70	7	2	0	7

5.1 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following age groups? (total must equal 100%)

Age group	Mean %	SD %
Pediatrics (0-21 years of age)	14.9	12.4
Adults (22-59 years of age)	49.6	16.8
Geriatrics (60 years of age to end of life)	37.6	16.4

5.2 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following sex groups? (total must equal 100%)

Sex	Mean %	SD %
Male	47.7	10.6
Female	51.2	10.7
Ambiguous	3.6	10.4

5.3 Please indicate your referral sources by percentages below (total must equal 100%)

Mean % SD %

Self-referral	26.2	27.3 <- e.g., "on average, 26% of referrals are from self-referral"
Chiropractic	3.1	6.0
Family practice physicians or other physician primary care p	32.3	18.9
Physician specialists (e.g. geriatrics physician)	30.6	19.9
Physician assistants	13.8	8.8
Podiatrist	4.4	4.3
Nurse practitioners	11.8	12.7
Other	9.5	22.2

7.1 In which geographic region is the major portion of your practice?

	frequency	percent
East North Central (IL, IN, MI, OH, WI)	24	2.0
East South Central (AL, KY, MS, TN)	7	0.6
Middle Atlantic (NJ, NY, PA)	40	3.3
Mountain (AZ, CO, ID, MT, NV, NM, UT, WY)	21	1.7
New England (CT, ME, MA, NH, RI, VT)	13	1.1
Pacific (AK, CA, HI, OR, WA)	34	2.8
South Atlantic (DE, DC, FL, GA, MD, NC, PR, SC, VA, WV)	34	2.8
West North Central (IA, KS, MN, MO, NE, ND, SD)	30	2.5
West South Central (AR, LA, OK, TX)	20	1.7
None Selected	987	81.6

7.2 What is your entry-level physical therapy education?

	frequency	percent
Baccalaureate	48	4.0
DPT	121	10.0
Entry-level master's	46	3.8
Other (please specify)	3	0.2
Postbaccalaureate certificate	5	0.4

None Selected	987	81.6
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7.3 What is your highest earned academic degree in any area of study?

	frequency	percent
Baccalaureate	19	1.6
DPT	120	9.9
Master's	24	2.0
Other (please specify)	3	0.2
PhD (or equivalent and DPT)	6	0.5
PhD (or equivalent) and tDPT	1	0.1
PhD (or equivalent, eg EdD or ScD)	15	1.2
tDPT	36	3.0
None Selected	986	81.5

Note. Other were Doctor of Chiropractic (n=2) and Post Graduate Diploma in Rehabilitation (n=1).

7.4 What is the total number of years you have been a practicing physical therapist?

	Frequency	Percent
31 or more years	41	3.4
21 - 30 years	57	4.7
16 - 20 years	24	2.0
11 - 15 years	37	3.1
6 - 10 years	44	3.6
3 - 5 years	17	1.4
1 - 2 years	4	0.3
None Selected	986	81.5

7.5 What is the total number of years you have primarily practiced in Orthopaedic Spine physical therapy?

	Frequency	Percent
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31 or more years	22	1.8
21 - 30 years	44	3.6
16 - 20 years	37	3.1
11 - 15 years	28	2.3
6 - 10 years	58	4.8
3 - 5 years	26	2.1
1 - 2 years	7	0.6
Less than a year	2	0.2
None Selected	986	81.5

7.6 Please indicate any ABPTS board certifications you currently hold (select all that apply)

	Frequency	Percent
Cardiovascular and Pulmonary	0	0.0
Clinical Electrophysiology	1	0.1
Geriatrics	4	0.3
Neurology	1	0.1
Oncology	0	0.0
Orthopaedics	169	14.0
Pediatrics	0	0.0
Sports	18	1.5
Women's Health	0	0.0
Wound Management	0	0.0
None of the above	39	3.2
None Selected	996	82.3

7.7 Please indicate if you graduated from an ABPTRFE-accredited residency program in any of the following areas of specialty practice (select all that apply)

	Frequency	Percent
Acute Care	0	0.0
Cardiovascular and Pulmonary	0	0.0
Clinical Electrophysiology	0	0.0
Faculty	0	0.0

Geriatrics	0	0.0
Neurology	0	0.0
Oncology	0	0.0
Orthopaedics	50	4.1
Pediatrics	0	0.0
Sports	1	0.1
Women's Health	0	0.0
Wound Management	0	0.0
None of the above	136	11.2
None Selected	1023	84.5

7.8 Please indicate if you graduated from an ABPTRFE-accredited fellowship program in any of the following areas of subspecialty practice (select all that apply)

	Frequency	Percent
Critical Care	0	0.0
Hand Therapy	0	0.0
Higher Education Leadership	0	0.0
Movement System	4	0.3
Neonatology	0	0.0
Orthopaedic Manual Physical Therapy	38	3.1
Performing Arts	0	0.0
Spine	8	0.7
Sports Division 1	0	0.0
Upper Extremity Athlete	0	0.0
None of the above	134	11.1
None Selected	1029	85.0

7.9 Based on state law and facility policies, do you evaluate and/or treat patients/clients without a physician referral?

	Frequency	Percent
Yes	179	14.8
No	43	3.6
None Selected	988	81.7

7.10 What is your current employment status at your primary position? (35 or more hours/wk is full-time)

	Frequency	Percent
Full-time hourly	25	2.1
Full-time salaried	143	11.8
Full-time self employed	26	2.1
Part-time hourly	14	1.2
Part-time salaried	5	0.4
Part-time self employed	5	0.4
Retired	2	0.2
Unemployed/not seeking work	2	0.2
None Selected	988	81.7

7.11 What educational method has had the MOST influence on developing your present level of clinical skills?

	Frequency	Percent
Continuing education courses, workshops, seminars, study	104	8.6
Formal fellowship program	39	3.2
Formal residency program	31	2.6
Graduate program	14	1.2
In service, peer interaction	4	0.3
Mentoring	13	1.1
Self-study (books, articles, videotapes, home study courses)	17	1.4
None Selected	988	81.7

7.12 Are you a member of the APTA

	Frequency	Percent
Yes	184	15.2
No	38	3.1
None Selected	988	81.7

7.13 Please indicate any APTA Section you are member of (select all that apply)

	Frequency	Percent
Acute Care	1	0.1
Aquatics	2	0.2
Cardiovascular and Pulmonary	1	0.1
Clinical Electrophysiology and Wound Management	2	0.2
Education	26	2.1
Federal	5	0.4
Geriatrics	7	0.6
Hand and Upper Extremity	2	0.2
Health Policy and Administration	4	0.3
Home Health	2	0.2
Neurology	6	0.5
Oncology	2	0.2
Orthopaedics	158	13.1
Pediatrics	1	0.1
Pelvic Health	8	0.7
Private Practice	19	1.6
Research	11	0.9
Sports	34	2.8
None of the above	38	3.1
None Selected	988	81.7

7.14 What is your sex?

	Frequency	Percent
Male	136	11.2
Female	87	7.2
None Selected	987	81.6

7.15 What is your age?

	Frequency	Percent
20-29	7	0.6
30-39	76	6.3

40-49	61	5.0
50-59	53	4.4
60-69	21	1.7
70+	5	0.4
None Selected	987	81.6

7.16 Which of the following best describes your race/ethnic origin?

	Frequency	Percent
African-American or Black (Not Hispanic)	6	0.5
Asian	23	1.9
Hispanic/Latino	3	0.2
Other	9	0.7
White (Not Hispanic)	180	14.9
None Selected	989	81.7

Introduction

Orthopaedic Spine Physical Therapy

Clinical Subspecialty Practice Analysis Survey

The purpose of this survey is to distinguish elements of subspecialized Orthopaedic Spine clinical practice. The results of this survey will establish a Description of Fellowship Practice (DFP) in Spine Physical Therapy. The questions are based on:

- (1) The curriculum of current ABPTRFE-accredited Spine Fellowship Programs,**
- (2) The opinions of a Subject Matter Expert (SME) workgroup pertaining to Spine physical therapy practice,**
- (3) The latest version of the *Guide to Physical Therapist Practice*, including the Patient/Client Management Model,**
- (4) The practice expectations identified in the publication, *A Normative Model of Physical Therapist Professional Education*; and**
- (5) Recent articles and textbooks pertaining to Spine physical therapist practice**

Survey Guidelines:

The Guide to Physical Therapist Practice describes the Patient/Client Management Model, which includes Examination (history, systems review, tests and measures), Evaluation, Diagnosis, Prognosis, Intervention, and Outcomes. Based on the development of the Guide and previous specialty practice surveys, the elements of this Patient/Client Management Model are the accepted standard for all physical therapy practice, including Orthopaedic Spine Subspecialty Practice.

The Normative Model was published by the APTA to serve as a consensus-based model for professional education. This publication provides Practice Expectations (PEs) for the professional physical therapist. There are a total of 19 PEs. PEs equate to clinical competencies or the knowledge, skills, and behaviors that describe the performance of a graduate from a professional (entry-level) physical therapy program as they enter into the practice of physical therapy. These competencies include: Professional Practice Expectations (communication, individual cultural differences, professional behaviors, critical inquiry and clinical decisions making, education, professional development), Patient and Client Management Expectations (screening, examination, evaluation, diagnosis, prognosis, plan of care, intervention, outcomes assessment and evaluation), and Practice Management Expectations (prevention/wellness/health promotion, management of care delivery, administration, consultation, social responsibility).

While all therapists may perform these same elements of practice, as "subspecialists" they may be performing them differently. That is to say, subspecialists may have additional knowledge or skill, and may analyze or synthesize information differently. The result of these differences is that subspecialists may be more efficient and effective in their patient/client management. This survey represents the description of subspecialty practice for the next 10 years so please answer the questions with respect to anticipated changes, growth over the next 10 years.

This survey also addresses specific knowledge areas and procedures, and the Orthopaedic Spine Subspecialist's roles/duties in education, leadership, virtuous behavior, consultation and critical inquiry. Your responses will help us validate both advanced skill and knowledge. Some of the advanced skills are not always obvious. For example, you may consider manual muscle testing (MMT) to be a basic skill. However, the use of MMT in clinical practice may actually reflect refined thought processes employed by a clinical subspecialist who has considered the best external evidence in formulating the intervention plan. So, it may not be the actual intervention that signifies advanced practice, but the thought processes, synthesis of external evidence or possession of more knowledge about the intervention that is the hallmark of advanced practice.

We ask you to please consider each item carefully in this context, so that the results of this survey truly reflect a "subspecialty" level of practice.

Survey Response Eligibility

1. Please select one of the following survey options:

- I am an ABPTS board-certified clinical specialist in orthopaedic **or** sports physical therapy, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.
- I am a graduate of an ABPTRFE-accredited orthopaedic **or** sports residency program, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.
- I am not a board-certified clinical specialist, or residency graduate, in orthopaedic or sports physical therapy **but** I am a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and have a minimum of 5 years of experience of practice in orthopaedic spine, with at least 1,000 hours in the last two (2) years.
- I am not actively involved in orthopaedic spine physical therapy practice and therefore I am not eligible to participate in this survey at this time.
- I am actively involved in orthopaedic spine physical therapy practice at the "subspecialist" level, but am unable to participate in this survey at this time.

PART 1 / 1.1 FOUNDATION SCIENCES

Part 1 - Knowledge Areas of Orthopaedic Spine Clinical Subspecialists

Your answers should reflect what you believe to be "orthopaedic spine subspecialty clinical practice" – i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 1 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as an orthopaedic spine clinical subspecialist?

- 0 – Not important;
- 1 – Of little importance;
- 2 – Moderately important;
- 3 – Very important

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialist exercise when they use information from this knowledge area?

- 0 - Do not use in their work;
- 1 - Recall;
- 2 - Application;
- 3 - Analysis

Level of Judgment Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.1 FOUNDATIONAL SCIENCES:

1.1.1 Human anatomy and physiology as related to orthopaedic spine conditions:

2. 1.1.1.1 Musculoskeletal system.

Frequency

Importance

Level of Judgment

Choose answers from
drop down menus.

3. 1.1.1.2 Neuromuscular system.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

4. 1.1.1.3 Cardiovascular and pulmonary systems.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

5. 1.1.1.4 Integumentary system.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6. 1.1.1.5 Human growth and development across the lifespan.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. 1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

8. 1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1 FOUNDATION SCIENCES, CONT.

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.1 FOUNDATIONAL SCIENCES, CONT.

1.1.2 Movement science as related to orthopaedic spine conditions:

9. 1.1.2.1 Kinesiology/biomechanics.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

10. 1.1.2.2 Neural control of movement.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

11. 1.1.2.3 Ergonomics.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

12. 1.1.2.4 Locomotion.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2 CLINICAL SCIENCES

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.2 CLINICAL SCIENCES

1.2.1 Pathology/Pathophysiology as related to orthopaedic spine conditions

13. 1.2.1.1 Signs and symptoms of disease/injury.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

14. 1.2.1.2 Progression of disease/injury processes.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

15. 1.2.1.3 Pathokinesiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

16. 1.2.1.4 Tissue inflammation, healing, and repair.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2 Medical and surgical considerations as related to orthopaedic spine conditions

17. 1.2.2.1 Imaging studies.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

18. 1.2.2.2 Pharmacology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

19. 1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrophysiological exams).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

20. 1.2.2.4 Nonsurgical interventional spine procedures (e.g., injections, radial ablation, denervation procedures) and their indications, contraindications, and precautions for orthopaedic spine physical therapy.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

21. 1.2.2.5 Spine surgical interventions and their indications, contraindications, and precautions for orthopaedic spine physical therapy.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

22. 1.2.2.6 Developments in genetics/regenerative medicine (e.g., genetic markers, stem cell applications, genetic-based alterations to pharmacological interventions, immunity).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3 BEHAVIORAL SCIENCES

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.3 BEHAVIORAL SCIENCES

1.3.1 Behavioral science as related to orthopaedic spine conditions:

23. 1.3.1.1 External environmental factors (e.g., expected behaviors and social pressures).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

24. 1.3.1.2 Personal factors (e.g., compliance, body awareness, pain perception, and related psychosocial factors).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

25. 1.3.1.3 Psychological/emotional conditions (e.g., anxiety, depression, catastrophization).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

26. 1.3.1.4 Impact of behavioral health risk factors (e.g., smoking effects on healing rates).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.2 Pain science as related to orthopaedic spine conditions:

27. 1.3.2.1 Peripheral nociceptive pain physiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

28. 1.3.2.2 Peripheral neurogenic/neuropathic pain physiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

29. 1.3.2.3 Central nervous system/nociplastic pain physiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

30. 1.3.2.4 Output mechanisms and expressions (e.g., immune, endocrine, sympathetic, behavioral).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3 BEHAVIORAL SCIENCES, CONT.

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.3 BEHAVIORAL SCIENCES, CONT.

1.3.3 Orthopaedic spine physical therapy theory and practice:

31. 1.3.3.1 Biopsychosocial model.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

32. 1.3.3.2 Exercise physiology across the lifespan.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

33. 1.3.3.3 Manual therapy techniques.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

34. 1.3.3.4 Movement systems impairments.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

35. 1.3.3.5 Motor control and motor learning.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

36. 1.3.3.6 Theory and application of orthotic, protective, and supportive devices.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

37. 1.3.3.7 Therapeutic exercise.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

38. 1.3.3.8 Models of differential diagnosis and clinical reasoning (e.g., hypothesis-oriented algorithm for clinicians (HOAC) model, prospect theory).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

39. 1.3.3.9 Principles of teaching and learning.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

40. 1.3.3.10 Principles of prevention and wellness.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.4 CRITICAL INQUIRY FOR EVIDENCE-BASED PRACTICE

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.4 CRITICAL INQUIRY FOR EVIDENCE-BASED PRACTICE

41. 1.4.1 Appraisal of research findings on orthopaedic spine physical therapy practice.

Frequency

Importance

Level of Judgment

Choose answers from
drop down menus.

42. 1.4.2 Application of research findings to orthopaedic spine physical therapy practice.

Frequency

Importance

Level of Judgment

Choose answers from
drop down menus.

PART 2 / 2.1 PROFESSIONAL BEHAVIOR

Part 2 - Professional Roles, Responsibilities, and Values of Orthopaedic Spine Clinical Subspecialists

Your answers should reflect what you believe to be "orthopaedic spine subspecialty clinical practice" – i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 2 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist perform this activity?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence, how important is this activity in everyday practice as an orthopaedic spine clinical subspecialist?

- 0 – Not important;
- 1 – Of little importance;
- 2 – Moderately important;
- 3 – Very important

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

- 0 - Advanced beginner level;
- 1 - Competent skill level;
- 2 - Proficient skill level;
- 3 - Expert skill level

Level of Master Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Advanced beginner level: Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level: Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level: Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level: Physical therapists at this level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid, and efficient. Clinical decision-making is rapid and accurate.

2.1 PROFESSIONAL BEHAVIOR. The orthopaedic spine subspecialist acts as a role model of professional behavior in all interactions and in accordance with APTA Code of Ethics. The orthopaedic spine subspecialist demonstrates professional behavior by:

43. 2.1.1 Consulting with and/or educating peers, colleagues, other health care professionals, community, agencies, legislative and/or regulatory organizations regarding issues of orthopaedic spine physical therapy practice.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

44. 2.1.2 Using patient-centered ethics and values in complex clinical decision making.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

45. 2.1.3 Maintaining active participation in professional organizations that address issues related to orthopaedic spine care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

46. 2.1.4 Maintaining state-of-the-art knowledge and skills by seeking own mentors and participating in continuing professional development (e.g., seminars, structured study, journal clubs, etc.).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.2 LEADERSHIP

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

2.2 LEADERSHIP. The orthopaedic spine subspecialist demonstrates leadership by:

47. 2.2.1 Representing orthopaedic spine physical therapy and interacting with other professionals and organizations (e.g., inter-professional interaction and mentoring).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

48. 2.2.2 Planning, directing, organizing, and managing human, technical, environmental, and financial resources effectively and efficiently.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

49. 2.2.3 Modeling and facilitating the translation of evidence into clinical practice as it relates to orthopaedic spine care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

50. 2.2.4 Acting as an expert resource for peers in the clinic and community for guidance on complex cases and problem solving/clinical reasoning as it relates to orthopaedic spine care.

Frequency

Importance

Level of Mastery

Choose answers
from drop down
menus.

2.3 COMMUNICATION / 2.4 ADVOCACY

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

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2.3 COMMUNICATION. The orthopaedic spine subspecialist demonstrates effective communication by:

51. 2.3.1 Empowering patients with orthopaedic spine conditions in the management of their own health (e.g., providing patients confidence to manage future occurrences of spine-related pain).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

52. 2.3.2 Facilitating collaborative and multidisciplinary team management and transition of care for individuals with orthopaedic spine conditions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.4 ADVOCACY. The orthopaedic spine subspecialist demonstrates advocacy by:

53. 2.4.1 Promoting the orthopaedic spine physical therapist as the first contact provider in musculoskeletal spine pathology.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

54. 2.4.2 Advocating for orthopaedic spine physical therapy practice with national organizations, healthcare systems or law-making bodies.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.5 EDUCATION / 2.6 CRITICAL INQUIRY AND EVIDENCE-BASED PRACTICE

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

2.5 EDUCATION. The orthopaedic spine subspecialist demonstrates the ability to educate others by:

55. 2.5.1 Contributing to the professional development of other physical therapists by teaching/mentoring.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

56. 2.5.2 Promoting awareness and benefits of fellowship programs in orthopaedic spine physical therapy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

57. 2.5.3 Educating the public regarding spine conditions, the role of orthopaedic spine physical therapists, and addressing common misconceptions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

58. 2.5.4 Educating other health care professionals and administrators as to the scope and role of orthopaedic spine physical therapists.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.6 CRITICAL INQUIRY AND EVIDENCE-BASED PRACTICE. The orthopaedic spine subspecialist demonstrates critical inquiry and evidence-based practice by:

59. 2.6.1 Applying principles of evidence-based practice in patient/client management.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

60. 2.6.2 Contributing to the body of evidence in orthopaedic spine physical therapy (e.g., peer-reviewed and non-peer-reviewed presentations and publications).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

61. 2.6.3 Evaluating the efficacy and effectiveness of examination tools, interventions, and technologies based upon available evidence.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

62. 2.6.4 Identifying research needs within the field of orthopaedic spine physical therapy, evaluating outcomes data, and assessing new concepts and technologies.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

PART 3 / 3.1 EXAMINATION / 3.1.1 HISTORY

Part 2 - Professional Roles, Responsibilities, and Values of Orthopaedic Spine Clinical Subspecialists

Your answers should reflect what you believe to be "orthopaedic spine subspecialty clinical practice" – i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 2 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist perform this activity?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence, how important is this activity in everyday practice as an orthopaedic spine clinical subspecialist?

- 0 – Not important;
- 1 – Of little importance;
- 2 – Moderately important;
- 3 – Very important

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

- 0 - Advanced beginner level;
- 1 - Competent skill level;
- 2 - Proficient skill level;
- 3 - Expert skill level

Level of Master Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Advanced beginner level: Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level: Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

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Expert skill level: Physical therapists at this level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid, and efficient. Clinical decision-making is rapid and accurate.

3.1 EXAMINATION. The orthopaedic spine physical therapist demonstrates examination by:

3.1.1 History.

3.1.1.1 Obtaining work/performance place and status data that includes, but is not limited to:

63. 3.1.1.1.1 Current and prior work.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

64. 3.1.1.1.2 Activity requirements/occupational demands.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

65. 3.1.1.1.3 Ergonomic considerations.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

66. 3.1.1.1.4 Utilization of adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1 HISTORY, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.1 History, cont.

3.1.1.2 Obtaining data regarding current condition(s)/chief complaint(s) by identifying areas of primary and secondary symptoms that includes, but is not limited to:

67. 3.1.1.2.1 Recognition of contributions from multiple body regions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

68. 3.1.1.2.2 Quality and behavior of symptoms.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

69. 3.1.1.2.3 Symptom irritability (onset, offset, and overall baseline).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

70. 3.1.1.2.4 Onset of condition (e.g., mechanism of injury, insidious onset, potential contributing factors).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

71. 3.1.1.2.5 Current and previous therapeutic interventions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

72. 3.1.1.2.6 Readiness for change.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

73. 3.1.1.2.7 Goals of the patient, family, and caregiver.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1 HISTORY, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.1 History, cont.

74. 3.1.1.3 Obtaining data regarding functional status and activity level of daily living.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

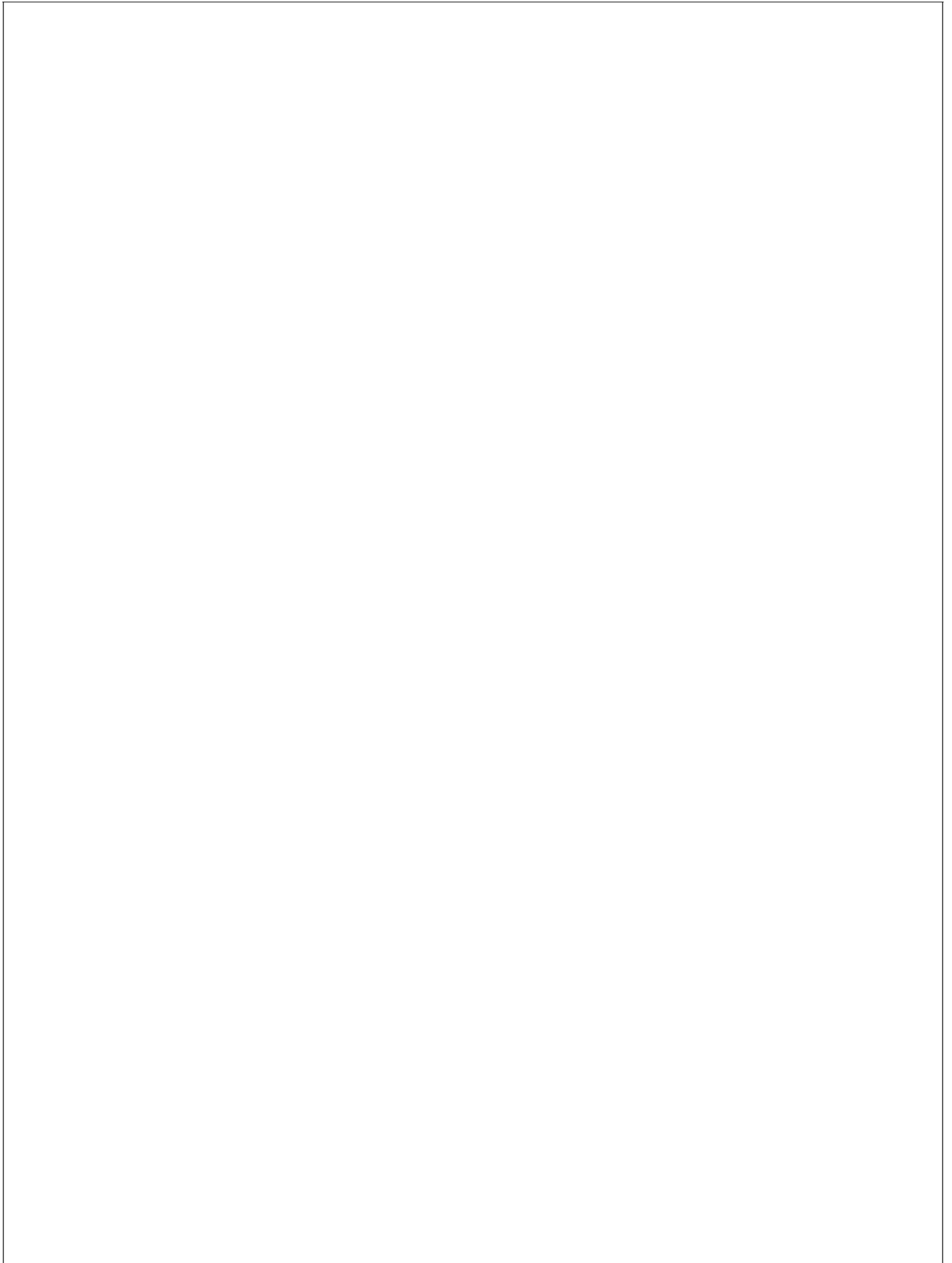
3.1.1.4 Obtaining data regarding general health status via self-report, family report, or caregiver report that includes, but is not limited to:

75. 3.1.1.4.1 Physical function.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

76. 3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression, catastrophizing).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>



3.1.1 HISTORY, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.1 History, cont.

77. 3.1.1.5 Obtaining data regarding social/health habits (past and current), including behavioral health risks (e.g., nutrition, smoking, substance use, sleep) and fitness level.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

78. 3.1.1.6 Obtaining medical/surgical history data.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

79. 3.1.1.7 Obtaining data regarding medication usage patterns and effects of medications currently and previously taken (for chief complaint and for other conditions).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

80. 3.1.1.8 Obtaining data regarding social history (e.g., cultural beliefs and support systems).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

81. 3.1.1.9 Obtaining general demographic information.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

82. 3.1.1.10 Obtaining data on living environment and community characteristics.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.2 INTERPRETING DATA FROM HISTORY / 3.1.3 PLANNING A PHYSICAL EXAM

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.2 Interpreting data from history in order to assist in planning physical therapy exam by:

83. 3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis that includes, nature and severity of problem(s), probable cause(s) of problem(s), anatomical structures involved, stage of condition, possible contraindications to physical therapy examination.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

84. 3.1.2.2 Assessing "red flags" and determining need based upon whether patient demonstrates neuromusculoskeletal problems responsive to physical therapy intervention or condition(s) requiring referral to another health care provider.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

85. 3.1.2.3 Identifying chief and secondary problems.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.3 Planning a physical exam that:

86. 3.1.3.1 Includes examination techniques with a high probability of reproducing the chief complaint and contributing to the development and refinement of the working hypothesis(es).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

87. 3.1.3.2 Is comprehensive but has the focus and detail appropriate to the working hypothesis and the patient's problems.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

88. 3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

89. 3.1.3.4 Prioritizes areas, movements, and functional activities to be examined as well as examination procedures and examination sequence.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.4 SYSTEMS REVIEW / 3.1.5 TEST AND MEASURES

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.4 SYSTEMS REVIEW.

90. 3.1.4.1 Performing systems review to identify the impaired or unimpaired status of the: cardiovascular/pulmonary system, musculoskeletal system, neuromotor system, integumentary system, and/or communication ability.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5 Performing tests and measures that include:

91. 3.1.5.1 Ergonomics and body mechanics.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

92. 3.1.5.2 Gait, locomotion, and balance.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

93. 3.1.5.3 Work (job/school/play), community and leisure integration or reintegration (including IADL).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

94. 3.1.5.4 Adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

95. 3.1.5.5 Pain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

96. 3.1.5.6 Anthropometric characteristics (e.g., edema, body dimensions and composition).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5 TEST AND MEASURES, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.5 Performing test and measures that include, cont.

97. 3.1.5.7 Circulation (e.g., vertebral artery examination, skin condition, thoracic outlet tests, and peripheral pulses).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

98. 3.1.5.8 Aerobic capacity and endurance (e.g., dyspnea perceived exertion, heart rate).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

99. 3.1.5.9 Neurodynamics.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

100. 3.1.5.10 Sensory integrity (e.g., assessment of superficial sensation, dermatomes, myotomes, proprioception and kinesthesia, 2-point discrimination, quantitative sensory testing).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

101. 3.1.5.11 Reflex integrity (e.g., assessment of normal and pathological reflexes).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

102. 3.1.5.12 Motor control and coordination (e.g., assessment of timing of movements across segments, capability of acquiring new movement strategies).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

103. 3.1.5.13 Biopsychosocial functioning (e.g., depression, impaired motivation, FABQ, STarT Back, Tampa Kinesiophobia).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

104. 3.1.5.14 Joint integrity (i.e., mobility assessment of joint hypermobility and hypomobility to include passive range of motion, passive accessory motions, response to manual provocation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5 TEST AND MEASURES, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

3.1 EXAMINATION, CONT.

3.1.5 Performing tests and measures that include, cont.

105. 3.1.5.15 Community, home, and work barriers.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

106. 3.1.5.16 Integumentary integrity.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

107. 3.1.5.17 Muscle performance (e.g., strength, power, and endurance).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

108. 3.1.5.18 Neuromotor development and sensory integration (e.g., assessment of appropriate development, dexterity, coordination, and integration of the somatosensory system).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

109. 3.1.5.19 Posture (e.g., assessment of body or body segment(s) structure, alignment, changes in different positions, body contours).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

110. 3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

111. 3.1.5.21 Flexibility (e.g., length, stiffness).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

112. 3.1.5.22 Soft tissue quality (e.g., mobility, provocation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

113. 3.1.5.23 Task-specific activities (e.g., lifting, bending, reaching).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.2 EVALUATION

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.2 EVALUATION: Evaluation is the dynamic process of clinical judgment. The orthopaedic spine subspecialist demonstrates evaluation by:

114. 3.2.1 Synthesizing data from history, systems review, and physical examination (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals), according to the International Classification of Functioning, Disability and Health (ICF) model.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

115. 3.2.2 Developing a working diagnosis, including nature of complaint, probable cause, anatomical structures involved, stage of condition, pain mechanisms, psychosocial factors, and possible contraindications for physical therapy intervention.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

116. 3.2.3 Incorporating data from ancillary testing (e.g., imaging, labs, electrophysiological studies).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

117. 3.2.4 Referring patient/client to other health care professionals for further examination as appropriate.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

118. 3.2.5 Considering implications of exam findings on activity, quality of life, and wellness as established by the ICF.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

119. 3.2.6 Interpreting data from history and systems review (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.3 DIAGNOSIS/3.4 PROGNOSIS

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.3 DIAGNOSIS. Diagnosis is the determination of labels to describe multiple dimensions of the individual, ranging from the most basic cellular level to the highest level of functioning as a person in society. The orthopaedic spine subspecialist determines diagnosis by:

120. 3.3.1 Organizing examination findings into clusters, syndromes, or categories to which physical therapy interventions will be directed and to determine prognosis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.4 PROGNOSIS. Prognosis is the determination of the predicted optimal level of improvement in function and the amount of time needed to reach that level. The orthopaedic spine subspecialist demonstrates prognosis by:

121. 3.4.1 The Orthopaedic Spine Physical Therapist establishes a prognosis including the complexity of the patient/client's dysfunctions/conditions, the predicted optimal level of improvement in function, and the amount of time needed to reach that level.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5 INTERVENTION

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.5 INTERVENTION. Physical therapists purposefully interact with the individual and, when appropriate, with other clinicians involved in his or her care, using various interventions to produce changes in the condition that are consistent with the diagnosis and prognosis. The orthopaedic spine subspecialist performs the following interventions:

122. 3.5.1 Ergonomics (influences of environment and occupation on posture and movement).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

123. 3.5.2 Education/training of functional activities.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

124. 3.5.3 Education/training of activities of daily living (e.g., hygiene, stair climbing, sleeping postures).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4 Education:

125. 3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility, and self-management within plan of care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

126. 3.5.4.2 Using the biopsychosocial/biomedical models.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

127. 3.5.4.3 Addressing pain physiology and dose response.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

128. 3.5.4.4 Addressing prevention and wellness.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5 INTERVENTION, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.5 INTERVENTION, CONT.

129. 3.5.5 Injury prevention and wellness promotion (e.g., task adaptation, behavior modification, body mechanics).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

130. 3.5.6 Sleep hygiene education (e.g., sleep schedules, technology usage, sleep habits, relationship between sleep and medication usage).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

131. 3.5.7 Nutritional education.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

132. 3.5.8 Pain neuroscience education.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

133. 3.5.9 Graded exposure.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

134. 3.5.10 Graded motor imagery.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

135. 3.5.4.11 Graded activity/exercise.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

136. 3.5.4.12 Protective, adaptive or supportive device or equipment (e.g., orthotics, taping).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

137. 3.5.4.13 Neural mobilization (e.g., nerve gliding).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5 INTERVENTION, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.5 INTERVENTION, CONT.

138. 3.5.14 Non-thrust mobilization/manipulation.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

139. 3.5.15 Thrust mobilization/manipulation.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

140. 3.5.16 Soft tissue mobilization (e.g., connective tissue, deep friction, cross friction massage, instrument-assisted).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

141. 3.5.17 Mobilization with movement.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

142. 3.5.18 Muscle energy techniques.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

143. 3.5.19 Traction/distraction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

144. 3.5.4.20 Directional preference exercises/activities.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

145. 3.5.4.21 Electro-therapeutic modalities (e.g., TENS, NMES).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

146. 3.5.4.22 Thermo-therapeutic modalities (e.g., heat, ice, ultrasound).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5 INTERVENTION, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

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3.5 INTERVENTION, CONT.

147. 3.5.23 Photo-therapeutic modalities (e.g., laser).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

148. 3.5.24 Dry needling.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

149. 3.5.25 Aerobic capacity and endurance exercises.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

150. 3.5.26 Motor coordination.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

151. 3.5.27 Muscle performance exercises (e.g., strength, muscle endurance).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.28 Complementary interventions including:

152. 3.5.28.1 Meditation.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

153. 3.5.28.2 Mindfulness.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

154. 3.5.28.3 Hypnosis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.6 RE-ASSESSMENT/RE-EVALUATION

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.6 RE-ASSESSMENT/RE-EVALUATION. The orthopaedic spine subspecialist performs re-assessment and re-evaluation by:

155. 3.6.1 Assessing intervention response.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

156. 3.6.2 Analyzing significance of changes.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

157. 3.6.3 Assessing change.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

158. 3.6.4 Re-examining/implementing a modified plan of care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

159. 3.6.5 Confirming/modifying goals.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

160. 3.6.6 Making referrals to other providers as needed.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.7 OUTCOMES ASSESSMENT

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.7 OUTCOMES ASSESSMENT. Outcomes assessment is the measurement of the actual results of implementing the plan of care that indicate the impact on functioning (body functions and structures, activities, and participation). The orthopaedic spine subspecialist performs outcomes assessment by:

161. 3.7.1 Assessing remediation of activity and participation limitations.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

162. 3.7.2 Assessing patient satisfaction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

163. 3.7.3 Assessing promotion of primary and secondary prevention.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

164. 3.7.4 Assessing improvement of patient's/client's activities and participation based on best available evidence and patient/client-specific variables (i.e., benchmarking).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

165. 3.7.5 Using applicable, evidence-based outcomes measurement tools/questionnaires/scales (e.g., Oswestry, Fear Avoidance Behavior Questionnaire).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

PART 4 PRACTICE SETTINGS

Part 4 - PRACTICE SETTINGS

This section addresses your own clinical practice as an orthopaedic spine clinician.

166. 4.1 Please indicate the percentage of time you spend in the following settings as an orthopaedic spine physical therapist (**total must equal 100%**).

Acute Care Hospital

Hospital-based outpatient facility or clinic

Private outpatient office or group practice

Skilled nursing facility (SNF)/long-term care

Patient's home/home care

School system (preschool/primary/secondary)

Academic institution (postsecondary)

Health and wellness facility

Research center

Industry

Inpatient rehab facility (IRF)

Other

PART 5 PATIENT POPULATIONS

Part 5 - PATIENT POPULATIONS

This section addresses your own clinical practice as an orthopaedic spine clinician.

167. 5.1 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following age groups? **(total must equal 100%)**

Pediatrics (0-21 years of age)

Adults (22-59 years of age)

Geriatrics (60 years of age to end of life)

168. 5.2 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following sex groups? **(total must equal 100%)**

Male

Female

Ambiguous

169. 5.3 Please indicate your referral sources by percentage below. **(total must equal 100%)**

Autonomous practice/self-referral

Chiropractors

Family practice physicians or other physician primary care providers

Physician specialists (e.g. geriatrics physician)

Physician assistants

Podiatrist

Nurse practitioners

Other

170. 5.3.1 If you entered information for "Other" above, please list a different referral source and percentage.

PART 6 MEDICAL CONDITIONS / 6.1 NERVOUS SYSTEM

Part 6 - Medical Conditions

The curriculum of all accredited orthopaedic spine fellowship programs must include a variety of medical conditions specific to orthopaedic spine.

This section addresses your clinical practice as an orthopaedic spine clinician.

Your answers should reflect what you believe to be "orthopaedic spine subspecialty clinical practice" – i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 2 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist perform this activity?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence, how important is this activity in everyday practice as an orthopaedic spine clinical subspecialist?

- 0 – Not important;
- 1 – Of little importance;
- 2 – Moderately important;
- 3 – Very important

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

- 0 - Advanced beginner level;
- 1 - Competent skill level;
- 2 - Proficient skill level;
- 3 - Expert skill level

Level of Master Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Advanced beginner level: Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level: Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level: Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level: Physical therapists at this level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid, and efficient. Clinical decision-making is rapid and accurate.

6.1 NERVOUS SYSTEM

171. 6.1.1 Cervical Radiculopathy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

172. 6.1.2 Lumbar Radiculopathy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

173. 6.1.3 Thoracic Outlet Syndrome.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

174. 6.1.4 Other peripheral neural impingements (not including thoracic outlet syndrome; e.g., carpal tunnel, Guyon's canal entrapment, peroneal nerve entrapment, tarsal tunnel syndrome).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

175. 6.1.5 Meralgia paresthetica.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

176. 6.1.6 Cervical Myelopathy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2 MUSCULOSKELETAL SYSTEM

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

6.2 MUSCULOSKELETAL SYSTEM

177. 6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion, herniation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

178. 6.2.2 Cervical Instability.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

179. 6.2.3 Cervical Sprain/Strain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

180. 6.2.4 Cervicogenic Headache.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

181. 6.2.5 Chronic Pain Syndromes.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

182. 6.2.6 Other Disorders of Cervical Spine.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

183. 6.2.7 Temporomandibular Dysfunction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

184. 6.2.8 Disorders of the Hip.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2 MUSCULOSKELETAL SYSTEM, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

6.2 MUSCULOSKELETAL SYSTEM, CONT.

185. 6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion, herniation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

186. 6.2.10 Lumbar Instability.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

187. 6.2.11 Lumbar Spondylosis / Spondylolisthesis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

188. 6.2.12 Lumbar Strain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

189. 6.2.13 Other Disorders of the Lumbar Spine.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

190. 6.2.14 Piriformis Syndrome.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

191. 6.2.15 Sacroiliac Dysfunction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

192. 6.2.16 Other Disorders of the Pelvic Girdle.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2 MUSCULOSKELETAL SYSTEM, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

6.2 MUSCULOSKELETAL SYSTEM, CONT.

193. 6.2.17 Rotator Cuff Pathology.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

194. 6.2.18 Disorders of the Shoulder Complex.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

195. 6.2.19 Rib Dysfunction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

196. 6.2.20 Thoracic Sprain/Strain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

197. 6.2.21 Other Disorders of the Thoracic Spine.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

198. 6.2.22 Curvature of the spine (e.g., scoliosis, kyphosis, lordosis).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

199. 6.2.23 Diastasis recti.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

200. 6.2.24 Facet dysfunction (cervical, throacic, lumbar).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

201. 6.2.25 Operative procedure on spinal structure.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

202. 6.2.26 Spinal stenosis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.3 ANSWER TO OTHER

* 203. 6.3 Please list any other diagnosis/condition/problem not identified previously that you see as an orthopaedic spine clinician, and percentage of time you treat the condition(s).

PART 7 DEMOGRAPHIC INFORMATION

Part 7 - DEMOGRAPHIC INFORMATION

Please answer each item by selecting the option that most clearly describes you or your professional activities. Demographic information is collected for purposes of group analysis. Individual responses are confidential.

204. 7.1 In which geographic region is the major portion of your practice?

205. 7.2 What is your entry-level physical therapy education?

206. 7.3 What is your highest earned academic degree in any area of study?

207. 7.4 What is the total number of years you have been a practicing physical therapist?

208. 7.5 What is the total number of years you have primarily practiced in Orthopaedic Spine physical therapy?

PART 7: DEMOGRAPHIC INFORMATION, CONT.

Part 7 - DEMOGRAPHIC INFORMATION, CONT.

209. 7.6 Please indicate any ABPTS board certifications you currently hold (select all that apply):

- Cardiovascular and Pulmonary
- Clinical Electrophysiology
- Geriatrics
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Sports
- Women's Health
- Wound Management
- None of the above

210. 7.7 Please indicate if you graduated from an ABPTRFE-accredited residency program in any of the following areas of specialty practice (select all that apply):

- Acute Care
- Cardiovascular and Pulmonary
- Clinical Electrophysiology
- Faculty
- Geriatrics
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Sports
- Women's Health
- Wound Management
- None of the above

211. 7.8 Please indicate if you graduated from an ABPTRFE-accredited fellowship program in any of the following areas of subspecialty practice (select all that apply):

- Critical Care
- Hand Therapy
- Higher Education Leadership
- Movement System
- Neonatology
- Orthopaedic Manual Physical Therapy
- Performing Arts
- Spine
- Sports Division 1
- Upper Extremity Athlete
- None of the above

212. 7.9 Based on state law and facility policies, do you evaluate and/or treat patients/clients without a physician referral?

- Yes
- No

PART 7: DEMOGRAPHIC INFORMATION, CONT.

Part 7 - DEMOGRAPHIC INFORMATION, CONT.

213. 7.10 What is your current employment status at your primary position (35 or more hours per week is full-time)?

- Full-time salaried
- Part-time salaried
- Full-time self employed
- Part-time self employed
- Retired
- Unemployed/not seeking work
- Unemployed/seeking full-time employment
- Unemployed/seeking part-time employment
- Full-time hourly
- Part-time hourly

214. 7.11 What educational method has had the MOST influence on developing your present level of clinical skills? **(Check one category only)**

- Self-study (books, articles, videotapes, home study courses)
- In service, peer interaction
- Continuing education courses, workshops, seminars, study groups
- Mentoring
- Formal pediatric residency program
- Formal neonatology fellowship program
- Graduate program

215. 7.12 Are you a member of the APTA?

- Yes
- No

216. 7.13 Please indicate any APTA Section you are a member of (select all that apply):

- Acute Care
- Aquatics
- Cardiovascular and Pulmonary
- Clinical Electrophysiology and Wound Management
- Education
- Federal
- Geriatrics
- Hand and Upper Extremity
- Health Policy and Administration
- Home Health
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Pelvic Health
- Private Practice
- Research
- Sports
- None of the above

PART 7: DEMOGRAPHIC INFORMATION, CONT.

Part 7 - DEMOGRAPHIC INFORMATION, CONT.

217. 7.14 What is your sex?

218. 7.15 What is your age?

219. 7.16 Which of the following best describes your race/ethnic origin?

- American Indian or Alaskan Native
- Asian
- African-American or Black (Not Hispanic)
- White (Not Hispanic)
- Hispanic/Latino
- Other
- Pacific Islander or Native Hawaiian

PART 8 OTHER INFORMATION

Part 8 - OTHER INFORMATION

220. 8.1 Please use the space below to share any concerns you have or additional items that you feel should be included in this survey.

Thank you for your professional time and thought to complete this survey.

Descriptives in Survey Order

Key	# of items	Response Scales		
		Frequency	Importance	Level of Judgment/Mastery
High frequency (≥ 3.0), high imp	134	0. Never	0. Not important	0. Do not use/ Advanced beginner skill level
Low frequency (< 3.0), high imp	18	1. Less than monthly	1. Of little importance	1. Recall/ Competent skill level
High frequency (≥ 3.0), low imp	16	2. Monthly	2. Moderately important	2. Application/ Proficient skill level
Low frequency (< 3.0), low imp	28	3. Weekly	3. Very important	3. Analysis/Expert skill level
		4. Daily		

Survey Item #	Survey Section	Item/Label	Frequency			Importance			Level of Judgment/Mastery		
			N	Mean	SD	N	Mean	SD	N	Mean	SD
2	1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system.	27	4.00	0.00	27	2.96	0.19	26	2.88	0.33
3	1.1 Foundation Sciences	1.1.1.2 Neuromuscular system.	27	4.00	0.00	27	2.96	0.19	27	2.93	0.27
4	1.1 Foundation Sciences	1.1.1.3 Cardiovascular and pulmonary systems.	27	3.11	0.80	27	2.19	0.56	27	2.19	0.68
5	1.1 Foundation Sciences	1.1.1.4 Integumentary system.	27	2.96	1.02	27	2.00	0.78	27	1.89	0.80
6	1.1 Foundation Sciences	1.1.1.5 Human growth and development across the lifespan.	27	3.11	0.85	27	2.19	0.62	27	2.22	0.80
7	1.1 Foundation Sciences	1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity).	27	3.11	0.89	27	2.26	0.66	27	2.26	0.76
8	1.1 Foundation Sciences	1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary).	27	2.89	0.85	27	2.00	0.68	27	1.93	0.73
9	1.2 Clinical Sciences	1.1.2.1 Kinesiology/biomechanics.	27	4.00	0.00	27	3.00	0.00	27	2.93	0.27
10	1.2 Clinical Sciences	1.1.2.2 Neural control of movement.	27	3.96	0.19	27	2.96	0.19	27	2.81	0.40
11	1.2 Clinical Sciences	1.1.2.3 Ergonomics.	27	3.78	0.42	26	2.73	0.53	27	2.63	0.49
12	1.2 Clinical Sciences	1.1.2.4 Locomotion.	27	3.96	0.19	27	2.89	0.32	27	2.78	0.42
13	1.2 Clinical Sciences	1.2.1.1 Signs and symptoms of disease/injury.	26	3.92	0.39	26	2.85	0.37	26	2.65	0.63
14	1.2 Clinical Sciences	1.2.1.2 Progression of disease/injury processes.	26	3.88	0.33	26	2.77	0.43	26	2.58	0.64
15	1.2 Clinical Sciences	1.2.1.3 Pathokinesiology.	25	3.92	0.28	25	2.76	0.44	25	2.56	0.65
16	1.2 Clinical Sciences	1.2.1.4 Tissue inflammation, healing, and repair.	25	3.96	0.20	25	2.92	0.28	25	2.68	0.56
17	1.2 Clinical Sciences	1.2.2.1 Imaging studies.	26	3.50	0.71	26	2.31	0.62	26	2.08	0.80
18	1.2 Clinical Sciences	1.2.2.2 Pharmacology.	26	3.42	0.70	26	2.19	0.57	26	1.58	0.70
19	1.2 Clinical Sciences	1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrophysiological exams).	26	2.73	0.78	26	2.04	0.60	26	1.69	0.74
20	1.2 Clinical Sciences	1.2.2.4 Nonsurgical interventional spine procedures (e.g., injections, radial ablation, denervation procedures) and their indications, contraindications, and precautions for orthopaedic spine physical therapy.	26	3.19	0.90	26	2.38	0.64	26	2.12	0.71
21	1.2 Clinical Sciences	1.2.2.5 Spine surgical interventions and their indications, contraindications, and precautions for orthopaedic spine physical therapy.	26	3.04	0.92	26	2.58	0.50	26	2.19	0.75
22	1.2 Clinical Sciences	1.2.2.6 Developments in genetics/regenerative medicine (e.g., genetic markers, stem cell applications, genetic-based alterations to pharmacological interventions, immunity).	26	1.62	1.33	26	1.62	0.80	26	1.27	1.04
23	1.3 Behavioral Sciences	1.3.1.1 External environmental factors (e.g., expected behaviors and social pressures).	26	3.69	0.62	26	2.62	0.57	26	2.50	0.51
24	1.3 Behavioral Sciences	1.3.1.2 Personal factors (e.g., compliance, body awareness, pain perception, and related psychosocial factors).	26	3.92	0.39	26	2.77	0.43	26	2.65	0.49
25	1.3 Behavioral Sciences	1.3.1.3 Psychological/emotional conditions (e.g., anxiety, depression, catastrophization).	26	3.85	0.37	26	2.88	0.33	26	2.62	0.50
26	1.3 Behavioral Sciences	1.3.1.4 Impact of behavioral health risk factors (e.g., smoking effects on healing rates).	26	3.54	0.76	26	2.58	0.58	26	2.31	0.62
27	1.3 Behavioral Sciences	1.3.2.1 Peripheral nociceptive pain physiology.	25	3.80	0.41	25	2.84	0.37	25	2.68	0.48
28	1.3 Behavioral Sciences	1.3.2.2 Peripheral neurogenic/neuropathic pain physiology.	26	3.77	0.51	26	2.88	0.33	26	2.69	0.47
29	1.3 Behavioral Sciences	1.3.2.3 Central nervous system/nociplastic pain physiology.	26	3.73	0.53	26	2.81	0.40	26	2.81	0.40
30	1.3 Behavioral Sciences	1.3.2.4 Output mechanisms and expressions (e.g., immune, endocrine, sympathetic, behavioral).	26	3.42	0.64	26	2.42	0.50	25	2.40	0.65
31	1.3 Behavioral Sciences	1.3.3.1 Biopsychosocial model.	26	3.85	0.37	25	2.80	0.41	26	2.58	0.50
32	1.3 Behavioral Sciences	1.3.3.2 Exercise physiology across the lifespan.	26	3.65	0.63	26	2.62	0.57	26	2.35	0.63
33	1.3 Behavioral Sciences	1.3.3.3 Manual therapy techniques.	26	3.96	0.20	26	2.85	0.37	26	2.69	0.47
34	1.3 Behavioral Sciences	1.3.3.4 Movement systems impairments.	26	3.96	0.20	26	3.00	0.00	25	2.80	0.41
35	1.3 Behavioral Sciences	1.3.3.5 Motor control and motor learning.	26	4.00	0.00	26	2.96	0.20	25	2.80	0.41
36	1.3 Behavioral Sciences	1.3.3.6 Theory and application of orthotic, protective, and supportive devices.	26	2.73	0.87	26	2.08	0.63	26	2.23	0.65
37	1.3 Behavioral Sciences	1.3.3.7 Therapeutic exercise.	26	4.00	0.00	26	2.96	0.20	26	2.81	0.40
38	1.3 Behavioral Sciences	1.3.3.8 Models of differential diagnosis and clinical reasoning (e.g., hypothesis-oriented algorithm for clinicians (HOAC) model, prospect theory).	26	3.65	0.69	26	2.54	0.65	24	2.58	0.65
39	1.3 Behavioral Sciences	1.3.3.9 Principles of teaching and learning.	26	3.65	0.56	26	2.73	0.45	26	2.58	0.50
40	1.3 Behavioral Sciences	1.3.3.10 Principles of prevention and wellness.	26	3.58	0.58	26	2.62	0.57	26	2.38	0.50

41	1.4 Critical Inquiry for Evidence-I	1.4.1 Appraisal of research findings on orthopaedic spine physical therapy practice.	26	2.65	1.06	26	2.46	0.58	26	2.31	0.74
42	1.4 Critical Inquiry for Evidence-I	1.4.2 Application of research findings to orthopaedic spine physical therapy practice.	26	3.42	0.70	26	2.62	0.50	26	2.50	0.65
43	2.1 Professional Behavior	2.1.1 Consulting with and/or educating peers, colleagues, other health care professionals, community, agencies, legislative and/or regulatory organizations regarding issues of orthopaedic spine physical therapy practice.	26	2.92	0.89	26	2.69	0.47	25	2.32	0.75
44	2.1 Professional Behavior	2.1.2 Using patient-centered ethics and values in complex clinical decision making.	26	3.77	0.59	26	2.88	0.33	26	2.12	0.95
45	2.1 Professional Behavior	2.1.3 Maintaining active participation in professional organizations that address issues related to orthopaedic spine care.	26	2.00	1.06	26	2.23	0.59	26	1.65	1.02
46	2.1 Professional Behavior	2.1.4 Maintaining state-of-the-art knowledge and skills by seeking own mentors and participating in continuing professional development (e.g., seminars, structured study, journal clubs, etc.).	26	2.27	0.96	26	2.65	0.49	26	2.15	0.67
47	2.2 Leadership	2.2.1 Representing orthopaedic spine physical therapy and interacting with other professionals and organizations (e.g., inter-professional interaction and mentoring).	26	2.42	1.10	26	2.50	0.58	26	2.31	0.84
48	2.2 Leadership	2.2.2 Planning, directing, organizing, and managing human, technical, environmental, and financial resources effectively and efficiently.	26	2.54	1.42	25	2.20	0.71	25	2.00	0.87
49	2.2 Leadership	2.2.3 Modeling and facilitating the translation of evidence into clinical practice as it relates to orthopaedic spine care.	26	3.23	1.03	26	2.69	0.55	26	2.46	0.58
50	2.2 Leadership	2.2.4 Acting as an expert resource for peers in the clinic and community for guidance on complex cases and problem solving/clinical reasoning as it relates to orthopaedic spine care.	26	3.27	0.78	26	2.81	0.40	26	2.69	0.55
51	2.3 Communication	2.3.1 Empowering patients with orthopaedic spine conditions in the management of their own health (e.g., providing patients confidence to manage future occurrences of spine-related pain).	26	3.92	0.27	26	3.00	0.00	26	2.35	0.80
52	2.3 Communication	2.3.2 Facilitating collaborative and multidisciplinary team management and transition of care for individuals with orthopaedic spine conditions.	26	3.23	0.65	26	2.77	0.43	26	2.15	0.83
53	2.4 Advocacy	2.4.1 Promoting the orthopaedic spine physical therapist as the first contact provider in musculoskeletal spine pathology.	26	3.35	0.80	25	2.60	0.65	26	2.35	0.85
54	2.4 Advocacy	2.4.2 Advocating for orthopaedic spine physical therapy practice with national organizations, healthcare systems or law-making bodies.	26	1.62	1.13	26	2.42	0.58	26	2.04	1.04
55	2.5 Education	2.5.1 Contributing to the professional development of other physical therapists by teaching/mentoring.	26	2.54	0.71	26	2.65	0.49	26	2.42	0.81
56	2.5 Education	2.5.2 Promoting awareness and benefits of fellowship programs in orthopaedic spine physical therapy.	26	2.08	0.93	26	2.38	0.57	26	2.08	0.74
57	2.5 Education	2.5.3 Educating the public regarding spine conditions, the role of orthopaedic spine physical therapists, and addressing common misconceptions.	26	2.58	1.10	26	2.50	0.58	26	2.04	0.60
58	2.5 Education	2.5.4 Educating other health care professionals and administrators as to the scope and role of orthopaedic spine physical therapists.	26	2.46	1.03	26	2.50	0.58	26	2.12	0.71
59	2.6 Critical Inquiry and Evidence-I	2.6.1 Applying principles of evidence-based practice in patient/client management.	26	3.73	0.60	26	2.81	0.40	26	2.27	0.83
60	2.6 Critical Inquiry and Evidence-I	2.6.2 Contributing to the body of evidence in orthopaedic spine physical therapy (e.g., peer-reviewed and non-peer-reviewed presentations and publications).	26	0.96	0.72	26	2.19	0.63	26	1.88	0.95
61	2.6 Critical Inquiry and Evidence-I	2.6.3 Evaluating the efficacy and effectiveness of examination tools, interventions, and technologies based upon available evidence.	26	2.50	1.14	26	2.27	0.53	26	2.15	0.83
62	2.6 Critical Inquiry and Evidence-I	2.6.4 Identifying research needs within the field of orthopaedic spine physical therapy, evaluating outcomes data, and assessing new concepts and technologies.	26	1.58	0.90	26	2.19	0.63	26	2.00	0.89
63	3.1.1 History	3.1.1.1.1 Current and prior work.	25	3.64	0.76	25	2.64	0.57	25	1.96	0.89
64	3.1.1 History	3.1.1.1.2 Activity requirements/occupational demands.	25	3.60	1.00	25	2.68	0.56	25	1.80	1.00
65	3.1.1 History	3.1.1.1.3 Ergonomic considerations.	25	3.84	0.47	25	2.68	0.56	25	1.96	0.89
66	3.1.1 History	3.1.1.1.4 Utilization of adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).	25	3.24	0.78	25	2.28	0.61	25	1.84	0.80
67	3.1.1 History	3.1.1.2.1 Recognition of contributions from multiple body regions.	25	4.00	0.00	23	2.87	0.34	23	2.30	0.93
68	3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms.	25	3.96	0.20	23	2.83	0.39	24	2.33	0.92
69	3.1.1 History	3.1.1.2.3 Symptom irritability (onset, offset, and overall baseline).	25	4.00	0.00	23	2.96	0.21	25	2.36	0.95
70	3.1.1 History	3.1.1.2.4 Onset of condition (e.g., mechanism of injury, insidious onset, potential contributing factors).	25	3.92	0.28	24	2.92	0.28	25	2.28	0.89
71	3.1.1 History	3.1.1.2.5 Current and previous therapeutic interventions.	25	3.96	0.20	25	2.80	0.41	25	2.28	0.94
72	3.1.1 History	3.1.1.2.6 Readiness for change.	25	3.96	0.20	25	2.84	0.37	25	2.32	0.75
73	3.1.1 History	3.1.1.2.7 Goals of the patient, family, and caregiver.	25	3.88	0.33	25	2.84	0.37	25	2.28	0.98
74	3.1.1 History	3.1.1.3 Obtaining data regarding functional status and activity level of daily living.	25	3.92	0.28	25	2.76	0.44	25	2.12	0.97
75	3.1.1 History	3.1.1.4.1 Physical function.	25	3.96	0.20	25	2.84	0.37	25	2.16	0.99
76	3.1.1 History	3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression, catastrophizing).	25	3.84	0.47	25	2.92	0.28	25	2.48	0.71

77	3.1.1 History	3.1.1.5 Obtaining data regarding social/health habits (past and current), including behavioral health risks (e.g., nutrition, smoking, substance use, sleep) and fitness level.	24	3.92	0.28		25	2.72	0.46	25	2.28	0.74
78	3.1.1 History	3.1.1.6 Obtaining medical/surgical history data.	25	3.96	0.20		25	2.80	0.41	25	2.04	1.02
79	3.1.1 History	3.1.1.7 Obtaining data regarding medication usage patterns and effects of medications currently and previously taken (for chief complaint and for other conditions).	25	3.84	0.37		25	2.56	0.58	25	2.00	0.87
80	3.1.1 History	3.1.1.8 Obtaining data regarding social history (e.g., cultural beliefs and support systems).	25	3.92	0.28		25	2.72	0.46	25	2.28	0.74
81	3.1.1 History	3.1.1.9 Obtaining general demographic information.	25	3.88	0.33		25	2.40	0.58	25	1.88	0.97
82	3.1.1 History	3.1.1.10 Obtaining data on living environment and community characteristics.	25	3.84	0.47		25	2.44	0.58	25	1.92	1.00
83	3.1.2 Interpreting Data from Hist	3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis that includes, nature and severity of problem(s), probable cause(s) of problem(s), anatomical structures involved, stage of condition, possible contraindications to physical therapy examination.	24	3.96	0.20		22	3.00	0.00	23	2.48	0.79
84	3.1.2 Interpreting Data from Hist	3.1.2.2 Assessing "red flags" and determining need based upon whether patient demonstrates neuromusculoskeletal problems responsive to physical therapy intervention or condition(s) requiring referral to another health care provider.	24	3.96	0.20		24	2.96	0.20	23	2.52	0.73
85	3.1.2 Interpreting Data from Hist	3.1.2.3 Identifying chief and secondary problems.	24	4.00	0.00		24	2.83	0.38	23	2.35	0.88
86	3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques with a high probability of reproducing the chief complaint and contributing to the development and refinement of the working hypothesis(es).	24	4.00	0.00		24	3.00	0.00	24	2.46	0.72
87	3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and detail appropriate to the working hypothesis and the patient's problems.	24	4.00	0.00		24	2.88	0.34	24	2.50	0.59
88	3.1.3 Planning a Physical Exam	3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems.	24	4.00	0.00		24	2.83	0.38	24	2.54	0.72
89	3.1.3 Planning a Physical Exam	3.1.3.4 Prioritizes areas, movements, and functional activities to be examined as well as examination procedures and examination sequence.	24	3.96	0.20		24	2.83	0.38	23	2.52	0.73
90	3.1.4 Systems Review	3.1.4.1 Performing systems review to identify the impaired or unimpaired status of the: cardiovascular/pulmonary system, musculoskeletal system, neuromotor system, integumentary system, and/or communication ability.	24	3.75	0.53		23	2.70	0.47	23	2.13	0.92
91	3.1.5 Test and Measures	3.1.5.1 Ergonomics and body mechanics.	24	3.96	0.20		24	2.88	0.34	23	2.35	0.83
92	3.1.5 Test and Measures	3.1.5.2 Gait, locomotion, and balance.	24	4.00	0.00		24	2.92	0.28	24	2.33	0.92
93	3.1.5 Test and Measures	3.1.5.3 Work (job/school/play), community and leisure integration or reintegration (including IADL).	23	3.96	0.21		23	2.78	0.42	23	2.43	0.79
94	3.1.5 Test and Measures	3.1.5.4 Adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).	24	3.25	0.94		24	2.33	0.56	24	2.00	0.78
95	3.1.5 Test and Measures	3.1.5.5 Pain.	24	4.00	0.00		24	2.96	0.20	24	2.38	0.97
96	3.1.5 Test and Measures	3.1.5.6 Anthropometric characteristics (e.g., edema, body dimensions and composition).	24	3.46	0.72		24	2.42	0.50	24	2.04	0.86
97	3.1.5 Test and Measures	3.1.5.7 Circulation (e.g., vertebral artery examination, skin condition, thoracic outlet tests, and peripheral pulses).	24	3.17	0.70		24	2.71	0.46	24	2.08	0.88
98	3.1.5 Test and Measures	3.1.5.8 Aerobic capacity and endurance (e.g., dyspnea perceived exertion, heart rate).	24	3.08	0.88		24	2.54	0.51	24	1.96	0.81
99	3.1.5 Test and Measures	3.1.5.9 Neurodynamics.	24	3.92	0.28		24	2.92	0.28	24	2.46	0.83
100	3.1.5 Test and Measures	3.1.5.10 Sensory integrity (e.g., assessment of superficial sensation, dermatomes, myotomes, proprioception and kinesthesia, 2-point discrimination, quantitative sensory testing).	24	3.71	0.46		24	2.88	0.34	24	2.33	1.01
101	3.1.5 Test and Measures	3.1.5.11 Reflex integrity (e.g., assessment of normal and pathological reflexes).	24	3.67	0.48		24	2.92	0.28	24	2.33	1.01
102	3.1.5 Test and Measures	3.1.5.12 Motor control and coordination (e.g., assessment of timing of movements across segments, capability of acquiring new movement strategies).	24	4.00	0.00		24	2.88	0.34	24	2.38	0.88
103	3.1.5 Test and Measures	3.1.5.13 Biopsychosocial functioning (e.g., depression, impaired motivation, FABQ, STarT Back, Tampa Kinesiophobia).	24	3.58	0.72		24	2.71	0.46	24	2.29	0.75
104	3.1.5 Test and Measures	3.1.5.14 Joint integrity (i.e., mobility assessment of joint hypermobility and hypomobility to include passive range of motion, passive accessory motions, response to manual provocation).	24	3.96	0.20		24	3.00	0.00	24	2.50	0.83
105	3.1.5 Test and Measures	3.1.5.15 Community, home, and work barriers.	24	3.46	0.88		24	2.50	0.66	24	2.08	0.78
106	3.1.5 Test and Measures	3.1.5.16 Integumentary integrity.	24	3.04	1.08		24	2.29	0.62	24	2.00	0.93
107	3.1.5 Test and Measures	3.1.5.17 Muscle performance (e.g., strength, power, and endurance).	24	4.00	0.00		24	2.79	0.41	24	2.29	1.00
108	3.1.5 Test and Measures	3.1.5.18 Neuromotor development and sensory integration (e.g., assessment of appropriate development, dexterity, coordination, and integration of the somatosensory system).	24	3.63	0.77		24	2.54	0.59	23	2.22	0.85
109	3.1.5 Test and Measures	3.1.5.19 Posture (e.g., assessment of body or body segment(s) structure, alignment, changes in different positions, body contours).	24	4.00	0.00		24	2.83	0.38	24	2.38	0.92

110	3.1.5 Test and Measures	3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests).	24	3.88	0.34	24	2.50	0.59	24	2.38	0.82
111	3.1.5 Test and Measures	3.1.5.21 Flexibility (e.g., length, stiffness).	24	3.92	0.28	24	2.71	0.55	24	2.38	0.97
112	3.1.5 Test and Measures	3.1.5.22 Soft tissue quality (e.g., mobility, provocation).	24	4.00	0.00	24	2.75	0.44	24	2.46	0.83
113	3.1.5 Test and Measures	3.1.5.23 Task-specific activities (e.g., lifting, bending, reaching).	24	3.96	0.20	24	2.75	0.44	24	2.42	0.78
114	3.2 Evaluation	3.2.1 Synthesizing data from history, systems review, and physical examination (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals), according to the International Classification of Functioning, Disability and Health (ICF) model.	23	3.91	0.29	22	2.77	0.43	22	2.41	0.85
115	3.2 Evaluation	3.2.2 Developing a working diagnosis, including nature of complaint, probable cause, anatomical structures involved, stage of condition, pain mechanisms, psychosocial factors, and possible contraindications for physical therapy intervention.	23	4.00	0.00	23	2.96	0.21	23	2.57	0.84
116	3.2 Evaluation	3.2.3 Incorporating data from ancillary testing (e.g., imaging, labs, electrophysiological studies).	23	3.74	0.45	23	2.48	0.59	23	2.30	0.70
117	3.2 Evaluation	3.2.4 Referring patient/client to other health care professionals for further examination as appropriate.	23	3.22	0.74	23	2.87	0.34	23	2.26	0.86
118	3.2 Evaluation	3.2.5 Considering implications of exam findings on activity, quality of life, and wellness as established by the ICF.	23	3.78	0.42	23	2.61	0.50	23	2.43	0.79
119	3.2 Evaluation	3.2.6 Interpreting data from history and systems review (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals).	23	3.96	0.21	23	2.83	0.39	23	2.61	0.72
120	3.3. Diagnosis	3.3.1 Organizing examination findings into clusters, syndromes, or categories to which physical therapy interventions will be directed and to determine prognosis.	21	4.00	0.00	21	2.86	0.36	21	2.71	0.56
121	3.4 Prognosis	3.4.1 The Orthopaedic Spine Physical Therapist establishes a prognosis including the complexity of the patient/client's dysfunctions/conditions, the predicted optimal level of improvement in function, and the amount of time needed to reach that level.	22	4.00	0.00	22	2.86	0.35	22	2.50	0.67
122	3.5 Intervention	3.5.1 Ergonomics (influences of environment and occupation on posture and movement).	21	3.95	0.22	21	2.71	0.46	21	2.33	0.73
123	3.5 Intervention	3.5.2 Education/training of functional activities.	21	3.90	0.30	21	2.81	0.40	21	2.43	0.81
124	3.5 Intervention	3.5.3 Education/training of activities of daily living (e.g., hygiene, stair climbing, sleeping postures).	21	3.90	0.30	21	2.81	0.40	21	2.33	0.80
125	3.5 Intervention	3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility, and self-management within plan of care.	22	4.00	0.00	22	2.82	0.39	22	2.45	0.74
126	3.5 Intervention	3.5.4.2 Using the biopsychosocial/biomedical models.	22	3.82	0.39	22	2.73	0.46	22	2.32	0.84
127	3.5 Intervention	3.5.4.3 Addressing pain physiology and dose response.	22	4.00	0.00	22	2.82	0.39	22	2.50	0.74
128	3.5 Intervention	3.5.4.4 Addressing prevention and wellness.	22	3.68	0.48	22	2.77	0.43	22	2.41	0.73
129	3.5 Intervention	3.5.5 Injury prevention and wellness promotion (e.g., task adaptation, behavior modification, body mechanics).	22	3.86	0.35	22	2.82	0.39	22	2.27	0.88
130	3.5 Intervention	3.5.6 Sleep hygiene education (e.g., sleep schedules, technology usage, sleep habits, relationship between sleep and medication usage).	22	3.41	0.67	22	2.55	0.51	22	2.00	0.76
131	3.5 Intervention	3.5.7 Nutritional education.	22	2.86	0.89	22	2.32	0.57	22	1.82	0.80
132	3.5 Intervention	3.5.8 Pain neuroscience education.	22	3.55	0.60	22	2.95	0.21	22	2.36	0.79
133	3.5 Intervention	3.5.9 Graded exposure.	22	3.55	0.67	22	2.82	0.39	22	2.41	0.80
134	3.5 Intervention	3.5.10 Graded motor imagery.	22	2.77	1.02	22	2.45	0.60	22	2.14	0.94
135	3.5 Intervention	3.5.4.11 Graded activity/exercise.	22	3.73	0.63	22	2.77	0.43	22	2.36	0.85
136	3.5 Intervention	3.5.4.12 Protective, adaptive or supportive device or equipment (e.g., orthotics, taping).	22	3.00	0.82	22	2.27	0.55	22	1.95	0.90
137	3.5 Intervention	3.5.4.13 Neural mobilization (e.g., nerve gliding).	22	3.64	0.73	22	2.82	0.50	22	2.23	0.87
138	3.5 Intervention	3.5.14 Non-thrust mobilization/manipulation.	22	3.95	0.21	22	2.82	0.39	22	2.55	0.74
139	3.5 Intervention	3.5.15 Thrust mobilization/manipulation.	22	3.27	0.83	22	2.73	0.55	22	2.68	0.57
140	3.5 Intervention	3.5.16 Soft tissue mobilization (e.g., connective tissue, deep friction, cross friction massage, instrument-assisted).	22	3.55	0.74	22	2.77	0.43	22	2.41	0.85
141	3.5 Intervention	3.5.17 Mobilization with movement.	22	3.45	0.67	22	2.59	0.50	22	2.27	0.83
142	3.5 Intervention	3.5.18 Muscle energy techniques.	22	3.18	0.91	22	2.41	0.67	22	2.18	0.85
143	3.5 Intervention	3.5.19 Traction/distraction.	22	2.95	0.95	22	2.32	0.57	22	2.14	0.89
144	3.5 Intervention	3.5.4.20 Directional preference exercises/activities.	22	3.59	0.59	22	2.59	0.59	22	2.32	0.84
145	3.5 Intervention	3.5.4.21 Electro-therapeutic modalities (e.g., TENS, NMES).	22	1.95	1.33	22	1.64	0.95	22	1.73	1.08
146	3.5 Intervention	3.5.4.22 Thermo-therapeutic modalities (e.g., heat, ice, ultrasound).	22	2.14	1.28	22	1.45	0.91	22	1.50	0.96
147	3.5 Intervention	3.5.23 Photo-therapeutic modalities (e.g., laser).	22	0.82	1.05	22	0.64	0.73	21	0.76	1.04
148	3.5 Intervention	3.5.24 Dry needling.	21	0.76	1.18	21	1.24	1.04	20	1.25	1.33
149	3.5 Intervention	3.5.25 Aerobic capacity and endurance exercises.	22	3.32	0.95	22	2.64	0.49	22	1.95	0.90
150	3.5 Intervention	3.5.26 Motor coordination.	22	3.91	0.29	22	2.86	0.35	21	2.33	0.86

151	3.5 Intervention	3.5.27 Muscle performance exercises (e.g., strength, muscle endurance).	22	3.86	0.47	22	2.77	0.43	22	2.27	0.94
152	3.5 Intervention	3.5.28.1 Meditation.	22	1.86	1.36	22	2.14	0.64	21	1.43	0.75
153	3.5 Intervention	3.5.28.2 Mindfulness.	22	2.36	1.36	22	2.23	0.61	21	1.48	0.68
154	3.5 Intervention	3.5.28.3 Hypnosis.	22	0.23	0.87	21	0.24	0.54	18	0.61	1.09
155	3.6 Re-assessment / re-evaluation	3.6.1 Assessing intervention response.	22	4.00	0.00	22	2.91	0.29	22	2.55	0.91
156	3.6 Re-assessment / re-evaluation	3.6.2 Analyzing significance of changes.	22	3.91	0.29	22	2.91	0.29	21	2.43	0.81
157	3.6 Re-assessment / re-evaluation	3.6.3 Assessing change.	22	3.95	0.21	22	2.91	0.29	22	2.41	0.91
158	3.6 Re-assessment / re-evaluation	3.6.4 Re-examining/implementing a modified plan of care.	22	3.73	0.55	22	2.77	0.53	22	2.41	0.91
159	3.6 Re-assessment / re-evaluation	3.6.5 Confirming/modifying goals.	22	3.59	0.59	22	2.82	0.39	22	2.32	0.95
160	3.6 Re-assessment / re-evaluation	3.6.6 Making referrals to other providers as needed.	22	2.86	0.83	22	2.64	0.49	21	2.24	0.77
161	3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity and participation limitations.	22	3.73	0.55	22	2.73	0.55	22	2.18	0.91
162	3.7 Outcomes Assessment	3.7.2 Assessing patient satisfaction.	22	3.68	0.48	22	2.77	0.43	22	2.32	0.84
163	3.7 Outcomes Assessment	3.7.3 Assessing promotion of primary and secondary prevention.	22	3.32	0.84	22	2.59	0.59	22	2.32	0.89
164	3.7 Outcomes Assessment	3.7.4 Assessing improvement of patient/client's activities and participation based on best available evidence and patient/client-specific variables (i.e., benchmarking).	22	3.41	0.67	22	2.64	0.58	22	2.27	0.88
165	3.7 Outcomes Assessment	3.7.5 Using applicable, evidence-based outcomes measurement tools/questionnaires/scales (e.g., Oswestry, Fear Avoidance Behavior Questionnaire).	22	3.32	0.78	22	2.59	0.50	22	2.14	0.99
171	6.1 Nervous System	6.1.1 Cervical Radiculopathy	23	3.48	0.59	23	2.91	0.29	23	2.52	0.90
172	6.1 Nervous System	6.1.2 Lumbar Radiculopathy	23	3.57	0.59	23	2.91	0.29	23	2.35	1.07
173	6.1 Nervous System	6.1.3 Thoracic Outlet Syndrome	23	2.00	1.17	23	2.39	0.89	23	2.35	0.83
174	6.1 Nervous System	6.1.4 Other peripheral neural impingements (not including thoracic outlet syndrome; e.g., carpal tunnel, Guyon's canal entrapment, peroneal nerve entrapment, tarsal tunnel syndrome).	23	2.57	0.90	23	2.65	0.57	23	2.39	0.84
175	6.1 Nervous System	6.1.5 Meralgia paresthetica.	23	1.57	0.90	23	2.26	0.75	23	2.13	0.81
176	6.1 Nervous System	6.1.6 Cervical Myelopathy.	23	1.83	1.03	23	2.78	0.52	23	2.26	1.01
177	6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion, herniation).	22	3.55	0.60	20	2.90	0.31	20	2.65	0.75
178	6.2 Musculoskeletal System	6.2.2 Cervical Instability	22	2.00	1.11	21	2.81	0.40	21	2.52	0.81
179	6.2 Musculoskeletal System	6.2.3 Cervical Sprain Strain	22	3.09	0.87	21	2.76	0.44	21	2.38	0.86
180	6.2 Musculoskeletal System	6.2.4 Cervicogenic Headache	22	2.91	0.87	21	2.81	0.40	21	2.57	0.75
181	6.2 Musculoskeletal System	6.2.5 Chronic Pain Syndromes	22	3.41	0.73	21	2.90	0.30	21	2.33	0.80
182	6.2 Musculoskeletal System	6.2.6 Other Disorders of Cervical Spine	22	3.23	0.92	21	2.71	0.46	21	2.29	0.85
183	6.2 Musculoskeletal System	6.2.7 Temporomandibular Dysfunction	22	1.73	0.98	21	2.48	0.81	21	2.10	0.89
184	6.2 Musculoskeletal System	6.2.8 Disorders of the Hip	22	3.27	0.77	21	2.67	0.48	21	2.33	0.86
185	6.2 Musculoskeletal System	6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion, herniation).	23	3.65	0.57	22	2.86	0.35	22	2.41	0.91
186	6.2 Musculoskeletal System	6.2.10 Lumbar Instability	23	3.00	1.00	23	2.87	0.34	23	2.43	0.95
187	6.2 Musculoskeletal System	6.2.11 Lumbar Spondylosis Spondylolisthesis	23	3.48	0.59	23	2.91	0.29	23	2.30	0.97
188	6.2 Musculoskeletal System	6.2.12 Lumbar Strain	23	3.52	0.79	23	2.87	0.34	23	2.26	1.10
189	6.2 Musculoskeletal System	6.2.13 Other Disorders of the Lumbar Spine	23	3.09	0.95	23	2.70	0.47	22	2.32	0.95
190	6.2 Musculoskeletal System	6.2.14 Piriformis Syndrome	23	2.61	1.03	23	2.52	0.51	23	2.17	1.03
191	6.2 Musculoskeletal System	6.2.15 Sacroiliac Dysfunction	23	2.61	1.12	23	2.52	0.73	23	2.30	0.97
192	6.2 Musculoskeletal System	6.2.16 Other Disorders of the Pelvic Girdle	23	2.39	1.12	23	2.52	0.59	23	2.39	0.78
193	6.2 Musculoskeletal System	6.2.17 Rotator Cuff Pathology	22	3.18	0.91	22	2.64	0.49	22	2.23	0.87
194	6.2 Musculoskeletal System	6.2.18 Disorders of the Shoulder Complex	22	3.41	0.80	22	2.73	0.46	22	2.36	0.79
195	6.2 Musculoskeletal System	6.2.19 Rib Dysfunction	22	1.91	0.97	22	2.36	0.85	22	2.27	0.83
196	6.2 Musculoskeletal System	6.2.20 Thoracic Sprain Strain	22	2.55	1.01	22	2.59	0.59	22	2.41	0.85
197	6.2 Musculoskeletal System	6.2.21 Other Disorders of the Thoracic Spine	22	2.41	1.01	22	2.59	0.67	22	2.45	0.74
198	6.2 Musculoskeletal System	6.2.22 Curvature of the spine (e.g., scoliosis, kyphosis, lordosis).lordosis	22	2.73	0.98	22	2.64	0.58	22	2.32	0.84
199	6.2 Musculoskeletal System	6.2.23 Diastasis recti.	22	1.86	1.28	22	2.36	0.90	22	2.05	0.95
200	6.2 Musculoskeletal System	6.2.24 Facet dysfunction (cervical, thoracic, lumbar).	22	3.77	0.43	22	2.82	0.50	22	2.55	0.74
201	6.2 Musculoskeletal System	6.2.25 Operative procedure on spinal structure.	22	2.50	0.96	22	2.68	0.48	22	2.23	0.97
202	6.2 Musculoskeletal System	6.2.26 Spinal stenosis.	22	3.36	0.73	22	2.82	0.39	22	2.41	0.80

Descriptives in Order of Importance and Frequency (High to Low)

Key	# of items
High frequency (≥ 3.0), high imp	134
Low frequency (< 3.0), high imp	18
High frequency (≥ 3.0), low imp	16
Low frequency (< 3.0), low imp	28

Response Scales		
Frequency	Importance	Level of Judgment/Mastery
0. Never	0. Not important	0. Do not use/ Advanced beginner skill level
1. Less than monthly	1. Of little importance	1. Recall/ Competent skill level
2. Monthly	2. Moderately important	2. Application/ Proficient skill level
3. Weekly	3. Very important	3. Analysis/Expert skill level
4. Daily		

Survey Item #	Survey Section	Item/Label	Frequency			Importance			Level of Judgment/Mastery		
			N	Mean	SD	N	Mean	SD	N	Mean	SD
9	1.2 Clinical Sciences	1.1.2.1 Kinesiology/biomechanics.	27	4.00	0.00	27	3.00	0.00	27	2.93	0.27
86	3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques with a high probability of reproducing the chief complaint and contributing to the development and refinement of the working hypothesis(es).	24	4.00	0.00	24	3.00	0.00	24	2.46	0.72
34	1.3 Behavioral Sciences	1.3.3.4 Movement systems impairments.	26	3.96	0.20	26	3.00	0.00	25	2.80	0.41
83	3.1.2 Interpreting Data from History	3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis that includes, nature and severity of problem(s), probable cause(s) of problem(s), anatomical structures involved, stage of condition, possible contraindications to physical therapy examination.	24	3.96	0.20	22	3.00	0.00	23	2.48	0.79
104	3.1.5 Test and Measures	3.1.5.14 Joint integrity (i.e., mobility assessment of joint hypermobility and hypomobility to include passive range of motion, passive accessory motions, response to manual provocation).	24	3.96	0.20	24	3.00	0.00	24	2.50	0.83
51	2.3 Communication	2.3.1 Empowering patients with orthopaedic spine conditions in the management of their own health (e.g., providing patients confidence to manage future occurrences of spine-related pain).	26	3.92	0.27	26	3.00	0.00	26	2.35	0.80
2	1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system.	27	4.00	0.00	27	2.96	0.19	26	2.88	0.33
3	1.1 Foundation Sciences	1.1.1.2 Neuromuscular system.	27	4.00	0.00	27	2.96	0.19	27	2.93	0.27
10	1.2 Clinical Sciences	1.1.2.2 Neural control of movement.	27	3.96	0.19	27	2.96	0.19	27	2.81	0.40
35	1.3 Behavioral Sciences	1.3.3.5 Motor control and motor learning.	26	4.00	0.00	26	2.96	0.20	25	2.80	0.41
37	1.3 Behavioral Sciences	1.3.3.7 Therapeutic exercise.	26	4.00	0.00	26	2.96	0.20	26	2.81	0.40
84	3.1.2 Interpreting Data from History	3.1.2.2 Assessing "red flags" and determining need based upon whether patient demonstrates neuromusculoskeletal problems responsive to physical therapy intervention or condition(s) requiring referral to another health care provider.	24	3.96	0.20	24	2.96	0.20	23	2.52	0.73
95	3.1.5 Test and Measures	3.1.5.5 Pain.	24	4.00	0.00	24	2.96	0.20	24	2.38	0.97
115	3.2 Evaluation	3.2.2 Developing a working diagnosis, including nature of complaint, probable cause, anatomical structures involved, stage of condition, pain mechanisms, psychosocial factors, and possible contraindications for physical therapy intervention.	23	4.00	0.00	23	2.96	0.21	23	2.57	0.84
69	3.1.1 History	3.1.1.2.3 Symptom irritability (onset, offset, and overall baseline).	25	4.00	0.00	23	2.96	0.21	25	2.36	0.95
132	3.5 Intervention	3.5.8 Pain neuroscience education.	22	3.55	0.60	22	2.95	0.21	22	2.36	0.79
16	1.2 Clinical Sciences	1.2.1.4 Tissue inflammation, healing, and repair.	25	3.96	0.20	25	2.92	0.28	25	2.68	0.56
76	3.1.1 History	3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression, catastrophizing).	25	3.84	0.47	25	2.92	0.28	25	2.48	0.71
92	3.1.5 Test and Measures	3.1.5.2 Gait, locomotion, and balance.	24	4.00	0.00	24	2.92	0.28	24	2.33	0.92
101	3.1.5 Test and Measures	3.1.5.11 Reflex integrity (e.g., assessment of normal and pathological reflexes).	24	3.67	0.48	24	2.92	0.28	24	2.33	1.01
70	3.1.1 History	3.1.1.2.4 Onset of condition (e.g., mechanism of injury, insidious onset, potential contributing factors).	25	3.92	0.28	24	2.92	0.28	25	2.28	0.89
99	3.1.5 Test and Measures	3.1.5.9 Neurodynamics.	24	3.92	0.28	24	2.92	0.28	24	2.46	0.83
172	6.1 Nervous System	6.1.2 Lumbar Radiculopathy	23	3.57	0.59	23	2.91	0.29	23	2.35	1.07
171	6.1 Nervous System	6.1.1 Cervical Radiculopathy	23	3.48	0.59	23	2.91	0.29	23	2.52	0.90
187	6.2 Musculoskeletal System	6.2.11 Lumbar Spondylosis Spondylolisthesis	23	3.48	0.59	23	2.91	0.29	23	2.30	0.97
155	3.6 Re-assessment / re-evaluation	3.6.1 Assessing intervention response.	22	4.00	0.00	22	2.91	0.29	22	2.55	0.91
157	3.6 Re-assessment / re-evaluation	3.6.3 Assessing change.	22	3.95	0.21	22	2.91	0.29	22	2.41	0.91
156	3.6 Re-assessment / re-evaluation	3.6.2 Analyzing significance of changes.	22	3.91	0.29	22	2.91	0.29	21	2.43	0.81
181	6.2 Musculoskeletal System	6.2.5 Chronic Pain Syndromes	22	3.41	0.73	21	2.90	0.30	21	2.33	0.80
177	6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion, herniation).	22	3.55	0.60	20	2.90	0.31	20	2.65	0.75
12	1.2 Clinical Sciences	1.1.2.4 Locomotion.	27	3.96	0.19	27	2.89	0.32	27	2.78	0.42
28	1.3 Behavioral Sciences	1.3.2.2 Peripheral neurogenic/neuropathic pain physiology.	26	3.77	0.51	26	2.88	0.33	26	2.69	0.47
25	1.3 Behavioral Sciences	1.3.1.3 Psychological/emotional conditions (e.g., anxiety, depression, catastrophization).	26	3.85	0.37	26	2.88	0.33	26	2.62	0.50

44	2.1 Professional Behavior	2.1.2 Using patient-centered ethics and values in complex clinical decision making.	26	3.77	0.59	26	2.88	0.33	26	2.12	0.95
87	3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and detail appropriate to the working hypothesis and the patient's problems.	24	4.00	0.00	24	2.88	0.34	24	2.50	0.59
102	3.1.5 Test and Measures	3.1.5.12 Motor control and coordination (e.g., assessment of timing of movements across segments, capability of acquiring new movement strategies).	24	4.00	0.00	24	2.88	0.34	24	2.38	0.88
91	3.1.5 Test and Measures	3.1.5.1 Ergonomics and body mechanics.	24	3.96	0.20	24	2.88	0.34	23	2.35	0.83
100	3.1.5 Test and Measures	3.1.5.10 Sensory integrity (e.g., assessment of superficial sensation, dermatomes, myotomes, proprioception and kinesthesia, 2-point discrimination, quantitative sensory testing).	24	3.71	0.46	24	2.88	0.34	24	2.33	1.01
67	3.1.1 History	3.1.1.2.1 Recognition of contributions from multiple body regions.	25	4.00	0.00	23	2.87	0.34	23	2.30	0.93
186	6.2 Musculoskeletal System	6.2.10 Lumbar Instability	23	3.00	1.00	23	2.87	0.34	23	2.43	0.95
188	6.2 Musculoskeletal System	6.2.12 Lumbar Strain	23	3.52	0.79	23	2.87	0.34	23	2.26	1.10
117	3.2 Evaluation	3.2.4 Referring patient/client to other health care professionals for further examination as appropriate.	23	3.22	0.74	23	2.87	0.34	23	2.26	0.86
121	3.4 Prognosis	3.4.1 The Orthopaedic Spine Physical Therapist establishes a prognosis including the complexity of the patient/client's dysfunctions/conditions, the predicted optimal level of improvement in function, and the amount of time needed to reach that level.	22	4.00	0.00	22	2.86	0.35	22	2.50	0.67
150	3.5 Intervention	3.5.26 Motor coordination.	22	3.91	0.29	22	2.86	0.35	21	2.33	0.86
185	6.2 Musculoskeletal System	6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion, herniation).	23	3.65	0.57	22	2.86	0.35	22	2.41	0.91
120	3.3. Diagnosis	3.3.1 Organizing examination findings into clusters, syndromes, or categories to which physical therapy interventions will be directed and to determine prognosis.	21	4.00	0.00	21	2.86	0.36	21	2.71	0.56
33	1.3 Behavioral Sciences	1.3.3.3 Manual therapy techniques.	26	3.96	0.20	26	2.85	0.37	26	2.69	0.47
13	1.2 Clinical Sciences	1.2.1.1 Signs and symptoms of disease/injury.	26	3.92	0.39	26	2.85	0.37	26	2.65	0.63
75	3.1.1 History	3.1.1.4.1 Physical function.	25	3.96	0.20	25	2.84	0.37	25	2.16	0.99
72	3.1.1 History	3.1.1.2.6 Readiness for change.	25	3.96	0.20	25	2.84	0.37	25	2.32	0.75
73	3.1.1 History	3.1.1.2.7 Goals of the patient, family, and caregiver.	25	3.88	0.33	25	2.84	0.37	25	2.28	0.98
27	1.3 Behavioral Sciences	1.3.2.1 Peripheral nociceptive pain physiology.	25	3.80	0.41	25	2.84	0.37	25	2.68	0.48
88	3.1.3 Planning a Physical Exam	3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems.	24	4.00	0.00	24	2.83	0.38	24	2.54	0.72
89	3.1.3 Planning a Physical Exam	3.1.3.4 Prioritizes areas, movements, and functional activities to be examined as well as examination procedures and examination sequence.	24	3.96	0.20	24	2.83	0.38	23	2.52	0.73
85	3.1.2 Interpreting Data from History	3.1.2.3 Identifying chief and secondary problems.	24	4.00	0.00	24	2.83	0.38	23	2.35	0.88
109	3.1.5 Test and Measures	3.1.5.19 Posture (e.g., assessment of body or body segment(s) structure, alignment, changes in different positions, body contours).	24	4.00	0.00	24	2.83	0.38	24	2.38	0.92
119	3.2 Evaluation	3.2.6 Interpreting data from history and systems review (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals).	23	3.96	0.21	23	2.83	0.39	23	2.61	0.72
68	3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms.	25	3.96	0.20	23	2.83	0.39	24	2.33	0.92
137	3.5 Intervention	3.5.4.13 Neural mobilization (e.g., nerve gliding).	22	3.64	0.73	22	2.82	0.50	22	2.23	0.87
159	3.6 Re-assessment / re-evaluation	3.6.5 Confirming/modifying goals.	22	3.59	0.59	22	2.82	0.39	22	2.32	0.95
133	3.5 Intervention	3.5.9 Graded exposure.	22	3.55	0.67	22	2.82	0.39	22	2.41	0.80
125	3.5 Intervention	3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility, and self-management within plan of care.	22	4.00	0.00	22	2.82	0.39	22	2.45	0.74
127	3.5 Intervention	3.5.4.3 Addressing pain physiology and dose response.	22	4.00	0.00	22	2.82	0.39	22	2.50	0.74
138	3.5 Intervention	3.5.14 Non-thrust mobilization/manipulation.	22	3.95	0.21	22	2.82	0.39	22	2.55	0.74
129	3.5 Intervention	3.5.5 Injury prevention and wellness promotion (e.g., task adaptation, behavior modification, body mechanics).	22	3.86	0.35	22	2.82	0.39	22	2.27	0.88
202	6.2 Musculoskeletal System	6.2.26 Spinal stenosis.	22	3.36	0.73	22	2.82	0.39	22	2.41	0.80
200	6.2 Musculoskeletal System	6.2.24 Facet dysfunction (cervical, thoracic, lumbar).	22	3.77	0.43	22	2.82	0.50	22	2.55	0.74
123	3.5 Intervention	3.5.2 Education/training of functional activities.	21	3.90	0.30	21	2.81	0.40	21	2.43	0.81
124	3.5 Intervention	3.5.3 Education/training of activities of daily living (e.g., hygiene, stair climbing, sleeping postures).	21	3.90	0.30	21	2.81	0.40	21	2.33	0.80
180	6.2 Musculoskeletal System	6.2.4 Cervicogenic Headache	22	2.91	0.87	21	2.81	0.40	21	2.57	0.75
178	6.2 Musculoskeletal System	6.2.2 Cervical Instability	22	2.00	1.11	21	2.81	0.40	21	2.52	0.81
50	2.2 Leadership	2.2.4 Acting as an expert resource for peers in the clinic and community for guidance on complex cases and problem solving/clinical reasoning as it relates to orthopaedic spine care.	26	3.27	0.78	26	2.81	0.40	26	2.69	0.55
29	1.3 Behavioral Sciences	1.3.2.3 Central nervous system/nociplastic pain physiology.	26	3.73	0.53	26	2.81	0.40	26	2.81	0.40
59	2.6 Critical Inquiry and Evidence	2.6.1 Applying principles of evidence-based practice in patient/client management.	26	3.73	0.60	26	2.81	0.40	26	2.27	0.83
78	3.1.1 History	3.1.1.6 Obtaining medical/surgical history data.	25	3.96	0.20	25	2.80	0.41	25	2.04	1.02
31	1.3 Behavioral Sciences	1.3.3.1 Biopsychosocial model.	26	3.85	0.37	25	2.80	0.41	26	2.58	0.50
71	3.1.1 History	3.1.1.2.5 Current and previous therapeutic interventions.	25	3.96	0.20	25	2.80	0.41	25	2.28	0.94

107	3.1.5 Test and Measures	3.1.5.17 Muscle performance (e.g., strength, power, and endurance).	24	4.00	0.00	24	2.79	0.41	24	2.29	1.00
176	6.1 Nervous System	6.1.6 Cervical Myelopathy.	23	1.83	1.03	23	2.78	0.52	23	2.26	1.01
93	3.1.5 Test and Measures	3.1.5.3 Work (job/school/play), community and leisure integration or reintegration (including IADL).	23	3.96	0.21	23	2.78	0.42	23	2.43	0.79
114	3.2 Evaluation	3.2.1 Synthesizing data from history, systems review, and physical examination (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's needs, motivations and goals), according to the International Classification of Functioning, Disability and Health (ICF) model.	23	3.91	0.29	22	2.77	0.43	22	2.41	0.85
151	3.5 Intervention	3.5.27 Muscle performance exercises (e.g., strength, muscle endurance).	22	3.86	0.47	22	2.77	0.43	22	2.27	0.94
135	3.5 Intervention	3.5.4.11 Graded activity/exercise.	22	3.73	0.63	22	2.77	0.43	22	2.36	0.85
158	3.6 Re-assessment / re-evaluation	3.6.4 Re-examining/implementing a modified plan of care.	22	3.73	0.55	22	2.77	0.53	22	2.41	0.91
128	3.5 Intervention	3.5.4.4 Addressing prevention and wellness.	22	3.68	0.48	22	2.77	0.43	22	2.41	0.73
162	3.7 Outcomes Assessment	3.7.2 Assessing patient satisfaction.	22	3.68	0.48	22	2.77	0.43	22	2.32	0.84
140	3.5 Intervention	3.5.16 Soft tissue mobilization (e.g., connective tissue, deep friction, cross friction massage, instrument-assisted).	22	3.55	0.74	22	2.77	0.43	22	2.41	0.85
24	1.3 Behavioral Sciences	1.3.1.2 Personal factors (e.g., compliance, body awareness, pain perception, and related psychosocial factors).	26	3.92	0.39	26	2.77	0.43	26	2.65	0.49
14	1.2 Clinical Sciences	1.2.1.2 Progression of disease/injury processes.	26	3.88	0.33	26	2.77	0.43	26	2.58	0.64
52	2.3 Communication	2.3.2 Facilitating collaborative and multidisciplinary team management and transition of care for individuals with orthopaedic spine conditions.	26	3.23	0.65	26	2.77	0.43	26	2.15	0.83
179	6.2 Musculoskeletal System	6.2.3 Cervical Sprain Strain	22	3.09	0.87	21	2.76	0.44	21	2.38	0.86
74	3.1.1 History	3.1.1.3 Obtaining data regarding functional status and activity level of daily living.	25	3.92	0.28	25	2.76	0.44	25	2.12	0.97
15	1.2 Clinical Sciences	1.2.1.3 Pathokinesiology.	25	3.92	0.28	25	2.76	0.44	25	2.56	0.65
112	3.1.5 Test and Measures	3.1.5.22 Soft tissue quality (e.g., mobility, provocation).	24	4.00	0.00	24	2.75	0.44	24	2.46	0.83
113	3.1.5 Test and Measures	3.1.5.23 Task-specific activities (e.g., lifting, bending, reaching).	24	3.96	0.20	24	2.75	0.44	24	2.42	0.78
39	1.3 Behavioral Sciences	1.3.3.9 Principles of teaching and learning.	26	3.65	0.56	26	2.73	0.45	26	2.58	0.50
11	1.2 Clinical Sciences	1.1.2.3 Ergonomics.	27	3.78	0.42	26	2.73	0.53	27	2.63	0.49
126	3.5 Intervention	3.5.4.2 Using the biopsychosocial/biomedical models.	22	3.82	0.39	22	2.73	0.46	22	2.32	0.84
161	3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity and participation limitations.	22	3.73	0.55	22	2.73	0.55	22	2.18	0.91
139	3.5 Intervention	3.5.15 Thrust mobilization/manipulation.	22	3.27	0.83	22	2.73	0.55	22	2.68	0.57
194	6.2 Musculoskeletal System	6.2.18 Disorders of the Shoulder Complex	22	3.41	0.80	22	2.73	0.46	22	2.36	0.79
80	3.1.1 History	3.1.1.8 Obtaining data regarding social history (e.g., cultural beliefs and support systems).	25	3.92	0.28	25	2.72	0.46	25	2.28	0.74
77	3.1.1 History	3.1.1.5 Obtaining data regarding social/health habits (past and current), including behavioral health risks (e.g., nutrition, smoking, substance use, sleep) and fitness level.	24	3.92	0.28	25	2.72	0.46	25	2.28	0.74
182	6.2 Musculoskeletal System	6.2.6 Other Disorders of Cervical Spine	22	3.23	0.92	21	2.71	0.46	21	2.29	0.85
122	3.5 Intervention	3.5.1 Ergonomics (influences of environment and occupation on posture and movement).	21	3.95	0.22	21	2.71	0.46	21	2.33	0.73
97	3.1.5 Test and Measures	3.1.5.7 Circulation (e.g., vertebral artery examination, skin condition, thoracic outlet tests, and peripheral pulses).	24	3.17	0.70	24	2.71	0.46	24	2.08	0.88
111	3.1.5 Test and Measures	3.1.5.21 Flexibility (e.g., length, stiffness).	24	3.92	0.28	24	2.71	0.55	24	2.38	0.97
103	3.1.5 Test and Measures	3.1.5.13 Biopsychosocial functioning (e.g., depression, impaired motivation, FABQ, StarT Back, Tampa Kinesiophobia).	24	3.58	0.72	24	2.71	0.46	24	2.29	0.75
189	6.2 Musculoskeletal System	6.2.13 Other Disorders of the Lumbar Spine	23	3.09	0.95	23	2.70	0.47	22	2.32	0.95
90	3.1.4 Systems Review	3.1.4.1 Performing systems review to identify the impaired or unimpaired status of the: cardiovascular/pulmonary system, musculoskeletal system, neuromotor system, integumentary system, and/or communication ability.	24	3.75	0.53	23	2.70	0.47	23	2.13	0.92
43	2.1 Professional Behavior	2.1.1 Consulting with and/or educating peers, colleagues, other health care professionals, community, agencies, legislative and/or regulatory organizations regarding issues of orthopaedic spine physical therapy practice.	26	2.92	0.89	26	2.69	0.47	25	2.32	0.75
49	2.2 Leadership	2.2.3 Modeling and facilitating the translation of evidence into clinical practice as it relates to orthopaedic spine care.	26	3.23	1.03	26	2.69	0.55	26	2.46	0.58
201	6.2 Musculoskeletal System	6.2.25 Operative procedure on spinal structure.	22	2.50	0.96	22	2.68	0.48	22	2.23	0.97
65	3.1.1 History	3.1.1.1.3 Ergonomic considerations.	25	3.84	0.47	25	2.68	0.56	25	1.96	0.89
64	3.1.1 History	3.1.1.1.2 Activity requirements/occupational demands.	25	3.60	1.00	25	2.68	0.56	25	1.80	1.00
184	6.2 Musculoskeletal System	6.2.8 Disorders of the Hip	22	3.27	0.77	21	2.67	0.48	21	2.33	0.86
55	2.5 Education	2.5.1 Contributing to the professional development of other physical therapists by teaching/mentoring.	26	2.54	0.71	26	2.65	0.49	26	2.42	0.81

46	2.1 Professional Behavior	2.1.4 Maintaining state-of-the-art knowledge and skills by seeking own mentors and participating in continuing professional development (e.g., seminars, structured study, journal clubs, etc.).	26	2.27	0.96	26	2.65	0.49	26	2.15	0.67
174	6.1 Nervous System	6.1.4 Other peripheral neural impingements (not including thoracic outlet syndrome; e.g., carpal tunnel, Guyon's canal entrapment, peroneal nerve entrapment, tarsal tunnel syndrome).	23	2.57	0.90	23	2.65	0.57	23	2.39	0.84
63	3.1.1 History	3.1.1.1.1 Current and prior work.	25	3.64	0.76	25	2.64	0.57	25	1.96	0.89
160	3.6 Re-assessment / re-evaluation	3.6.6 Making referrals to other providers as needed.	22	2.86	0.83	22	2.64	0.49	21	2.24	0.77
149	3.5 Intervention	3.5.25 Aerobic capacity and endurance exercises.	22	3.32	0.95	22	2.64	0.49	22	1.95	0.90
193	6.2 Musculoskeletal System	6.2.17 Rotator Cuff Pathology	22	3.18	0.91	22	2.64	0.49	22	2.23	0.87
164	3.7 Outcomes Assessment	3.7.4 Assessing improvement of patient/client's activities and participation based on best available evidence and patient/client-specific variables (i.e., benchmarking).	22	3.41	0.67	22	2.64	0.58	22	2.27	0.88
198	6.2 Musculoskeletal System	6.2.22 Curvature of the spine (e.g., scoliosis, kyphosis, lordosis).lordosis	22	2.73	0.98	22	2.64	0.58	22	2.32	0.84
23	1.3 Behavioral Sciences	1.3.1.1 External environmental factors (e.g., expected behaviors and social pressures).	26	3.69	0.62	26	2.62	0.57	26	2.50	0.51
32	1.3 Behavioral Sciences	1.3.3.2 Exercise physiology across the lifespan.	26	3.65	0.63	26	2.62	0.57	26	2.35	0.63
40	1.3 Behavioral Sciences	1.3.3.10 Principles of prevention and wellness.	26	3.58	0.58	26	2.62	0.57	26	2.38	0.50
42	1.4 Critical Inquiry for Evidence-based Practice	1.4.2 Application of research findings to orthopaedic spine physical therapy practice.	26	3.42	0.70	26	2.62	0.50	26	2.50	0.65
118	3.2 Evaluation	3.2.5 Considering implications of exam findings on activity, quality of life, and wellness as established by the ICF.	23	3.78	0.42	23	2.61	0.50	23	2.43	0.79
53	2.4 Advocacy	2.4.1 Promoting the orthopaedic spine physical therapist as the first contact provider in musculoskeletal spine pathology.	26	3.35	0.80	25	2.60	0.65	26	2.35	0.85
141	3.5 Intervention	3.5.17 Mobilization with movement.	22	3.45	0.67	22	2.59	0.50	22	2.27	0.83
163	3.7 Outcomes Assessment	3.7.3 Assessing promotion of primary and secondary prevention.	22	3.32	0.84	22	2.59	0.59	22	2.32	0.89
196	6.2 Musculoskeletal System	6.2.20 Thoracic Sprain Strain	22	2.55	1.01	22	2.59	0.59	22	2.41	0.85
197	6.2 Musculoskeletal System	6.2.21 Other Disorders of the Thoracic Spine	22	2.41	1.01	22	2.59	0.67	22	2.45	0.74
144	3.5 Intervention	3.5.4.20 Directional preference exercises/activities.	22	3.59	0.59	22	2.59	0.59	22	2.32	0.84
165	3.7 Outcomes Assessment	3.7.5 Using applicable, evidence-based outcomes measurement tools/questionnaires/scales (e.g., Oswestry, Fear Avoidance Behavior Questionnaire).	22	3.32	0.78	22	2.59	0.50	22	2.14	0.99
26	1.3 Behavioral Sciences	1.3.1.4 Impact of behavioral health risk factors (e.g., smoking effects on healing rates).	26	3.54	0.76	26	2.58	0.58	26	2.31	0.62
21	1.2 Clinical Sciences	1.2.2.5 Spine surgical interventions and their indications, contraindications, and precautions for orthopaedic spine physical therapy.	26	3.04	0.92	26	2.58	0.50	26	2.19	0.75
79	3.1.1 History	3.1.1.7 Obtaining data regarding medication usage patterns and effects of medications currently and previously taken (for chief complaint and for other conditions).	25	3.84	0.37	25	2.56	0.58	25	2.00	0.87
130	3.5 Intervention	3.5.6 Sleep hygiene education (e.g., sleep schedules, technology usage, sleep habits, relationship between sleep and medication usage).	22	3.41	0.67	22	2.55	0.51	22	2.00	0.76
108	3.1.5 Test and Measures	3.1.5.18 Neuromotor development and sensory integration (e.g., assessment of appropriate development, dexterity, coordination, and integration of the somatosensory system).	24	3.63	0.77	24	2.54	0.59	23	2.22	0.85
98	3.1.5 Test and Measures	3.1.5.8 Aerobic capacity and endurance (e.g., dyspnea perceived exertion, heart rate).	24	3.08	0.88	24	2.54	0.51	24	1.96	0.81
38	1.3 Behavioral Sciences	1.3.3.8 Models of differential diagnosis and clinical reasoning (e.g., hypothesis-oriented algorithm for clinicians (HOAC) model, prospect theory).	26	3.65	0.69	26	2.54	0.65	24	2.58	0.65
190	6.2 Musculoskeletal System	6.2.14 Piriformis Syndrome	23	2.61	1.03	23	2.52	0.51	23	2.17	1.03
191	6.2 Musculoskeletal System	6.2.15 Sacroiliac Dysfunction	23	2.61	1.12	23	2.52	0.73	23	2.30	0.97
192	6.2 Musculoskeletal System	6.2.16 Other Disorders of the Pelvic Girdle	23	2.39	1.12	23	2.52	0.59	23	2.39	0.78
110	3.1.5 Test and Measures	3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests).	24	3.88	0.34	24	2.50	0.59	24	2.38	0.82
105	3.1.5 Test and Measures	3.1.5.15 Community, home, and work barriers.	24	3.46	0.88	24	2.50	0.66	24	2.08	0.78
57	2.5 Education	2.5.3 Educating the public regarding spine conditions, the role of orthopaedic spine physical therapists, and addressing common misconceptions.	26	2.58	1.10	26	2.50	0.58	26	2.04	0.60
58	2.5 Education	2.5.4 Educating other health care professionals and administrators as to the scope and role of orthopaedic spine physical therapists.	26	2.46	1.03	26	2.50	0.58	26	2.12	0.71
47	2.2 Leadership	2.2.1 Representing orthopaedic spine physical therapy and interacting with other professionals and organizations (e.g., inter-professional interaction and mentoring).	26	2.42	1.10	26	2.50	0.58	26	2.31	0.84
116	3.2 Evaluation	3.2.3 Incorporating data from ancillary testing (e.g., imaging, labs, electrophysiological studies).	23	3.74	0.45	23	2.48	0.59	23	2.30	0.70
183	6.2 Musculoskeletal System	6.2.7 Temporomandibular Dysfunction	22	1.73	0.98	21	2.48	0.81	21	2.10	0.89
41	1.4 Critical Inquiry for Evidence-based Practice	1.4.1 Appraisal of research findings on orthopaedic spine physical therapy practice.	26	2.65	1.06	26	2.46	0.58	26	2.31	0.74
134	3.5 Intervention	3.5.10 Graded motor imagery.	22	2.77	1.02	22	2.45	0.60	22	2.14	0.94
82	3.1.1 History	3.1.1.10 Obtaining data on living environment and community characteristics.	25	3.84	0.47	25	2.44	0.58	25	1.92	1.00
30	1.3 Behavioral Sciences	1.3.2.4 Output mechanisms and expressions (e.g., immune, endocrine, sympathetic, behavioral).	26	3.42	0.64	26	2.42	0.50	25	2.40	0.65

54	2.4 Advocacy	2.4.2 Advocating for orthopaedic spine physical therapy practice with national organizations, healthcare systems or law-making bodies.	26	1.62	1.13	26	2.42	0.58	26	2.04	1.04
96	3.1.5 Test and Measures	3.1.5.6 Anthropometric characteristics (e.g., edema, body dimensions and composition).	24	3.46	0.72	24	2.42	0.50	24	2.04	0.86
142	3.5 Intervention	3.5.18 Muscle energy techniques.	22	3.18	0.91	22	2.41	0.67	22	2.18	0.85
81	3.1.1 History	3.1.1.9 Obtaining general demographic information.	25	3.88	0.33	25	2.40	0.58	25	1.88	0.97
173	6.1 Nervous System	6.1.3 Thoracic Outlet Syndrome	23	2.00	1.17	23	2.39	0.89	23	2.35	0.83
20	1.2 Clinical Sciences	1.2.2.4 Nonsurgical interventional spine procedures (e.g., injections, radial ablation, denervation procedures) and their indications, contraindications, and precautions for orthopaedic spine physical therapy.	26	3.19	0.90	26	2.38	0.64	26	2.12	0.71
56	2.5 Education	2.5.2 Promoting awareness and benefits of fellowship programs in orthopaedic spine physical therapy.	26	2.08	0.93	26	2.38	0.57	26	2.08	0.74
195	6.2 Musculoskeletal System	6.2.19 Rib Dysfunction	22	1.91	0.97	22	2.36	0.85	22	2.27	0.83
199	6.2 Musculoskeletal System	6.2.23 Diastasis recti.	22	1.86	1.28	22	2.36	0.90	22	2.05	0.95
94	3.1.5 Test and Measures	3.1.5.4 Adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).	24	3.25	0.94	24	2.33	0.56	24	2.00	0.78
143	3.5 Intervention	3.5.19 Traction/distraction.	22	2.95	0.95	22	2.32	0.57	22	2.14	0.89
131	3.5 Intervention	3.5.7 Nutritional education.	22	2.86	0.89	22	2.32	0.57	22	1.82	0.80
17	1.2 Clinical Sciences	1.2.2.1 Imaging studies.	26	3.50	0.71	26	2.31	0.62	26	2.08	0.80
106	3.1.5 Test and Measures	3.1.5.16 Integumentary integrity.	24	3.04	1.08	24	2.29	0.62	24	2.00	0.93
66	3.1.1 History	3.1.1.1.4 Utilization of adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).	25	3.24	0.78	25	2.28	0.61	25	1.84	0.80
136	3.5 Intervention	3.5.4.12 Protective, adaptive or supportive device or equipment (e.g., orthotics, taping).	22	3.00	0.82	22	2.27	0.55	22	1.95	0.90
61	2.6 Critical Inquiry and Evidence	2.6.3 Evaluating the efficacy and effectiveness of examination tools, interventions, and technologies based upon available evidence.	26	2.50	1.14	26	2.27	0.53	26	2.15	0.83
175	6.1 Nervous System	6.1.5 Meralgia paresthetica.	23	1.57	0.90	23	2.26	0.75	23	2.13	0.81
7	1.1 Foundation Sciences	1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity).	27	3.11	0.89	27	2.26	0.66	27	2.26	0.76
45	2.1 Professional Behavior	2.1.3 Maintaining active participation in professional organizations that address issues related to orthopaedic spine care.	26	2.00	1.06	26	2.23	0.59	26	1.65	1.02
153	3.5 Intervention	3.5.28.2 Mindfulness.	22	2.36	1.36	22	2.23	0.61	21	1.48	0.68
48	2.2 Leadership	2.2.2 Planning, directing, organizing, and managing human, technical, environmental, and financial resources effectively and efficiently.	26	2.54	1.42	25	2.20	0.71	25	2.00	0.87
18	1.2 Clinical Sciences	1.2.2.2 Pharmacology.	26	3.42	0.70	26	2.19	0.57	26	1.58	0.70
60	2.6 Critical Inquiry and Evidence	2.6.2 Contributing to the body of evidence in orthopaedic spine physical therapy (e.g., peer-reviewed and non-peer-reviewed presentations and publications).	26	0.96	0.72	26	2.19	0.63	26	1.88	0.95
62	2.6 Critical Inquiry and Evidence	2.6.4 Identifying research needs within the field of orthopaedic spine physical therapy, evaluating outcomes data, and assessing new concepts and technologies.	26	1.58	0.90	26	2.19	0.63	26	2.00	0.89
4	1.1 Foundation Sciences	1.1.1.3 Cardiovascular and pulmonary systems.	27	3.11	0.80	27	2.19	0.56	27	2.19	0.68
6	1.1 Foundation Sciences	1.1.1.5 Human growth and development across the lifespan.	27	3.11	0.85	27	2.19	0.62	27	2.22	0.80
152	3.5 Intervention	3.5.28.1 Meditation.	22	1.86	1.36	22	2.14	0.64	21	1.43	0.75
36	1.3 Behavioral Sciences	1.3.3.6 Theory and application of orthotic, protective, and supportive devices.	26	2.73	0.87	26	2.08	0.63	26	2.23	0.65
19	1.2 Clinical Sciences	1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrophysiological exams).	26	2.73	0.78	26	2.04	0.60	26	1.69	0.74
5	1.1 Foundation Sciences	1.1.1.4 Integumentary system.	27	2.96	1.02	27	2.00	0.78	27	1.89	0.80
8	1.1 Foundation Sciences	1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary).	27	2.89	0.85	27	2.00	0.68	27	1.93	0.73
145	3.5 Intervention	3.5.4.21 Electro-therapeutic modalities (e.g., TENS, NMES).	22	1.95	1.33	22	1.64	0.95	22	1.73	1.08
22	1.2 Clinical Sciences	1.2.2.6 Developments in genetics/regenerative medicine (e.g., genetic markers, stem cell applications, genetic-based alterations to pharmacological interventions, immunity).	26	1.62	1.33	26	1.62	0.80	26	1.27	1.04
146	3.5 Intervention	3.5.4.22 Thermo-therapeutic modalities (e.g., heat, ice, ultrasound).	22	2.14	1.28	22	1.45	0.91	22	1.50	0.96
148	3.5 Intervention	3.5.24 Dry needling.	21	0.76	1.18	21	1.24	1.04	20	1.25	1.33
147	3.5 Intervention	3.5.23 Photo-therapeutic modalities (e.g., laser).	22	0.82	1.05	22	0.64	0.73	21	0.76	1.04
154	3.5 Intervention	3.5.28.3 Hypnosis.	22	0.23	0.87	21	0.24	0.54	18	0.61	1.09

Frequency of Responses in Survey Order

Part 1. Foundation Sciences

				Frequency					Percentage						
				Daily / Very Important / Analysis	Weekly / Moderately Important / Application	Monthly / Little Importance / Recall	Less than once a month / Not Important	Never	Daily / Very Important / Analysis	Weekly / Moderately Important / Application	Monthly / Little Importance / Recall	Less than once a month / Not Important	Never		
Part 1	1.1 Foundation Sciences		# Responses												
Part 1	1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system.	Frequency	27	27	0	0	0	100	0	0	0	0		
			Importance	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0		
			Level of Judgment	26	23	3	0		88.5	11.5	0.0				
		1.1.1.2 Neuromuscular system.	Frequency	27	27	0	0	0	100.0	0.0	0.0	0.0	0.0		
			Importance	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0		
			Level of Judgment	27	25	2	0		92.6	7.4	0.0				
		1.1.1.3 Cardiovascular and pulmonary sy	Frequency	27	9	13	4	1	33.3	48.1	14.8	3.7			
			Importance	27	7	18	2	0	25.9	66.7	7.4	0.0			
			Level of Judgment	27	9	14	4		33.3	51.9	14.8				
		1.1.1.4 Integumentary system.	Frequency	27	9	11	5	1	33.3	40.7	18.5	3.7	3.7		
			Importance	27	7	14	5	1	25.9	51.9	18.5	3.7			
			Level of Judgment	26	6	13	7		23.1	50.0	26.9				
		1.1.1.5 Human growth and development	Frequency	27	10	11	5	1	37.0	40.7	18.5	3.7			
			Importance	27	8	16	3	0	29.6	59.3	11.1	0.0			
			Level of Judgment	26	11	12	3		42.3	46.2	11.5				
		1.1.1.6 Histology (e.g., connective tissue,	Frequency	27	10	12	3	2	37.0	44.4	11.1	7.4			
			Importance	27	10	14	3	0	37.0	51.9	11.1	0.0			
			Level of Judgment	27	12	10	5		44.4	37.0	18.5				
		1.1.1.7 Other systems (e.g., endocrine, d	Frequency	27	6	14	5	2	22.2	51.9	18.5	7.4			
			Importance	27	6	15	6	0	22.2	55.6	22.2	0.0			
			Level of Judgment	27	6	13	8		22.2	48.1	29.6				
		Part 1	1.2 Clinical Sciences	1.1.2.1 Kinesiology/biomechanics.	Frequency	27	27	0	0	0	100.0	0.0	0.0	0.0	
					Importance	27	27	0	0	0	100.0	0.0	0.0	0.0	
					Level of Judgment	27	25	2	0		92.6	7.4	0.0		
1.1.2.2 Neural control of movement.	Frequency			27	26	1	0	0	96.3	3.7	0.0	0.0			
	Importance			27	26	1	0	0	96.3	3.7	0.0	0.0			
	Level of Judgment			27	22	5	0		81.5	18.5	0.0				
1.1.2.3 Ergonomics.	Frequency			27	21	6	0	0	77.8	22.2	0.0	0.0			
	Importance			26	20	5	1	0	76.9	19.2	3.8	0.0			
	Level of Judgment			27	17	10	0		63.0	37.0	0.0				
1.1.2.4 Locomotion.	Frequency			27	26	1	0	0	96.3	3.7	0.0	0.0			
	Importance			27	24	3	0	0	88.9	11.1	0.0	0.0			
	Level of Judgment			27	21	6	0		77.8	22.2	0.0				
1.2.1.1 Signs and symptoms of disease/ir	Frequency			26	25	0	1	0	96.2	0.0	3.8	0.0			
	Importance			26	22	4	0	0	84.6	15.4	0.0	0.0			
	Level of Judgment			26	19	5	2		73.1	19.2	7.7				
1.2.1.2 Progression of disease/injury pro	Frequency			26	23	3	0	0	88.5	11.5	0.0	0.0			
	Importance			26	20	6	0	0	76.9	23.1	0.0	0.0			
	Level of Judgment			26	17	7	2		65.4	26.9	7.7				
1.2.1.3 Pathokinesiology.	Frequency			25	23	2	0	0	92.0	8.0	0.0	0.0			
	Importance			25	19	6	0	0	76.0	24.0	0.0	0.0			
	Level of Judgment			25	16	7	2		64.0	28.0	8.0				
1.2.1.4 Tissue inflammation, healing, anc	Frequency			25	24	1	0	0	96.0	4.0	0.0	0.0			
	Importance			25	23	2	0	0	92.0	8.0	0.0	0.0			
	Level of Judgment			25	18	6	1		72.0	24.0	4.0				
1.2.2.1 Imaging studies.	Frequency	26	15	10	0	1	57.7	38.5	0.0	3.8					
	Importance	26	10	14	2	0	38.5	53.8	7.7	0.0					
	Level of Judgment	26	9	10	7		34.6	38.5	26.9						
1.2.2.2 Pharmacology.	Frequency	26	13	12	0	1	50.0	46.2	0.0	3.8					
	Importance	26	7	17	2	0	26.9	65.4	7.7	0.0					

	Level of Judgment	26	3	9	14			
1.2.2.3 Ancillary tests (e.g., lab studies, E	Frequency	26	4	12	9	1		
	Importance	26	5	17	4	0		
	Level of Judgment	26	4	10	12			
1.2.2.4 Nonsurgical interventional spine	Frequency	26	12	8	5	1		
	Importance	26	12	12	2	0		
	Level of Judgment	26	8	13	5			
1.2.2.5 Spine surgical interventions and t	Frequency	26	9	11	4	2		
	Importance	26	15	11	0	0		
	Level of Judgment	26	10	11	5			
1.2.2.6 Developments in genetics/regene	Frequency	26	3	4	5	8	6	
	Importance	26	3	12	9	2		
	Level of Judgment	19	4	6	9			
1.3 Behavioral Sciences								
1.3.1.1 External environmental factors (e	Frequency	26	20	4	2	0		
	Importance	26	17	8	1	0		
	Level of Judgment	26	13	13	0			
1.3.1.2 Personal factors (e.g., complianc	Frequency	26	25	0	1	0		
	Importance	26	20	6	0	0		
	Level of Judgment	26	17	9	0			
1.3.1.3 Psychological/emotional conditio	Frequency	26	22	4	0	0		
	Importance	26	23	3	0	0		
	Level of Judgment	26	16	10	0			
1.3.1.4 Impact of behavioral health risk f	Frequency	26	17	7	1	1		
	Importance	26	16	9	1	0		
	Level of Judgment	26	10	14	2			
1.3.2.1 Peripheral nociceptive pain physi	Frequency	25	20	5	0	0		
	Importance	25	21	4	0	0		
	Level of Judgment	25	17	8	0			
1.3.2.2 Peripheral neurogenic/neuropath	Frequency	26	21	4	1	0		
	Importance	26	23	3	0	0		
	Level of Judgment	26	18	8	0			
1.3.2.3 Central nervous system/nociplast	Frequency	26	20	5	1	0		
	Importance	26	21	5	0	0		
	Level of Judgment	26	21	5	0			
1.3.2.4 Output mechanisms and expressi	Frequency	26	13	11	2	0		
	Importance	26	11	15	0	0		
	Level of Judgment	25	12	11	2			
1.3.3.1 Biopsychosocial model.	Frequency	26	22	4	0	0		
	Importance	25	20	5	0	0		
	Level of Judgment	26	15	11	0			
1.3.3.2 Exercise physiology across the lif	Frequency	26	19	5	2	0		
	Importance	26	17	8	1	0		
	Level of Judgment	26	11	13	2			
1.3.3.3 Manual therapy techniques.	Frequency	26	25	1	0	0		
	Importance	26	22	4	0	0		
	Level of Judgment	26	18	8	0			
1.3.3.4 Movement systems impairments.	Frequency	26	25	1	0	0		
	Importance	26	26	0	0	0		
	Level of Judgment	25	20	5	0			
1.3.3.5 Motor control and motor learnin	Frequency	26	26	0	0	0		
	Importance	26	25	1	0	0		
	Level of Judgment	25	20	5	0			
1.3.3.6 Theory and application of orthoti	Frequency	26	5	11	8	2		
	Importance	26	6	16	4	0		
	Level of Judgment	26	9	14	3			
1.3.3.7 Therapeutic exercise.	Frequency	26	26	0	0	0		
	Importance	26	25	1	0	0		
	Level of Judgment	26	21	5	0			
1.3.3.8 Models of differential diagnosis a	Frequency	26	19	6	0	1		
	Importance	26	16	8	2	0		
	Level of Judgment	24	16	6	2			

		11.5	34.6	53.8			
		15.4	46.2	34.6	3.8		
		19.2	65.4	15.4	0.0		
		15.4	38.5	46.2			
		46.2	30.8	19.2	3.8		
		46.2	46.2	7.7	0.0		
		30.8	50.0	19.2			
		34.6	42.3	15.4	7.7		
		57.7	42.3	0.0	0.0		
		38.5	42.3	19.2			
		11.5	15.4	19.2	30.8	23.1	
		11.5	46.2	34.6	7.7		
		21.1	31.6	47.4			
		76.9	15.4	7.7	0.0		
		65.4	30.8	3.8	0.0		
		50.0	50.0	0.0			
		96.2	0.0	3.8	0.0		
		76.9	23.1	0.0	0.0		
		65.4	34.6	0.0			
		84.6	15.4	0.0	0.0		
		88.5	11.5	0.0	0.0		
		61.5	38.5	0.0			
		65.4	26.9	3.8	3.8		
		61.5	34.6	3.8	0.0		
		38.5	53.8	7.7			
		80.0	20.0	0.0	0.0		
		84.0	16.0	0.0	0.0		
		68.0	32.0	0.0			
		80.8	15.4	3.8	0.0		
		88.5	11.5	0.0	0.0		
		69.2	30.8	0.0			
		76.9	19.2	3.8	0.0		
		80.8	19.2	0.0	0.0		
		80.8	19.2	0.0			
		50.0	42.3	7.7	0.0		
		42.3	57.7	0.0	0.0		
		48.0	44.0	8.0			
		84.6	15.4	0.0	0.0		
		80.0	20.0	0.0	0.0		
		57.7	42.3	0.0			
		73.1	19.2	7.7	0.0		
		65.4	30.8	3.8	0.0		
		42.3	50.0	7.7			
		96.2	3.8	0.0	0.0		
		84.6	15.4	0.0	0.0		
		69.2	30.8	0.0			
		96.2	3.8	0.0	0.0		
		100.0	0.0	0.0	0.0		
		80.0	20.0	0.0			
		100.0	0.0	0.0	0.0		
		96.2	3.8	0.0	0.0		
		80.0	20.0	0.0			
		19.2	42.3	30.8	7.7		
		23.1	61.5	15.4	0.0		
		34.6	53.8	11.5			
		100.0	0.0	0.0	0.0		
		96.2	3.8	0.0	0.0		
		80.8	19.2	0.0			
		73.1	23.1	0.0	3.8		
		61.5	30.8	7.7	0.0		
		66.7	25.0	8.3			

1.3.3.9 Principles of teaching and learnin	Frequency	26	18	7	1	0	
	Importance	26	19	7	0	0	
	Level of Judgment	26	15	11	0		
1.3.3.10 Principles of prevention and we	Frequency	26	16	9	1	0	
	Importance	26	17	8	1	0	
	Level of Judgment	26	10	16	0		
1.4 Critical Inquiry for Evidence-Base 1.4.1 Appraisal of research findings on o	Frequency	26	5	12	5	3	1
	Importance	26	13	12	1	0	
	Level of Judgment	26	12	10	4		
1.4.2 Application of research findings to	Frequency	26	14	9	3	0	
	Importance	26	16	10	0	0	
	Level of Judgment	26	15	9	2		

69.2	26.9	3.8	0.0
73.1	26.9	0.0	0.0
57.7	42.3	0.0	
61.5	34.6	3.8	0.0
65.4	30.8	3.8	0.0
38.5	61.5	0.0	
19.2	46.2	19.2	11.5
50.0	46.2	3.8	0.0
46.2	38.5	15.4	
53.8	34.6	11.5	0.0
61.5	38.5	0.0	0.0
57.7	34.6	7.7	

Part 2. Professional Behavior and Part 3. Examination

		# Responses	Frequency					
			Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv.	Never	
Par 2	2.1 Professional Behavior	2.1.1 Consulting with and/or educating p	Frequency	7	12	5	2	
			Importance	18	8	0	0	
			Level of Mastery	25	12	9	4	0
		2.1.2 Using patient-centered ethics and v	Frequency	22	2	2	0	
			Importance	23	3	0	0	
			Level of Mastery	26	11	9	4	2
	2.1.3 Maintaining active participation in	Frequency	3	4	10	8	1	
		Importance	8	16	2	0		
		Level of Mastery	26	6	9	7	4	
	2.1.4 Maintaining state-of-the-art knowl	Frequency	3	7	10	6		
		Importance	17	9	0	0		
		Level of Mastery	26	7	17	1	1	
	2.2.1 Representing orthopaedic spine ph	Frequency	6	5	9	6		
		Importance	14	11	1	0		
		Level of Mastery	26	13	9	3	1	
	2.2 Leadership	2.2.2 Planning, directing, organizing, and	Frequency	10	3	7	3	3
			Importance	9	12	4	0	
			Level of Mastery	25	7	13	3	2
2.2.3 Modeling and facilitating the transi		Frequency	15	4	5	2		
		Importance	19	6	1	0		
		Level of Mastery	26	13	12	1	0	
2.2.4 Acting as an expert resource for pe	Frequency	11	12	2	1			
	Importance	21	5	0	0			
	Level of Mastery	26	19	6	1	0		
2.3 Communication	2.3.1 Empowering patients with orthopa	Frequency	24	2	0	0		
		Importance	26	0	0	0		
		Level of Mastery	25	13	10	2	0	
	2.3.2 Facilitating collaborative and multi	Frequency	9	14	3	0		
		Importance	20	6	0	0		
		Level of Mastery	26	9	14	1	2	
2.4 Advocacy	2.4.1 Promoting the orthopaedic spine p	Frequency	14	7	5	0		
		Importance	17	6	2	0		
		Level of Mastery	26	14	8	3	1	
	2.4.2 Advocating for orthopaedic spine p	Frequency	3	1	8	11	3	
		Importance	12	13	1	0		
		Level of Mastery	26	11	8	4	3	
2.5 Education	2.5.1 Contributing to the professional de	Frequency	1	14	9	2		
		Importance	17	9	0	0		
		Level of Mastery	26	15	8	2	1	
	2.5.2 Promoting awareness and benefits	Frequency	3	3	13	7		

Percentage				
Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv.	Never
26.9	46.2	19.2	7.7	
69.2	30.8	0.0	0.0	
48.0	36.0	16.0	0.0	
84.6	7.7	7.7	0.0	
88.5	11.5	0.0	0.0	
42.3	34.6	15.4	7.7	
11.5	15.4	38.5	30.8	3.8
30.8	61.5	7.7	0.0	
23.1	34.6	26.9	15.4	
11.5	26.9	38.5	23.1	
65.4	34.6	0.0	0.0	
26.9	65.4	3.8	3.8	
23.1	19.2	34.6	23.1	
53.8	42.3	3.8	0.0	
50.0	34.6	11.5	3.8	
38.5	11.5	26.9	11.5	11.5
36.0	48.0	16.0	0.0	
28.0	52.0	12.0	8.0	
57.7	15.4	19.2	7.7	
73.1	23.1	3.8	0.0	
50.0	46.2	3.8	0.0	
42.3	46.2	7.7	3.8	
80.8	19.2	0.0	0.0	
73.1	23.1	3.8	0.0	
92.3	7.7	0.0	0.0	
100.0	0.0	0.0	0.0	
52.0	40.0	8.0	0.0	
34.6	53.8	11.5	0.0	
76.9	23.1	0.0	0.0	
34.6	53.8	3.8	7.7	
53.8	26.9	19.2	0.0	
68.0	24.0	8.0	0.0	
53.8	30.8	11.5	3.8	
11.5	3.8	30.8	42.3	11.5
46.2	50.0	3.8	0.0	
42.3	30.8	15.4	11.5	
3.8	53.8	34.6	7.7	
65.4	34.6	0.0	0.0	
57.7	30.8	7.7	3.8	
11.5	11.5	50.0	26.9	

		Importance	26	11	14	1	0			42.3	53.8	3.8	0.0	
		Level of Mastery	26	8	12	6	0			30.8	46.2	23.1	0.0	
	2.5.3 Educating the public regarding spin	Frequency	26	7	6	8	5			26.9	23.1	30.8	19.2	
		Importance	26	14	11	1	0			53.8	42.3	3.8	0.0	
		Level of Mastery	26	5	17	4	0			19.2	65.4	15.4	0.0	
	2.5.4 Educating other health care profes:	Frequency	26	5	7	9	5			19.2	26.9	34.6	19.2	
		Importance	26	14	11	1	0			53.8	42.3	3.8	0.0	
		Level of Mastery	26	8	13	5	0			30.8	50.0	19.2	0.0	
	2.6 Critical Inquiry and Evidence-Basi	2.6.1 Applying principles of evidence-bas:	Frequency	26	21	3	2	0		80.8	11.5	7.7	0.0	
		Importance	26	21	5	0	0			80.8	19.2	0.0	0.0	
		Level of Mastery	26	12	10	3	1			46.2	38.5	11.5	3.8	
	2.6.2 Contributing to the body of eviden:	Frequency	26	0	2	0	19	5		0.0	7.7	0.0	73.1	19.2
		Importance	26	8	15	3	0			30.8	57.7	11.5	0.0	
		Level of Mastery	26	7	12	4	3			26.9	46.2	15.4	11.5	
	2.6.3 Evaluating the efficacy and effectiv	Frequency	26	5	10	5	5	1		19.2	38.5	19.2	19.2	3.8
		Importance	26	8	17	1	0			30.8	65.4	3.8	0.0	
		Level of Mastery	26	9	14	1	2			34.6	53.8	3.8	7.7	
	2.6.4 Identifying research needs within tl	Frequency	26	1	3	7	14	1		3.8	11.5	26.9	53.8	3.8
		Importance	26	8	15	3	0			30.8	57.7	11.5	0.0	
		Level of Mastery	26	8	12	4	2			30.8	46.2	15.4	7.7	
Part 3	3.1.1 History	3.1.1.1.1 Current and prior work.	Frequency	25	19	4	1	1		76.0	16.0	4.0	4.0	
		Importance	25	17	7	1	0			68.0	28.0	4.0	0.0	
		Level of Mastery	25	7	12	4	2			28.0	48.0	16.0	8.0	
	3.1.1.1.2 Activity requirements/occupati	Frequency	25	21	1	0	3			84.0	4.0	0.0	12.0	
		Importance	25	18	6	1	0			72.0	24.0	4.0	0.0	
		Level of Mastery	25	6	12	3	4			24.0	48.0	12.0	16.0	
	3.1.1.1.3 Ergonomic considerations.	Frequency	25	22	2	1	0			88.0	8.0	4.0	0.0	
		Importance	25	18	6	1	0			72.0	24.0	4.0	0.0	
		Level of Mastery	25	7	12	4	2			28.0	48.0	16.0	8.0	
	3.1.1.1.4 Utilization of adaptive and sup:	Frequency	25	10	12	2	1			40.0	48.0	8.0	4.0	
		Importance	25	9	14	2	0			36.0	56.0	8.0	0.0	
		Level of Mastery	25	5	12	7	1			20.0	48.0	28.0	4.0	
	3.1.1.2.1 Recognition of contributions fr:	Frequency	25	25	0	0	0			100.0	0.0	0.0	0.0	
		Importance	23	20	3	0	0			87.0	13.0	0.0	0.0	
		Level of Mastery	23	12	8	1	2			52.2	34.8	4.3	8.7	
	3.1.1.2.2 Quality and behavior of sympto	Frequency	25	24	1	0	0			96.0	4.0	0.0	0.0	
		Importance	23	19	4	0	0			82.6	17.4	0.0	0.0	
		Level of Mastery	24	13	8	1	2			54.2	33.3	4.2	8.3	
	3.1.1.2.3 Symptom irritability (onset, off:	Frequency	25	25	0	0	0			100.0	0.0	0.0	0.0	
		Importance	23	22	1	0	0			95.7	4.3	0.0	0.0	
		Level of Mastery	25	15	6	2	2			60.0	24.0	8.0	8.0	
	3.1.1.2.4 Onset of condition (e.g., mecha	Frequency	25	23	2	0	0			92.0	8.0	0.0	0.0	
		Importance	24	22	2	0	0			91.7	8.3	0.0	0.0	
		Level of Mastery	25	12	10	1	2			48.0	40.0	4.0	8.0	
	3.1.1.2.5 Current and previous therapeut	Frequency	25	24	1	0	0			96.0	4.0	0.0	0.0	
		Importance	25	20	5	0	0			80.0	20.0	0.0	0.0	
		Level of Mastery	25	13	8	2	2			52.0	32.0	8.0	8.0	
	3.1.1.2.6 Readiness for change.	Frequency	25	24	1	0	0			96.0	4.0	0.0	0.0	
		Importance	25	21	4	0	0			84.0	16.0	0.0	0.0	
		Level of Mastery	25	12	9	4	0			48.0	36.0	16.0	0.0	
	3.1.1.2.7 Goals of the patient, family, an	Frequency	25	22	3	0	0			88.0	12.0	0.0	0.0	
		Importance	25	21	4	0	0			84.0	16.0	0.0	0.0	
		Level of Mastery	25	14	6	3	2			56.0	24.0	12.0	8.0	
	3.1.1.3 Obtaining data regarding functio	Frequency	25	23	2	0	0			92.0	8.0	0.0	0.0	
		Importance	25	19	6	0	0			76.0	24.0	0.0	0.0	
		Level of Mastery	25	11	8	4	2			44.0	32.0	16.0	8.0	
	3.1.1.4.1 Physical function.	Frequency	25	24	1	0	0			96.0	4.0	0.0	0.0	
		Importance	25	21	4	0	0			84.0	16.0	0.0	0.0	
		Level of Mastery	25	12	7	4	2			48.0	28.0	16.0	8.0	
	3.1.1.4.2 Psychosocial factors (e.g., anxie	Frequency	25	22	2	1	0			88.0	8.0	4.0	0.0	
		Importance	25	23	2	0	0			92.0	8.0	0.0	0.0	

	Level of Mastery	25	15	7	3	0	60.0	28.0	12.0	0.0			
3.1.1.5	Obtaining data regarding social/h	Frequency	24	22	2	0	91.7	8.3	0.0	0.0			
	Importance	25	18	7	0	0	72.0	28.0	0.0	0.0			
	Level of Mastery	25	11	10	4	0	44.0	40.0	16.0	0.0			
3.1.1.6	Obtaining medical/surgical histor	Frequency	25	24	1	0	96.0	4.0	0.0	0.0			
	Importance	25	20	5	0	0	80.0	20.0	0.0	0.0			
	Level of Mastery	25	11	6	6	2	44.0	24.0	24.0	8.0			
3.1.1.7	Obtaining data regarding medical	Frequency	25	21	4	0	84.0	16.0	0.0	0.0			
	Importance	25	15	9	1	0	60.0	36.0	4.0	0.0			
	Level of Mastery	25	7	13	3	2	28.0	52.0	12.0	8.0			
3.1.1.8	Obtaining data regarding social h	Frequency	25	23	2	0	92.0	8.0	0.0	0.0			
	Importance	25	18	7	0	0	72.0	28.0	0.0	0.0			
	Level of Mastery	25	11	10	4	0	44.0	40.0	16.0	0.0			
3.1.1.9	Obtaining general demographic i	Frequency	25	22	3	0	88.0	12.0	0.0	0.0			
	Importance	25	11	13	1	0	44.0	52.0	4.0	0.0			
	Level of Mastery	25	7	11	4	3	28.0	44.0	16.0	12.0			
3.1.1.10	Obtaining data on living environ	Frequency	25	22	2	1	88.0	8.0	4.0	0.0			
	Importance	25	12	12	1	0	48.0	48.0	4.0	0.0			
	Level of Mastery	25	8	10	4	3	32.0	40.0	16.0	12.0			
3.1.2	Interpreting Data from History	3.1.2.1	Developing a working hypothesis	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
				Importance	22	22	0	0	0	100.0	0.0	0.0	0.0
				Level of Mastery	23	14	7	1	1	60.9	30.4	4.3	4.3
		3.1.2.2	Assessing "red flags" and determi	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
				Importance	24	23	1	0	0	95.8	4.2	0.0	0.0
				Level of Mastery	23	14	8	0	1	60.9	34.8	0.0	4.3
		3.1.2.3	Identifying chief and secondary p	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
				Importance	24	20	4	0	0	83.3	16.7	0.0	0.0
				Level of Mastery	23	13	6	3	1	56.5	26.1	13.0	4.3
3.1.3	Planning a Physical Exam	3.1.3.1	Includes examination techniques	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
				Importance	24	24	0	0	0	100.0	0.0	0.0	0.0
				Level of Mastery	24	14	7	3	0	58.3	29.2	12.5	0.0
		3.1.3.2	Is comprehensive but has the foc	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
				Importance	24	21	3	0	0	87.5	12.5	0.0	0.0
				Level of Mastery	24	13	10	1	0	54.2	41.7	4.2	0.0
		3.1.3.3	Considers the nature, severity, ar	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
				Importance	24	20	4	0	0	83.3	16.7	0.0	0.0
				Level of Mastery	24	15	8	0	1	62.5	33.3	0.0	4.2
		3.1.3.4	Prioritizes areas, movements, anc	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
				Importance	24	20	4	0	0	83.3	16.7	0.0	0.0
				Level of Mastery	23	14	8	0	1	60.9	34.8	0.0	4.3
3.1.4	Systems Review	3.1.4.1	Performing systems review to ide	Frequency	24	19	4	1	0	79.2	16.7	4.2	0.0
				Importance	23	16	7	0	0	69.6	30.4	0.0	0.0
				Level of Mastery	23	9	10	2	2	39.1	43.5	8.7	8.7
3.1.5	Test and Measures	3.1.5.1	Ergonomics and body mechanics.	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
				Importance	24	21	3	0	0	87.5	12.5	0.0	0.0
				Level of Mastery	23	12	8	2	1	52.2	34.8	8.7	4.3
		3.1.5.2	Gait, locomotion, and balance.	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
				Importance	24	22	2	0	0	91.7	8.3	0.0	0.0
				Level of Mastery	24	13	8	1	2	54.2	33.3	4.2	8.3
		3.1.5.3	Work (job/school/play), commun	Frequency	23	22	1	0	0	95.7	4.3	0.0	0.0
				Importance	23	18	5	0	0	78.3	21.7	0.0	0.0
				Level of Mastery	23	13	8	1	1	56.5	34.8	4.3	4.3
		3.1.5.4	Adaptive and supportive devices	Frequency	24	13	5	5	1	54.2	20.8	20.8	4.2
				Importance	24	9	14	1	0	37.5	58.3	4.2	0.0
				Level of Mastery	24	6	13	4	1	25.0	54.2	16.7	4.2
		3.1.5.5	Pain.	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
				Importance	24	23	1	0	0	95.8	4.2	0.0	0.0
				Level of Mastery	24	15	5	2	2	62.5	20.8	8.3	8.3
		3.1.5.6	Anthropometric characteristics (c	Frequency	24	14	7	3	0	58.3	29.2	12.5	0.0
				Importance	24	10	14	0	0	41.7	58.3	0.0	0.0
				Level of Mastery	24	8	10	5	1	33.3	41.7	20.8	4.2

3.1.5.7 Circulation (e.g., vertebral artery)	Frequency	24	8	12	4	0	33.3	50.0	16.7	0.0	
	Importance	24	17	7	0	0	70.8	29.2	0.0	0.0	
	Level of Mastery	24	9	9	5	1	37.5	37.5	20.8	4.2	
3.1.5.8 Aerobic capacity and endurance	Frequency	24	9	9	5	1	37.5	37.5	20.8	4.2	
	Importance	24	13	11	0	0	54.2	45.8	0.0	0.0	
	Level of Mastery	24	6	12	5	1	25.0	50.0	20.8	4.2	
3.1.5.9 Neurodynamics.	Frequency	24	22	2	0	0	91.7	8.3	0.0	0.0	
	Importance	24	22	2	0	0	91.7	8.3	0.0	0.0	
	Level of Mastery	22	15	6	0	1	68.2	27.3	0.0	4.5	
3.1.5.10 Sensory integrity (e.g., assessment)	Frequency	24	17	7	0	0	70.8	29.2	0.0	0.0	
	Importance	24	21	3	0	0	87.5	12.5	0.0	0.0	
	Level of Mastery	21	15	4	0	2	71.4	19.0	0.0	9.5	
3.1.5.11 Reflex integrity (e.g., assessment)	Frequency	24	16	8	0	0	66.7	33.3	0.0	0.0	
	Importance	24	22	2	0	0	91.7	8.3	0.0	0.0	
	Level of Mastery	24	15	4	3	2	62.5	16.7	12.5	8.3	
3.1.5.12 Motor control and coordination	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0	
	Importance	24	21	3	0	0	87.5	12.5	0.0	0.0	
	Level of Mastery	24	14	6	3	1	58.3	25.0	12.5	4.2	
3.1.5.13 Biopsychosocial functioning (e.g., assessment)	Frequency	24	16	7	0	1	66.7	29.2	0.0	4.2	
	Importance	24	17	7	0	0	70.8	29.2	0.0	0.0	
	Level of Mastery	24	11	9	4	0	45.8	37.5	16.7	0.0	
3.1.5.14 Joint integrity (i.e., mobility assessment)	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0	
	Importance	24	24	0	0	0	100.0	0.0	0.0	0.0	
	Level of Mastery	24	16	5	2	1	66.7	20.8	8.3	4.2	
3.1.5.15 Community, home, and work balance	Frequency	24	15	7	0	2	62.5	29.2	0.0	8.3	
	Importance	24	14	8	2	0	58.3	33.3	8.3	0.0	
	Level of Mastery	24	8	10	6	0	33.3	41.7	25.0	0.0	
3.1.5.16 Integumentary integrity.	Frequency	24	10	8	4	1	41.7	33.3	16.7	4.2	
	Importance	24	9	13	2	0	37.5	54.2	8.3	0.0	
	Level of Mastery	24	8	10	4	2	33.3	41.7	16.7	8.3	
3.1.5.17 Muscle performance (e.g., strength)	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0	
	Importance	24	19	5	0	0	79.2	20.8	0.0	0.0	
	Level of Mastery	24	14	5	3	2	58.3	20.8	12.5	8.3	
3.1.5.18 Neuromotor development and skills	Frequency	24	18	4	1	1	75.0	16.7	4.2	4.2	
	Importance	24	14	9	1	0	58.3	37.5	4.2	0.0	
	Level of Mastery	23	10	9	3	1	43.5	39.1	13.0	4.3	
3.1.5.19 Posture (e.g., assessment of body alignment)	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0	
	Importance	24	20	4	0	0	83.3	16.7	0.0	0.0	
	Level of Mastery	24	15	4	4	1	62.5	16.7	16.7	4.2	
3.1.5.20 Tissue-specific diagnostic tests (e.g., imaging)	Frequency	24	21	3	0	0	87.5	12.5	0.0	0.0	
	Importance	24	13	10	1	0	54.2	41.7	4.2	0.0	
	Level of Mastery	24	13	8	2	1	54.2	33.3	8.3	4.2	
3.1.5.21 Flexibility (e.g., length, stiffness)	Frequency	24	22	2	0	0	91.7	8.3	0.0	0.0	
	Importance	24	18	5	1	0	75.0	20.8	4.2	0.0	
	Level of Mastery	24	15	5	2	2	62.5	20.8	8.3	8.3	
3.1.5.22 Soft tissue quality (e.g., mobility)	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0	
	Importance	24	18	6	0	0	75.0	25.0	0.0	0.0	
	Level of Mastery	24	15	6	2	1	62.5	25.0	8.3	4.2	
3.1.5.23 Task-specific activities (e.g., lifting)	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0	
	Importance	24	18	6	0	0	75.0	25.0	0.0	0.0	
	Level of Mastery	24	14	6	4	0	58.3	25.0	16.7	0.0	
3.2 Evaluation	3.2.1 Synthesizing data from history, systems, and physical examination	Frequency	23	21	2	0	0	91.3	8.7	0.0	0.0
		Importance	22	17	5	0	0	77.3	22.7	0.0	0.0
		Level of Mastery	22	13	6	2	1	59.1	27.3	9.1	4.5
3.2.2 Developing a working diagnosis, including differential diagnosis	Frequency	23	23	0	0	0	100.0	0.0	0.0	0.0	
	Importance	23	22	1	0	0	95.7	4.3	0.0	0.0	
	Level of Mastery	23	17	3	2	1	73.9	13.0	8.7	4.3	
3.2.3 Incorporating data from ancillary tests and imaging	Frequency	23	17	6	0	0	73.9	26.1	0.0	0.0	
	Importance	23	12	10	1	0	52.2	43.5	4.3	0.0	
	Level of Mastery	20	10	10	0	0	50.0	50.0	0.0	0.0	
3.2.4 Referring patient/client to other health care providers	Frequency	23	9	10	4	0	39.1	43.5	17.4	0.0	

	Importance	23	20	3	0	0	87.0	13.0	0.0	0.0
	Level of Mastery	23	11	8	3	1	47.8	34.8	13.0	4.3
3.2.5 Considering implications of exam fi	Frequency	23	18	5	0	0	78.3	21.7	0.0	0.0
	Importance	23	14	9	0	0	60.9	39.1	0.0	0.0
	Level of Mastery	23	14	5	4	0	60.9	21.7	17.4	0.0
3.2.6 Interpreting data from history and	Frequency	23	22	1	0	0	95.7	4.3	0.0	0.0
	Importance	23	19	4	0	0	82.6	17.4	0.0	0.0
	Level of Mastery	23	17	3	3	0	73.9	13.0	13.0	0.0
3.3. Diagnosis	3.3.1 Organizing examination findings int	Frequency	21	21	0	0	100.0	0.0	0.0	0.0
	Importance	21	18	3	0	0	85.7	14.3	0.0	0.0
	Level of Mastery	21	16	4	1	0	76.2	19.0	4.8	0.0
3.4 Prognosis	3.4.1 The Orthopaedic Spine Physical Thr	Frequency	22	22	0	0	100.0	0.0	0.0	0.0
	Importance	22	19	3	0	0	86.4	13.6	0.0	0.0
	Level of Mastery	22	13	7	2	0	59.1	31.8	9.1	0.0
3.5 Intervention	3.5.1 Ergonomics (influences of environn	Frequency	21	20	1	0	95.2	4.8	0.0	0.0
	Importance	21	15	6	0	0	71.4	28.6	0.0	0.0
	Level of Mastery	21	10	8	3	0	47.6	38.1	14.3	0.0
	3.5.2 Education/training of functional ac	Frequency	21	19	2	0	90.5	9.5	0.0	0.0
	Importance	21	17	4	0	0	81.0	19.0	0.0	0.0
	Level of Mastery	17	13	4	0	0	76.5	23.5	0.0	0.0
	3.5.3 Education/training of activities of d	Frequency	21	19	2	0	90.5	9.5	0.0	0.0
	Importance	21	17	4	0	0	81.0	19.0	0.0	0.0
	Level of Mastery	17	11	6	0	0	64.7	35.3	0.0	0.0
	3.5.4.1 Concerning diagnosis, prognosis,	Frequency	22	22	0	0	100.0	0.0	0.0	0.0
	Importance	22	18	4	0	0	81.8	18.2	0.0	0.0
	Level of Mastery	22	13	6	3	0	59.1	27.3	13.6	0.0
	3.5.4.2 Using the biopsychosocial/biome	Frequency	22	18	4	0	81.8	18.2	0.0	0.0
	Importance	22	16	6	0	0	72.7	27.3	0.0	0.0
	Level of Mastery	22	12	5	5	0	54.5	22.7	22.7	0.0
	3.5.4.3 Addressing pain physiology and d	Frequency	22	22	0	0	100.0	0.0	0.0	0.0
	Importance	22	18	4	0	0	81.8	18.2	0.0	0.0
	Level of Mastery	22	14	5	3	0	63.6	22.7	13.6	0.0
	3.5.4.4 Addressing prevention and welln	Frequency	22	15	7	0	68.2	31.8	0.0	0.0
	Importance	22	17	5	0	0	77.3	22.7	0.0	0.0
	Level of Mastery	22	12	7	3	0	54.5	31.8	13.6	0.0
	3.5.5 Injury prevention and wellness pro	Frequency	22	19	3	0	86.4	13.6	0.0	0.0
	Importance	22	18	4	0	0	81.8	18.2	0.0	0.0
	Level of Mastery	22	11	7	3	1	50.0	31.8	13.6	4.5
	3.5.6 Sleep hygiene education (e.g., sleep	Frequency	22	11	9	2	50.0	40.9	9.1	0.0
	Importance	22	12	10	0	0	54.5	45.5	0.0	0.0
	Level of Mastery	22	6	10	6	0	27.3	45.5	27.3	0.0
	3.5.7 Nutritional education.	Frequency	22	5	11	4	22.7	50.0	18.2	9.1
	Importance	22	8	13	1	0	36.4	59.1	4.5	0.0
	Level of Mastery	22	4	11	6	1	18.2	50.0	27.3	4.5
	3.5.8 Pain neuroscience education.	Frequency	22	13	8	1	59.1	36.4	4.5	0.0
	Importance	22	21	1	0	0	95.5	4.5	0.0	0.0
	Level of Mastery	22	11	9	1	1	50.0	40.9	4.5	4.5
	3.5.9 Graded exposure.	Frequency	22	14	6	2	63.6	27.3	9.1	0.0
	Importance	22	18	4	0	0	81.8	18.2	0.0	0.0
	Level of Mastery	22	12	8	1	1	54.5	36.4	4.5	4.5
	3.5.10 Graded motor imagery.	Frequency	22	6	8	5	27.3	36.4	22.7	13.6
	Importance	22	11	10	1	0	50.0	45.5	4.5	0.0
	Level of Mastery	22	9	9	2	2	40.9	40.9	9.1	9.1
	3.5.4.11 Graded activity/exercise.	Frequency	22	18	2	2	81.8	9.1	9.1	0.0
	Importance	22	17	5	0	0	77.3	22.7	0.0	0.0
	Level of Mastery	22	12	7	2	1	54.5	31.8	9.1	4.5
	3.5.4.12 Protective, adaptive or supporti	Frequency	22	6	11	4	27.3	50.0	18.2	4.5
	Importance	22	7	14	1	0	31.8	63.6	4.5	0.0
	Level of Mastery	19	6	11	0	2	31.6	57.9	0.0	10.5
	3.5.4.13 Neural mobilization (e.g., nerve	Frequency	22	16	5	0	72.7	22.7	0.0	4.5
	Importance	22	19	2	1	0	86.4	9.1	4.5	0.0

	Level of Mastery	22	10	8	3	1		
3.5.14 Non-thrust mobilization/manipulation	Frequency	22	21	1	0	0		
	Importance	22	18	4	0	0		
	Level of Mastery	22	14	7	0	1		
3.5.15 Thrust mobilization/manipulation	Frequency	22	10	9	2	1		
	Importance	22	17	4	1	0		
	Level of Mastery	22	16	5	1	0		
3.5.16 Soft tissue mobilization (e.g., conr	Frequency	22	14	7	0	1		
	Importance	22	17	5	0	0		
	Level of Mastery	22	13	6	2	1		
3.5.17 Mobilization with movement.	Frequency	22	12	8	2	0		
	Importance	22	13	9	0	0		
	Level of Mastery	22	10	9	2	1		
3.5.18 Muscle energy techniques.	Frequency	22	10	7	4	1		
	Importance	22	11	9	2	0		
	Level of Mastery	22	9	9	3	1		
3.5.19 Traction/distraction.	Frequency	22	7	9	4	2		
	Importance	22	8	13	1	0		
	Level of Mastery	22	9	8	4	1		
3.5.4.20 Directional preference exercises	Frequency	22	14	7	1	0		
	Importance	22	14	7	1	0		
	Level of Mastery	22	11	8	2	1		
3.5.4.21 Electro-therapeutic modalities (Frequency	22	4	3	6	6	3	
	Importance	22	5	6	9	2		
	Level of Mastery	15	7	5	0	3		
3.5.4.22 Thermo-therapeutic modalities	Frequency	22	4	5	5	6	2	
	Importance	22	3	7	9	3		
	Level of Mastery	22	4	6	9	3		
3.5.23 Photo-therapeutic modalities (e.g	Frequency	22	0	2	4	4	12	
	Importance	22	0	3	8	11		
	Level of Mastery	21	2	3	4	12		
3.5.24 Dry needling.	Frequency	21	0	3	3	1	14	
	Importance	21	2	8	4	7		
	Level of Mastery	20	6	2	3	9		
3.5.25 Aerobic capacity and endurance e	Frequency	22	13	4	4	1		
	Importance	22	14	8	0	0		
	Level of Mastery	22	6	11	3	2		
3.5.26 Motor coordination.	Frequency	22	20	2	0	0		
	Importance	22	19	3	0	0		
	Level of Mastery	21	11	7	2	1		
3.5.27 Muscle performance exercises (e.	Frequency	22	20	1	1	0		
	Importance	22	17	5	0	0		
	Level of Mastery	22	11	8	1	2		
3.5.28.1 Meditation.	Frequency	22	3	4	7	3	5	
	Importance	22	6	13	3	0		
	Level of Mastery	21	0	12	6	3		
3.5.28.2 Mindfulness.	Frequency	22	5	7	4	3	3	
	Importance	22	7	13	2	0		
	Level of Mastery	21	0	12	7	2		
3.5.28.3 Hypnosis.	Frequency	22	1	0	0	1	20	
	Importance	21	0	1	3	17		
	Level of Mastery	18	2	2	1	13		
3.6 Re-assessment / re-evaluation	3.6.1 Assessing intervention response.	Frequency	22	22	0	0	0	
		Importance	22	20	2	0	0	
		Level of Mastery	22	16	4	0	2	
3.6.2 Analyzing significance of changes.	Frequency	22	20	2	0	0		
	Importance	22	20	2	0	0		
	Level of Mastery	21	12	7	1	1		
3.6.3 Assessing change.	Frequency	22	21	1	0	0		
	Importance	22	20	2	0	0		
	Level of Mastery	22	13	7	0	2		

	45.5	36.4	13.6	4.5	
	95.5	4.5	0.0	0.0	
	81.8	18.2	0.0	0.0	
	63.6	31.8	0.0	4.5	
	45.5	40.9	9.1	4.5	
	77.3	18.2	4.5	0.0	
	72.7	22.7	4.5	0.0	
	63.6	31.8	0.0	4.5	
	77.3	22.7	0.0	0.0	
	59.1	27.3	9.1	4.5	
	54.5	36.4	9.1	0.0	
	59.1	40.9	0.0	0.0	
	45.5	40.9	9.1	4.5	
	45.5	31.8	18.2	4.5	
	50.0	40.9	9.1	0.0	
	40.9	40.9	13.6	4.5	
	31.8	40.9	18.2	9.1	
	36.4	59.1	4.5	0.0	
	40.9	36.4	18.2	4.5	
	63.6	31.8	4.5	0.0	
	63.6	31.8	4.5	0.0	
	50.0	36.4	9.1	4.5	
	18.2	13.6	27.3	27.3	13.6
	22.7	27.3	40.9	9.1	
	46.7	33.3	0.0	20.0	
	18.2	22.7	22.7	27.3	9.1
	13.6	31.8	40.9	13.6	
	18.2	27.3	40.9	13.6	
	0.0	9.1	18.2	18.2	54.5
	0.0	13.6	36.4	50.0	
	9.5	14.3	19.0	57.1	
	0.0	14.3	14.3	4.8	66.7
	9.5	38.1	19.0	33.3	
	30.0	10.0	15.0	45.0	
	59.1	18.2	18.2	4.5	
	63.6	36.4	0.0	0.0	
	27.3	50.0	13.6	9.1	
	90.9	9.1	0.0	0.0	
	86.4	13.6	0.0	0.0	
	52.4	33.3	9.5	4.8	
	90.9	4.5	4.5	0.0	
	77.3	22.7	0.0	0.0	
	50.0	36.4	4.5	9.1	
	13.6	18.2	31.8	13.6	22.7
	27.3	59.1	13.6	0.0	
	0.0	57.1	28.6	14.3	
	22.7	31.8	18.2	13.6	13.6
	31.8	59.1	9.1	0.0	
	0.0	57.1	33.3	9.5	
	4.5	0.0	0.0	4.5	90.9
	0.0	4.8	14.3	81.0	
	11.1	11.1	5.6	72.2	
	100.0	0.0	0.0	0.0	
	90.9	9.1	0.0	0.0	
	72.7	18.2	0.0	9.1	
	90.9	9.1	0.0	0.0	
	90.9	9.1	0.0	0.0	
	57.1	33.3	4.8	4.8	
	95.5	4.5	0.0	0.0	
	90.9	9.1	0.0	0.0	
	59.1	31.8	0.0	9.1	

3.6.4 Re-examining/implementing a mod	Frequency	22	17	4	1	0	
	Importance	22	18	3	1	0	
	Level of Mastery	22	13	7	0	2	
3.6.5 Confirming/modifying goals.	Frequency	22	14	7	1	0	
	Importance	22	18	4	0	0	
	Level of Mastery	22	12	7	1	2	
3.6.6 Making referrals to other providers	Frequency	22	6	7	9	0	
	Importance	22	14	8	0	0	
	Level of Mastery	21	9	8	4	0	
3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity at	Frequency	22	17	4	1	0
		Importance	22	17	4	1	0
		Level of Mastery	22	10	7	4	1
	3.7.2 Assessing patient satisfaction.	Frequency	22	15	7	0	0
		Importance	22	17	5	0	0
		Level of Mastery	22	11	8	2	1
	3.7.3 Assessing promotion of primary an	Frequency	22	12	5	5	0
		Importance	22	14	7	1	0
		Level of Mastery	22	12	6	3	1
	3.7.4 Assessing improvement of patientâ	Frequency	22	11	9	2	0
		Importance	22	15	6	1	0
		Level of Mastery	22	11	7	3	1
3.7.5 Using applicable, evidence-based o	Frequency	22	11	7	4	0	
	Importance	22	13	9	0	0	
	Level of Mastery	22	10	7	3	2	

77.3	18.2	4.5	0.0
81.8	13.6	4.5	0.0
59.1	31.8	0.0	9.1
63.6	31.8	4.5	0.0
81.8	18.2	0.0	0.0
54.5	31.8	4.5	9.1
27.3	31.8	40.9	0.0
63.6	36.4	0.0	0.0
42.9	38.1	19.0	0.0
77.3	18.2	4.5	0.0
77.3	18.2	4.5	0.0
45.5	31.8	18.2	4.5
68.2	31.8	0.0	0.0
77.3	22.7	0.0	0.0
50.0	36.4	9.1	4.5
54.5	22.7	22.7	0.0
63.6	31.8	4.5	0.0
54.5	27.3	13.6	4.5
50.0	40.9	9.1	0.0
68.2	27.3	4.5	0.0
50.0	31.8	13.6	4.5
50.0	31.8	18.2	0.0
59.1	40.9	0.0	0.0
45.5	31.8	13.6	9.1

Part 6. Medical Conditions

		# Responses	Frequency					
			Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never	
6.1 Nervous System	6.1.1 Cervical Radiculopathy	Frequency	23	12	10	1	0	0
		Importance	23	21	2	0	0	
		Level of Mastery	23	16	5	0	2	
	6.1.2 Lumbar Radiculopathy	Frequency	23	14	8	1	0	0
		Importance	23	21	2	0	0	
		Level of Mastery	23	15	4	1	3	
	6.1.3 Thoracic Outlet Syndrome	Frequency	23	3	5	5	9	1
		Importance	23	13	8	0	2	
		Level of Mastery	23	12	8	2	1	
	6.1.4 Other peripheral neural impingeme	Frequency	23	3	10	7	3	0
		Importance	23	16	6	1	0	
		Level of Mastery	23	13	7	2	1	
6.1.5 Meralgia paresthetica.	Frequency	23	0	4	7	10	2	
	Importance	23	10	9	4	0		
	Level of Mastery	23	8	11	3	1		
6.1.6 Cervical Myelopathy.	Frequency	23	2	3	8	9	1	
	Importance	23	19	3	1	0		
	Level of Mastery	23	13	5	3	2		
6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD	Frequency	22	13	8	1	0	0
		Importance	20	18	2	0	0	
		Level of Mastery	20	15	4	0	1	
	6.2.2 Cervical Instability	Frequency	22	3	4	5	10	0
		Importance	21	17	4	0	0	
		Level of Mastery	21	14	5	1	1	
	6.2.3 Cervical Sprain Strain	Frequency	22	8	9	4	1	0
		Importance	21	16	5	0	0	
		Level of Mastery	21	12	6	2	1	
	6.2.4 Cervicogenic Headache	Frequency	22	6	9	6	1	0
		Importance	21	17	4	0	0	

		Percentage				
		Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never
6.1 Nervous System	6.1.1 Cervical Radiculopathy	52.2	43.5	4.3	0.0	0.0
		91.3	8.7	0.0	0.0	
		69.6	21.7	0.0	8.7	
	6.1.2 Lumbar Radiculopathy	60.9	34.8	4.3	0.0	0.0
		91.3	8.7	0.0	0.0	
		65.2	17.4	4.3	13.0	
	6.1.3 Thoracic Outlet Syndrome	13.0	21.7	21.7	39.1	4.3
		56.5	34.8	0.0	8.7	
		52.2	34.8	8.7	4.3	
	6.1.4 Other peripheral neural impingeme	13.0	43.5	30.4	13.0	
		69.6	26.1	4.3	0.0	
		56.5	30.4	8.7	4.3	
6.1.5 Meralgia paresthetica.	0.0	17.4	30.4	43.5	8.7	
	43.5	39.1	17.4	0.0		
	34.8	47.8	13.0	4.3		
6.1.6 Cervical Myelopathy.	8.7	13.0	34.8	39.1	4.3	
	82.6	13.0	4.3	0.0		
	56.5	21.7	13.0	8.7		
6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD	59.1	36.4	4.5	0.0	
		90.0	10.0	0.0	0.0	
		75.0	20.0	0.0	5.0	
	6.2.2 Cervical Instability	13.6	18.2	22.7	45.5	
		81.0	19.0	0.0	0.0	
		66.7	23.8	4.8	4.8	
	6.2.3 Cervical Sprain Strain	36.4	40.9	18.2	4.5	
		76.2	23.8	0.0	0.0	
		57.1	28.6	9.5	4.8	
	6.2.4 Cervicogenic Headache	27.3	40.9	27.3	4.5	
		81.0	19.0	0.0	0.0	

	Level of Mastery	21	14	6	0	1	
6.2.5 Chronic Pain Syndromes	Frequency	22	12	7	3	0	0
	Importance	21	19	2	0	0	
	Level of Mastery	21	10	9	1	1	
6.2.6 Other Disorders of Cervical Spine	Frequency	22	10	9	1	2	0
	Importance	21	15	6	0	0	
	Level of Mastery	21	10	8	2	1	
6.2.7 Temporomandibular Dysfunction	Frequency	22	1	4	6	10	1
	Importance	21	13	6	1	1	
	Level of Mastery	21	8	8	4	1	
6.2.8 Disorders of the Hip	Frequency	22	9	11	1	1	0
	Importance	21	14	7	0	0	
	Level of Mastery	21	11	7	2	1	
6.2.9 Lumbar Disc Pathologies (e.g., DDD)	Frequency	23	16	6	1	0	0
	Importance	22	19	3	0	0	
	Level of Mastery	22	13	7	0	2	
6.2.10 Lumbar Instability	Frequency	23	8	10	2	3	0
	Importance	23	20	3	0	0	
	Level of Mastery	23	15	5	1	2	
6.2.11 Lumbar Spondylosis Spondylolisth	Frequency	23	12	10	1	0	0
	Importance	23	21	2	0	0	
	Level of Mastery	23	13	6	2	2	
6.2.12 Lumbar Strain	Frequency	23	16	3	4	0	0
	Importance	23	20	3	0	0	
	Level of Mastery	23	14	4	2	3	
6.2.13 Other Disorders of the Lumbar Sp	Frequency	23	9	9	3	2	0
	Importance	23	16	7	0	0	
	Level of Mastery	22	13	4	4	1	
6.2.14 Piriformis Syndrome	Frequency	23	6	5	9	3	0
	Importance	23	12	11	0	0	
	Level of Mastery	23	11	8	1	3	
6.2.15 Sacroiliac Dysfunction	Frequency	23	6	7	5	5	0
	Importance	23	15	5	3	0	
	Level of Mastery	23	13	6	2	2	
6.2.16 Other Disorders of the Pelvic Gird	Frequency	23	4	7	7	4	1
	Importance	23	13	9	1	0	
	Level of Mastery	23	13	6	4	0	
6.2.17 Rotator Cuff Pathology	Frequency	22	10	7	4	1	0
	Importance	22	14	8	0	0	
	Level of Mastery	22	10	8	3	1	
6.2.18 Disorders of the Shoulder Comple	Frequency	22	13	5	4	0	0
	Importance	22	16	6	0	0	
	Level of Mastery	22	11	9	1	1	
6.2.19 Rib Dysfunction	Frequency	22	2	2	11	6	1
	Importance	22	13	4	5	0	
	Level of Mastery	22	10	9	2	1	
6.2.20 Thoracic Sprain Strain	Frequency	22	4	8	6	4	0
	Importance	22	14	7	1	0	
	Level of Mastery	22	13	6	2	1	
6.2.21 Other Disorders of the Thoracic Sp	Frequency	22	4	5	9	4	0
	Importance	22	15	5	2	0	
	Level of Mastery	22	13	6	3	0	
6.2.22 Curvature of the spine (e.g., scolio	Frequency	22	6	6	8	2	0
	Importance	22	15	6	1	0	
	Level of Mastery	22	11	8	2	1	
6.2.23 Diastasis recti.	Frequency	22	4	2	5	9	2
	Importance	22	13	5	3	1	
	Level of Mastery	22	9	6	6	1	
6.2.24 Facet dysfunction (cervical, throa	Frequency	22	17	5	0	0	0
	Importance	22	19	2	1	0	
	Level of Mastery	22	14	7	0	1	

	66.7	28.6	0.0	4.8
	54.5	31.8	13.6	0.0
	90.5	9.5	0.0	0.0
	47.6	42.9	4.8	4.8
	45.5	40.9	4.5	9.1
	71.4	28.6	0.0	0.0
	47.6	38.1	9.5	4.8
	4.5	18.2	27.3	45.5
	61.9	28.6	4.8	4.8
	38.1	38.1	19.0	4.8
	40.9	50.0	4.5	4.5
	66.7	33.3	0.0	0.0
	52.4	33.3	9.5	4.8
	69.6	26.1	4.3	0.0
	86.4	13.6	0.0	0.0
	59.1	31.8	0.0	9.1
	34.8	43.5	8.7	13.0
	87.0	13.0	0.0	0.0
	65.2	21.7	4.3	8.7
	52.2	43.5	4.3	0.0
	91.3	8.7	0.0	0.0
	56.5	26.1	8.7	8.7
	69.6	13.0	17.4	0.0
	87.0	13.0	0.0	0.0
	60.9	17.4	8.7	13.0
	39.1	39.1	13.0	8.7
	69.6	30.4	0.0	0.0
	59.1	18.2	18.2	4.5
	26.1	21.7	39.1	13.0
	52.2	47.8	0.0	0.0
	47.8	34.8	4.3	13.0
	26.1	30.4	21.7	21.7
	65.2	21.7	13.0	0.0
	56.5	26.1	8.7	8.7
	17.4	30.4	30.4	17.4
	56.5	39.1	4.3	0.0
	56.5	26.1	17.4	0.0
	45.5	31.8	18.2	4.5
	63.6	36.4	0.0	0.0
	45.5	36.4	13.6	4.5
	59.1	22.7	18.2	0.0
	72.7	27.3	0.0	0.0
	50.0	40.9	4.5	4.5
	9.1	9.1	50.0	27.3
	59.1	18.2	22.7	0.0
	45.5	40.9	9.1	4.5
	18.2	36.4	27.3	18.2
	63.6	31.8	4.5	0.0
	59.1	27.3	9.1	4.5
	18.2	22.7	40.9	18.2
	68.2	22.7	9.1	0.0
	59.1	27.3	13.6	0.0
	27.3	27.3	36.4	9.1
	68.2	27.3	4.5	0.0
	50.0	36.4	9.1	4.5
	18.2	9.1	22.7	40.9
	59.1	22.7	13.6	4.5
	40.9	27.3	27.3	4.5
	77.3	22.7	0.0	0.0
	86.4	9.1	4.5	0.0
	63.6	31.8	0.0	4.5

6.2.25 Operative procedure on spinal str	Frequency	22	4	6	9	3	0
	Importance	22	15	7	0	0	
	Level of Mastery	22	11	7	2	2	
6.2.26 Spinal stenosis.	Frequency	22	11	8	3	0	0
	Importance	22	18	4	0	0	
	Level of Mastery	22	12	8	1	1	

18.2	27.3	40.9	13.6
68.2	31.8	0.0	0.0
50.0	31.8	9.1	9.1
50.0	36.4	13.6	0.0
81.8	18.2	0.0	0.0
54.5	36.4	4.5	4.5

Frequency of Responses in Order of Importance and Frequency (High to Low)

Part 1. Foundation Sciences

				Frequency					Percentage				
				Daily / Very Important / Analysis	Weekly / Moderately Important / Application	Monthly / Little Importance / Recall	Less than once a month / Important / Not	Never	Daily / Very Important / Analysis	Weekly / Moderately Important / Application	Monthly / Little Importance / Recall	Less than once a month / Important / Not	Never
1.2 Clinical Sciences	1.1.2.1 Kinesiology/biomechanics.	Frequency	27	27	0	0	0	100.0	0.0	0.0	0.0	0.0	
		Importance	27	27	0	0	0	100.0	0.0	0.0	0.0	0.0	
		Level of Judgment	27	25	2	0		92.6	7.4	0.0			
1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system.	Frequency	27	27	0	0	0	100	0	0	0	0	
		Importance	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0	
		Level of Judgment	26	23	3	0		88.5	11.5	0.0			
1.1 Foundation Sciences	1.1.1.2 Neuromuscular system.	Frequency	27	27	0	0	0	100.0	0.0	0.0	0.0	0.0	
		Importance	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0	
		Level of Judgment	27	25	2	0		92.6	7.4	0.0			
1.3 Behavioral Sciences	1.3.3.5 Motor control and motor learning.	Frequency	26	26	0	0	0	100.0	0.0	0.0	0.0	0.0	
		Importance	26	25	1	0	0	96.2	3.8	0.0	0.0	0.0	
		Level of Judgment	25	20	5	0		80.0	20.0	0.0			
1.3 Behavioral Sciences	1.3.3.7 Therapeutic exercise.	Frequency	26	26	0	0	0	100.0	0.0	0.0	0.0	0.0	
		Importance	26	25	1	0	0	96.2	3.8	0.0	0.0	0.0	
		Level of Judgment	26	21	5	0		80.8	19.2	0.0			
1.1 Foundation Sciences	1.1.2.2 Neural control of movement.	Frequency	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0	
		Importance	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0	
		Level of Judgment	27	22	5	0		81.5	18.5	0.0			
1.1 Foundation Sciences	1.1.2.4 Locomotion.	Frequency	27	26	1	0	0	96.3	3.7	0.0	0.0	0.0	
		Importance	27	24	3	0	0	88.9	11.1	0.0	0.0	0.0	
		Level of Judgment	27	21	6	0		77.8	22.2	0.0			
1.3 Behavioral Sciences	1.3.3.4 Movement systems impairments.	Frequency	26	25	1	0	0	96.2	3.8	0.0	0.0	0.0	
		Importance	26	26	0	0	0	100.0	0.0	0.0	0.0	0.0	
		Level of Judgment	25	20	5	0		80.0	20.0	0.0			
1.2 Clinical Sciences	1.2.1.1 Signs and symptoms of disease/injury.	Frequency	26	25	0	1	0	96.2	0.0	3.8	0.0	0.0	
		Importance	26	22	4	0	0	84.6	15.4	0.0	0.0	0.0	
		Level of Judgment	26	19	5	2		73.1	19.2	7.7			
1.3 Behavioral Sciences	1.3.3.3 Manual therapy techniques.	Frequency	26	25	1	0	0	96.2	3.8	0.0	0.0	0.0	
		Importance	26	22	4	0	0	84.6	15.4	0.0	0.0	0.0	
		Level of Judgment	26	18	8	0		69.2	30.8	0.0			
1.3 Behavioral Sciences	1.3.1.2 Personal factors (e.g., compliance, body awa	Frequency	26	25	0	1	0	96.2	0.0	3.8	0.0	0.0	
		Importance	26	20	6	0	0	76.9	23.1	0.0	0.0	0.0	
		Level of Judgment	26	17	9	0		65.4	34.6	0.0			
1.2 Clinical Sciences	1.2.1.4 Tissue inflammation, healing, and repair.	Frequency	25	24	1	0	0	96.0	4.0	0.0	0.0	0.0	
		Importance	25	23	2	0	0	92.0	8.0	0.0	0.0	0.0	
		Level of Judgment	25	18	6	1		72.0	24.0	4.0			
1.2 Clinical Sciences	1.2.1.3 Pathokinesiology.	Frequency	25	23	2	0	0	92.0	8.0	0.0	0.0	0.0	
		Importance	25	19	6	0	0	76.0	24.0	0.0	0.0	0.0	
		Level of Judgment	25	16	7	2		64.0	28.0	8.0			
1.2 Clinical Sciences	1.2.1.2 Progression of disease/injury processes.	Frequency	26	23	3	0	0	88.5	11.5	0.0	0.0	0.0	
		Importance	26	20	6	0	0	76.9	23.1	0.0	0.0	0.0	
		Level of Judgment	26	17	7	2		65.4	26.9	7.7			
1.3 Behavioral Sciences	1.3.1.3 Psychological/emotional conditions (e.g., anx	Frequency	26	22	4	0	0	84.6	15.4	0.0	0.0	0.0	
		Importance	26	23	3	0	0	88.5	11.5	0.0	0.0	0.0	
		Level of Judgment	26	16	10	0		61.5	38.5	0.0			
1.3 Behavioral Sciences	1.3.3.1 Biopsychosocial model.	Frequency	26	22	4	0	0	84.6	15.4	0.0	0.0	0.0	
		Importance	25	20	5	0	0	80.0	20.0	0.0	0.0	0.0	
		Level of Judgment	26	15	11	0		57.7	42.3	0.0			
1.3 Behavioral Sciences	1.3.2.2 Peripheral neurogenic/neuropathic pain phys	Frequency	26	21	4	1	0	80.8	15.4	3.8	0.0	0.0	
		Importance	26	23	3	0	0	88.5	11.5	0.0	0.0	0.0	
		Level of Judgment	26	18	8	0		69.2	30.8	0.0			
1.3 Behavioral Sciences	1.3.2.1 Peripheral nociceptive pain physiology.	Frequency	25	20	5	0	0	80.0	20.0	0.0	0.0	0.0	
		Importance	25	21	4	0	0	84.0	16.0	0.0	0.0	0.0	
		Level of Judgment	25	17	8	0		68.0	32.0	0.0			
1.2 Clinical Sciences	1.1.2.3 Ergonomics.	Frequency	27	21	6	0	0	77.8	22.2	0.0	0.0	0.0	

		Importance	26	20	5	1	0	76.9	19.2	3.8	0.0
		Level of Judgment	27	17	10	0		63.0	37.0	0.0	0.0
1.3 Behavioral Sciences	1.3.2.3 Central nervous system/nociplastic pain phys	Frequency	26	20	5	1	0	76.9	19.2	3.8	0.0
		Importance	26	21	5	0	0	80.8	19.2	0.0	0.0
		Level of Judgment	26	21	5	0		80.8	19.2	0.0	
1.3 Behavioral Sciences	1.3.1.1 External environmental factors (e.g., expecte	Frequency	26	20	4	2	0	76.9	15.4	7.7	0.0
		Importance	26	17	8	1	0	65.4	30.8	3.8	0.0
		Level of Judgment	26	13	13	0		50.0	50.0	0.0	
1.3 Behavioral Sciences	1.3.3.2 Exercise physiology across the lifespan.	Frequency	26	19	5	2	0	73.1	19.2	7.7	0.0
		Importance	26	17	8	1	0	65.4	30.8	3.8	0.0
		Level of Judgment	26	11	13	2		42.3	50.0	7.7	
1.3 Behavioral Sciences	1.3.3.8 Models of differential diagnosis and clinical ri	Frequency	26	19	6	0	1	73.1	23.1	0.0	3.8
		Importance	26	16	8	2	0	61.5	30.8	7.7	0.0
		Level of Judgment	24	16	6	2		66.7	25.0	8.3	
1.3 Behavioral Sciences	1.3.3.9 Principles of teaching and learning.	Frequency	26	18	7	1	0	69.2	26.9	3.8	0.0
		Importance	26	19	7	0	0	73.1	26.9	0.0	0.0
		Level of Judgment	26	15	11	0		57.7	42.3	0.0	
1.3 Behavioral Sciences	1.3.1.4 Impact of behavioral health risk factors (e.g.,	Frequency	26	17	7	1	1	65.4	26.9	3.8	3.8
		Importance	26	16	9	1	0	61.5	34.6	3.8	0.0
		Level of Judgment	26	10	14	2		38.5	53.8	7.7	
1.3 Behavioral Sciences	1.3.3.10 Principles of prevention and wellness.	Frequency	26	16	9	1	0	61.5	34.6	3.8	0.0
		Importance	26	17	8	1	0	65.4	30.8	3.8	0.0
		Level of Judgment	26	10	16	0		38.5	61.5	0.0	
1.2 Clinical Sciences	1.2.2.1 Imaging studies.	Frequency	26	15	10	0	1	57.7	38.5	0.0	3.8
		Importance	26	10	14	2	0	38.5	53.8	7.7	0.0
		Level of Judgment	26	9	10	7		34.6	38.5	26.9	
1.4 Critical Inquiry for Evidence-Based Practice	1.4.2 Application of research findings to orthopaedic	Frequency	26	14	9	3	0	53.8	34.6	11.5	0.0
		Importance	26	16	10	0	0	61.5	38.5	0.0	0.0
		Level of Judgment	26	15	9	2		57.7	34.6	7.7	
1.3 Behavioral Sciences	1.3.2.4 Output mechanisms and expressions (e.g., in	Frequency	26	13	11	2	0	50.0	42.3	7.7	0.0
		Importance	26	11	15	0	0	42.3	57.7	0.0	0.0
		Level of Judgment	25	12	11	2		48.0	44.0	8.0	
1.2 Clinical Sciences	1.2.2.2 Pharmacology.	Frequency	26	13	12	0	1	50.0	46.2	0.0	3.8
		Importance	26	7	17	2	0	26.9	65.4	7.7	0.0
		Level of Judgment	26	3	9	14		11.5	34.6	53.8	
1.2 Clinical Sciences	1.2.2.4 Nonsurgical interventional spine procedures	Frequency	26	12	8	5	1	46.2	30.8	19.2	3.8
		Importance	26	12	12	2	0	46.2	46.2	7.7	0.0
		Level of Judgment	26	8	13	5		30.8	50.0	19.2	
1.1 Foundation Sciences	1.1.1.6 Histology (e.g., connective tissue, muscle fibre	Frequency	27	10	12	3	2	37.0	44.4	11.1	7.4
		Importance	27	10	14	3	0	37.0	51.9	11.1	0.0
		Level of Judgment	27	12	10	5		44.4	37.0	18.5	
1.1 Foundation Sciences	1.1.1.5 Human growth and development across the l	Frequency	27	10	11	5	1	37.0	40.7	18.5	3.7
		Importance	27	8	16	3	0	29.6	59.3	11.1	0.0
		Level of Judgment	26	11	12	3		42.3	46.2	11.5	
1.2 Clinical Sciences	1.2.2.5 Spine surgical interventions and their indicati	Frequency	26	9	11	4	2	34.6	42.3	15.4	7.7
		Importance	26	15	11	0	0	57.7	42.3	0.0	0.0
		Level of Judgment	26	10	11	5		38.5	42.3	19.2	
1.1 Foundation Sciences	1.1.1.3 Cardiovascular and pulmonary systems.	Frequency	27	9	13	4	1	33.3	48.1	14.8	3.7
		Importance	27	7	18	2	0	25.9	66.7	7.4	0.0
		Level of Judgment	27	9	14	4		33.3	51.9	14.8	
1.1 Foundation Sciences	1.1.1.4 Integumentary system.	Frequency	27	9	11	5	1	33.3	40.7	18.5	3.7
		Importance	27	7	14	5	1	25.9	51.9	18.5	3.7
		Level of Judgment	26	6	13	7		23.1	50.0	26.9	
1.1 Foundation Sciences	1.1.1.7 Other systems (e.g., endocrine, digestive, gei	Frequency	27	6	14	5	2	22.2	51.9	18.5	7.4
		Importance	27	6	15	6	0	22.2	55.6	22.2	0.0
		Level of Judgment	27	6	13	8		22.2	48.1	29.6	
1.4 Critical Inquiry for Evidence-Based Practice	1.4.1 Appraisal of research findings on orthopaedic s	Frequency	26	5	12	5	3	19.2	46.2	19.2	11.5
		Importance	26	13	12	1	0	50.0	46.2	3.8	0.0
		Level of Judgment	26	12	10	4		46.2	38.5	15.4	
1.3 Behavioral Sciences	1.3.3.6 Theory and application of orthotic, protective	Frequency	26	5	11	8	2	19.2	42.3	30.8	7.7
		Importance	26	6	16	4	0	23.1	61.5	15.4	0.0
		Level of Judgment	26	9	14	3		34.6	53.8	11.5	
1.2 Clinical Sciences	1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrof	Frequency	26	4	12	9	1	15.4	46.2	34.6	3.8
		Importance	26	5	17	4	0	19.2	65.4	15.4	0.0

1.2 Clinical Sciences	Level of Judgment	26	4	10	12			
	1.2.2.6 Developments in genetics/regenerative med	Frequency	26	3	4	5	8	6
	Importance	26	3	12	9	2		
	Level of Judgment	19	4	6	9			

15.4	38.5	46.2		
11.5	15.4	19.2	30.8	23.1
11.5	46.2	34.6	7.7	
21.1	31.6	47.4		

Part 2. Professional Behavior and Part 3. Examination

			Frequency				
			Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. / Beginner	Never
3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques with a high	Frequency	24	24	0	0	0
		Importance	24	24	0	0	0
		Level of Mastery	24	14	7	3	0
3.1.5 Test and Measures	3.1.5.5 Pain.	Frequency	24	24	0	0	0
		Importance	24	23	1	0	0
		Level of Mastery	24	15	5	2	2
3.1.1 History	3.1.1.2.3 Symptom irritability (onset, offset, and ove	Frequency	25	25	0	0	0
		Importance	23	22	1	0	0
		Level of Mastery	25	15	6	2	2
3.2 Evaluation	3.2.2 Developing a working diagnosis, including natu	Frequency	23	23	0	0	0
		Importance	23	22	1	0	0
		Level of Mastery	23	17	3	2	1
3.1.5 Test and Measures	3.1.5.2 Gait, locomotion, and balance.	Frequency	24	24	0	0	0
		Importance	24	22	2	0	0
		Level of Mastery	24	13	8	1	2
3.6 Re-assessment / re-evaluation	3.6.1 Assessing intervention response.	Frequency	22	22	0	0	0
		Importance	22	20	2	0	0
		Level of Mastery	22	16	4	0	2
3.1.5 Test and Measures	3.1.5.12 Motor control and coordination (e.g., asses	Frequency	24	24	0	0	0
		Importance	24	21	3	0	0
		Level of Mastery	24	14	6	3	1
3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and deta	Frequency	24	24	0	0	0
		Importance	24	21	3	0	0
		Level of Mastery	24	13	10	1	0
3.1.2 Interpreting Data from History	3.1.1.2.1 Recognition of contributions from multiple	Frequency	25	25	0	0	0
		Importance	23	20	3	0	0
		Level of Mastery	23	12	8	1	2
3.4 Prognosis	3.4.1 The Orthopaedic Spine Physical Therapist estat	Frequency	22	22	0	0	0
		Importance	22	19	3	0	0
		Level of Mastery	22	13	7	2	0
3.3. Diagnosis	3.3.1 Organizing examination findings into clusters, s	Frequency	21	21	0	0	0
		Importance	21	18	3	0	0
		Level of Mastery	21	16	4	1	0
3.1.2 Interpreting Data from History	3.1.2.3 Identifying chief and secondary problems.	Frequency	24	24	0	0	0
		Importance	24	20	4	0	0
		Level of Mastery	23	13	6	3	1
3.1.1 History	3.1.3.3 Considers the nature, severity, and irritability	Frequency	24	24	0	0	0
		Importance	24	20	4	0	0
		Level of Mastery	24	15	8	0	1
3.1.5 Test and Measures	3.1.5.19 Posture (e.g., assessment of body or body s	Frequency	24	24	0	0	0
		Importance	24	20	4	0	0
		Level of Mastery	24	15	4	4	1
3.5 Intervention	3.5.4.1 Concerning diagnosis, prognosis, treatment, i	Frequency	22	22	0	0	0
		Importance	22	18	4	0	0
		Level of Mastery	22	13	6	3	0
3.5 Intervention	3.5.4.3 Addressing pain physiology and dose respons	Frequency	22	22	0	0	0
		Importance	22	18	4	0	0
		Level of Mastery	22	14	5	3	0
3.1.5 Test and Measures	3.1.5.17 Muscle performance (e.g., strength, power,	Frequency	24	24	0	0	0
		Importance	24	19	5	0	0
		Level of Mastery	24	14	5	3	2

Percentage				
Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. / Beginner	Never
100.0	0.0	0.0	0.0	0.0
100.0	0.0	0.0	0.0	0.0
58.3	29.2	12.5	0.0	0.0
100.0	0.0	0.0	0.0	0.0
95.8	4.2	0.0	0.0	0.0
62.5	20.8	8.3	8.3	0.0
100.0	0.0	0.0	0.0	0.0
95.7	4.3	0.0	0.0	0.0
60.0	24.0	8.0	8.0	0.0
100.0	0.0	0.0	0.0	0.0
95.7	4.3	0.0	0.0	0.0
73.9	13.0	8.7	4.3	0.0
100.0	0.0	0.0	0.0	0.0
91.7	8.3	0.0	0.0	0.0
54.2	33.3	4.2	8.3	0.0
100.0	0.0	0.0	0.0	0.0
90.9	9.1	0.0	0.0	0.0
72.7	18.2	0.0	9.1	0.0
100.0	0.0	0.0	0.0	0.0
87.5	12.5	0.0	0.0	0.0
58.3	25.0	12.5	4.2	0.0
100.0	0.0	0.0	0.0	0.0
87.5	12.5	0.0	0.0	0.0
54.2	41.7	4.2	0.0	0.0
100.0	0.0	0.0	0.0	0.0
87.0	13.0	0.0	0.0	0.0
52.2	34.8	4.3	8.7	0.0
100.0	0.0	0.0	0.0	0.0
86.4	13.6	0.0	0.0	0.0
59.1	31.8	9.1	0.0	0.0
100.0	0.0	0.0	0.0	0.0
85.7	14.3	0.0	0.0	0.0
76.2	19.0	4.8	0.0	0.0
100.0	0.0	0.0	0.0	0.0
83.3	16.7	0.0	0.0	0.0
56.5	26.1	13.0	4.3	0.0
100.0	0.0	0.0	0.0	0.0
83.3	16.7	0.0	0.0	0.0
62.5	33.3	0.0	4.2	0.0
100.0	0.0	0.0	0.0	0.0
83.3	16.7	0.0	0.0	0.0
62.5	16.7	16.7	4.2	0.0
100.0	0.0	0.0	0.0	0.0
81.8	18.2	0.0	0.0	0.0
59.1	27.3	13.6	0.0	0.0
100.0	0.0	0.0	0.0	0.0
81.8	18.2	0.0	0.0	0.0
63.6	22.7	13.6	0.0	0.0
100.0	0.0	0.0	0.0	0.0
79.2	20.8	0.0	0.0	0.0
58.3	20.8	12.5	8.3	0.0

3.1.5 Test and Measures	3.1.5.22 Soft tissue quality (e.g., mobility, provocative)	Frequency	24	24	0	0	0	100.0	0.0	0.0	0.0
		Importance	24	18	6	0	0	75.0	25.0	0.0	0.0
		Level of Mastery	24	15	6	2	1	62.5	25.0	8.3	4.2
3.1.1 History	3.1.1.2.6 Readiness for change.	Frequency	25	24	1	0	0	96.0	4.0	0.0	0.0
		Importance	25	21	4	0	0	84.0	16.0	0.0	0.0
		Level of Mastery	25	12	9	4	0	48.0	36.0	16.0	0.0
3.1.1 History	3.1.1.4.1 Physical function.	Frequency	25	24	1	0	0	96.0	4.0	0.0	0.0
		Importance	25	21	4	0	0	84.0	16.0	0.0	0.0
		Level of Mastery	25	12	7	4	2	48.0	28.0	16.0	8.0
3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms.	Frequency	25	24	1	0	0	96.0	4.0	0.0	0.0
		Importance	23	19	4	0	0	82.6	17.4	0.0	0.0
		Level of Mastery	24	13	8	1	2	54.2	33.3	4.2	8.3
3.1.1 History	3.1.1.2.5 Current and previous therapeutic intervent	Frequency	25	24	1	0	0	96.0	4.0	0.0	0.0
		Importance	25	20	5	0	0	80.0	20.0	0.0	0.0
		Level of Mastery	25	13	8	2	2	52.0	32.0	8.0	8.0
3.1.1 History	3.1.1.6 Obtaining medical/surgical history data.	Frequency	25	24	1	0	0	96.0	4.0	0.0	0.0
		Importance	25	20	5	0	0	80.0	20.0	0.0	0.0
		Level of Mastery	25	11	6	6	2	44.0	24.0	24.0	8.0
3.1.2 Interpreting Data from History	3.1.2.1 Developing a working hypothesis of the phys	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
		Importance	22	22	0	0	0	100.0	0.0	0.0	0.0
		Level of Mastery	23	14	7	1	1	60.9	30.4	4.3	4.3
3.1.5 Test and Measures	3.1.5.14 Joint integrity (i.e., mobility assessment of j	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
		Importance	24	24	0	0	0	100.0	0.0	0.0	0.0
		Level of Mastery	24	16	5	2	1	66.7	20.8	8.3	4.2
3.1.2 Interpreting Data from History	3.1.2.2 Assessing "red flags" and determining need t	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
		Importance	24	23	1	0	0	95.8	4.2	0.0	0.0
		Level of Mastery	23	14	8	0	1	60.9	34.8	0.0	4.3
3.1.5 Test and Measures	3.1.5.1 Ergonomics and body mechanics.	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
		Importance	24	21	3	0	0	87.5	12.5	0.0	0.0
		Level of Mastery	23	12	8	2	1	52.2	34.8	8.7	4.3
3.1.4 Systems Review	3.1.3.4 Prioritizes areas, movements, and functional	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
		Importance	24	20	4	0	0	83.3	16.7	0.0	0.0
		Level of Mastery	23	14	8	0	1	60.9	34.8	0.0	4.3
3.1.5 Test and Measures	3.1.5.23 Task-specific activities (e.g., lifting, bending,	Frequency	24	23	1	0	0	95.8	4.2	0.0	0.0
		Importance	24	18	6	0	0	75.0	25.0	0.0	0.0
		Level of Mastery	24	14	6	4	0	58.3	25.0	16.7	0.0
3.2 Evaluation	3.2.6 Interpreting data from history and systems rev	Frequency	23	22	1	0	0	95.7	4.3	0.0	0.0
		Importance	23	19	4	0	0	82.6	17.4	0.0	0.0
		Level of Mastery	23	17	3	3	0	73.9	13.0	13.0	0.0
3.1.5 Test and Measures	3.1.5.3 Work (job/school/play), community and leisu	Frequency	23	22	1	0	0	95.7	4.3	0.0	0.0
		Importance	23	18	5	0	0	78.3	21.7	0.0	0.0
		Level of Mastery	23	13	8	1	1	56.5	34.8	4.3	4.3
3.6 Re-assessment / re-evaluation	3.6.3 Assessing change.	Frequency	22	21	1	0	0	95.5	4.5	0.0	0.0
		Importance	22	20	2	0	0	90.9	9.1	0.0	0.0
		Level of Mastery	22	13	7	0	2	59.1	31.8	0.0	9.1
3.5 Intervention	3.5.14 Non-thrust mobilization/manipulation.	Frequency	22	21	1	0	0	95.5	4.5	0.0	0.0
		Importance	22	18	4	0	0	81.8	18.2	0.0	0.0
		Level of Mastery	22	14	7	0	1	63.6	31.8	0.0	4.5
3.5 Intervention	3.5.1 Ergonomics (influences of environment and occ	Frequency	21	20	1	0	0	95.2	4.8	0.0	0.0
		Importance	21	15	6	0	0	71.4	28.6	0.0	0.0
		Level of Mastery	21	10	8	3	0	47.6	38.1	14.3	0.0
2.3 Communication	2.3.1 Empowering patients with orthopaedic spine c	Frequency	26	24	2	0	0	92.3	7.7	0.0	0.0
		Importance	26	26	0	0	0	100.0	0.0	0.0	0.0
		Level of Mastery	25	13	10	2	0	52.0	40.0	8.0	0.0
3.1.1 History	3.1.1.2.4 Onset of condition (e.g., mechanism of inju	Frequency	25	23	2	0	0	92.0	8.0	0.0	0.0
		Importance	24	22	2	0	0	91.7	8.3	0.0	0.0
		Level of Mastery	25	12	10	1	2	48.0	40.0	4.0	8.0
3.1.1 History	3.1.1.3 Obtaining data regarding functional status an	Frequency	25	23	2	0	0	92.0	8.0	0.0	0.0
		Importance	25	19	6	0	0	76.0	24.0	0.0	0.0
		Level of Mastery	25	11	8	4	2	44.0	32.0	16.0	8.0
3.1.1 History	3.1.1.8 Obtaining data regarding social history (e.g.,	Frequency	25	23	2	0	0	92.0	8.0	0.0	0.0
		Importance	25	18	7	0	0	72.0	28.0	0.0	0.0
		Level of Mastery	25	11	10	4	0	44.0	40.0	16.0	0.0
3.1.5 Test and Measures	3.1.5.9 Neurodynamics.	Frequency	24	22	2	0	0	91.7	8.3	0.0	0.0

		Importance	24	22	2	0	0	91.7	8.3	0.0	0.0
		Level of Mastery	22	15	6	0	1	68.2	27.3	0.0	4.5
3.1.5 Test and Measures	3.1.5.21 Flexibility (e.g., length, stiffness).	Frequency	24	22	2	0	0	91.7	8.3	0.0	0.0
		Importance	24	18	5	1	0	75.0	20.8	4.2	0.0
		Level of Mastery	24	15	5	2	2	62.5	20.8	8.3	8.3
3.1.1 History	3.1.1.5 Obtaining data regarding social/health habits	Frequency	24	22	2	0	0	91.7	8.3	0.0	0.0
		Importance	25	18	7	0	0	72.0	28.0	0.0	0.0
		Level of Mastery	25	11	10	4	0	44.0	40.0	16.0	0.0
3.2 Evaluation	3.2.1 Synthesizing data from history, systems review	Frequency	23	21	2	0	0	91.3	8.7	0.0	0.0
		Importance	22	17	5	0	0	77.3	22.7	0.0	0.0
		Level of Mastery	22	13	6	2	1	59.1	27.3	9.1	4.5
3.6 Re-assessment / re-evaluation	3.6.2 Analyzing significance of changes.	Frequency	22	20	2	0	0	90.9	9.1	0.0	0.0
		Importance	22	20	2	0	0	90.9	9.1	0.0	0.0
		Level of Mastery	21	12	7	1	1	57.1	33.3	4.8	4.8
3.5 Intervention	3.5.26 Motor coordination.	Frequency	22	20	2	0	0	90.9	9.1	0.0	0.0
		Importance	22	19	3	0	0	86.4	13.6	0.0	0.0
		Level of Mastery	21	11	7	2	1	52.4	33.3	9.5	4.8
3.5 Intervention	3.5.27 Muscle performance exercises (e.g., strength,	Frequency	22	20	1	1	0	90.9	4.5	4.5	0.0
		Importance	22	17	5	0	0	77.3	22.7	0.0	0.0
		Level of Mastery	22	11	8	1	2	50.0	36.4	4.5	9.1
3.5 Intervention	3.5.2 Education/training of functional activities.	Frequency	21	19	2	0	0	90.5	9.5	0.0	0.0
		Importance	21	17	4	0	0	81.0	19.0	0.0	0.0
		Level of Mastery	17	13	4	0	0	76.5	23.5	0.0	0.0
3.5 Intervention	3.5.3 Education/training of activities of daily living (e	Frequency	21	19	2	0	0	90.5	9.5	0.0	0.0
		Importance	21	17	4	0	0	81.0	19.0	0.0	0.0
		Level of Mastery	17	11	6	0	0	64.7	35.3	0.0	0.0
3.1.1 History	3.1.1.4.2 Psychosocial factors (e.g., anxiety, depressi	Frequency	25	22	2	1	0	88.0	8.0	4.0	0.0
		Importance	25	23	2	0	0	92.0	8.0	0.0	0.0
		Level of Mastery	25	15	7	3	0	60.0	28.0	12.0	0.0
3.1.1 History	3.1.1.2.7 Goals of the patient, family, and caregiver.	Frequency	25	22	3	0	0	88.0	12.0	0.0	0.0
		Importance	25	21	4	0	0	84.0	16.0	0.0	0.0
		Level of Mastery	25	14	6	3	2	56.0	24.0	12.0	8.0
3.1.1 History	3.1.1.1.3 Ergonomic considerations.	Frequency	25	22	2	1	0	88.0	8.0	4.0	0.0
		Importance	25	18	6	1	0	72.0	24.0	4.0	0.0
		Level of Mastery	25	7	12	4	2	28.0	48.0	16.0	8.0
3.1.1 History	3.1.1.10 Obtaining data on living environment and c	Frequency	25	22	2	1	0	88.0	8.0	4.0	0.0
		Importance	25	12	12	1	0	48.0	48.0	4.0	0.0
		Level of Mastery	25	8	10	4	3	32.0	40.0	16.0	12.0
3.1.1 History	3.1.1.9 Obtaining general demographic information.	Frequency	25	22	3	0	0	88.0	12.0	0.0	0.0
		Importance	25	11	13	1	0	44.0	52.0	4.0	0.0
		Level of Mastery	25	7	11	4	3	28.0	44.0	16.0	12.0
3.1.5 Test and Measures	3.1.5.20 Tissue-specific diagnostic tests (i.e., special	Frequency	24	21	3	0	0	87.5	12.5	0.0	0.0
		Importance	24	13	10	1	0	54.2	41.7	4.2	0.0
		Level of Mastery	24	13	8	2	1	54.2	33.3	8.3	4.2
3.5 Intervention	3.5.5 Injury prevention and wellness promotion (e.g.	Frequency	22	19	3	0	0	86.4	13.6	0.0	0.0
		Importance	22	18	4	0	0	81.8	18.2	0.0	0.0
		Level of Mastery	22	11	7	3	1	50.0	31.8	13.6	4.5
2.1 Professional Behavior	2.1.2 Using patient-centered ethics and values in cor	Frequency	26	22	2	2	0	84.6	7.7	7.7	0.0
		Importance	26	23	3	0	0	88.5	11.5	0.0	0.0
		Level of Mastery	26	11	9	4	2	42.3	34.6	15.4	7.7
3.1.1 History	3.1.1.1.2 Activity requirements/occupational deman	Frequency	25	21	1	0	3	84.0	4.0	0.0	12.0
		Importance	25	18	6	1	0	72.0	24.0	4.0	0.0
		Level of Mastery	25	6	12	3	4	24.0	48.0	12.0	16.0
3.1.1 History	3.1.1.7 Obtaining data regarding medication usage p	Frequency	25	21	4	0	0	84.0	16.0	0.0	0.0
		Importance	25	15	9	1	0	60.0	36.0	4.0	0.0
		Level of Mastery	25	7	13	3	2	28.0	52.0	12.0	8.0
3.5 Intervention	3.5.4.11 Graded activity/exercise.	Frequency	22	18	2	2	0	81.8	9.1	9.1	0.0
		Importance	22	17	5	0	0	77.3	22.7	0.0	0.0
		Level of Mastery	22	12	7	2	1	54.5	31.8	9.1	4.5
3.5 Intervention	3.5.4.2 Using the biopsychosocial/biomedical model	Frequency	22	18	4	0	0	81.8	18.2	0.0	0.0
		Importance	22	16	6	0	0	72.7	27.3	0.0	0.0
		Level of Mastery	22	12	5	5	0	54.5	22.7	22.7	0.0
2.6 Critical Inquiry and Evidence-Based Practice	2.6.1 Applying principles of evidence-based practice	Frequency	26	21	3	2	0	80.8	11.5	7.7	0.0
		Importance	26	21	5	0	0	80.8	19.2	0.0	0.0

		Level of Mastery	26	12	10	3	1		46.2	38.5	11.5	3.8
3.1.4 Systems Review	3.1.4.1 Performing systems review to identify the im	Frequency	24	19	4	1	0		79.2	16.7	4.2	0.0
		Importance	23	16	7	0	0		69.6	30.4	0.0	0.0
		Level of Mastery	23	9	10	2	2		39.1	43.5	8.7	8.7
3.2 Evaluation	3.2.5 Considering implications of exam findings on a	Frequency	23	18	5	0	0		78.3	21.7	0.0	0.0
		Importance	23	14	9	0	0		60.9	39.1	0.0	0.0
		Level of Mastery	23	14	5	4	0		60.9	21.7	17.4	0.0
3.6 Re-assessment / re-evaluation	3.6.4 Re-examining/implementing a modified plan of	Frequency	22	17	4	1	0		77.3	18.2	4.5	0.0
		Importance	22	18	3	1	0		81.8	13.6	4.5	0.0
		Level of Mastery	22	13	7	0	2		59.1	31.8	0.0	9.1
3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity and participa	Frequency	22	17	4	1	0		77.3	18.2	4.5	0.0
		Importance	22	17	4	1	0		77.3	18.2	4.5	0.0
		Level of Mastery	22	10	7	4	1		45.5	31.8	18.2	4.5
3.1.1 History	3.1.1.1.1 Current and prior work.	Frequency	25	19	4	1	1		76.0	16.0	4.0	4.0
		Importance	25	17	7	1	0		68.0	28.0	4.0	0.0
		Level of Mastery	25	7	12	4	2		28.0	48.0	16.0	8.0
3.1.5 Test and Measures	3.1.5.18 Neuromotor development and sensory inte	Frequency	24	18	4	1	1		75.0	16.7	4.2	4.2
		Importance	24	14	9	1	0		58.3	37.5	4.2	0.0
		Level of Mastery	23	10	9	3	1		43.5	39.1	13.0	4.3
3.2 Evaluation	3.2.3 Incorporating data from ancillary testing (e.g., i	Frequency	23	17	6	0	0		73.9	26.1	0.0	0.0
		Importance	23	12	10	1	0		52.2	43.5	4.3	0.0
		Level of Mastery	20	10	10	0	0		50.0	50.0	0.0	0.0
3.5 Intervention	3.5.4.13 Neural mobilization (e.g., nerve gliding).	Frequency	22	16	5	0	1		72.7	22.7	0.0	4.5
		Importance	22	19	2	1	0		86.4	9.1	4.5	0.0
		Level of Mastery	22	10	8	3	1		45.5	36.4	13.6	4.5
3.1.5 Test and Measures	3.1.5.10 Sensory integrity (e.g., assessment of super	Frequency	24	17	7	0	0		70.8	29.2	0.0	0.0
		Importance	24	21	3	0	0		87.5	12.5	0.0	0.0
		Level of Mastery	21	15	4	0	2		71.4	19.0	0.0	9.5
3.5 Intervention	3.5.4.4 Addressing prevention and wellness.	Frequency	22	15	7	0	0		68.2	31.8	0.0	0.0
		Importance	22	17	5	0	0		77.3	22.7	0.0	0.0
		Level of Mastery	22	12	7	3	0		54.5	31.8	13.6	0.0
3.7 Outcomes Assessment	3.7.2 Assessing patient satisfaction.	Frequency	22	15	7	0	0		68.2	31.8	0.0	0.0
		Importance	22	17	5	0	0		77.3	22.7	0.0	0.0
		Level of Mastery	22	11	8	2	1		50.0	36.4	9.1	4.5
3.1.5 Test and Measures	3.1.5.11 Reflex integrity (e.g., assessment of normal	Frequency	24	16	8	0	0		66.7	33.3	0.0	0.0
		Importance	24	22	2	0	0		91.7	8.3	0.0	0.0
		Level of Mastery	24	15	4	3	2		62.5	16.7	12.5	8.3
3.1.5 Test and Measures	3.1.5.13 Biopsychosocial functioning (e.g., depressio	Frequency	24	16	7	0	1		66.7	29.2	0.0	4.2
		Importance	24	17	7	0	0		70.8	29.2	0.0	0.0
		Level of Mastery	24	11	9	4	0		45.8	37.5	16.7	0.0
3.5 Intervention	3.5.9 Graded exposure.	Frequency	22	14	6	2	0		63.6	27.3	9.1	0.0
		Importance	22	18	4	0	0		81.8	18.2	0.0	0.0
		Level of Mastery	22	12	8	1	1		54.5	36.4	4.5	4.5
3.6 Re-assessment / re-evaluation	3.6.5 Confirming/modifying goals.	Frequency	22	14	7	1	0		63.6	31.8	4.5	0.0
		Importance	22	18	4	0	0		81.8	18.2	0.0	0.0
		Level of Mastery	22	12	7	1	2		54.5	31.8	4.5	9.1
3.5 Intervention	3.5.16 Soft tissue mobilization (e.g., connective tissu	Frequency	22	14	7	0	1		63.6	31.8	0.0	4.5
		Importance	22	17	5	0	0		77.3	22.7	0.0	0.0
		Level of Mastery	22	13	6	2	1		59.1	27.3	9.1	4.5
3.5 Intervention	3.5.4.20 Directional preference exercises/activities.	Frequency	22	14	7	1	0		63.6	31.8	4.5	0.0
		Importance	22	14	7	1	0		63.6	31.8	4.5	0.0
		Level of Mastery	22	11	8	2	1		50.0	36.4	9.1	4.5
3.1.5 Test and Measures	3.1.5.15 Community, home, and work barriers.	Frequency	24	15	7	0	2		62.5	29.2	0.0	8.3
		Importance	24	14	8	2	0		58.3	33.3	8.3	0.0
		Level of Mastery	24	8	10	6	0		33.3	41.7	25.0	0.0
3.5 Intervention	3.5.8 Pain neuroscience education.	Frequency	22	13	8	1	0		59.1	36.4	4.5	0.0
		Importance	22	21	1	0	0		95.5	4.5	0.0	0.0
		Level of Mastery	22	11	9	1	1		50.0	40.9	4.5	4.5
3.5 Intervention	3.5.25 Aerobic capacity and endurance exercises.	Frequency	22	13	4	4	1		59.1	18.2	18.2	4.5
		Importance	22	14	8	0	0		63.6	36.4	0.0	0.0
		Level of Mastery	22	6	11	3	2		27.3	50.0	13.6	9.1
3.1.5 Test and Measures	3.1.5.6 Anthropometric characteristics (e.g., edema,	Frequency	24	14	7	3	0		58.3	29.2	12.5	0.0
		Importance	24	10	14	0	0		41.7	58.3	0.0	0.0
		Level of Mastery	24	8	10	5	1		33.3	41.7	20.8	4.2

2.2 Leadership	2.2.3 Modeling and facilitating the translation of evic	Frequency	26	15	4	5	2	57.7	15.4	19.2	7.7
		Importance	26	19	6	1	0	73.1	23.1	3.8	0.0
		Level of Mastery	26	13	12	1	0	50.0	46.2	3.8	0.0
3.7 Outcomes Assessment	3.7.3 Assessing promotion of primary and secondary	Frequency	22	12	5	5	0	54.5	22.7	22.7	0.0
		Importance	22	14	7	1	0	63.6	31.8	4.5	0.0
		Level of Mastery	22	12	6	3	1	54.5	27.3	13.6	4.5
3.5 Intervention	3.5.17 Mobilization with movement.	Frequency	22	12	8	2	0	54.5	36.4	9.1	0.0
		Importance	22	13	9	0	0	59.1	40.9	0.0	0.0
		Level of Mastery	22	10	9	2	1	45.5	40.9	9.1	4.5
3.1.5 Test and Measures	3.1.5.4 Adaptive and supportive devices (e.g., taping	Frequency	24	13	5	5	1	54.2	20.8	20.8	4.2
		Importance	24	9	14	1	0	37.5	58.3	4.2	0.0
		Level of Mastery	24	6	13	4	1	25.0	54.2	16.7	4.2
2.4 Advocacy	2.4.1 Promoting the orthopaedic spine physical ther:	Frequency	26	14	7	5	0	53.8	26.9	19.2	0.0
		Importance	25	17	6	2	0	68.0	24.0	8.0	0.0
		Level of Mastery	26	14	8	3	1	53.8	30.8	11.5	3.8
3.7 Outcomes Assessment	3.7.4 Assessing improvement of patientâ€™s/clientâ€™	Frequency	22	11	9	2	0	50.0	40.9	9.1	0.0
		Importance	22	15	6	1	0	68.2	27.3	4.5	0.0
		Level of Mastery	22	11	7	3	1	50.0	31.8	13.6	4.5
3.7 Outcomes Assessment	3.7.5 Using applicable, evidence-based outcomes me	Frequency	22	11	7	4	0	50.0	31.8	18.2	0.0
		Importance	22	13	9	0	0	59.1	40.9	0.0	0.0
		Level of Mastery	22	10	7	3	2	45.5	31.8	13.6	9.1
3.5 Intervention	3.5.6 Sleep hygiene education (e.g., sleep schedules,	Frequency	22	11	9	2	0	50.0	40.9	9.1	0.0
		Importance	22	12	10	0	0	54.5	45.5	0.0	0.0
		Level of Mastery	22	6	10	6	0	27.3	45.5	27.3	0.0
3.5 Intervention	3.5.15 Thrust mobilization/manipulation.	Frequency	22	10	9	2	1	45.5	40.9	9.1	4.5
		Importance	22	17	4	1	0	77.3	18.2	4.5	0.0
		Level of Mastery	22	16	5	1	0	72.7	22.7	4.5	0.0
3.5 Intervention	3.5.18 Muscle energy techniques.	Frequency	22	10	7	4	1	45.5	31.8	18.2	4.5
		Importance	22	11	9	2	0	50.0	40.9	9.1	0.0
		Level of Mastery	22	9	9	3	1	40.9	40.9	13.6	4.5
2.2 Leadership	2.2.4 Acting as an expert resource for peers in the cli	Frequency	26	11	12	2	1	42.3	46.2	7.7	3.8
		Importance	26	21	5	0	0	80.8	19.2	0.0	0.0
		Level of Mastery	26	19	6	1	0	73.1	23.1	3.8	0.0
3.1.5 Test and Measures	3.1.5.16 Integumentary integrity.	Frequency	24	10	8	4	1	41.7	33.3	16.7	4.2
		Importance	24	9	13	2	0	37.5	54.2	8.3	0.0
		Level of Mastery	24	8	10	4	2	33.3	41.7	16.7	8.3
3.1.1 History	3.1.1.1.4 Utilization of adaptive and supportive devic	Frequency	25	10	12	2	1	40.0	48.0	8.0	4.0
		Importance	25	9	14	2	0	36.0	56.0	8.0	0.0
		Level of Mastery	25	5	12	7	1	20.0	48.0	28.0	4.0
3.2 Evaluation	3.2.4 Referring patient/client to other health care pr	Frequency	23	9	10	4	0	39.1	43.5	17.4	0.0
		Importance	23	20	3	0	0	87.0	13.0	0.0	0.0
		Level of Mastery	23	11	8	3	1	47.8	34.8	13.0	4.3
2.2 Leadership	2.2.2 Planning, directing, organizing, and managing h	Frequency	26	10	3	7	3	38.5	11.5	26.9	11.5
		Importance	25	9	12	4	0	36.0	48.0	16.0	0.0
		Level of Mastery	25	7	13	3	2	28.0	52.0	12.0	8.0
3.1.5 Test and Measures	3.1.5.8 Aerobic capacity and endurance (e.g., dyspne	Frequency	24	9	9	5	1	37.5	37.5	20.8	4.2
		Importance	24	13	11	0	0	54.2	45.8	0.0	0.0
		Level of Mastery	24	6	12	5	1	25.0	50.0	20.8	4.2
2.3 Communication	2.3.2 Facilitating collaborative and multidisciplinary t	Frequency	26	9	14	3	0	34.6	53.8	11.5	0.0
		Importance	26	20	6	0	0	76.9	23.1	0.0	0.0
		Level of Mastery	26	9	14	1	2	34.6	53.8	3.8	7.7
3.1.5 Test and Measures	3.1.5.7 Circulation (e.g., vertebral artery examinatio	Frequency	24	8	12	4	0	33.3	50.0	16.7	0.0
		Importance	24	17	7	0	0	70.8	29.2	0.0	0.0
		Level of Mastery	24	9	9	5	1	37.5	37.5	20.8	4.2
3.5 Intervention	3.5.19 Traction/distraction.	Frequency	22	7	9	4	2	31.8	40.9	18.2	9.1
		Importance	22	8	13	1	0	36.4	59.1	4.5	0.0
		Level of Mastery	22	9	8	4	1	40.9	36.4	18.2	4.5
3.6 Re-assessment / re-evaluation	3.6.6 Making referrals to other providers as needed.	Frequency	22	6	7	9	0	27.3	31.8	40.9	0.0
		Importance	22	14	8	0	0	63.6	36.4	0.0	0.0
		Level of Mastery	21	9	8	4	0	42.9	38.1	19.0	0.0
3.5 Intervention	3.5.10 Graded motor imagery.	Frequency	22	6	8	5	3	27.3	36.4	22.7	13.6
		Importance	22	11	10	1	0	50.0	45.5	4.5	0.0
		Level of Mastery	22	9	9	2	2	40.9	40.9	9.1	9.1
3.5 Intervention	3.5.4.12 Protective, adaptive or supportive device or	Frequency	22	6	11	4	1	27.3	50.0	18.2	4.5

		Importance	22	7	14	1	0	
		Level of Mastery	19	6	11	0	2	
2.1 Professional Behavior	2.1.1 Consulting with and/or educating peers, colleagues	Frequency	26	7	12	5	2	
		Importance	26	18	8	0	0	
		Level of Mastery	25	12	9	4	0	
2.5 Education	2.5.3 Educating the public regarding spine conditions	Frequency	26	7	6	8	5	
		Importance	26	14	11	1	0	
		Level of Mastery	26	5	17	4	0	
2.1 Professional Behavior	2.2.1 Representing orthopaedic spine physical therapy	Frequency	26	6	5	9	6	
		Importance	26	14	11	1	0	
		Level of Mastery	26	13	9	3	1	
3.5 Intervention	3.5.7 Nutritional education.	Frequency	22	5	11	4	2	
		Importance	22	8	13	1	0	
		Level of Mastery	22	4	11	6	1	
3.5 Intervention	3.5.28.2 Mindfulness.	Frequency	22	5	7	4	3	3
		Importance	22	7	13	2	0	
		Level of Mastery	21	0	12	7	2	
2.5 Education	2.5.4 Educating other health care professionals and students	Frequency	26	5	7	9	5	
		Importance	26	14	11	1	0	
		Level of Mastery	26	8	13	5	0	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.3 Evaluating the efficacy and effectiveness of exercises	Frequency	26	5	10	5	5	1
		Importance	26	8	17	1	0	
		Level of Mastery	26	9	14	1	2	
3.5 Intervention	3.5.4.21 Electro-therapeutic modalities (e.g., TENS, N	Frequency	22	4	3	6	6	3
		Importance	22	5	6	9	2	
		Level of Mastery	15	7	5	0	3	
3.5 Intervention	3.5.4.22 Thermo-therapeutic modalities (e.g., heat, i	Frequency	22	4	5	5	6	2
		Importance	22	3	7	9	3	
		Level of Mastery	22	4	6	9	3	
3.5 Intervention	3.5.28.1 Meditation.	Frequency	22	3	4	7	3	5
		Importance	22	6	13	3	0	
		Level of Mastery	21	0	12	6	3	
2.1 Professional Behavior	2.1.4 Maintaining state-of-the-art knowledge and skills	Frequency	26	3	7	10	6	
		Importance	26	17	9	0	0	
		Level of Mastery	26	7	17	1	1	
2.4 Advocacy	2.4.2 Advocating for orthopaedic spine physical therapy	Frequency	26	3	1	8	11	3
		Importance	26	12	13	1	0	
		Level of Mastery	26	11	8	4	3	
2.5 Education	2.5.2 Promoting awareness and benefits of fellowship	Frequency	26	3	3	13	7	
		Importance	26	11	14	1	0	
		Level of Mastery	26	8	12	6	0	
2.1 Professional Behavior	2.1.3 Maintaining active participation in professional	Frequency	26	3	4	10	8	1
		Importance	26	8	16	2	0	
		Level of Mastery	26	6	9	7	4	
3.5 Intervention	3.5.28.3 Hypnosis.	Frequency	22	1	0	0	1	20
		Importance	21	0	1	3	17	
		Level of Mastery	18	2	2	1	13	
2.5 Education	2.5.1 Contributing to the professional development of	Frequency	26	1	14	9	2	
		Importance	26	17	9	0	0	
		Level of Mastery	26	15	8	2	1	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.4 Identifying research needs within the field of o	Frequency	26	1	3	7	14	1
		Importance	26	8	15	3	0	
		Level of Mastery	26	8	12	4	2	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.2 Contributing to the body of evidence in orthop	Frequency	26	0	2	0	19	5
		Importance	26	8	15	3	0	
		Level of Mastery	26	7	12	4	3	
3.5 Intervention	3.5.24 Dry needling.	Frequency	21	0	3	3	1	14
		Importance	21	2	8	4	7	
		Level of Mastery	20	6	2	3	9	
3.5 Intervention	3.5.23 Photo-therapeutic modalities (e.g., laser).	Frequency	22	0	2	4	4	12
		Importance	22	0	3	8	11	
		Level of Mastery	21	2	3	4	12	

				31.8	63.6	4.5	0.0	
				31.6	57.9	0.0	10.5	
				26.9	46.2	19.2	7.7	
				69.2	30.8	0.0	0.0	
				48.0	36.0	16.0	0.0	
				26.9	23.1	30.8	19.2	
				53.8	42.3	3.8	0.0	
				19.2	65.4	15.4	0.0	
				23.1	19.2	34.6	23.1	
				53.8	42.3	3.8	0.0	
				50.0	34.6	11.5	3.8	
				22.7	50.0	18.2	9.1	
				36.4	59.1	4.5	0.0	
				18.2	50.0	27.3	4.5	
				22.7	31.8	18.2	13.6	13.6
				31.8	59.1	9.1	0.0	
				0.0	57.1	33.3	9.5	
				19.2	26.9	34.6	19.2	
				53.8	42.3	3.8	0.0	
				30.8	50.0	19.2	0.0	
				19.2	38.5	19.2	19.2	3.8
				30.8	65.4	3.8	0.0	
				34.6	53.8	3.8	7.7	
				18.2	13.6	27.3	27.3	13.6
				22.7	27.3	40.9	9.1	
				46.7	33.3	0.0	20.0	
				18.2	22.7	22.7	27.3	9.1
				13.6	31.8	40.9	13.6	
				18.2	27.3	40.9	13.6	
				13.6	18.2	31.8	13.6	22.7
				27.3	59.1	13.6	0.0	
				0.0	57.1	28.6	14.3	
				11.5	26.9	38.5	23.1	
				65.4	34.6	0.0	0.0	
				26.9	65.4	3.8	3.8	
				11.5	3.8	30.8	42.3	11.5
				46.2	50.0	3.8	0.0	
				42.3	30.8	15.4	11.5	
				11.5	11.5	50.0	26.9	
				42.3	53.8	3.8	0.0	
				30.8	46.2	23.1	0.0	
				11.5	15.4	38.5	30.8	3.8
				30.8	61.5	7.7	0.0	
				23.1	34.6	26.9	15.4	
				4.5	0.0	0.0	4.5	90.9
				0.0	4.8	14.3	81.0	
				11.1	11.1	5.6	72.2	
				3.8	53.8	34.6	7.7	
				65.4	34.6	0.0	0.0	
				57.7	30.8	7.7	3.8	
				3.8	11.5	26.9	53.8	3.8
				30.8	57.7	11.5	0.0	
				30.8	46.2	15.4	7.7	
				0.0	7.7	0.0	73.1	19.2
				30.8	57.7	11.5	0.0	
				26.9	46.2	15.4	11.5	
				0.0	14.3	14.3	4.8	66.7
				9.5	38.1	19.0	33.3	
				30.0	10.0	15.0	45.0	
				0.0	9.1	18.2	18.2	54.5
				0.0	13.6	36.4	50.0	
				9.5	14.3	19.0	57.1	

Part 6. Medical Conditions

			Frequency					Percentage					
			# Responses	Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never	Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never
6.1 Nervous System	6.1.2 Lumbar Radiculopathy	Frequency	23	14	8	1	0		60.9	34.8	4.3	0.0	
		Importance	23	21	2	0	0		91.3	8.7	0.0	0.0	
		Level of Mastery	23	15	4	1	3		65.2	17.4	4.3	13.0	
6.1 Nervous System	6.1.1 Cervical Radiculopathy	Frequency	23	12	10	1	0		52.2	43.5	4.3	0.0	
		Importance	23	21	2	0	0		91.3	8.7	0.0	0.0	
		Level of Mastery	23	16	5	0	2		69.6	21.7	0.0	8.7	
6.2 Musculoskeletal System	6.2.11 Lumbar Spondylosis Spondylolisthesis	Frequency	23	12	10	1	0		52.2	43.5	4.3	0.0	
		Importance	23	21	2	0	0		91.3	8.7	0.0	0.0	
		Level of Mastery	23	13	6	2	2		56.5	26.1	8.7	8.7	
6.2 Musculoskeletal System	6.2.5 Chronic Pain Syndromes	Frequency	22	12	7	3	0		54.5	31.8	13.6	0.0	
		Importance	21	19	2	0	0		90.5	9.5	0.0	0.0	
		Level of Mastery	21	10	9	1	1		47.6	42.9	4.8	4.8	
6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion)	Frequency	22	13	8	1	0		59.1	36.4	4.5	0.0	
		Importance	20	18	2	0	0		90.0	10.0	0.0	0.0	
		Level of Mastery	20	15	4	0	1		75.0	20.0	0.0	5.0	
6.2 Musculoskeletal System	6.2.10 Lumbar Instability	Frequency	23	8	10	2	3		34.8	43.5	8.7	13.0	
		Importance	23	20	3	0	0		87.0	13.0	0.0	0.0	
		Level of Mastery	23	15	5	1	2		65.2	21.7	4.3	8.7	
6.2 Musculoskeletal System	6.2.12 Lumbar Strain	Frequency	23	16	3	4	0		69.6	13.0	17.4	0.0	
		Importance	23	20	3	0	0		87.0	13.0	0.0	0.0	
		Level of Mastery	23	14	4	2	3		60.9	17.4	8.7	13.0	
6.2 Musculoskeletal System	6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion)	Frequency	23	16	6	1	0		69.6	26.1	4.3	0.0	
		Importance	22	19	3	0	0		86.4	13.6	0.0	0.0	
		Level of Mastery	22	13	7	0	2		59.1	31.8	0.0	9.1	
6.2 Musculoskeletal System	6.2.26 Spinal stenosis.	Frequency	22	11	8	3	0		50.0	36.4	13.6	0.0	
		Importance	22	18	4	0	0		81.8	18.2	0.0	0.0	
		Level of Mastery	22	12	8	1	1		54.5	36.4	4.5	4.5	
6.2 Musculoskeletal System	6.2.24 Facet dysfunction (cervical, thoracic, lumbar).	Frequency	22	17	5	0	0		77.3	22.7	0.0	0.0	
		Importance	22	19	2	1	0		86.4	9.1	4.5	0.0	
		Level of Mastery	22	14	7	0	1		63.6	31.8	0.0	4.5	
6.2 Musculoskeletal System	6.2.4 Cervicogenic Headache	Frequency	22	6	9	6	1		27.3	40.9	27.3	4.5	
		Importance	21	17	4	0	0		81.0	19.0	0.0	0.0	
		Level of Mastery	21	14	6	0	1		66.7	28.6	0.0	4.8	
6.2 Musculoskeletal System	6.2.2 Cervical Instability	Frequency	22	3	4	5	10		13.6	18.2	22.7	45.5	
		Importance	21	17	4	0	0		81.0	19.0	0.0	0.0	
		Level of Mastery	21	14	5	1	1		66.7	23.8	4.8	4.8	
6.1 Nervous System	6.1.6 Cervical Myelopathy.	Frequency	23	2	3	8	9	1	8.7	13.0	34.8	39.1	4.3
		Importance	23	19	3	1	0		82.6	13.0	4.3	0.0	
		Level of Mastery	23	13	5	3	2		56.5	21.7	13.0	8.7	
6.2 Musculoskeletal System	6.2.3 Cervical Sprain Strain	Frequency	22	8	9	4	1		36.4	40.9	18.2	4.5	
		Importance	21	16	5	0	0		76.2	23.8	0.0	0.0	
		Level of Mastery	21	12	6	2	1		57.1	28.6	9.5	4.8	
6.2 Musculoskeletal System	6.2.18 Disorders of the Shoulder Complex	Frequency	22	13	5	4	0		59.1	22.7	18.2	0.0	
		Importance	22	16	6	0	0		72.7	27.3	0.0	0.0	
		Level of Mastery	22	11	9	1	1		50.0	40.9	4.5	4.5	
6.2 Musculoskeletal System	6.2.6 Other Disorders of Cervical Spine	Frequency	22	10	9	1	2		45.5	40.9	4.5	9.1	
		Importance	21	15	6	0	0		71.4	28.6	0.0	0.0	
		Level of Mastery	21	10	8	2	1		47.6	38.1	9.5	4.8	
6.2 Musculoskeletal System	6.2.13 Other Disorders of the Lumbar Spine	Frequency	23	9	9	3	2		39.1	39.1	13.0	8.7	
		Importance	23	16	7	0	0		69.6	30.4	0.0	0.0	
		Level of Mastery	22	13	4	4	1		59.1	18.2	18.2	4.5	
6.2 Musculoskeletal System	6.2.25 Operative procedure on spinal structure.	Frequency	22	4	6	9	3		18.2	27.3	40.9	13.6	
		Importance	22	15	7	0	0		68.2	31.8	0.0	0.0	
		Level of Mastery	22	11	7	2	2		50.0	31.8	9.1	9.1	
6.2 Musculoskeletal System	6.2.8 Disorders of the Hip	Frequency	22	9	11	1	1		40.9	50.0	4.5	4.5	
		Importance	21	14	7	0	0		66.7	33.3	0.0	0.0	
		Level of Mastery	21	11	7	2	1		52.4	33.3	9.5	4.8	
6.1 Nervous System	6.1.4 Other peripheral neural impingements (not inc	Frequency	23	3	10	7	3		13.0	43.5	30.4	13.0	

		Importance	23	16	6	1	0	
		Level of Mastery	23	13	7	2	1	
6.2 Musculoskeletal System	6.2.17 Rotator Cuff Pathology	Frequency	22	10	7	4	1	
		Importance	22	14	8	0	0	
		Level of Mastery	22	10	8	3	1	
6.2 Musculoskeletal System	6.2.22 Curvature of the spine (e.g., scoliosis, kyphosis)	Frequency	22	6	6	8	2	
		Importance	22	15	6	1	0	
		Level of Mastery	22	11	8	2	1	
6.2 Musculoskeletal System	6.2.20 Thoracic Sprain/Strain	Frequency	22	4	8	6	4	
		Importance	22	14	7	1	0	
		Level of Mastery	22	13	6	2	1	
6.2 Musculoskeletal System	6.2.21 Other Disorders of the Thoracic Spine	Frequency	22	4	5	9	4	
		Importance	22	15	5	2	0	
		Level of Mastery	22	13	6	3	0	
6.2 Musculoskeletal System	6.2.14 Piriformis Syndrome	Frequency	23	6	5	9	3	
		Importance	23	12	11	0	0	
		Level of Mastery	23	11	8	1	3	
6.2 Musculoskeletal System	6.2.15 Sacroiliac Dysfunction	Frequency	23	6	7	5	5	
		Importance	23	15	5	3	0	
		Level of Mastery	23	13	6	2	2	
6.2 Musculoskeletal System	6.2.16 Other Disorders of the Pelvic Girdle	Frequency	23	4	7	7	4	1
		Importance	23	13	9	1	0	
		Level of Mastery	23	13	6	4	0	
6.2 Musculoskeletal System	6.2.7 Temporomandibular Dysfunction	Frequency	22	1	4	6	10	1
		Importance	21	13	6	1	1	
		Level of Mastery	21	8	8	4	1	
6.1 Nervous System	6.1.3 Thoracic Outlet Syndrome	Frequency	23	3	5	5	9	1
		Importance	23	13	8	0	2	
		Level of Mastery	23	12	8	2	1	
6.2 Musculoskeletal System	6.2.19 Rib Dysfunction	Frequency	22	2	2	11	6	1
		Importance	22	13	4	5	0	
		Level of Mastery	22	10	9	2	1	
6.2 Musculoskeletal System	6.2.23 Diastasis recti.	Frequency	22	4	2	5	9	2
		Importance	22	13	5	3	1	
		Level of Mastery	22	9	6	6	1	
6.1 Nervous System	6.1.5 Meralgia paresthetica.	Frequency	23	0	4	7	10	2
		Importance	23	10	9	4	0	
		Level of Mastery	23	8	11	3	1	

		69.6	26.1	4.3	0.0
		56.5	30.4	8.7	4.3
		45.5	31.8	18.2	4.5
		63.6	36.4	0.0	0.0
		45.5	36.4	13.6	4.5
		27.3	27.3	36.4	9.1
		68.2	27.3	4.5	0.0
		50.0	36.4	9.1	4.5
		18.2	36.4	27.3	18.2
		63.6	31.8	4.5	0.0
		59.1	27.3	9.1	4.5
		18.2	22.7	40.9	18.2
		68.2	22.7	9.1	0.0
		59.1	27.3	13.6	0.0
		26.1	21.7	39.1	13.0
		52.2	47.8	0.0	0.0
		47.8	34.8	4.3	13.0
		26.1	30.4	21.7	21.7
		65.2	21.7	13.0	0.0
		56.5	26.1	8.7	8.7
		17.4	30.4	30.4	17.4
		56.5	39.1	4.3	0.0
		56.5	26.1	17.4	0.0
		4.5	18.2	27.3	45.5
		61.9	28.6	4.8	4.8
		38.1	38.1	19.0	4.8
		13.0	21.7	21.7	39.1
		56.5	34.8	0.0	8.7
		52.2	34.8	8.7	4.3
		9.1	9.1	50.0	27.3
		59.1	18.2	22.7	0.0
		45.5	40.9	9.1	4.5
		18.2	9.1	22.7	40.9
		59.1	22.7	13.6	4.5
		40.9	27.3	27.3	4.5
		0.0	17.4	30.4	43.5
		43.5	39.1	17.4	0.0
		34.8	47.8	13.0	4.3

Responses to Demographic Questions

1. Please select one of the following survey options

	Frequency	Percent
I am an ABPTS board-certified clinical specialist in orthopaedic or sports physical therapy, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	24	75
I am not actively involved in orthopaedic spine physical therapy practice and therefore I am not eligible to participate in this survey at this time.	3	9.4
I am a graduate of an ABPTRFE-accredited orthopaedic or sports residency program, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	2	6.3
I am not a board-certified clinical specialist, or residency graduate, in orthopaedic or sports physical therapy but I am a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and have a minimum of 5 years of experience of practice in orthopaedic spine, with at least 1,000 hours in the last two (2) years.	2	6.3

4.1 Please indicate the percentage of time you spend in the following settings as an orthopaedic spine physical therapist (total must equal 100%).

	M %	SD %	Counts within Percentage Bands			
			5 to 25%	26 to 50%	51 to 75%	76 to 100%
Acute Care Hospital	1.8	3.4	3			
Hospital-based outpatient facility or clinic	85.0	26.7	1			19

Private outpatient office or group practice	13.5	31.5	2		1
Skilled nursing facility (SNF)/long-term care	0.0	0.0			
Patient's home/home care	0.0	0.0			
School system (preschool/primary/secondary)	0.0	0.0			
Academic institution (postsecondary)	17.9	27.9	6	1	1
Health and wellness facility	0.0	0.0			
Research center	0.0	0.0			
Industry	0.0	0.0			
Inpatient rehab facility (IRF)	0.0	0.0			
Other	2.8	8.3	1		

5.1 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following age groups? (total must equal 100%)

Age group	Mean %	SD %
Pediatrics (0-21 years of age)	14.5	8.5
Adults (22-59 years of age)	44.8	13.5
Geriatrics (60 years of age to end of life)	36.6	11.9

5.2 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following sex groups? (total must equal 100%)

Sex	Mean %	SD %
Male	44.0	10.4
Female	51.7	11.9
Ambiguous	0.2	1.0

5.3 Please indicate your referral sources by percentages below (total must equal 100%)

	Mean %	SD %
Self-referral	17.1	15.8
Chiropractic	0.0	0.0
Family practice physicians or other physician primary care p	43.0	21.8
Physician specialists (e.g. geriatrics physician)	24.6	10.6
Physician assistants	15.5	8.6
Podiatrist	6.4	3.8
Nurse practitioners	9.1	7.5
Other	12.0	15.7

<- e.g., "on average, 17% of referrals are from self-referral"

Note. Other were Ortho, Physical Medicine = 1 and Hospital Network-based spine referrals = 1.

7.1 In which geographic region is the major portion of your practice?

	frequency	percent
Pacific (AK, CA, HI, OR, WA)	11	47.8
Middle Atlantic (NJ, NY, PA)	6	26.1
East North Central (IL, IN, MI, OH, WI)	3	13.0
South Atlantic (DE, DC, FL, GA, MD, NC, PR, SC, VA, WV)	1	4.3
West North Central (IA, KS, MN, MO, NE, ND, SD)	1	4.3
West South Central (AR, LA, OK, TX)	1	4.3
total	23	

7.2 What is your entry-level physical therapy education?

	frequency	percent
DPT	18	78.3
Entry-level master's	4	17.4
Baccalaureate	1	4.3

total

23

7.3 What is your highest earned academic degree in any area of study?

	frequency	percent
DPT	17	73.9
tDPT	3	13.0
Master's	1	4.3
PhD	1	4.3
Other	1	4.3
<i>Note.</i> Other was FAAOMPT	23	

7.4 What is the total number of years you have been a practicing physical therapist?

	Frequency	Percent
31 or more years	2	8.7
21 - 30 years	2	8.7
16 - 20 years	2	8.7
11 - 15 years	9	39.1
6 - 10 years	6	26.1
3 - 5 years	2	8.7
total	23	

7.5 What is the total number of years you have primarily practiced in Orthopaedic Spine physical therapy?

	Frequency	Percent
21 - 30 years	3	13.0
16 - 20 years	1	4.3
11 - 15 years	5	21.7
6 - 10 years	7	30.4
3 - 5 years	6	26.1

total

23

7.6 Please indicate any ABPTS board certifications you currently hold (select all that apply)

	Frequency	Percent
Cardiovascular and Pulmonary	1	4.3
Clinical Electrophysiology	1	4.3
Geriatrics	1	4.3
Neurology	1	4.3
Oncology	1	4.3
Orthopaedics	22	95.7
Pediatrics	1	4.3
Sports	3	13.0
Women's Health	1	4.3
Wound Management	1	4.3
None of the above	2	8.7

7.7 Please indicate if you graduated from an ABPTRFE-accredited residency program in any of the following areas of specialty practice (select all that apply)

	Frequency	Percent
Acute Care	1	4.3
Cardiovascular and Pulmonary	1	4.3
Clinical Electrophysiology	1	4.3
Faculty	1	4.3
Geriatrics	1	4.3
Neurology	1	4.3
Oncology	1	4.3
Orthopaedics	14	60.9
Pediatrics	1	4.3

Sports	1	4.3
Women's Health	1	4.3
Wound Management	1	4.3
None of the above	6	26.1

7.8 Please indicate if you graduated from an ABPTRFE-accredited program in any of the following areas of subspecialty practice (select all that apply)

	Frequency	Percent
Critical Care	1	4.3
Hand Therapy	1	4.3
Higher Education Leadership	2	8.7
Movement System	7	30.4
Neonatology	1	4.3
Orthopaedic Manual Physical Therapy	7	30.4
Performing Arts	1	4.3
Spine	11	47.8
Sports Division 1	1	4.3
Upper Extremity Athlete	1	4.3
None of the above	6	26.1

7.9 Based on state law and facility policies, do you evaluate and/or treat patients/clients without a physician referral?

	Frequency	Percent
Yes	17	73.9
No	6	26.1

7.10 What is your current employment status at your primary position? (35 or more hours/wk is full-time)

	Frequency	Percent
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Full-time hourly	12	52.2
Full-time salaried	10	43.5
Part-time salaried	1	4.3

7.11 What educational method has had the MOST influence on developing your present level of clinical skills?

	Frequency	Percent
Formal fellowship program	13	56.5
Continuing education courses, workshops, seminars, study	6	26.1
Formal residency program	1	4.3
Graduate program	1	4.3
Mentoring	1	4.3
Self-study (books, articles, videotapes, home study courses)	1	4.3

7.12 Are you a member of the APTA

	Frequency	Percent
Yes	21	91.3
No	2	8.7

7.13 Please indicate any APTA Section you are member of (select all that apply)

	Frequency	Percent
Orthopaedics	20	87.0
Sports	6	26.1
Education	3	13.0
Research	3	13.0
Acute Care	1	4.3
Aquatics	1	4.3
Cardiovascular and Pulmonary	1	4.3
Clinical Electrophysiology and Wound Management	1	4.3

Federal	1	4.3
Geriatrics	1	4.3
Hand and Upper Extremity	1	4.3
Health Policy and Administration	1	4.3
Home Health	1	4.3
Neurology	1	4.3
Oncology	1	4.3
Pediatrics	1	4.3
Pelvic Health	1	4.3
Private Practice	1	4.3

7.14 What is your sex?

	Frequency	Percent
Male	17	73.9
Female	6	26.1

7.15 What is your age?

	Frequency	Percent
60-69	2	8.7
50-59	2	8.7
40-49	3	13.0
30-39	16	69.6

7.16 Which of the following best describes your race/ethnic origin?

	Frequency	Percent
White (Not Hispanic)	15	65.2
Hispanic/Latino	4	17.4
Asian	3	13.0

Other

1

4.3

#	6.3 Please list any other diagnosis/condition/problem not identified previously that you see as an orthopaedic spine clinician, and percentage of time you treat the condition(s).
1	Foot/ankle disorders due to inhibition/facilitation/or herniated disc from the spine. 5%
2	May fall under strain, but c/s and L/S trigger points. 10%
3	Double crush syndrome , 15%
4	Vestibular dysfunctions - 10
5	Thoracic disc herniation - less than monthly
6	Fibromyalgia- 15% Myofascial pain syndrome- 25%
7	Dural/slump disorders 5%
8	Persistent pain
9	Elbow/Knee/foot/ankle injuries/pelvic floor dysfunctions
10	Unrelated to spine, also see all conditions related to elbow, hip, knee, foot/ankle in our clinic. Total of about 45% of the time

#	8.1 Please use the space below to share any concerns you have or additional items that you feel should be included in this survey
	<p>Concern: Seems like surveys like this are driven by conventional standards of practice descriptions to use "The Guide of Physical Therapists' Practice" and information from a "sample of practitioners." This becomes a problem when these "recognized" standards of care of a fragmented health care system have been shown in the scientific literature to contribute more disability in society. Thus, in essence, the conventional standard of describing practice is to survey current practice. However, select prominent medical journal publications have described the current system and current care pathways as contributing to the problem of a rising level of disability in monitored conditions, such as low back pain. (For example, see the 2018 Lancet series on low back pain). Hmmm. I know the team creating the survey instrument is following the guidelines given to them by consultants. I wonder if practice validation instruments are being driven to gather data from a failed system, design curricula consistent with the failed system, and thus, perpetuate failure. I wonder. My suggestion to the Spine Validation group is to liberally use their expert opinion and knowledge of scientific literature and clinical guideline recommendations to assist with interpreting the survey results for guiding the curricula criteria of future Spine Fellowships.</p>
1	Perhaps, some disruption of current practice is needed to positively transform society.
2	I feel the survey is unclear somewhat in its intent in regards to some points. To that end, it makes it difficult to choose when rating the level to which the PT performs. Is it the level to which a Spine graduate would perform? To which I would perform? The hypothetical level that I would expect a Spine specialist to perform at? As is, I based my answers on a combination of these questions, though it was not clear to me if that was the intent.
3	Percentage importance of self study, mentoring, weekend classes to emphasize the importance.

4	The spine fellowship program at Kaiser Permanente is what has given me a lot of opportunities at Kaiser in Washington DC. I am currently working on developing the spine clinic in which I am the only PT in this region qualified to do so because of my fellowship training. It has really helped me establish great rapport with physicians and surgeons here because of my ability to treat spinal conditions.
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June 24, 2022

American Board of Physical Therapy Specialties

American Board of Physical Therapy Fellowship and Residency Education

1111 N Fairfax Street

Alexandria, VA 22314-1488

We have reviewed results from the pilot practice analysis survey for Orthopaedic Spine physical therapists. The pilot survey was sent to specialists with expertise in the area of orthopaedic spine care, and the pilot data was analyzed and reviewed to inform any needed revisions to the survey before it is sent to the target population.

Results from the Orthopaedic Spine Pilot Survey

Generally, the survey performed as expected with respondents endorsing the competencies listed in the survey. Areas requiring revision based on lack of respondent endorsement, respondent comments, or grammatical corrections are outlined below. These changes are also shown as tracked changes in the attached Spine DFP Task List document and Medical Conditions document.

The following change was made in section I. Knowledge Areas of Orthopaedic Spine Physical Therapists:

Under “A. Critical Inquiry for Evidence-Based Practice,” Question 1 was not endorsed as highly as expected. To address potential misunderstanding of the question, “Appraisal” was changed to “Critical interpretation” to clarify that the item refers to practitioner as a consumer of research literature rather than being in the role of a formal research reviewer or researcher. The revised item reads, “Critical interpretation of research findings on orthopaedic spine physical therapy practice.”

The following changes were made in section III. Practice Expectations for Orthopaedic Spine Physical Therapists in the Patient/Client Management Model:

In Section A, under “3. Planning a physical exam that:”, we reworded item (a) to clarify that the intent is to address the chief concern to contribute to a working hypothesis of the issue, and rather than to merely reproduce or relieve. The revised item reads, “Includes examination techniques with a high probability of changing (reproducing or relieving) the chief concern and contributing to the development and refinement of the working hypothesis(es).”

Also in Section A, it was noted that items 6, 7, and 11 all refer to the same activity, except for the inclusion of the ICF model in item 7. To remove redundancy, we combined these three items into one (which now is item 6). The final item reads as follows: “Using the International Classification of Functioning, Disability and Health (ICF) model to synthesize data from history, systems review, and physical examination (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals).”

Under section C, we replaced the term “demonstrates prognosis” with “establishes prognosis.” (This is not included in the ‘Task List’ Word document but was noted in the survey itself.) Additionally, we removed the beginning of the item stem under Prognosis (a): “The Orthopaedic Spine Physical Therapist establishes a prognosis including” because this is redundant with the overall instructions for the section. The stem now begins with “Accounting for...”.

We revised the list of Medical Conditions for the survey to clarify relations between conditions – grouping conditions where appropriate – as well as adding conditions suggested by pilot respondents.

We look forward to your decision to move forward with the final Orthopaedic Spine survey.

Sincerely,

Brenda Ellis, Ph.D.

Human Resources Research Organization

Enclosures:

Spine DFP Task List_V4 updated 17JUN2022

Medical Conditions for Spine Pilot Survey 17JUNE2022

Spine Validation Practice Analysis Survey 2022

Introduction

Spine Physical Therapy

Clinical Subspecialty Practice Analysis Survey

The purpose of this survey is to distinguish elements of subspecialized Orthopaedic Spine clinical practice. The results of this survey will establish a Description of Fellowship Practice (DFP) in Spine Physical Therapy. The questions are based on:

- (1) The curriculum of current ABPTRFE-accredited Spine Fellowship Programs,
- (2) The opinions of a Subject Matter Expert (SME) workgroup pertaining to Spine physical therapy practice,
- (3) The latest version of the *Guide to Physical Therapist Practice*, including the Patient/Client Management Model,
- (4) The practice expectations identified in the publication, *A Normative Model of Physical Therapist Professional Education*
- (5) Recent articles and textbooks pertaining to Spine physical therapist practice; and
- (6) Results of a recent validation pilot survey.

Survey Guidelines:

The Guide to Physical Therapist Practice describes the Patient/Client Management Model, which includes Examination (history, systems review, tests and measures), Evaluation, Diagnosis, Prognosis, Intervention, and Outcomes. Based on the development of the Guide and previous specialty practice surveys, the elements of this Patient/Client Management Model are the accepted standard for all physical therapy practice, including Orthopaedic Spine Subspecialty Practice.

The Normative Model was published by the APTA to serve as a consensus-based model for professional education. This publication provides Practice Expectations (PEs) for the professional physical therapist. There are a total of 19 PEs. PEs equate to clinical competencies or the knowledge, skills, and behaviors that describe the performance of a graduate from a professional (entry-level) physical therapy program as they enter into the practice of physical therapy. These competencies include: Professional Practice Expectations (communication, individual cultural differences, professional behaviors, critical inquiry and clinical decisions making, education, professional development), Patient and Client Management Expectations (screening, examination, evaluation, diagnosis, prognosis, plan of care, intervention, outcomes assessment and evaluation), and Practice Management Expectations (prevention/wellness/health promotion, management of care delivery, administration, consultation, social responsibility).

While all therapists may perform these same elements of practice, as "subspecialists" they may be performing them differently. That is to say, subspecialists may have additional knowledge or skill, and may analyze or synthesize information differently. The result of these differences is that subspecialists may be more efficient and effective in their patient/client management. This survey represents the description of subspecialty practice for the next 10 years so please answer the questions with respect to anticipated changes, growth over the next 10 years.

This survey also addresses specific knowledge areas and procedures, and the Orthopaedic Spine Subspecialist's roles/duties in education, leadership, virtuous behavior, consultation and critical inquiry. Your responses will help us validate both advanced skill and knowledge. Some of the advanced skills are not always obvious. For example, you may consider manual muscle testing (MMT) to be a basic skill. However, the use of MMT in clinical practice may actually reflect refined thought processes employed by a clinical subspecialist who has considered the best external evidence in formulating the intervention plan. So, it may not be the actual intervention that signifies advanced practice, but the thought processes, synthesis of external evidence or possession of more knowledge about the intervention that is the hallmark of advanced practice.

We ask you to please consider each item carefully in this context, so that the results of this survey truly reflect a "subspecialty" level of practice.

Spine Validation Practice Analysis Survey 2022**Survey Response Eligibility**

Please select one of the following survey options:

- I am an ABPTS board-certified clinical specialist in orthopaedic **or** sports physical therapy, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.
- I am a graduate of an ABPTRFE-accredited orthopaedic **or** sports residency program, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.
- I am not a board-certified clinical specialist, or residency graduate, in orthopaedic or sports physical therapy **but** I am a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and have a minimum of 5 years of experience of practice in orthopaedic spine, with at least 1,000 hours in the last two (2) years.
- I am not actively involved in orthopaedic spine physical therapy practice and therefore I am not eligible to participate in this survey at this time.
- I am actively involved in orthopaedic spine physical therapy practice at the "subspecialist" level, but am unable to participate in this survey at this time.

Spine Validation Practice Analysis Survey 2022

PART 1 / 1.1 FOUNDATION SCIENCES

Part 1 - Knowledge Areas of Orthopaedic Spine Clinical Subspecialists

Your answers should reflect what you believe to be "orthopaedic spine subspecialty clinical practice" - i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 1 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as an orthopaedic spine clinical subspecialist?

- 0 - Not important;
- 1 - Of little importance;
- 2 - Moderately important;
- 3 - Very important

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialist exercise when they use information from this knowledge area?

- 0 - Do not use in their work;
- 1 - Recall;
- 2 - Application;
- 3 - Analysis

Level of Judgment Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.1 FOUNDATIONAL SCIENCES:

1.1.1 Human anatomy and physiology as related to orthopaedic spine conditions:

1.1.1.1 Musculoskeletal system.

Frequency

Importance

Level of Judgment

Choose answers from
drop down menus.

1.1.1.2 Neuromuscular system.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.1.3 Cardiovascular and pulmonary systems.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.1.4 Integumentary system.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.1.5 Human growth and development across the lifespan.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

1.1 FOUNDATION SCIENCES, CONT.

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.1 FOUNDATIONAL SCIENCES, CONT.

1.1.2 Movement science as related to orthopaedic spine conditions:

1.1.2.1 Kinesiology/biomechanics.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.2.2 Neural control of movement.

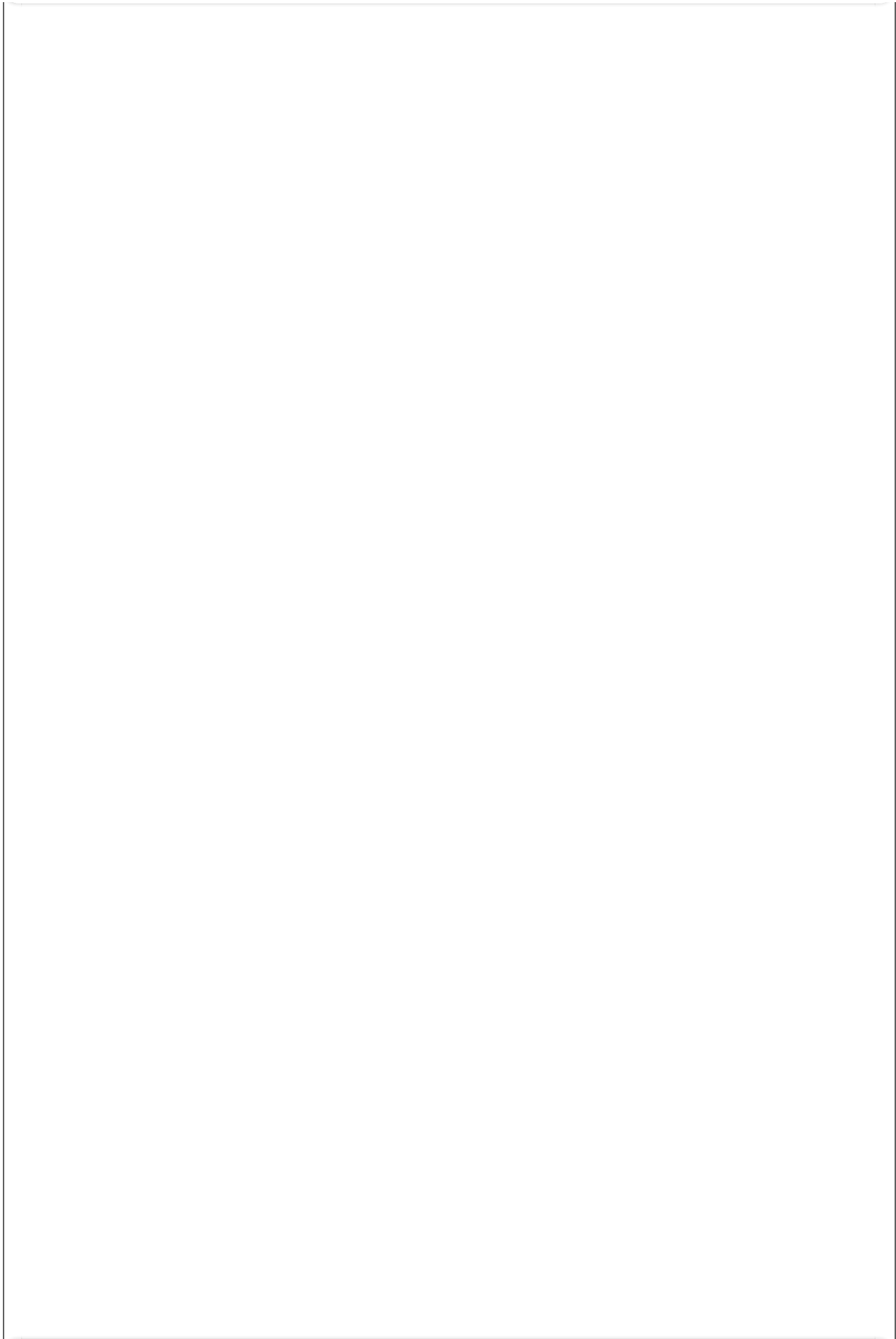
	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.2.3 Ergonomics.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.1.2.4 Locomotion.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>



Spine Validation Practice Analysis Survey 2022

1.2 CLINICAL SCIENCES

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.2 CLINICAL SCIENCES

1.2.1 Pathology/Pathophysiology as related to orthopaedic spine conditions

1.2.1.1 Signs and symptoms of disease/injury.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.1.2 Progression of disease/injury processes.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.1.3 Pathokinesiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.1.4 Tissue inflammation, healing, and repair.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2 Medical and surgical considerations as related to orthopaedic spine conditions

1.2.2.1 Imaging studies.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2.2 Pharmacology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrophysiological exams).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2.4 Nonsurgical interventional spine procedures (e.g., injections, radial ablation, denervation procedures) and their indications, contraindications, and precautions for orthopaedic spine physical therapy.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2.5 Spine surgical interventions and their indications, contraindications, and precautions for orthopaedic spine physical therapy.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.2.2.6 Developments in genetics/regenerative medicine (e.g., genetic markers, stem cell applications, genetic-based alterations to pharmacological interventions, immunity).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

1.3 BEHAVIORAL SCIENCES

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.3 BEHAVIORAL SCIENCES

1.3.1 Behavioral science as related to orthopaedic spine conditions:

1.3.1.1 External environmental factors (e.g., expected behaviors and social pressures).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.1.2 Personal factors (e.g., compliance, body awareness, pain perception, and related psychosocial factors).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.1.3 Psychological/emotional conditions (e.g., anxiety, depression, catastrophization).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.1.4 Impact of behavioral health risk factors (e.g., smoking effects on healing rates).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.2 Pain science as related to orthopaedic spine conditions:

1.3.2.1 Peripheral nociceptive pain physiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.2.2 Peripheral neurogenic/neuropathic pain physiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.2.3 Central nervous system/nociplastic pain physiology.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.2.4 Output mechanisms and expressions (e.g., immune, endocrine, sympathetic, behavioral).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

1.3 BEHAVIORAL SCIENCES, CONT.

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.3 BEHAVIORAL SCIENCES, CONT.

1.3.3 Orthopaedic spine physical therapy theory and practice:

1.3.3.1 Biopsychosocial model.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.2 Exercise physiology across the lifespan.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.3 Manual therapy techniques.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.4 Movement systems impairments.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.5 Motor control and motor learning.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.6 Theory and application of orthotic, protective, and supportive devices.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.7 Therapeutic exercise.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.8 Models of differential diagnosis and clinical reasoning (e.g., hypothesis-oriented algorithm for clinicians (HOAC) model, prospect theory).

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.9 Principles of teaching and learning.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.3.3.10 Principles of prevention and wellness.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

1.4 CRITICAL INQUIRY FOR EVIDENCE-BASED PRACTICE

Frequency - How frequently does the orthopaedic spine clinical subspecialist use this knowledge area?

Importance - Regardless of the frequency of occurrence or prevalence, how important is this knowledge area to practice as a Orthopaedic spine clinical subspecialist?

Level of Judgment - Which of the following statements best describes the level of judgment orthopaedic spine clinical subspecialists exercise when they use information from this knowledge area?

Level of Judgment Definitions

Recall: requires ability to recall or recognize specific information only.

Application: requires ability to comprehend, interpret or apply knowledge to new or changing situations.

Analysis: requires ability to analyze information, to put information together to arrive at a solution, and/or to evaluate the usefulness of the solution.

1.4 CRITICAL INQUIRY FOR EVIDENCE-BASED PRACTICE

1.4.1 Critical interpretation of research findings on orthopaedic spine physical therapy practice.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

1.4.2 Application of research findings to orthopaedic spine physical therapy practice.

	Frequency	Importance	Level of Judgment
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

PART 2 / 2.1 PROFESSIONAL BEHAVIOR

Part 2 - Professional Roles, Responsibilities, and Values of Orthopaedic Spine Clinical Subspecialists

Your answers should reflect what you believe to be “orthopaedic spine subspecialty clinical practice” – i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 2 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist perform this activity?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence, how important is this activity in everyday practice as an orthopaedic spine clinical subspecialist?

- 0 - Not important;
- 1 - Of little importance;
- 2 - Moderately important;
- 3 - Very important

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

- 0 - Advanced beginner level;
- 1 - Competent skill level;
- 2 - Proficient skill level;
- 3 - Expert skill level

Level of Master Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Advanced beginner level: Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level: Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level: Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level: Physical therapists at this level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid, and efficient. Clinical decision-making is rapid and accurate.

2.1 PROFESSIONAL BEHAVIOR. The orthopaedic spine subspecialist acts as a role model of professional behavior in all interactions and in accordance with APTA Code of Ethics. The orthopaedic spine subspecialist demonstrates professional behavior by:

2.1.1 Consulting with and/or educating peers, colleagues, other health care professionals, community, agencies, legislative and/or regulatory organizations regarding issues of orthopaedic spine physical therapy practice.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.1.2 Using patient-centered ethics and values in complex clinical decision making.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.1.3 Maintaining active participation in professional organizations that address issues related to orthopaedic spine care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.1.4 Maintaining state-of-the-art knowledge and skills by seeking own mentors and participating in continuing professional development (e.g., seminars, structured study, journal clubs, etc.).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

2.2 LEADERSHIP

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

2.2 LEADERSHIP. The orthopaedic spine subspecialist demonstrates leadership by:

2.2.1 Representing orthopaedic spine physical therapy and interacting with other professionals and organizations (e.g., inter-professional interaction and mentoring).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.2.2 Planning, directing, organizing, and managing human, technical, environmental, and financial resources effectively and efficiently.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.2.3 Modeling and facilitating the translation of evidence into clinical practice as it relates to orthopaedic spine care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.2.4 Acting as an expert resource for peers in the clinic and community for guidance on complex cases and problem solving/clinical reasoning as it relates to orthopaedic spine care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

2.3 COMMUNICATION / 2.4 ADVOCACY

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

2.3 COMMUNICATION. The orthopaedic spine subspecialist demonstrates effective communication by:

2.3.1 Empowering patients with orthopaedic spine conditions in the management of their own health (e.g., providing patients confidence to manage future occurrences of spine-related pain).

Frequency

Importance

Level of Mastery

Choose answers
from drop down
menus.

2.3.2 Facilitating collaborative and multidisciplinary team management and transition of care for individuals with orthopaedic spine conditions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.4 ADVOCACY. The orthopaedic spine subspecialist demonstrates advocacy by:

2.4.1 Promoting the orthopaedic spine physical therapist as the first contact provider in musculoskeletal spine pathology.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.4.2 Advocating for orthopaedic spine physical therapy practice with national organizations, healthcare systems or law-making bodies.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

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2.5 EDUCATION / 2.6 CRITICAL INQUIRY AND EVIDENCE-BASED PRACTICE

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

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Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

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Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

2.5 EDUCATION. The orthopaedic spine subspecialist demonstrates the ability to educate others by:

2.5.1 Contributing to the professional development of other physical therapists by teaching/mentoring.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.5.2 Promoting awareness and benefits of fellowship programs in orthopaedic spine physical therapy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.5.3 Educating the public regarding spine conditions, the role of orthopaedic spine physical therapists, and addressing common misconceptions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.5.4 Educating other health care professionals and administrators as to the scope and role of orthopaedic spine physical therapists.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.6 CRITICAL INQUIRY AND EVIDENCE-BASED PRACTICE. The orthopaedic spine subspecialist demonstrates critical inquiry and evidence-based practice by:

2.6.1 Applying principles of evidence-based practice in patient/client management.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.6.2 Contributing to the body of evidence in orthopaedic spine physical therapy (e.g., peer-reviewed and non-peer-reviewed presentations and publications).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.6.3 Evaluating the efficacy and effectiveness of examination tools, interventions, and technologies based upon available evidence.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.6.4 Identifying research needs within the field of orthopaedic spine physical therapy, evaluating outcomes data, and assessing new concepts and technologies.

Frequency

Importance

Level of Mastery

**Choose answers
from drop down
menus.**

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PART 3 / 3.1 EXAMINATION / 3.1.1 HISTORY

Part 2 - Professional Roles, Responsibilities, and Values of Orthopaedic Spine Clinical Subspecialists

Your answers should reflect what you believe to be “orthopaedic spine subspecialty clinical practice” – i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 2 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist perform this activity?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence, how important is this activity in everyday practice as an orthopaedic spine clinical subspecialist?

- 0 - Not important;
- 1 - Of little importance;
- 2 - Moderately important;
- 3 - Very important

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

- 0 - Advanced beginner level;
- 1 - Competent skill level;
- 2 - Proficient skill level;
- 3 - Expert skill level

Level of Master Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Advanced beginner level: Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level: Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

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Expert skill level: Physical therapists at this level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid, and efficient. Clinical decision-making is rapid and accurate.

3.1 EXAMINATION. The orthopaedic spine physical therapist demonstrates examination by:

3.1.1 History.

3.1.1.1 Obtaining work/performance place and status data that includes, but is not limited to:

3.1.1.1.1 Current and prior work.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.1.2 Activity requirements/occupational demands.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.1.3 Ergonomic considerations.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.1.4 Utilization of adaptive and supportive devices (e.g.,
taping, bracing, assistive devices, orthotics).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.1.1 HISTORY, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.1 History, cont.

3.1.1.2 Obtaining data regarding current condition(s)/chief complaint(s) by identifying areas of primary and secondary symptoms that includes, but is not limited to:

3.1.1.2.1 Recognition of contributions from multiple body regions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.2.2 Quality and behavior of symptoms.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.2.3 Symptom irritability (onset, offset, and overall baseline).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.2.4 Onset of condition (e.g., mechanism of injury, insidious onset, potential contributing factors).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.2.5 Current and previous therapeutic interventions.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.2.6 Readiness for change.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.2.7 Goals of the patient, family, and caregiver.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.1.1 HISTORY, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.1 History, cont.

3.1.1.3 Obtaining data regarding functional status and activity level of daily living.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.4 Obtaining data regarding general health status via self-report, family report, or caregiver report that includes, but is not limited to:

3.1.1.4.1 Physical function.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression, catastrophizing).

Frequency

Importance

Level of Mastery

**Choose answers
from drop down
menus.**

Spine Validation Practice Analysis Survey 2022

3.1.1 HISTORY, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.1 History, cont.

3.1.1.5 Obtaining data regarding social/health habits (past and current), including behavioral health risks (e.g., nutrition, smoking, substance use, sleep) and fitness level.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.6 Obtaining medical/surgical history data.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.7 Obtaining data regarding medication usage patterns and effects of medications currently and previously taken (for chief complaint and for other conditions).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.8 Obtaining data regarding social history (e.g., cultural beliefs and support systems).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.9 Obtaining general demographic information.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.1.10 Obtaining data on living environment and community characteristics.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.1.2 INTERPRETING DATA FROM HISTORY / 3.1.3 PLANNING A PHYSICAL EXAM

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.2 Interpreting data from history in order to assist in planning physical therapy exam by:

3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis that includes, nature and severity of problem(s), probable cause(s) of problem(s), anatomical structures involved, stage of condition, possible contraindications to physical therapy examination.

Frequency

Importance

Level of Mastery

Choose answers
from drop down
menus.

3.1.2.2 Assessing "red flags" and determining need based upon whether patient demonstrates neuromusculoskeletal problems responsive to physical therapy intervention or condition(s) requiring referral to another health care provider.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.2.3 Identifying chief and secondary problems.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.3 Planning a physical exam that:

3.1.3.1 Includes examination techniques with a high probability of changing (reproducing or relieving) the chief concern and contributing to the development and refinement of the working hypothesis(es).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.3.2 Is comprehensive but has the focus and detail appropriate to the working hypothesis and the patient's problems.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.3.4 Prioritizes areas, movements, and functional activities to be examined as well as examination procedures and examination sequence.

Frequency

Importance

Level of Mastery

**Choose answers
from drop down
menus.**

Spine Validation Practice Analysis Survey 2022

3.1.4 SYSTEMS REVIEW / 3.1.5 TEST AND MEASURES

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.4 SYSTEMS REVIEW.

3.1.4.1 Performing systems review to identify the impaired or unimpaired status of the: cardiovascular/pulmonary system, musculoskeletal system, neuromotor system, integumentary system, and/or communication ability.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5 Performing tests and measures that include:

3.1.5.1 Ergonomics and body mechanics.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.2 Gait, locomotion, and balance.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.3 Work (job/school/play), community and leisure integration or reintegration (including IADL).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.4 Adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.5 Pain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.6 Anthropometric characteristics (e.g., edema, body dimensions and composition).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.1.5 TEST AND MEASURES, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.1 EXAMINATION, CONT.

3.1.5 Performing test and measures that include, cont.

3.1.5.7 Circulation (e.g., vertebral artery examination, skin condition, thoracic outlet tests, and peripheral pulses).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.8 Aerobic capacity and endurance (e.g., dyspnea perceived exertion, heart rate).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.9 Neurodynamics.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.10 Sensory integrity (e.g., assessment of superficial sensation, dermatomes, myotomes, proprioception and kinesthesia, 2-point discrimination, quantitative sensory testing).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.11 Reflex integrity (e.g., assessment of normal and pathological reflexes).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.12 Motor control and coordination (e.g., assessment of timing of movements across segments, capability of acquiring new movement strategies).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.13 Biopsychosocial functioning (e.g., depression, impaired motivation, FABQ, STarT Back, Tampa Kinesiophobia).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.14 Joint integrity (i.e., mobility assessment of joint hypermobility and hypomobility to include passive range of motion, passive accessory motions, response to manual provocation).

Frequency

Importance

Level of Mastery

**Choose answers
from drop down
menus.**

Spine Validation Practice Analysis Survey 2022

3.1.5 TEST AND MEASURES, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.1 EXAMINATION, CONT.

3.1.5 Performing tests and measures that include, cont.

3.1.5.15 Community, home, and work barriers.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.16 Integumentary integrity.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.17 Muscle performance (e.g., strength, power, and endurance).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.18 Neuromotor development and sensory integration (e.g., assessment of appropriate development, dexterity, coordination, and integration of the somatosensory system).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.19 Posture (e.g., assessment of body or body segment(s) structure, alignment, changes in different positions, body contours).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.21 Flexibility (e.g., length, stiffness).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.22 Soft tissue quality (e.g., mobility, provocation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.1.5.23 Task-specific activities (e.g., lifting, bending, reaching).

Frequency

Importance

Level of Mastery

**Choose answers
from drop down
menus.**

Spine Validation Practice Analysis Survey 2022

3.2 EVALUATION

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

3.2 EVALUATION: Evaluation is the dynamic process of clinical judgment. The orthopaedic spine subspecialist demonstrates evaluation by:

3.2.1 Using the International Classification of Functioning, Disability and Health (ICF) model to synthesize data from history, systems review, and physical examination (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals).

Frequency

Importance

Level of Mastery

Choose answers
from drop down
menus.

3.2.2 Developing a working diagnosis, including nature of complaint, probable cause, anatomical structures involved, stage of condition, pain mechanisms, psychosocial factors, and possible contraindications for physical therapy intervention.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.2.3 Incorporating data from ancillary testing (e.g., imaging, labs, electrophysiological studies).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.2.4 Referring patient/client to other health care professionals for further examination as appropriate.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.2.5 Considering implications of exam findings on activity, quality of life, and wellness as established by the ICF.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.3 DIAGNOSIS/3.4 PROGNOSIS

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.3 DIAGNOSIS. Diagnosis is the determination of labels to describe multiple dimensions of the individual, ranging from the most basic cellular level to the highest level of functioning as a person in society. The orthopaedic spine subspecialist determines diagnosis by:

3.3.1 Organizing examination findings into clusters, syndromes, or categories to which physical therapy interventions will be directed and to determine prognosis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.4 PROGNOSIS. Prognosis is the determination of the predicted optimal level of improvement in function and the amount of time needed to reach that level. The orthopaedic spine subspecialist determines prognosis by:

3.4.1 Accounting for the complexity of the patient/client's dysfunctions/conditions, the predicted optimal level of improvement in function, and the amount of time needed to reach that level.

Frequency

Importance

Level of Mastery

**Choose answers
from drop down
menus.**

Spine Validation Practice Analysis Survey 2022

3.5 INTERVENTION

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.5 INTERVENTION. Physical therapists purposefully interact with the individual and, when appropriate, with other clinicians involved in his or her care, using various interventions to produce changes in the condition that are consistent with the diagnosis and prognosis. The orthopaedic spine subspecialist performs the following interventions:

3.5.1 Ergonomics (influences of environment and occupation on posture and movement).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.2 Education/training of functional activities.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.3 Education/training of activities of daily living (e.g., hygiene, stair climbing, sleeping postures).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4 Education:

3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility, and self-management within plan of care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.2 Using the biopsychosocial/biomedical models.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.3 Addressing pain physiology and dose response.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.4 Addressing prevention and wellness.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.5 INTERVENTION, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.5 INTERVENTION, CONT.

3.5.5 Injury prevention and wellness promotion (e.g., task adaptation, behavior modification, body mechanics).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.6 Sleep hygiene education (e.g., sleep schedules, technology usage, sleep habits, relationship between sleep and medication usage).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.7 Nutritional education.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.8 Pain neuroscience education.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.9 Graded exposure.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.10 Graded motor imagery.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.11 Graded activity/exercise.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.12 Protective, adaptive or supportive device or equipment (e.g., orthotics, taping).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.13 Neural mobilization (e.g., nerve gliding).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.5 INTERVENTION, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.5 INTERVENTION, CONT.

3.5.14 Non-thrust mobilization/manipulation.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.15 Thrust mobilization/manipulation.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.16 Soft tissue mobilization (e.g., connective tissue, deep friction, cross friction massage, instrument-assisted).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.17 Mobilization with movement.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.18 Muscle energy techniques.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.19 Traction/distraction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.20 Directional preference exercises/activities.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.21 Electro-therapeutic modalities (e.g., TENS, NMES).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.4.22 Thermo-therapeutic modalities (e.g., heat, ice, ultrasound).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.5 INTERVENTION, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

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3.5 INTERVENTION, CONT.

3.5.23 Photo-therapeutic modalities (e.g., laser).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.24 Dry needling.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.25 Aerobic capacity and endurance exercises.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.26 Motor coordination.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.27 Muscle performance exercises (e.g., strength, muscle endurance).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.28 Complementary interventions including:

3.5.28.1 Meditation.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.28.2 Mindfulness.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.5.28.3 Hypnosis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.6 RE-ASSESSMENT/RE-EVALUATION

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.6 RE-ASSESSMENT/RE-EVALUATION. The orthopaedic spine subspecialist performs re-assessment and re-evaluation by:

3.6.1 Assessing intervention response.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.6.2 Analyzing significance of changes.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.6.3 Assessing change.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.6.4 Re-examining/implementing a modified plan of care.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.6.5 Confirming/modifying goals.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.6.6 Making referrals to other providers as needed.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

3.7 OUTCOMES ASSESSMENT

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

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3.7 OUTCOMES ASSESSMENT. Outcomes assessment is the measurement of the actual results of implementing the plan of care that indicate the impact on functioning (body functions and structures, activities, and participation). The orthopaedic spine subspecialist performs outcomes assessment by:

3.7.1 Assessing remediation of activity and participation limitations.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.7.2 Assessing patient satisfaction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.7.3 Assessing promotion of primary and secondary prevention.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.7.4 Assessing improvement of patient's/client's activities and participation based on best available evidence and patient/client-specific variables (i.e., benchmarking).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.7.5 Using applicable, evidence-based outcomes measurement tools/questionnaires/scales (e.g., Oswestry, Fear Avoidance Behavior Questionnaire).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

PART 4 PRACTICE SETTINGS

Part 4 - PRACTICE SETTINGS

This section addresses your own clinical practice as an orthopaedic spine clinician.

4.1 Please indicate the percentage of time you spend in the following settings as an orthopaedic spine physical therapist **(total must equal 100%)**.

Acute Care Hospital	<input type="text"/>
Hospital-based outpatient facility or clinic	<input type="text"/>
Private outpatient office or group practice	<input type="text"/>
Skilled nursing facility (SNF)/long-term care	<input type="text"/>
Patient's home/home care	<input type="text"/>
School system (preschool/primary/secondary)	<input type="text"/>
Academic institution (postsecondary)	<input type="text"/>
Health and wellness facility	<input type="text"/>
Research center	<input type="text"/>
Industry	<input type="text"/>
Inpatient rehab facility (IRF)	<input type="text"/>
Other	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

PART 5 PATIENT POPULATIONS

Part 5 - PATIENT POPULATIONS

This section addresses your own clinical practice as an orthopaedic spine clinician.

5.1 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following age groups? **(total must equal 100%)**

Pediatrics (0-21 years of age)

Adults (22-59 years of age)

Geriatrics (60 years of age to end of life)

5.2 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following sex groups? **(total must equal 100%)**

Male

Female

Ambiguous

5.3 Please indicate your referral sources by percentage below.

(total must equal 100%)

Autonomous practice/self-referral	<input type="text"/>
Chiropractors	<input type="text"/>
Family practice physicians or other physician primary care providers	<input type="text"/>
Physician specialists (e.g. geriatrics physician)	<input type="text"/>
Physician assistants	<input type="text"/>
Podiatrist	<input type="text"/>
Nurse practitioners	<input type="text"/>
Other	<input type="text"/>

5.3.1 If you entered information for "Other" above, please list a different referral source and percentage.

Spine Validation Practice Analysis Survey 2022

PART 6 MEDICAL CONDITIONS / 6.1 NERVOUS SYSTEM

Part 6 - Medical Conditions

The curriculum of all accredited orthopaedic spine fellowship programs must include a variety of medical conditions specific to orthopaedic spine.

This section addresses your clinical practice as an orthopaedic spine clinician.

Your answers should reflect what you believe to be "orthopaedic spine subspecialty clinical practice" - i.e. practice that requires advanced knowledge and skill for efficient, effective performance, resulting in optimal patient/client care outcomes.

You are asked to rate each item in Part 2 on the following 3 scales:

Frequency - How frequently does the orthopaedic spine clinical subspecialist perform this activity?

- 0 - Never;
- 1 - Less than once a month;
- 2 - Monthly;
- 3 - Weekly;
- 4 - Daily

Importance - Regardless of the frequency of occurrence, how important is this activity in everyday practice as an orthopaedic spine clinical subspecialist?

- 0 - Not important;
- 1 - Of little importance;
- 2 - Moderately important;
- 3 - Very important

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

- 0 - Advanced beginner level;
- 1 - Competent skill level;
- 2 - Proficient skill level;
- 3 - Expert skill level

Level of Master Definitions - Please keep the following definitions for the skill levels indicated in the Level of Mastery scale in mind when completing the survey:

Advanced beginner level: Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level: Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level: Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level: Physical therapists at this level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid, and efficient. Clinical decision-making is rapid and accurate.

6.1 NERVOUS SYSTEM

6.1.1 Cervical Radiculopathy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.1.2 Lumbar Radiculopathy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.1.3 Thoracic Outlet Syndrome.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.1.4 Other peripheral neural impingements (not including thoracic outlet syndrome; e.g., double crush syndrome, other neurodynamic disorders).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.1.5 Meralgia paresthetica.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.1.6 Cervical Myelopathy.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

6.2 MUSCULOSKELETAL SYSTEM

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

6.2 MUSCULOSKELETAL SYSTEM

6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion, herniation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.2 Cervical Instability.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.3 Cervical Sprain/Strain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.4 Cervicogenic Headache.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.5 Chronic Pain Syndromes (e.g., central sensitization and/or nociplastic pain, other persistent pain conditions).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.6 Other Disorders of Cervical Spine.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.7 Temporomandibular Dysfunction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.8 Disorders of the Hip.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

6.2 MUSCULOSKELETAL SYSTEM, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

6.2 MUSCULOSKELETAL SYSTEM, CONT.

6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion, herniation).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.10 Lumbar Instability.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.11 Lumbar Spondylosis / Spondylolisthesis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.12 Lumbar Strain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.13 Other Disorders of the Lumbar Spine.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.14 Piriformis Syndrome.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.15 Sacroiliac Dysfunction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.16 Other Disorders of the Pelvic Girdle.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.17 Inflammatory Conditions (spondyloarthropathies such as ankylosing spondylitis, RA, etc.).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022

6.2 MUSCULOSKELETAL SYSTEM, CONT.

Frequency - How frequently does the clinical subspecialist in orthopaedic spine perform this activity?

Importance - Regardless of the frequency of occurrence, how important is activity in the everyday practice as a clinical subspecialist in orthopaedic spine?

Level of Mastery - Level of Mastery refers to the level of skill at which a physical therapist performs during the management of orthopaedic spine patients/clients. What skill level would an orthopaedic spine subspecialist demonstrate while performing this activity?

Level of Mastery Definitions

Advanced beginner skill level. Physical therapists at this level demonstrate acceptable performance but are not able to identify what is most important. They have little or no perception of recurrent meaningful aspects of a clinical or administrative situations. Their efficiency is marginal. They rely on rules and guidelines to understand the situation. Clinical decision-making is labor-intensive.

Competent skill level. Physical therapists at this level have the ability to identify the important aspects of a situation, prioritize them and make a plan that improves efficiency. The PT's have a conscious clinical awareness and perceive that their actions have meaning and purpose. Their efficiency is moderate and flexibility is beginning to develop.

Proficient skill level. Physical therapists at this level perceive each situation as a whole rather than parts. Performance is guided by clinical experience and data. These PT's have learned what to expect in a variety of clinical situations. Their perspective is presented by the situation, related to past experience and recent events. Decision-making has become more fluid.

Expert skill level. Physical therapists at this skill level demonstrate an intuitive grasp of the situation and zero in on the problem without wasting time. They are able to manage complex clinical situations without difficulty. Performance is flexible, fluid and efficient. Clinical decision-making is rapid and accurate.

6.2 MUSCULOSKELETAL SYSTEM, CONT.

6.2.18 Rib Dysfunction.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.19 Thoracic Sprain/Strain.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.20 Thoracic Disc Pathologies (e.g., thoracic disc herniation, thoracic radiculopathy).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.21 Other Disorders of the Thoracic Spine.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.22 Curvature of the spine (e.g., adolescent idiopathic scoliosis, congenital muscular scoliosis, pathologic scoliosis, adult idiopathic scoliosis, degenerative scoliosis, kyphosis, lordosis).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.23 Diastasis recti.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.24 Facet dysfunction (cervical, thoracic, lumbar).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.25 Operative procedure on spinal structure.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.26 Spinal stenosis.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.27 Oncological Disorders (e.g., tumor, spine metastases, etc.).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.28 Torticollis (e.g., atlanto axial rotary displacement, congenital muscular torticollis).

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.29 Klippel-Feil Syndrome.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

6.2.30 Scheuermann's Disease.

	Frequency	Importance	Level of Mastery
Choose answers from drop down menus.	<input type="text"/>	<input type="text"/>	<input type="text"/>

Spine Validation Practice Analysis Survey 2022**PART 7 DEMOGRAPHIC INFORMATION****Part 7 - DEMOGRAPHIC INFORMATION**

Please answer each item by selecting the option that most clearly describes you or your professional activities. Demographic information is collected for purposes of group analysis. Individual responses are confidential.

7.1 In which geographic region is the major portion of your practice?

7.2 What is your entry-level physical therapy education?

7.3 What is your highest earned academic degree in any area of study?

7.4 What is the total number of years you have been a practicing physical therapist?

7.5 What is the total number of years you have primarily practiced in Orthopaedic Spine physical therapy?

Spine Validation Practice Analysis Survey 2022**PART 7: DEMOGRAPHIC INFORMATION, CONT.****Part 7 - DEMOGRAPHIC INFORMATION, CONT.**

7.6 Please indicate any ABPTS board certifications you currently hold (select all that apply):

- Cardiovascular and Pulmonary
- Clinical Electrophysiology
- Geriatrics
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Sports
- Women's Health
- Wound Management
- None of the above

7.7 Please indicate if you graduated from an ABPTRFE-accredited residency program in any of the following areas of specialty practice (select all that apply):

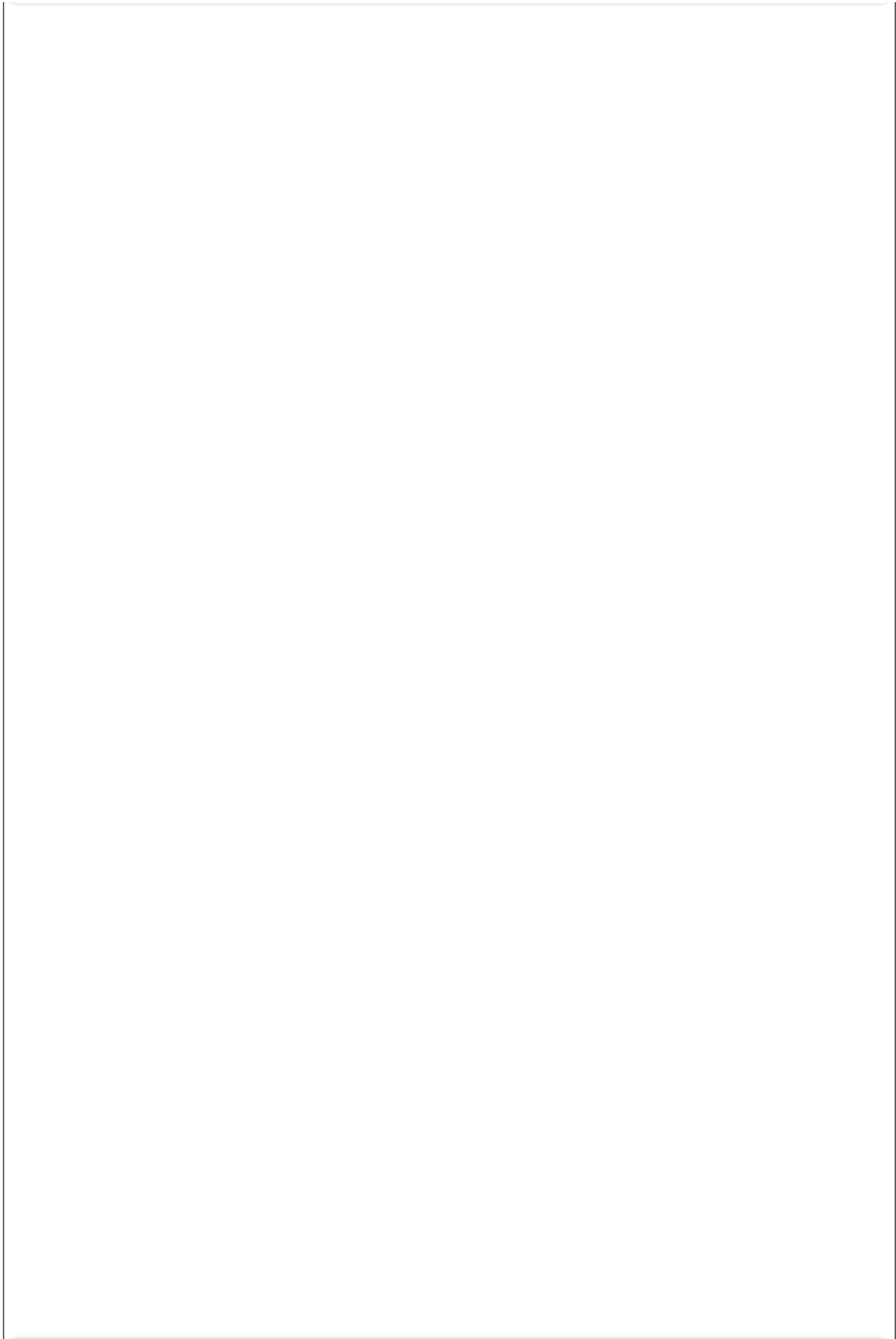
- Acute Care
- Cardiovascular and Pulmonary
- Clinical Electrophysiology
- Faculty
- Geriatrics
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Sports
- Women's Health
- Wound Management
- None of the above

7.8 Please indicate if you graduated from an ABPTRFE-accredited fellowship program in any of the following areas of subspecialty practice (select all that apply):

- Critical Care
- Hand Therapy
- Higher Education Leadership
- Movement System
- Neonatology
- Orthopaedic Manual Physical Therapy
- Performing Arts
- Spine
- Sports Division 1
- Upper Extremity Athlete
- None of the above

7.9 Based on state law and facility policies, do you evaluate and/or treat patients/clients without a physician referral?

- Yes
- No



Spine Validation Practice Analysis Survey 2022

PART 7: DEMOGRAPHIC INFORMATION, CONT.

Part 7 - DEMOGRAPHIC INFORMATION, CONT.

7.10 What is your current employment status at your primary position (35 or more hours per week is full-time)?

- Full-time salaried
- Part-time salaried
- Full-time self employed
- Part-time self employed
- Retired
- Unemployed/not seeking work
- Unemployed/seeking full-time employment
- Unemployed/seeking part-time employment
- Full-time hourly
- Part-time hourly

7.11 What educational method has had the MOST influence on developing your present level of clinical skills? **(Check one category only)**

- Self-study (books, articles, videotapes, home study courses)
- In service, peer interaction
- Continuing education courses, workshops, seminars, study groups
- Mentoring
- Formal residency program
- Formal fellowship program
- Graduate program

7.12 Are you a member of the APTA?

Yes

No

7.13 Please indicate any APTA Section you are a member of (select all that apply):

- Acute Care
- Aquatics
- Cardiovascular and Pulmonary
- Clinical Electrophysiology and Wound Management
- Education
- Federal
- Geriatrics
- Hand and Upper Extremity
- Health Policy and Administration
- Home Health
- Neurology
- Oncology
- Orthopaedics
- Pediatrics
- Pelvic Health
- Private Practice
- Research
- Sports
- None of the above

Spine Validation Practice Analysis Survey 2022**PART 7: DEMOGRAPHIC INFORMATION, CONT.****Part 7 - DEMOGRAPHIC INFORMATION, CONT.**

7.14 What is your sex?

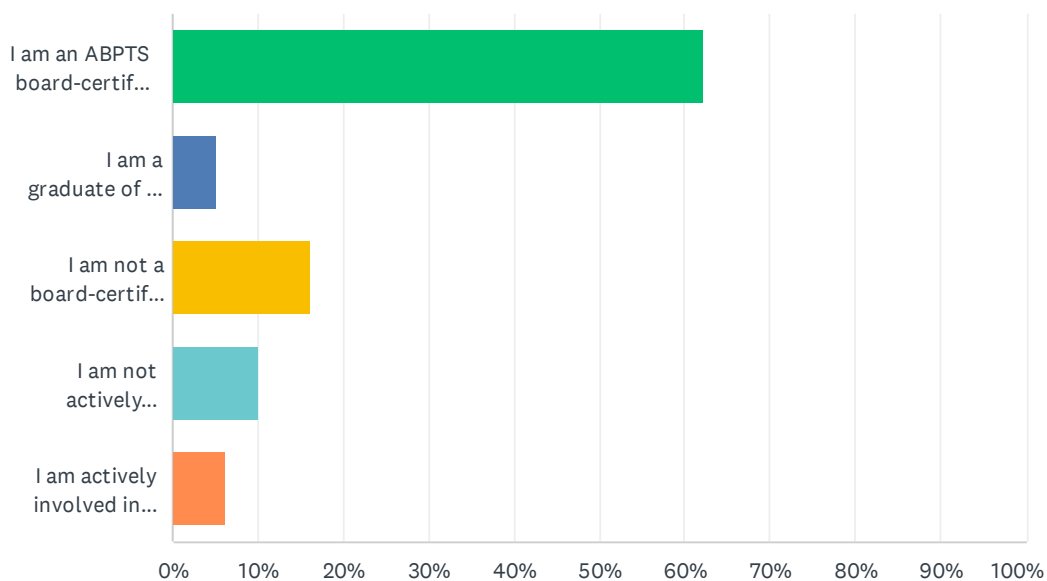
7.15 What is your age?

7.16 Which of the following best describes your race/ethnic origin?

- American Indian or Alaskan Native
- Asian
- African-American or Black (Not Hispanic)
- White (Not Hispanic)
- Hispanic/Latino
- Pacific Islander or Native Hawaiian
- Other

Q1 Please select one of the following survey options:

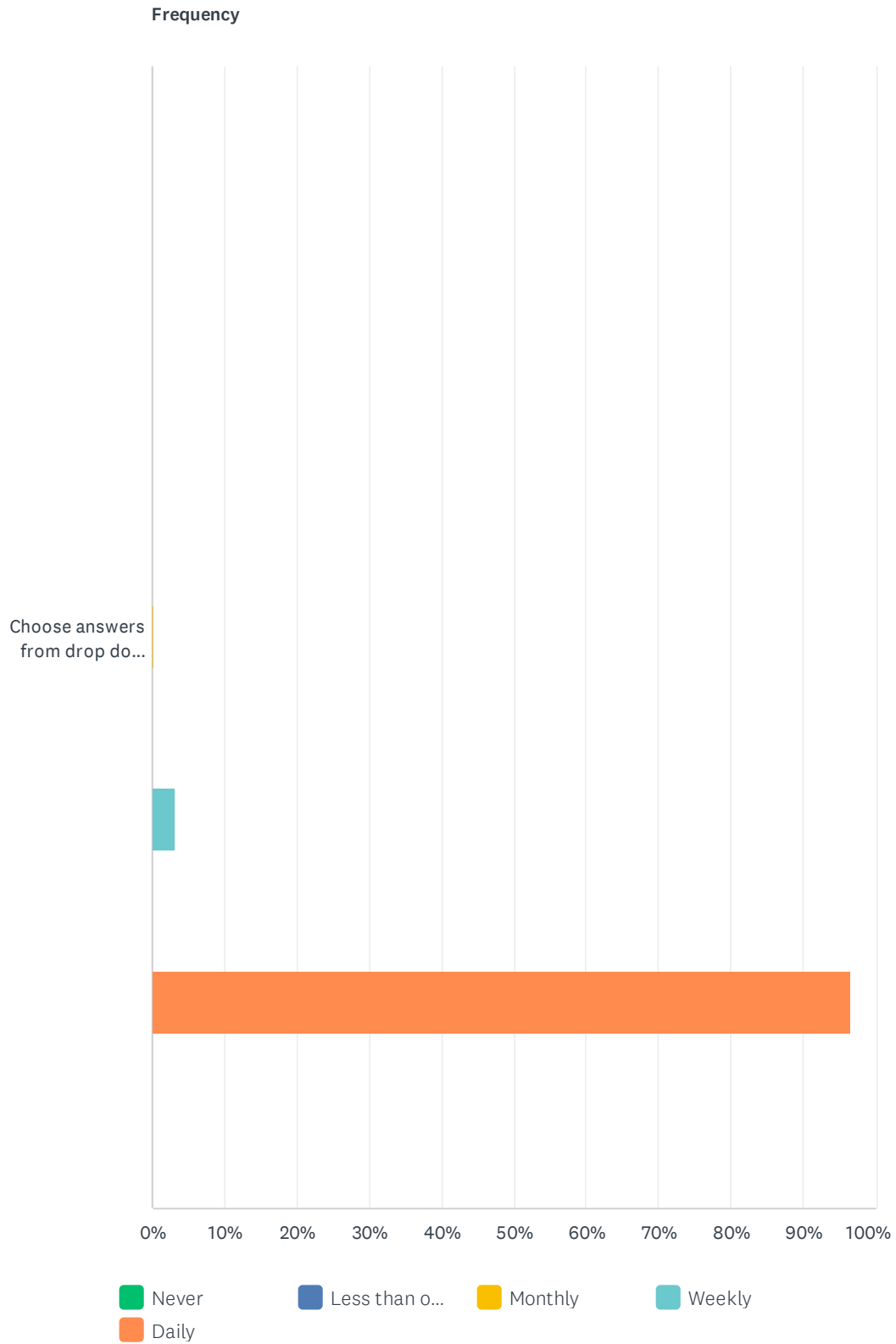
Answered: 1,210 Skipped: 0



ANSWER CHOICES	RESPONSES	
I am an ABPTS board-certified clinical specialist in orthopaedic or sports physical therapy, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	62.31%	754
I am a graduate of an ABPTRFE-accredited orthopaedic or sports residency program, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	5.21%	63
I am not a board-certified clinical specialist, or residency graduate, in orthopaedic or sports physical therapy but I am a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and have a minimum of 5 years of experience of practice in orthopaedic spine, with at least 1,000 hours in the last two (2) years.	16.28%	197
I am not actively involved in orthopaedic spine physical therapy practice and therefore I am not eligible to participate in this survey at this time.	10.00%	121
I am actively involved in orthopaedic spine physical therapy practice at the "subspecialist" level, but am unable to participate in this survey at this time.	6.20%	75
TOTAL		1,210

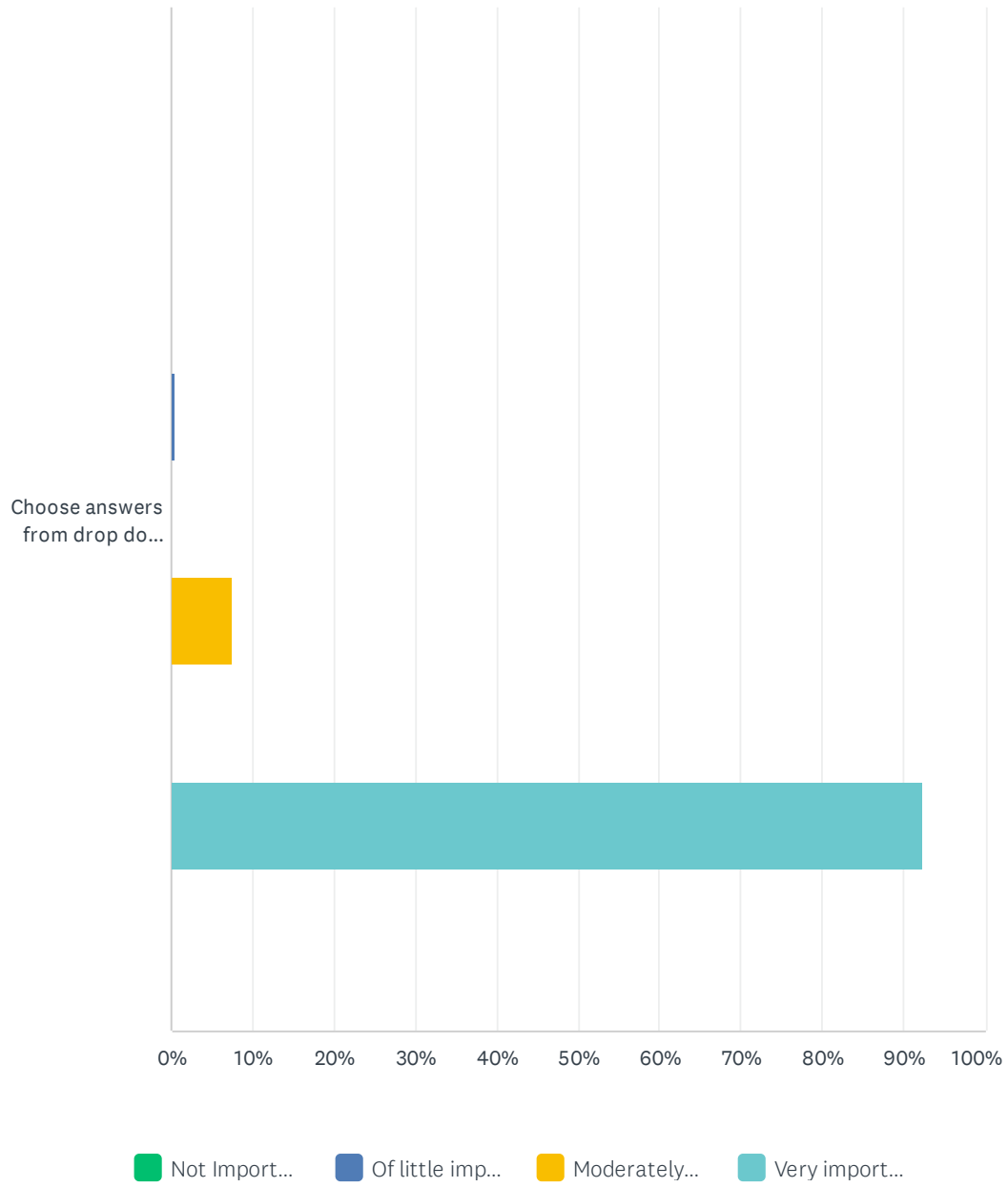
Q2 1.1.1.1 Musculoskeletal system.

Answered: 641 Skipped: 569



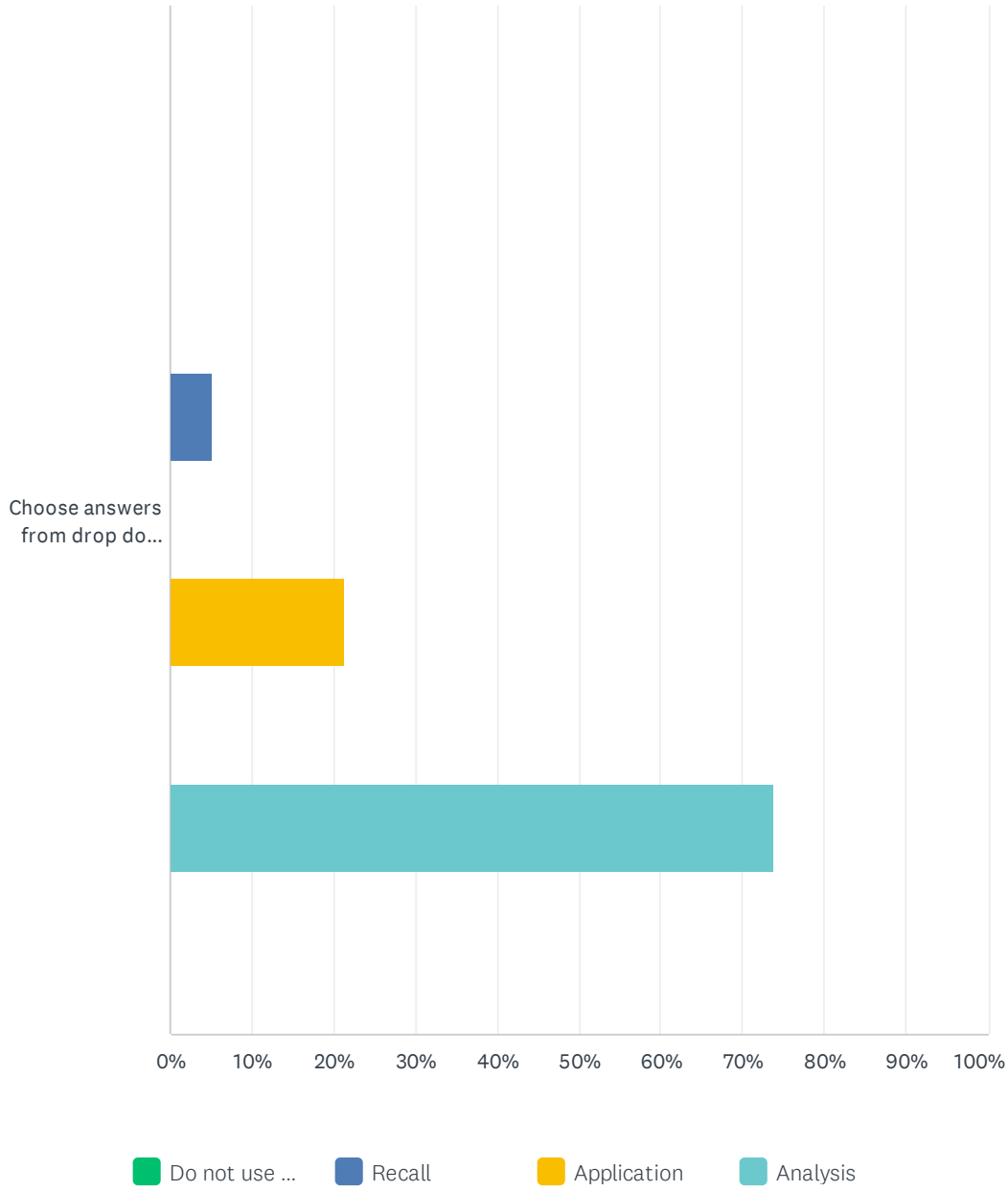
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.31% 2	3.13% 20	96.56% 618	640

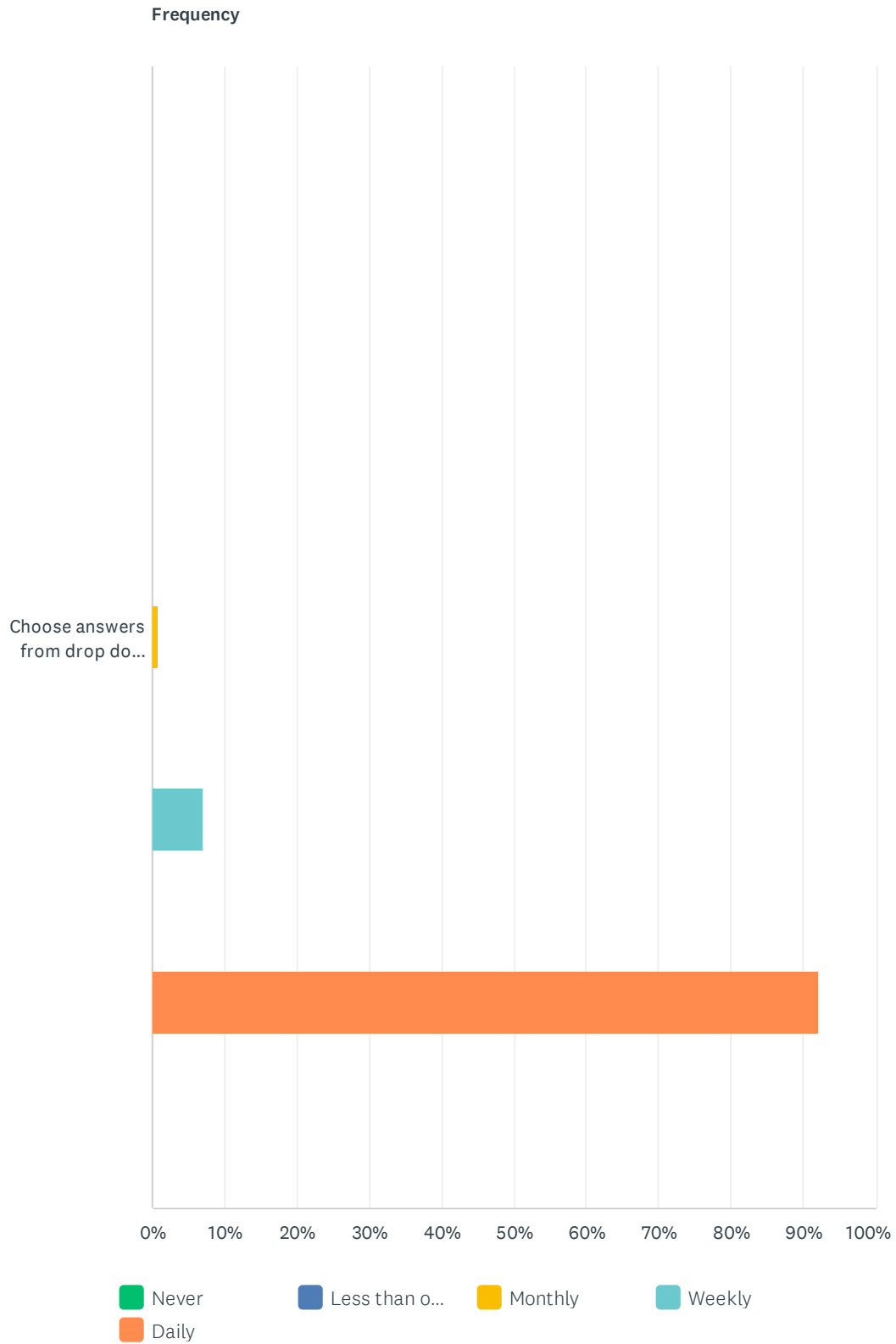
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.32% 2	7.42% 46	92.26% 572	620

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00%	5.03%	21.27%	73.70%	
	0	30	127	440	597

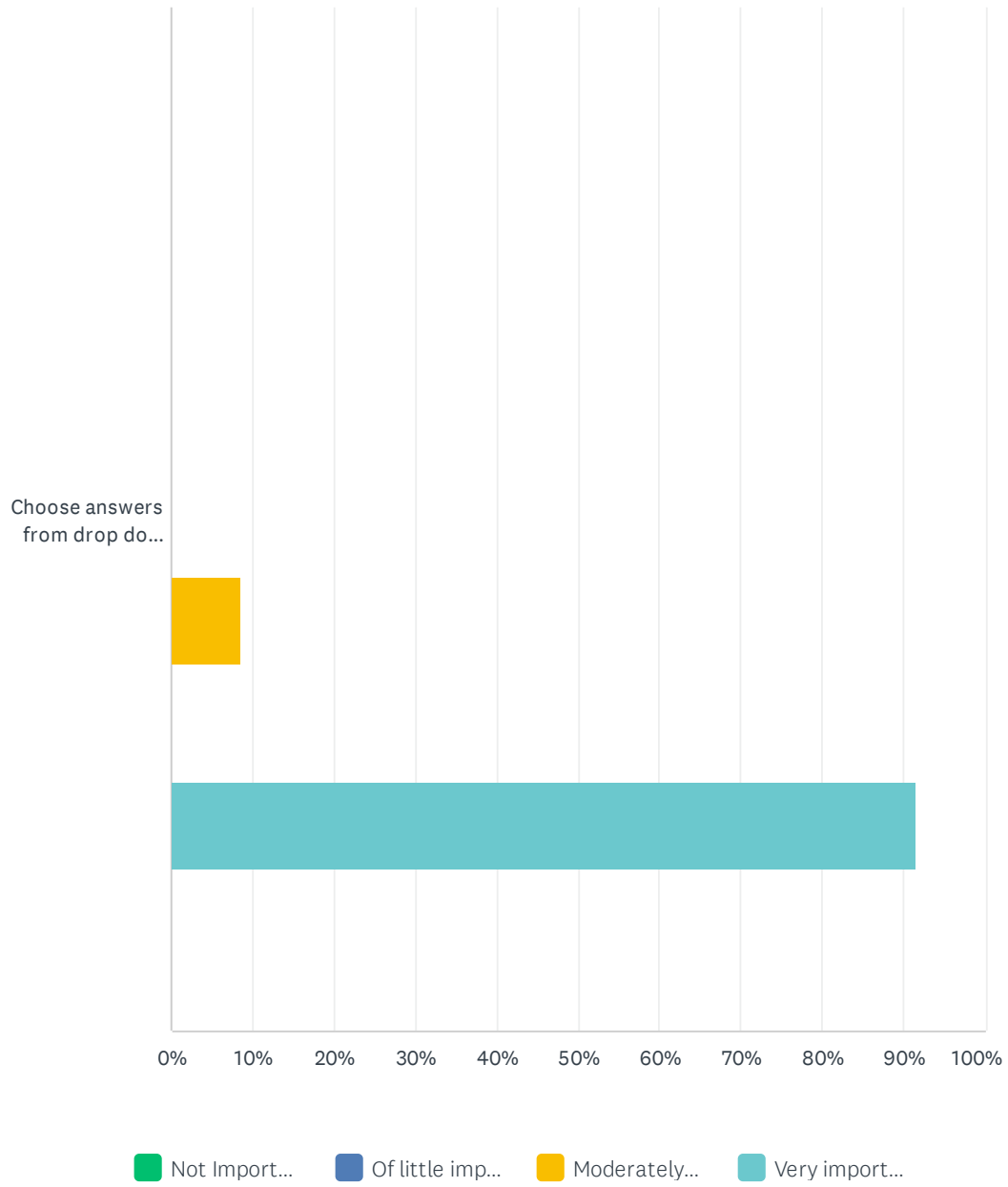
Q3 1.1.1.2 Neuromuscular system.

Answered: 635 Skipped: 575



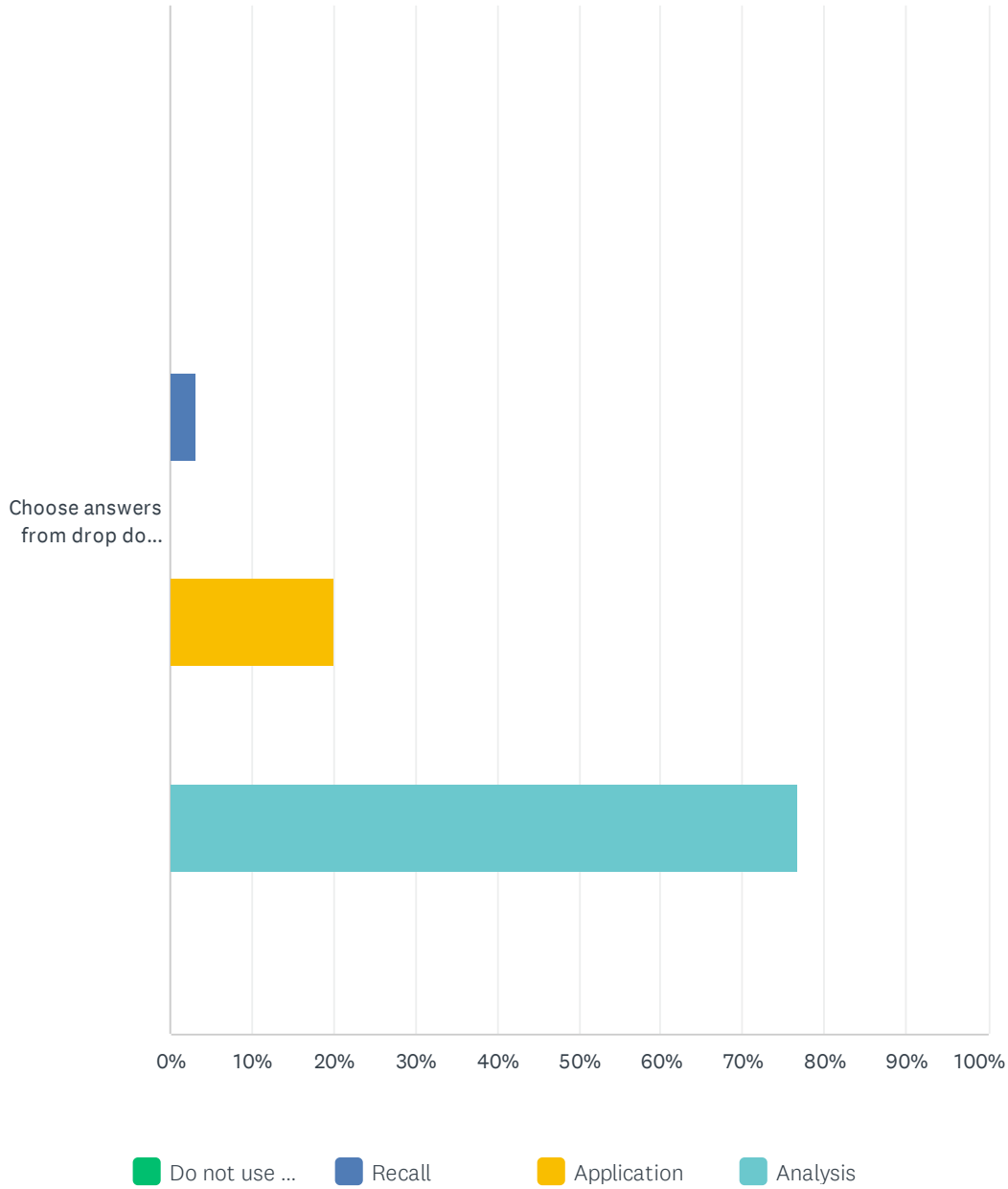
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.79% 5	7.09% 45	92.13% 585	635

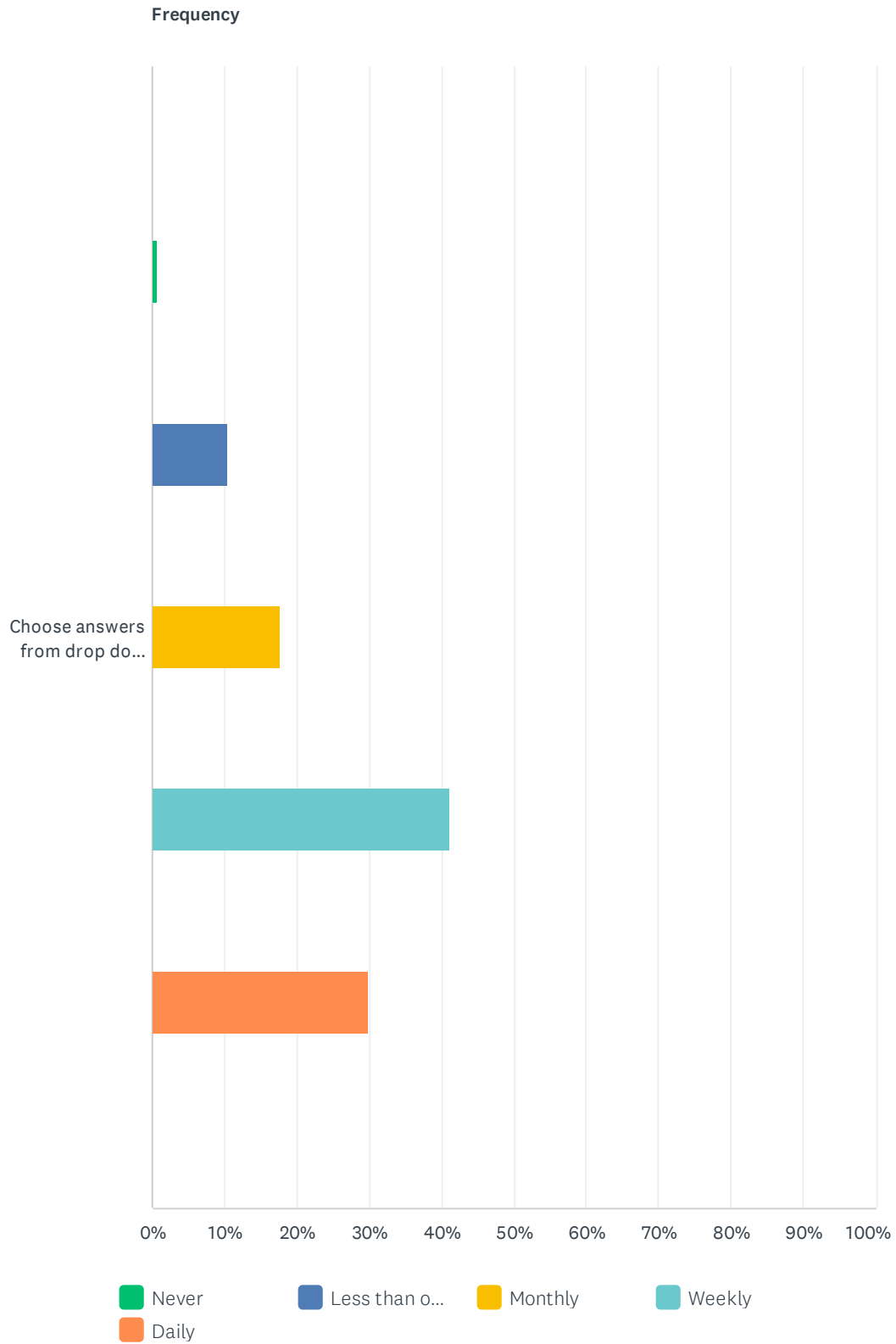
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	8.63% 53	91.37% 561	614

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00%	3.21%	20.10%	76.69%	
	0	19	119	454	592

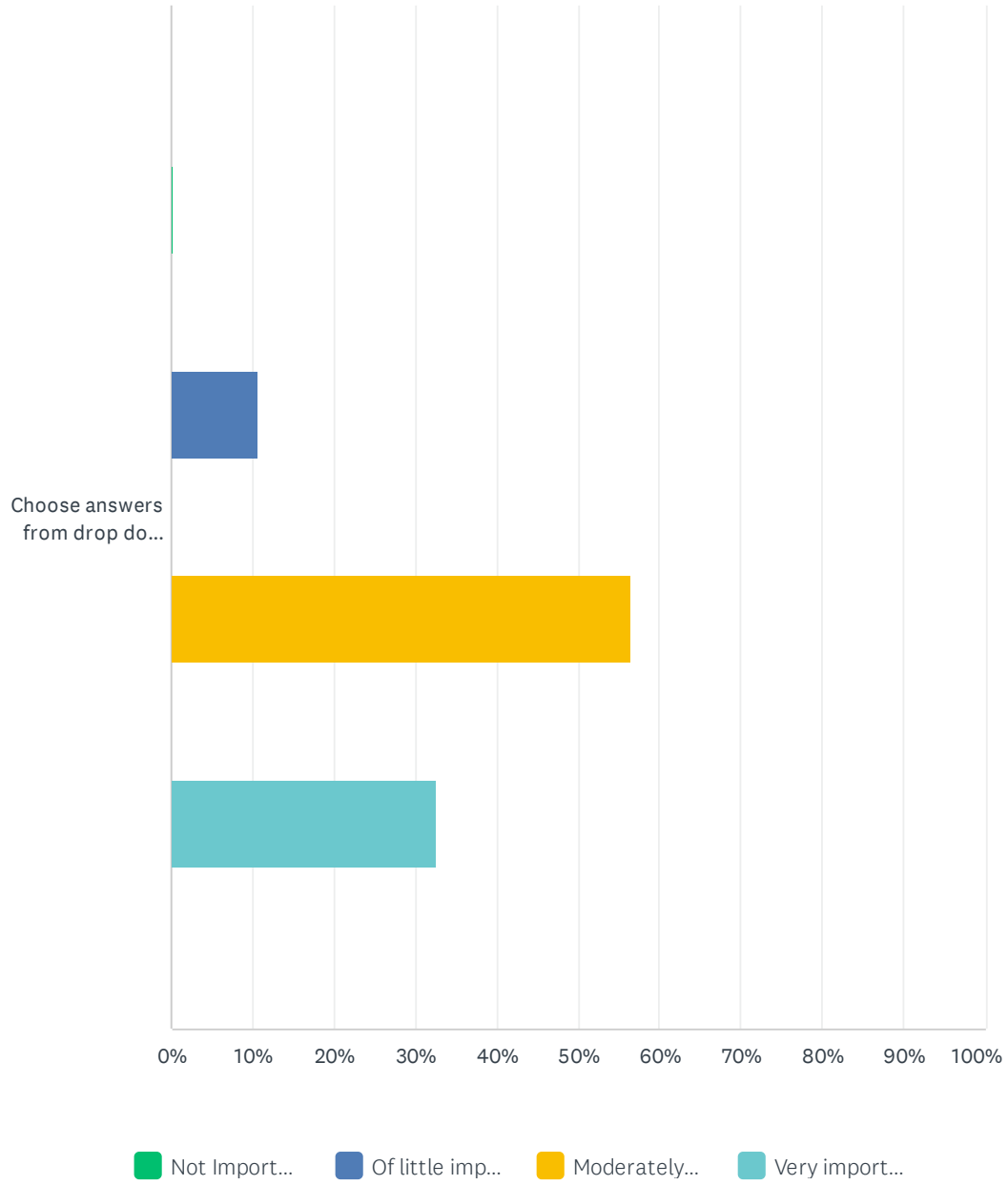
Q4 1.1.1.3 Cardiovascular and pulmonary systems.

Answered: 636 Skipped: 574



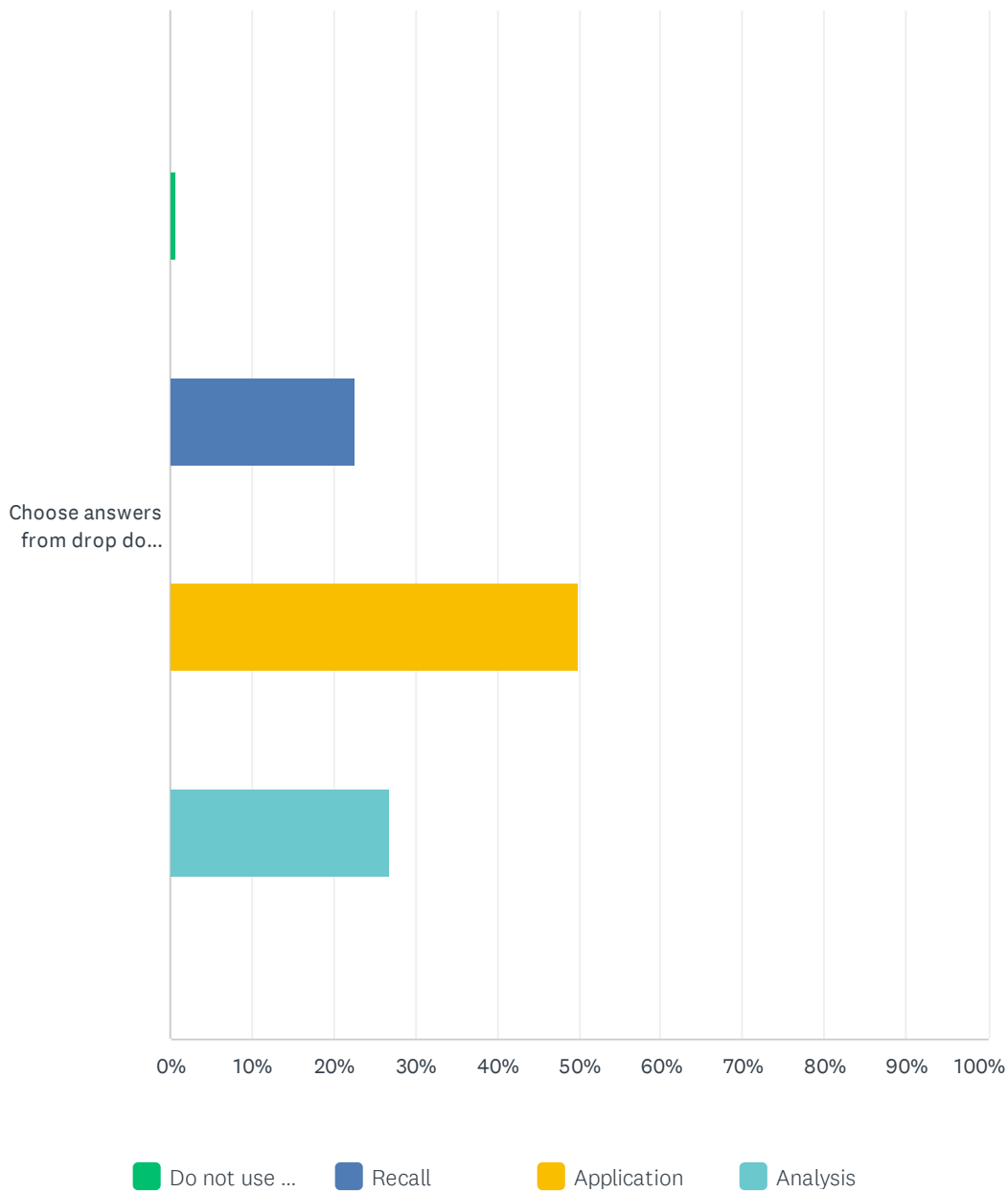
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.63% 4	10.53% 67	17.77% 113	41.19% 262	29.87% 190	636

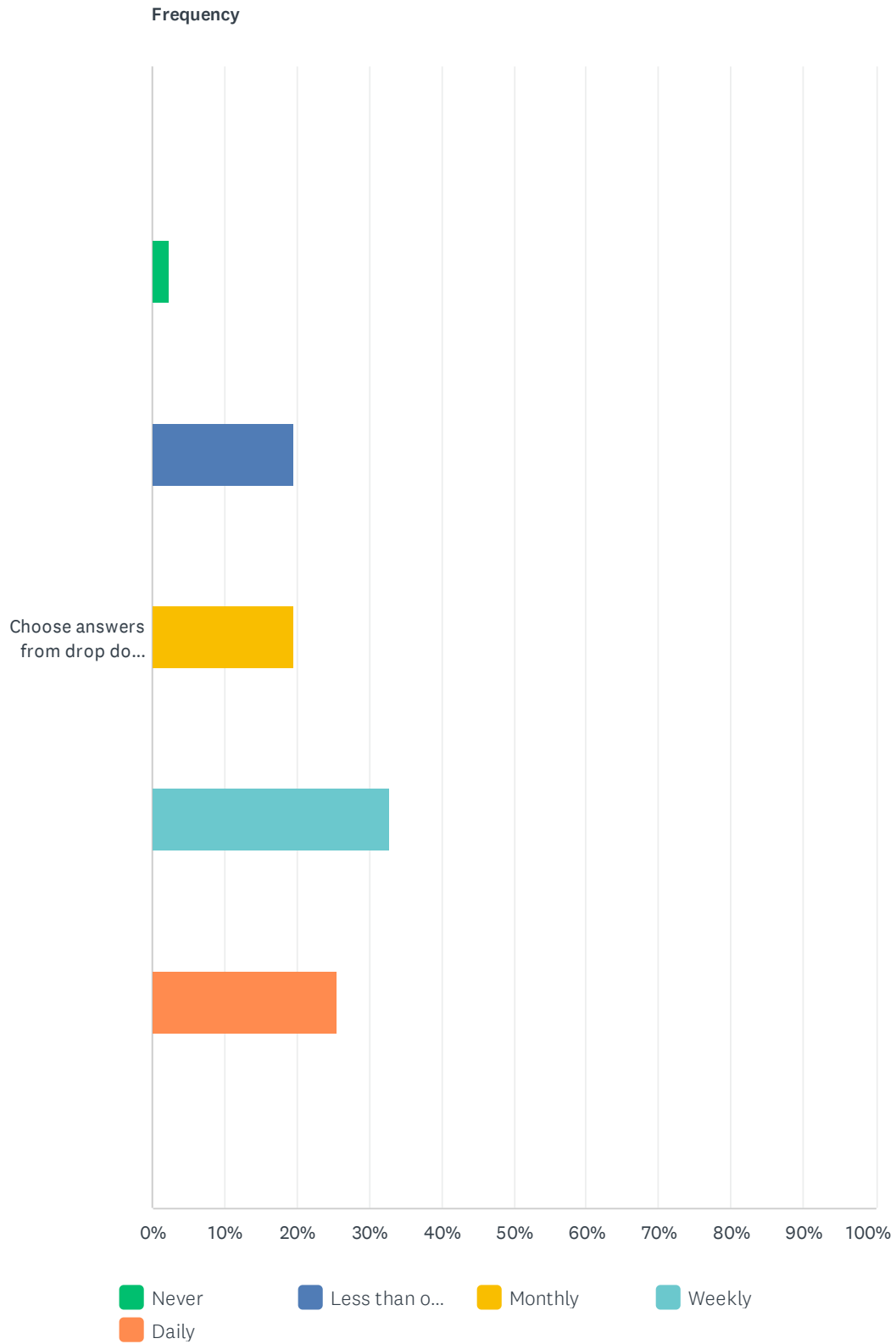
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.16% 1	10.73% 66	56.59% 348	32.52% 200	615

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.67%	22.60%	49.92%	26.81%	
	4	134	296	159	593

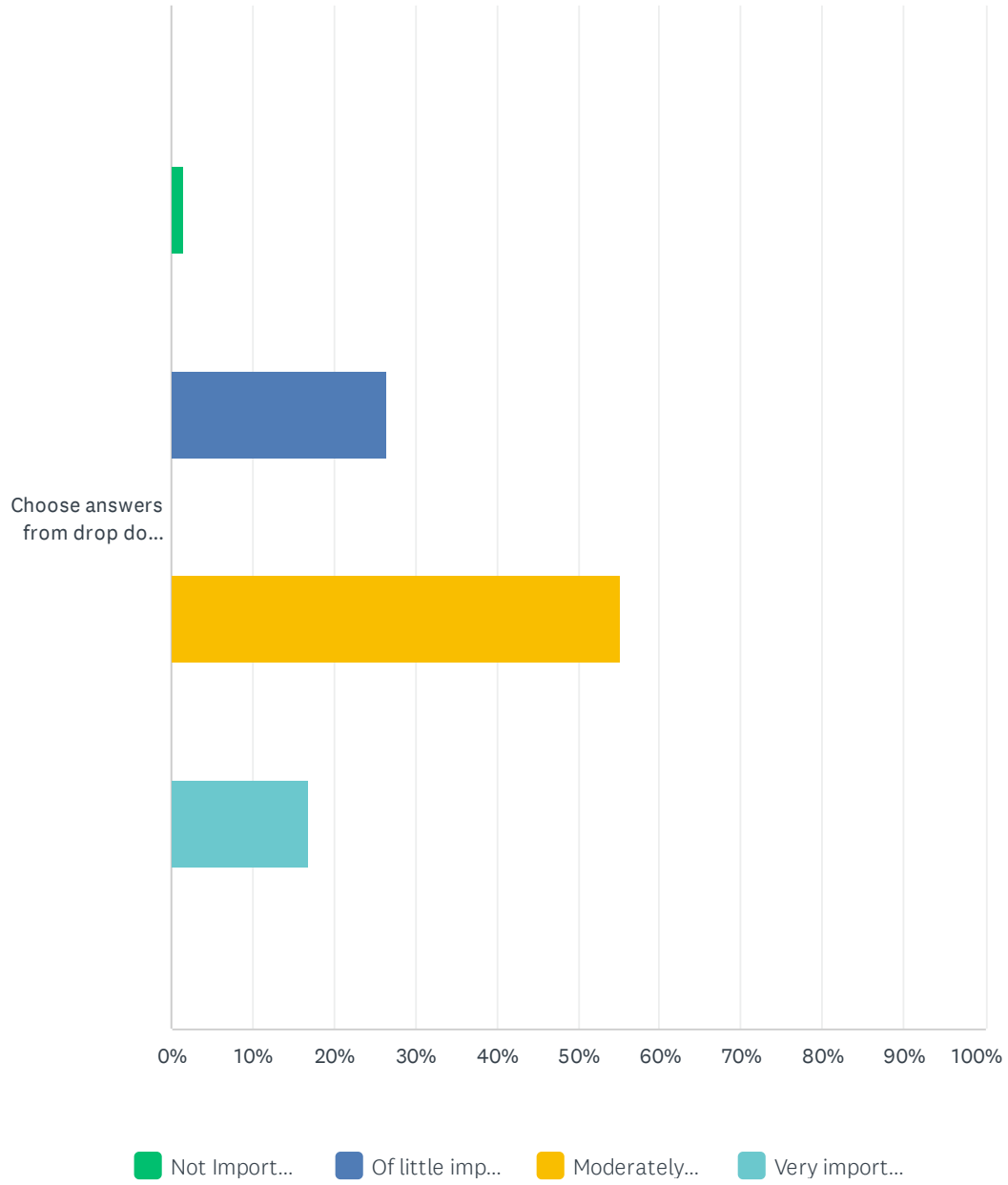
Q5 1.1.1.4 Integumentary system.

Answered: 635 Skipped: 575



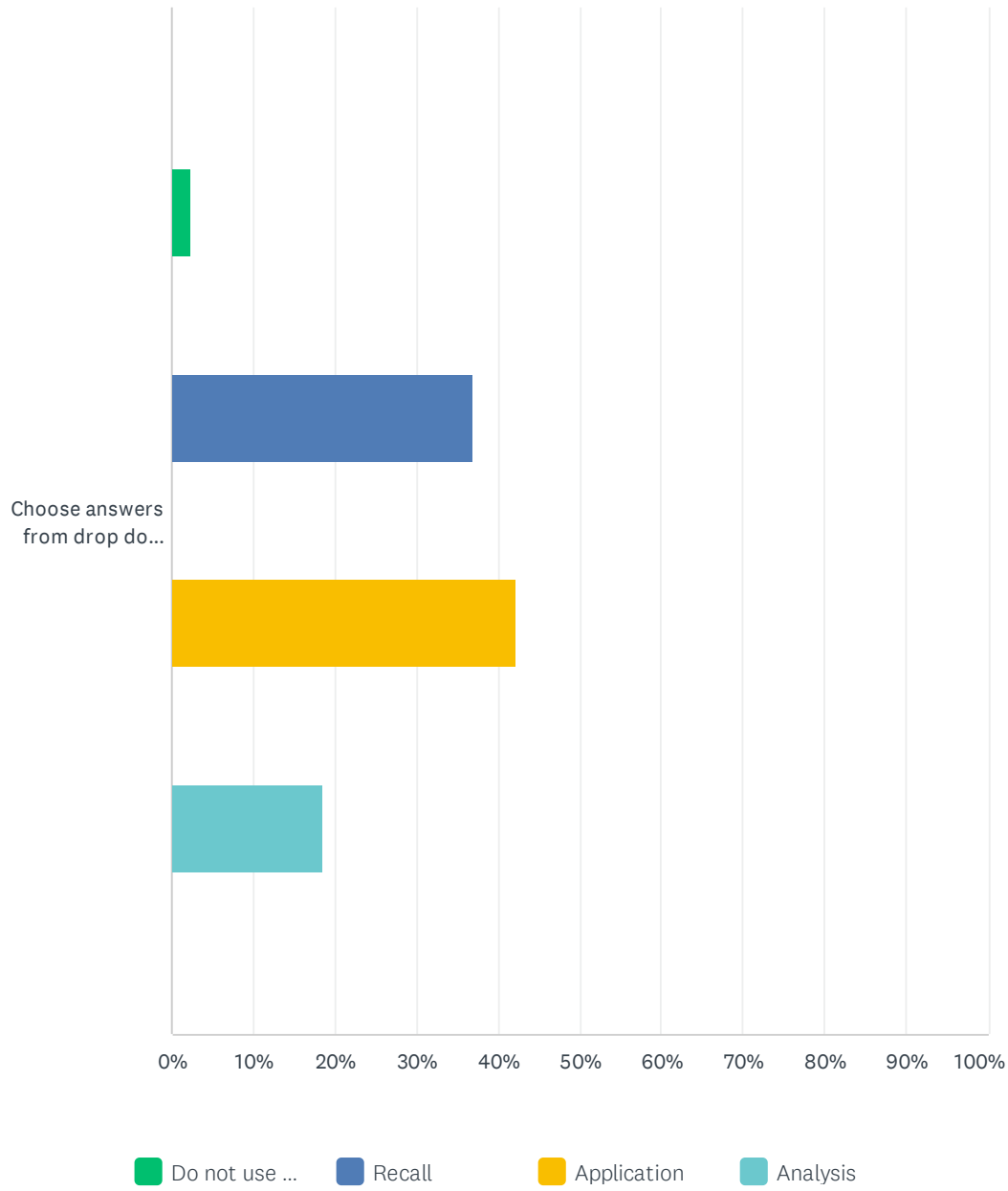
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	2.37% 15	19.72% 125	19.56% 124	32.81% 208	25.55% 162	634

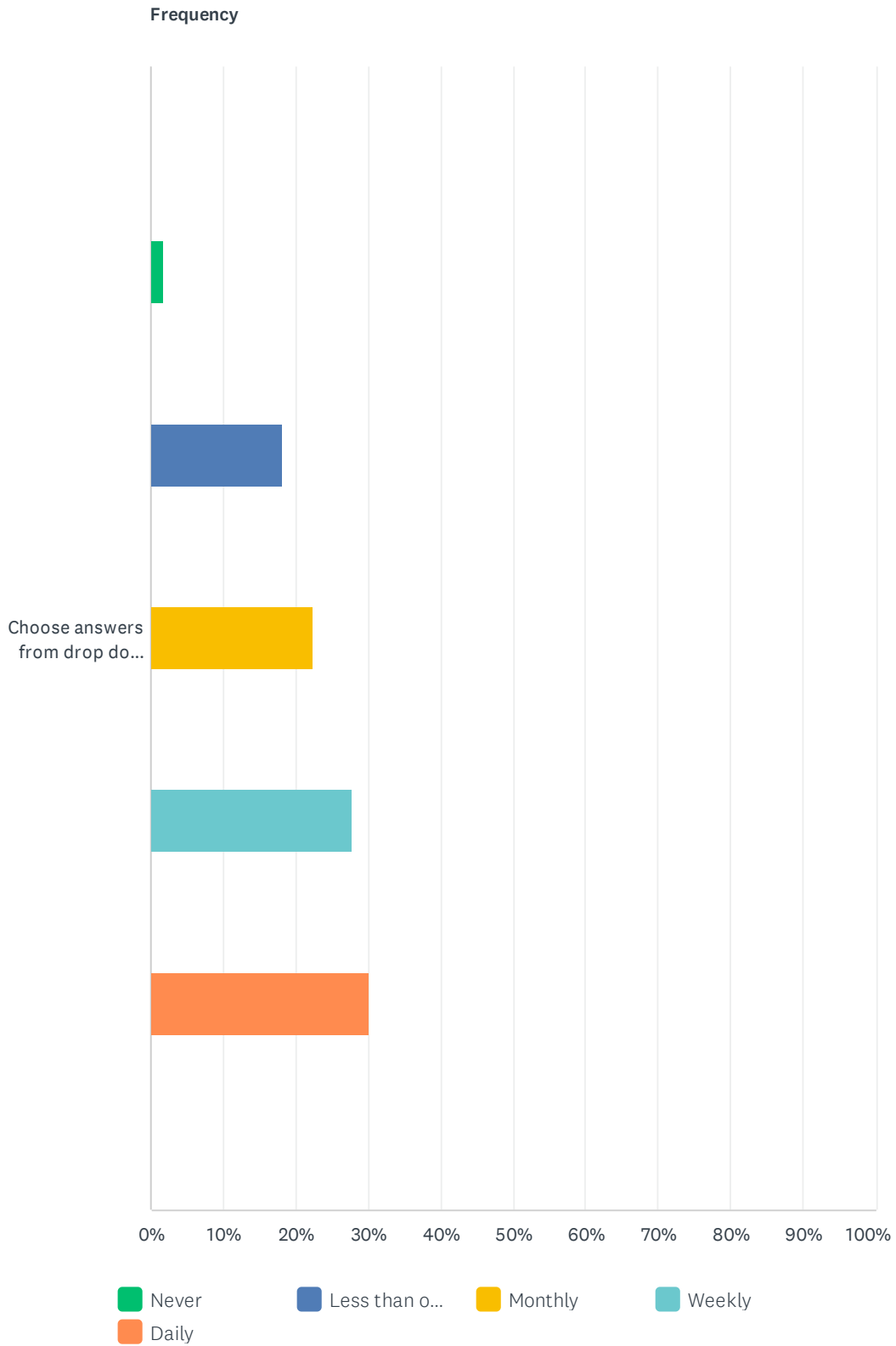
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.47% 9	26.43% 162	55.30% 339	16.80% 103	613

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	2.36% 14	36.82% 218	42.23% 250	18.58% 110	592

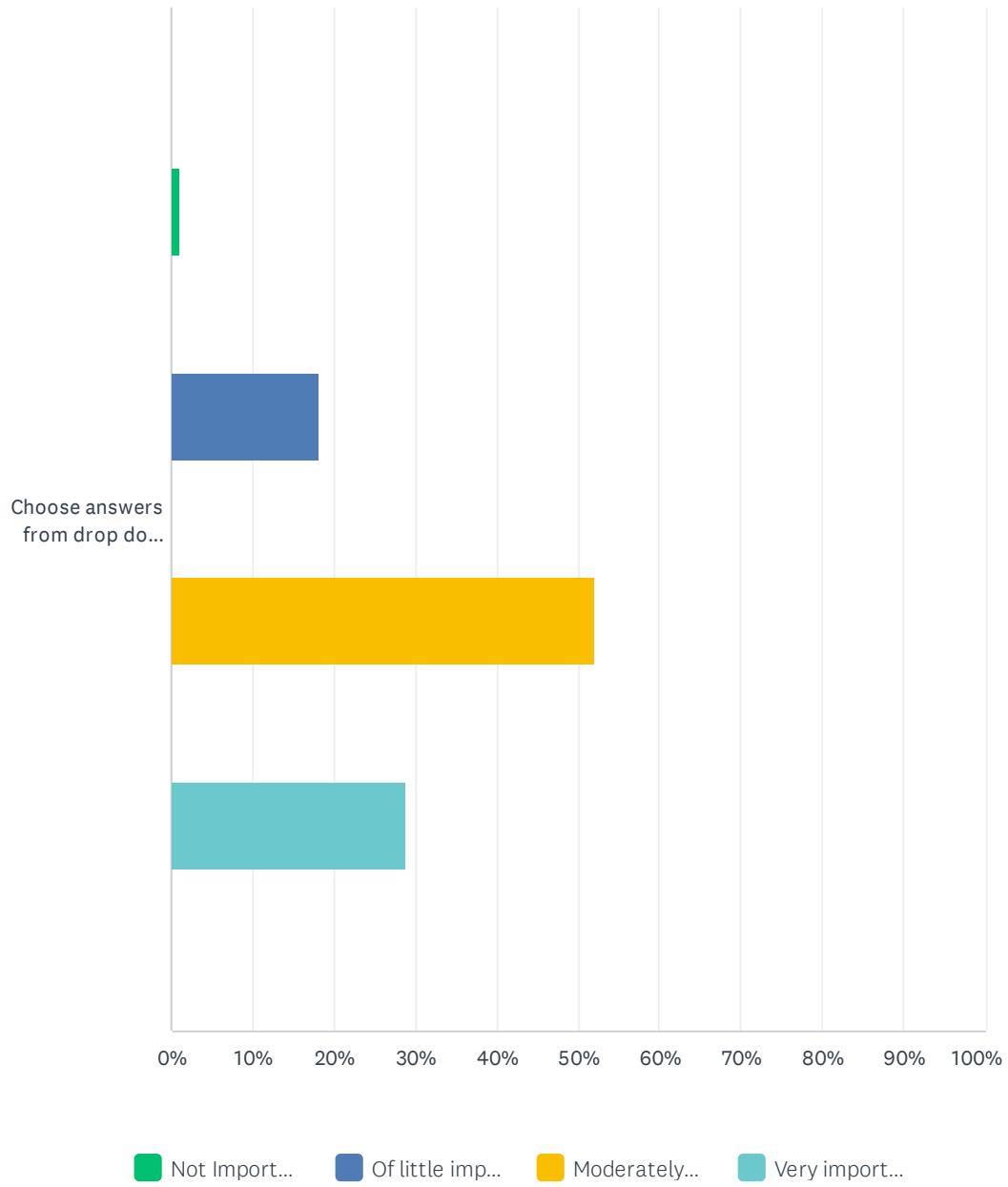
Q6 1.1.1.5 Human growth and development across the lifespan.

Answered: 634 Skipped: 576



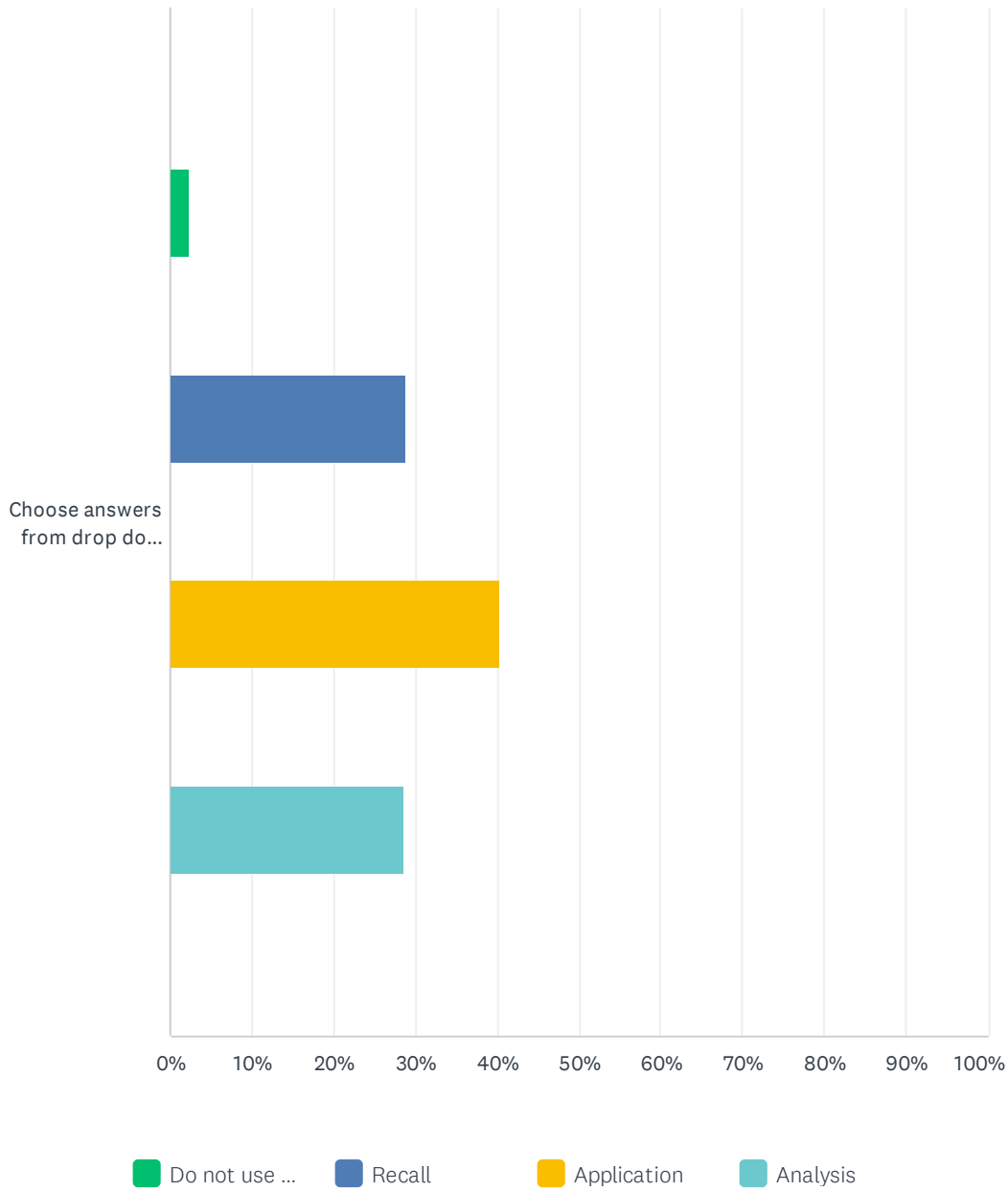
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.74% 11	18.14% 115	22.40% 142	27.76% 176	29.97% 190	634

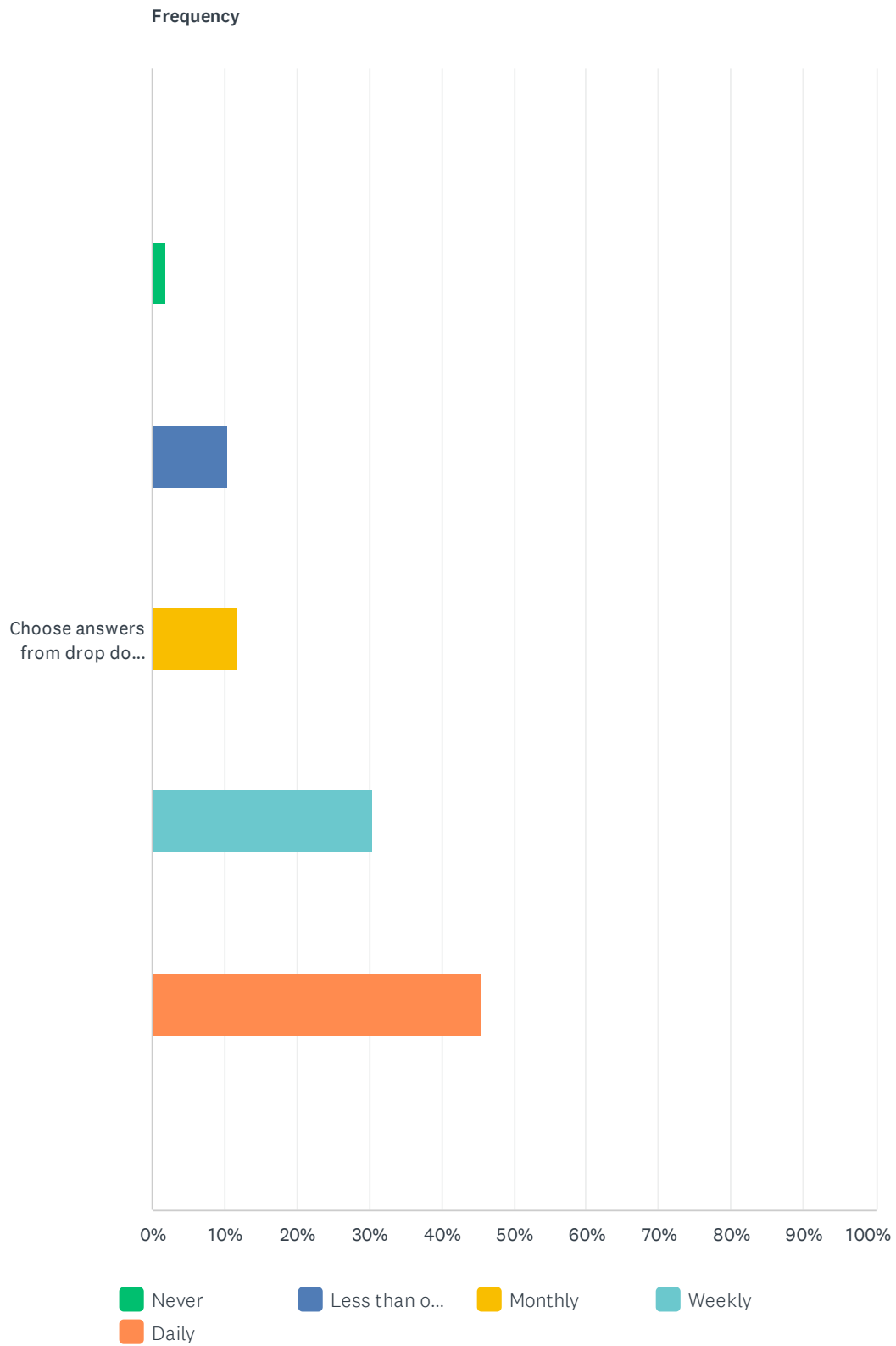
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.14% 7	18.11% 111	52.04% 319	28.71% 176	613

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	2.37% 14	28.76% 170	40.27% 238	28.60% 169	591

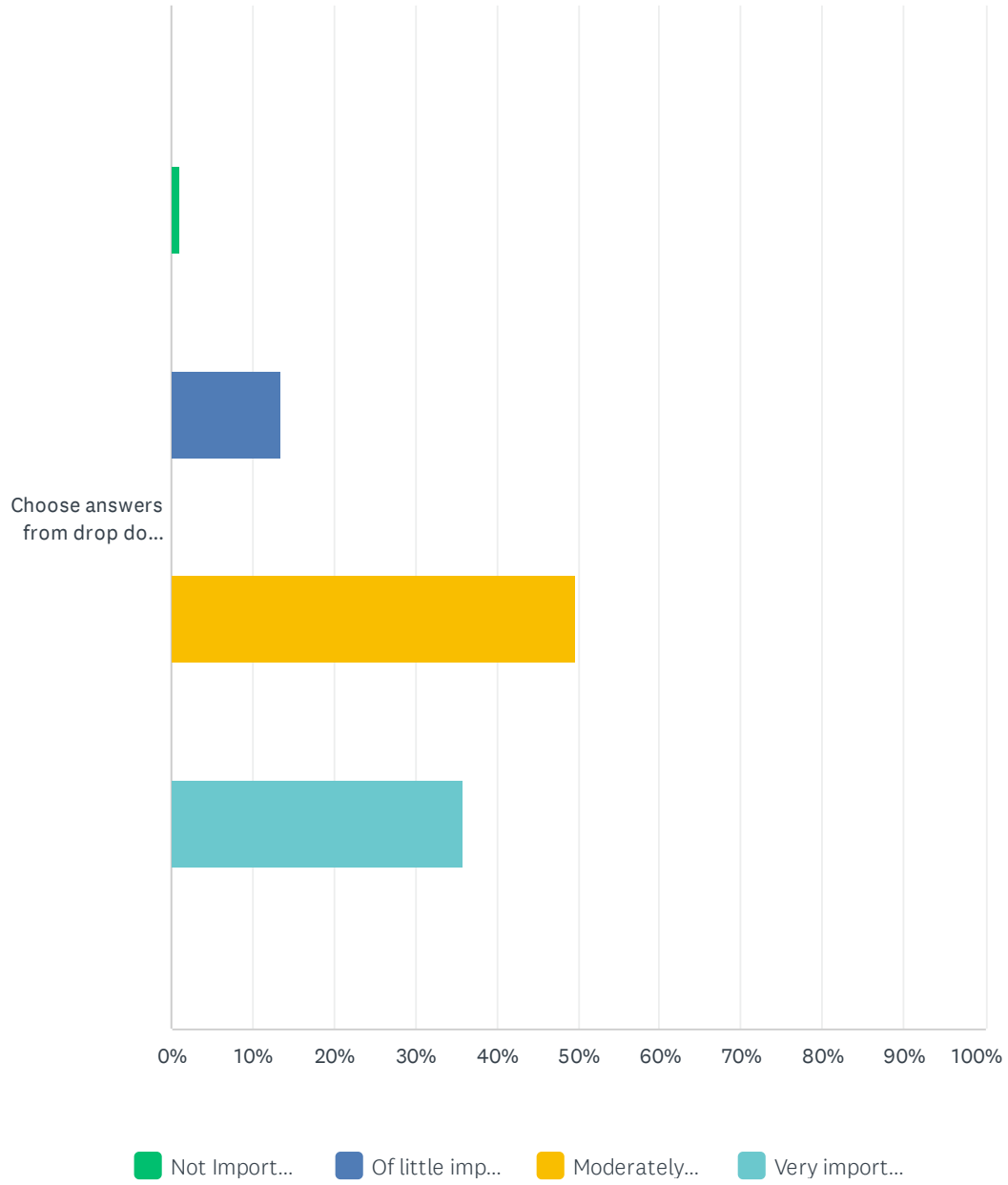
Q7 1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity).

Answered: 632 Skipped: 578



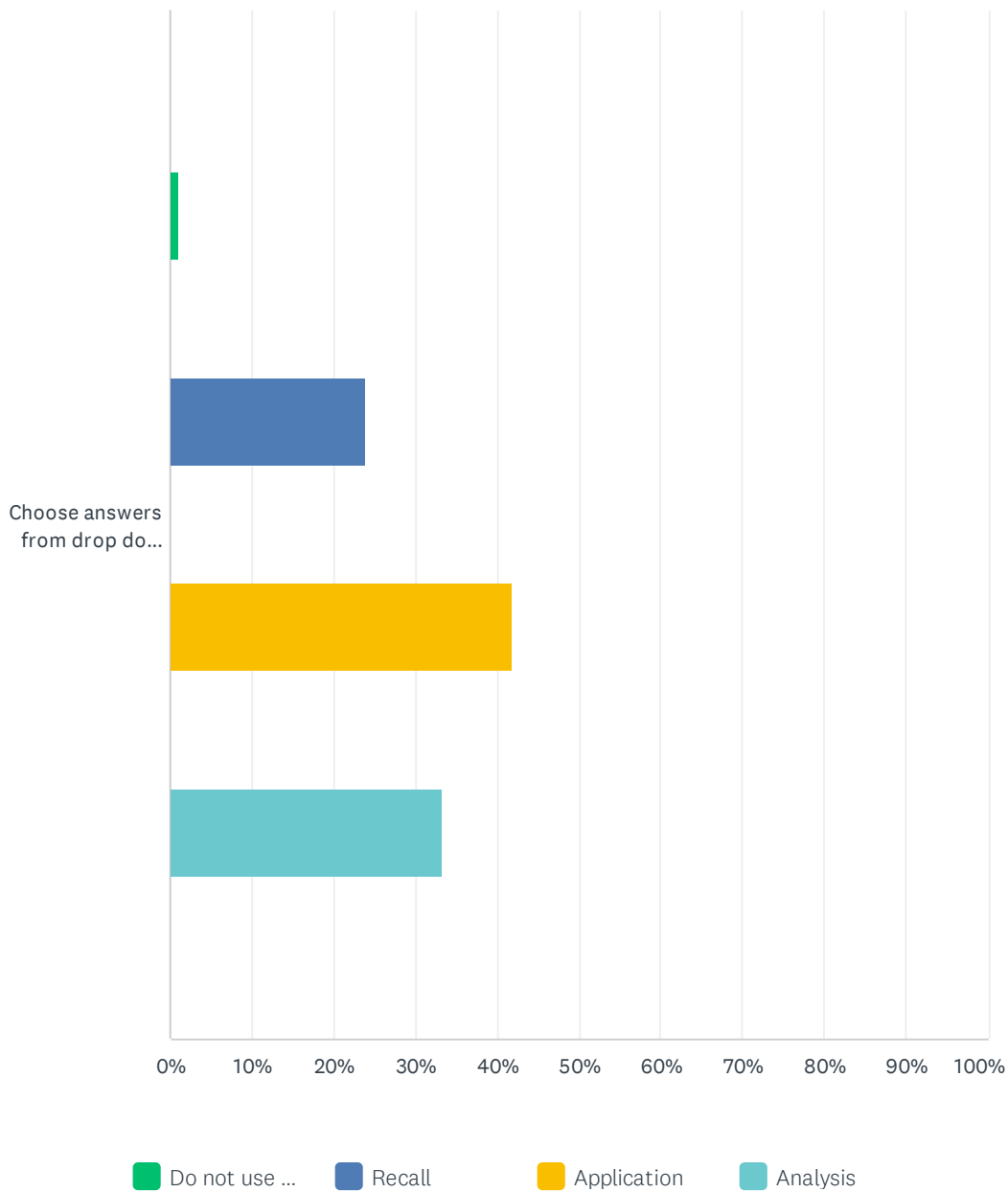
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.90% 12	10.46% 66	11.73% 74	30.59% 193	45.32% 286	631

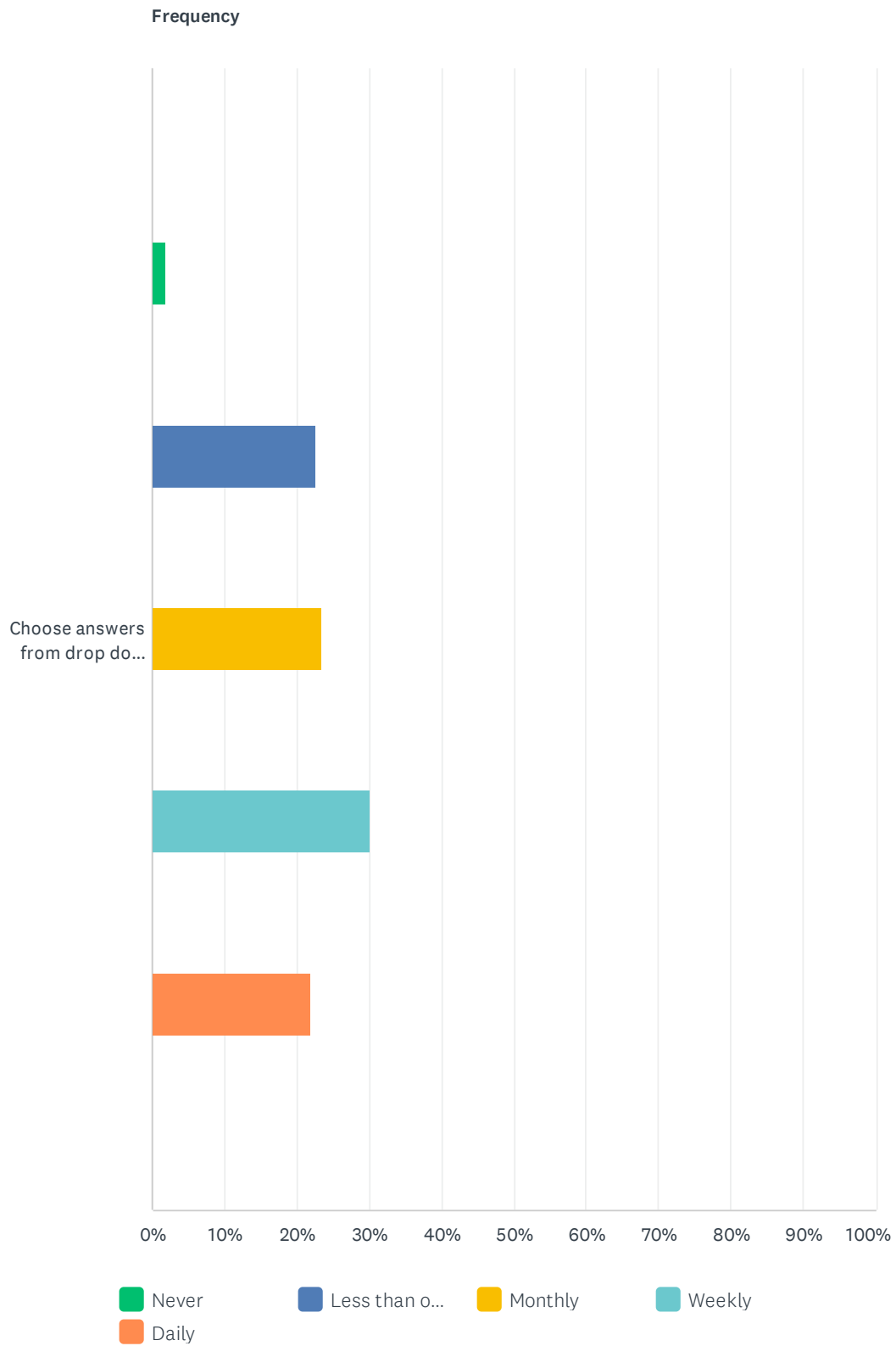
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.15% 7	13.46% 82	49.59% 302	35.80% 218	609

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	1.02%	23.94%	41.77%	33.28%	
	6	141	246	196	589

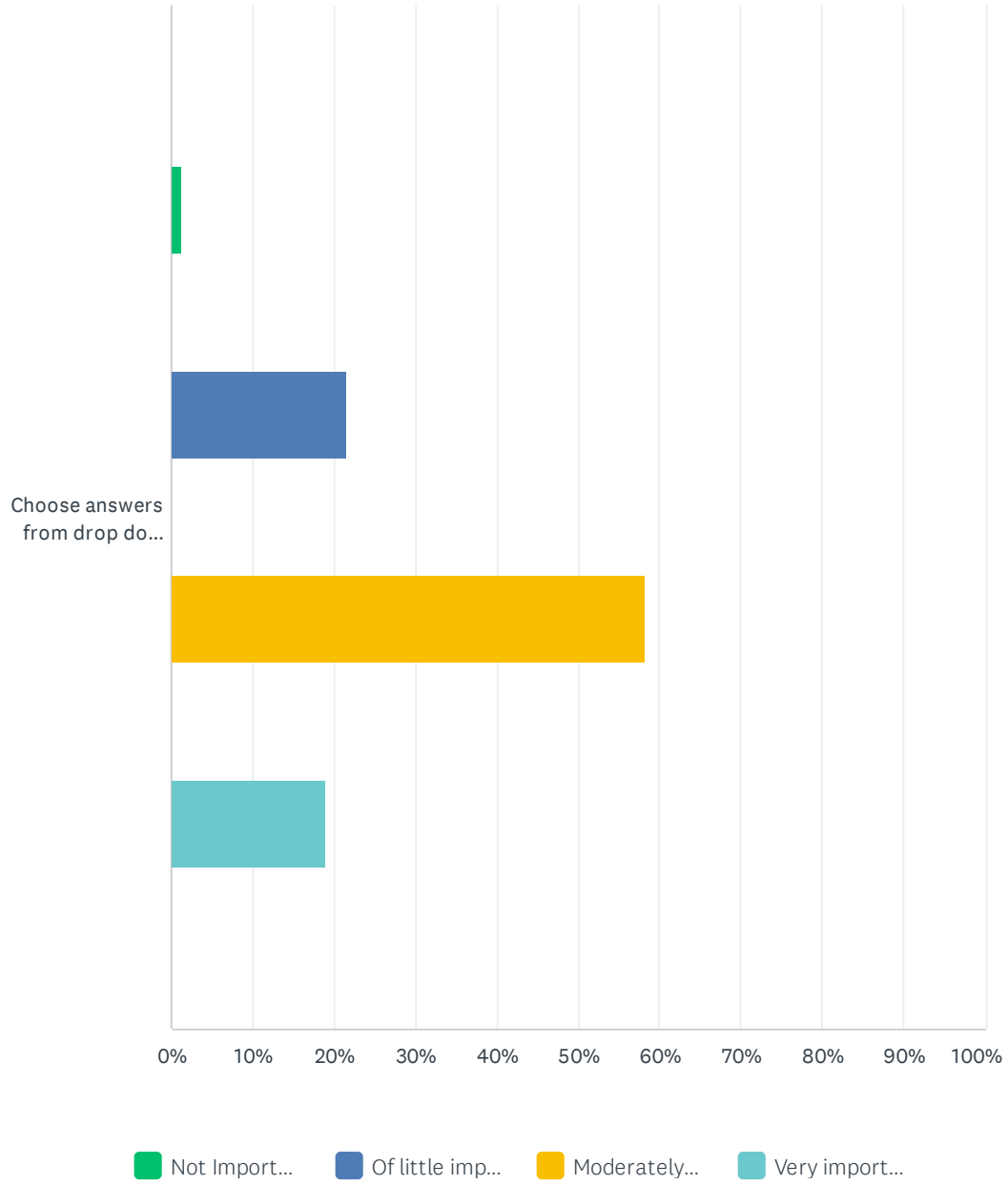
Q8 1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary).

Answered: 634 Skipped: 576



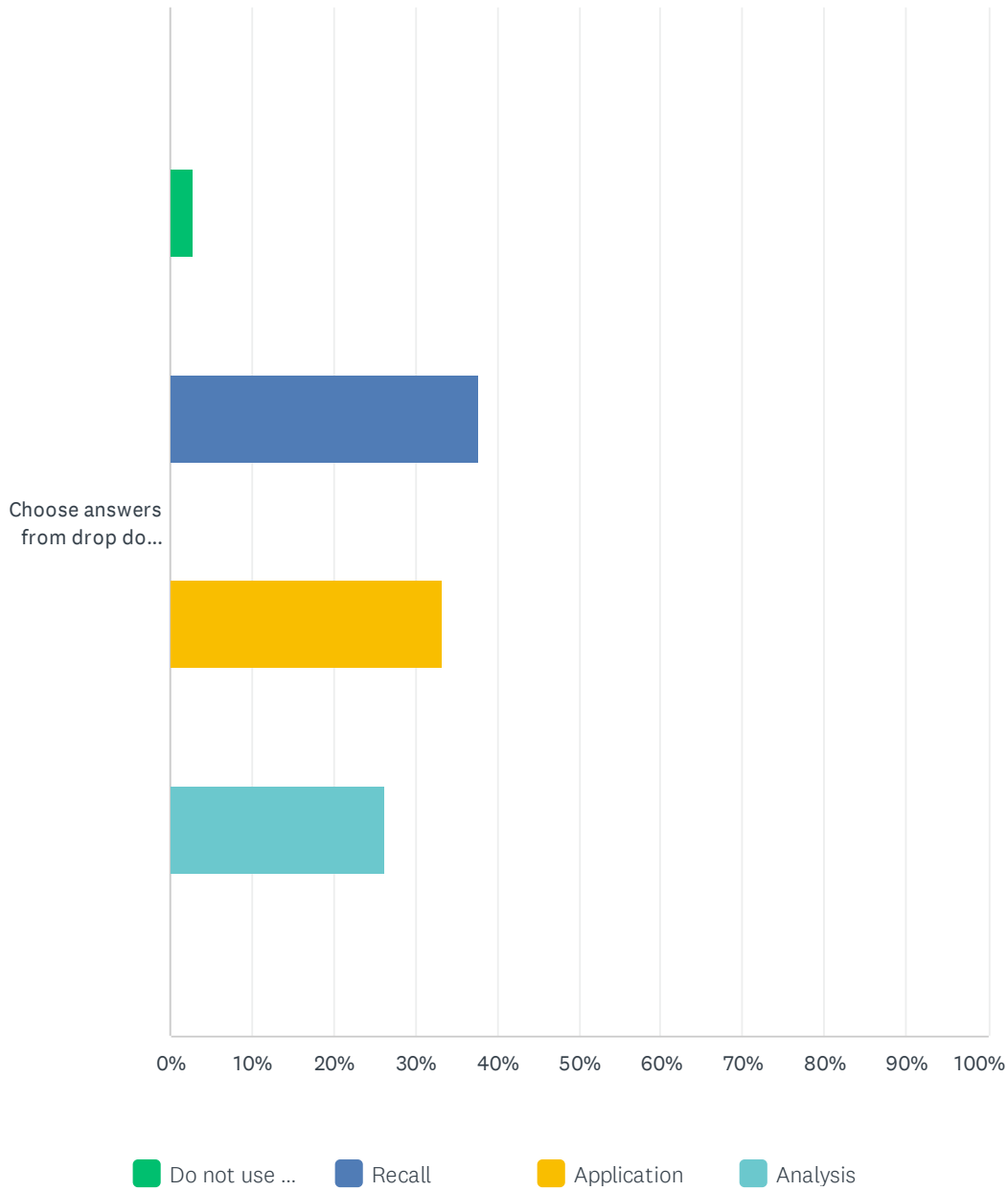
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.89% 12	22.56% 143	23.50% 149	30.13% 191	21.92% 139	634

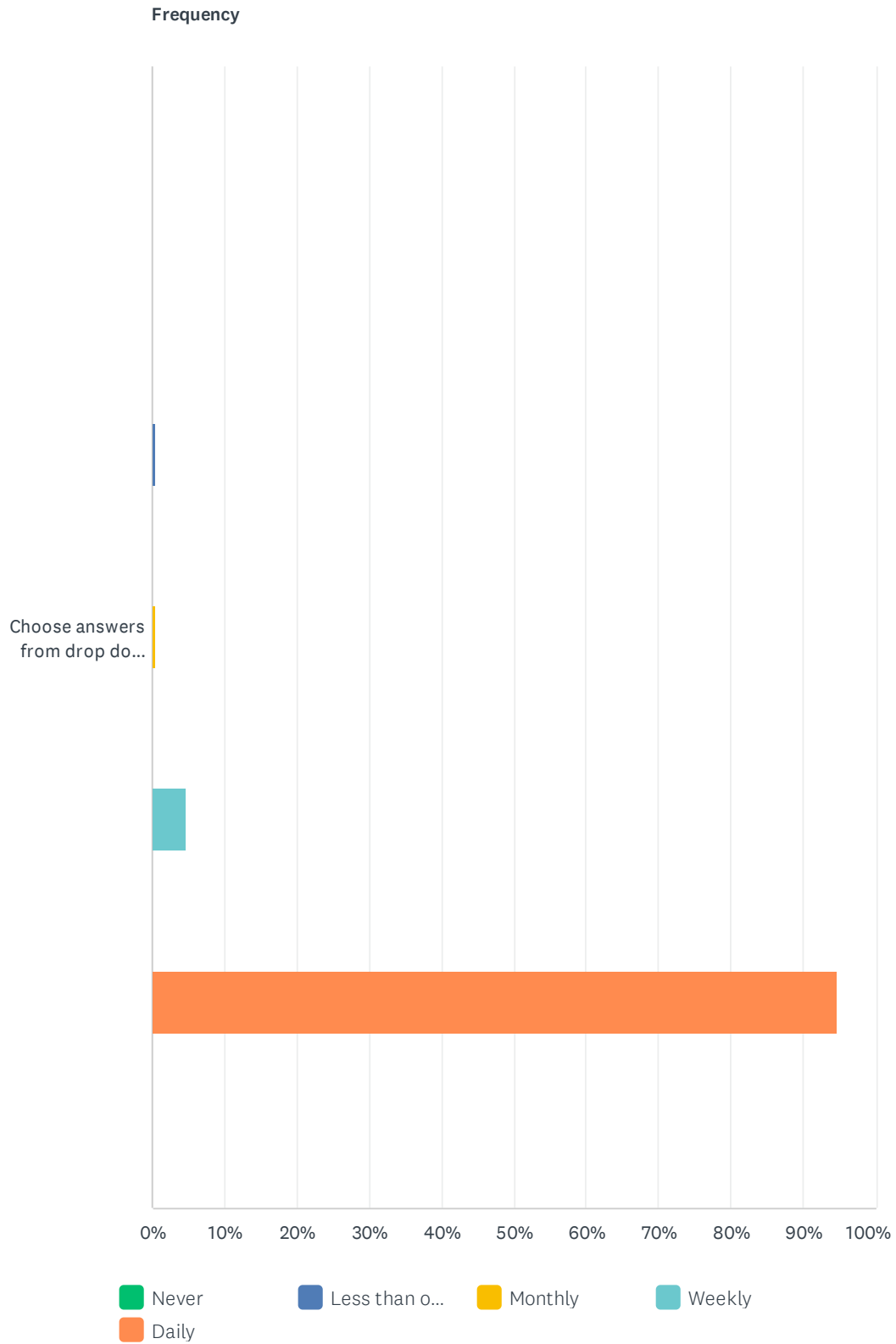
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.31% 8	21.57% 132	58.17% 356	18.95% 116	612

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	2.71% 16	37.73% 223	33.33% 197	26.23% 155	591

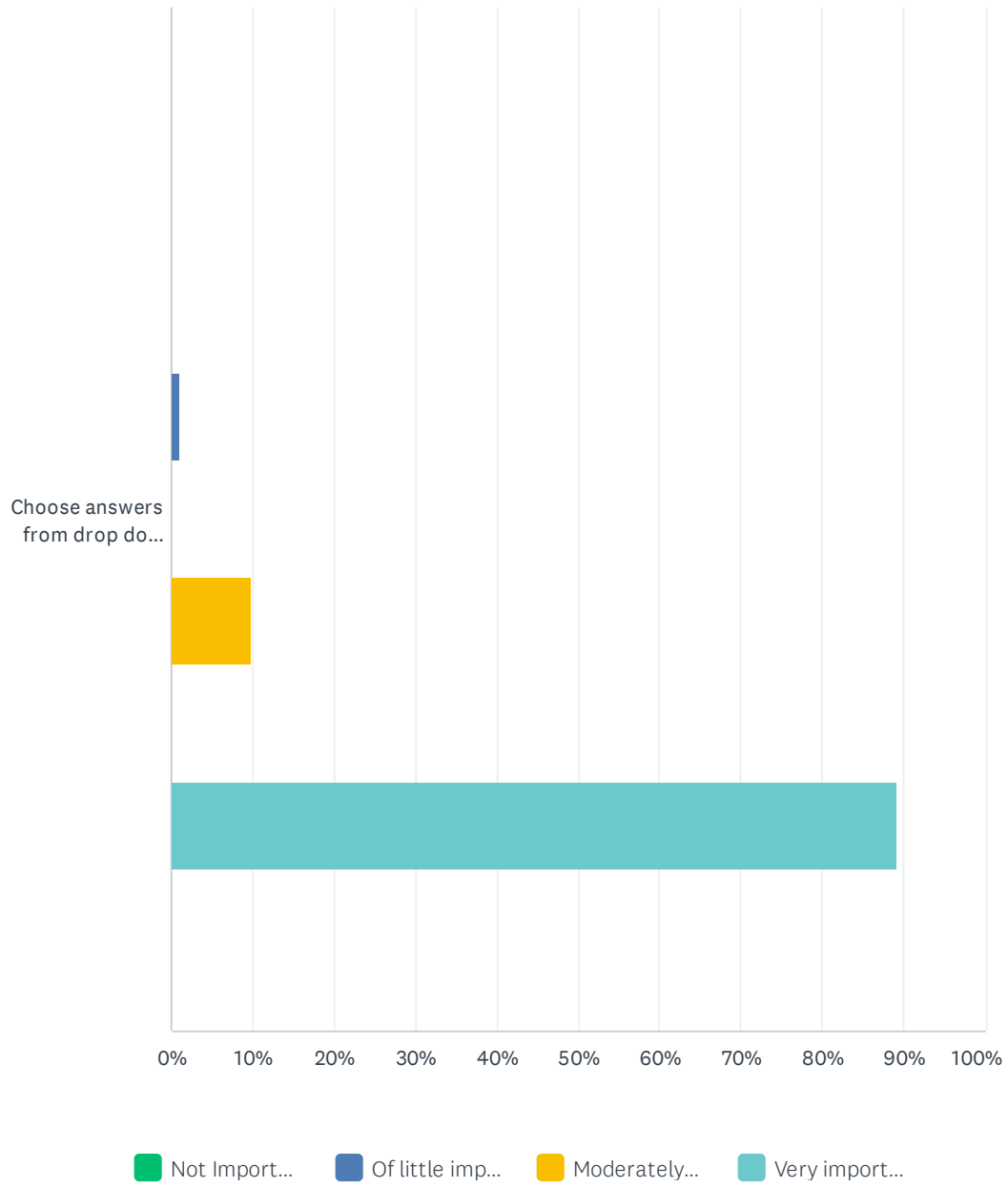
Q9 1.1.2.1 Kinesiology/biomechanics.

Answered: 589 Skipped: 621



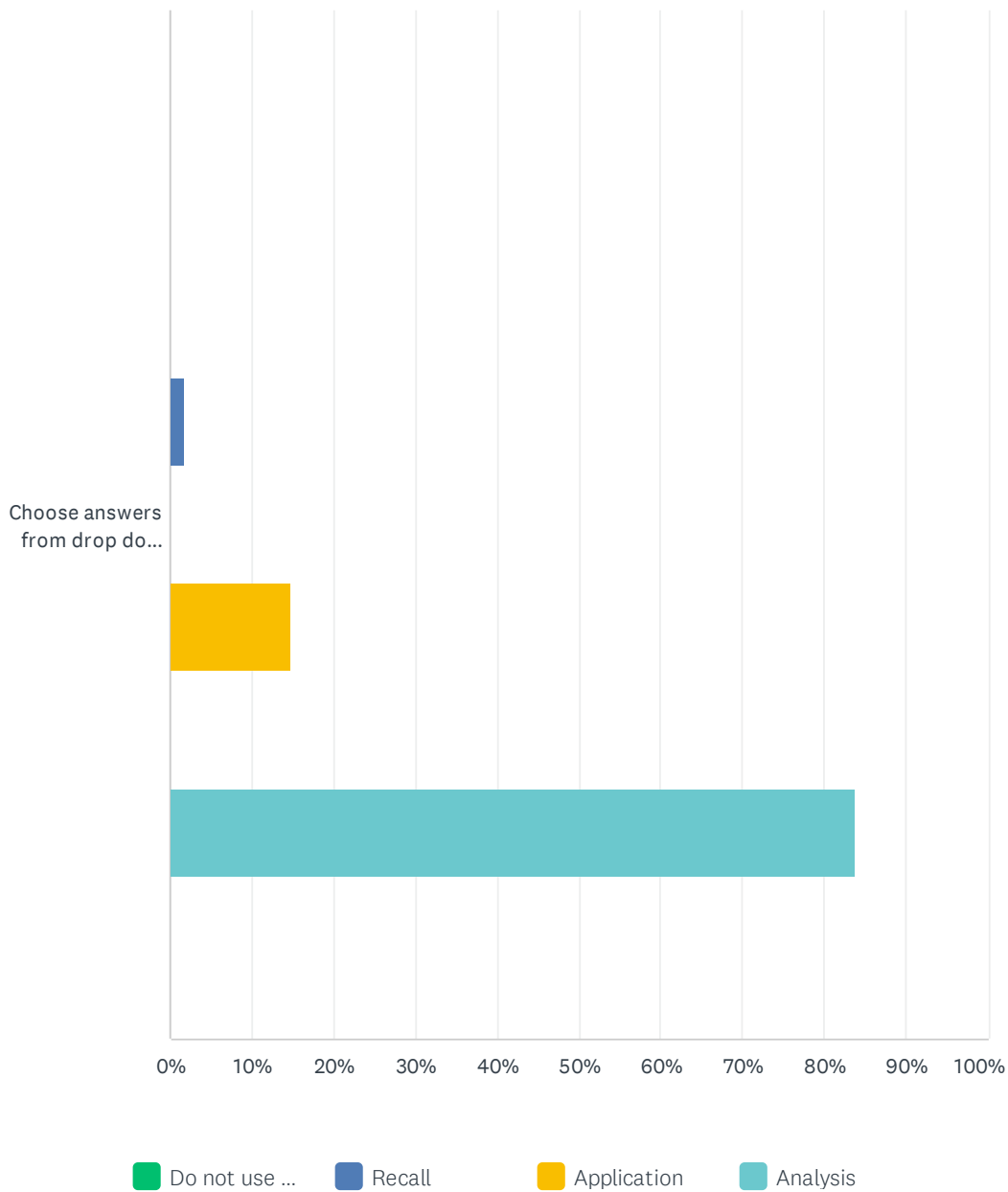
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.34% 2	0.34% 2	4.59% 27	94.73% 557	588

Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.05% 6	9.84% 56	89.10% 507	569

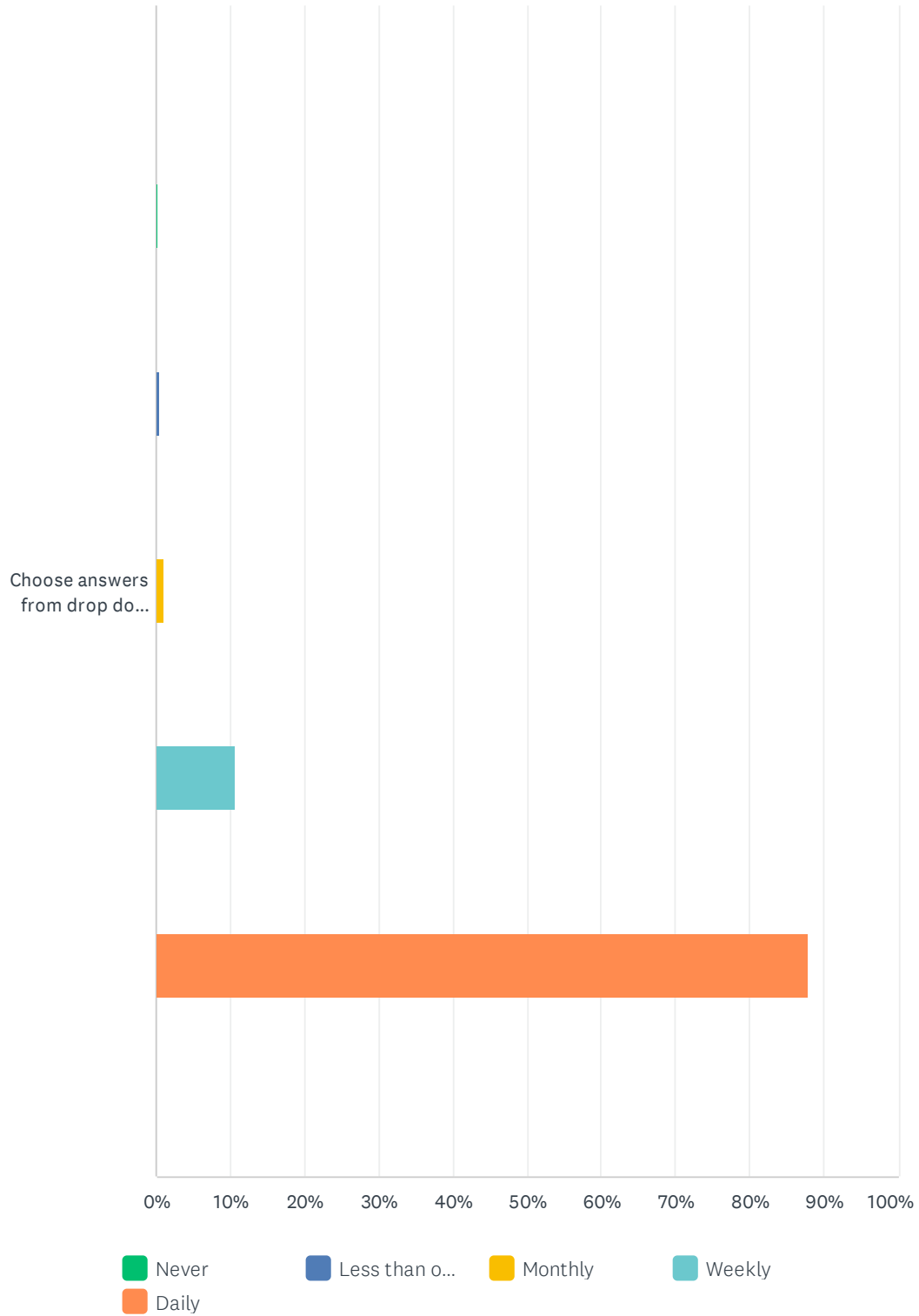
Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	1.65% 9	14.65% 80	83.70% 457	546

Q10 1.1.2.2 Neural control of movement.

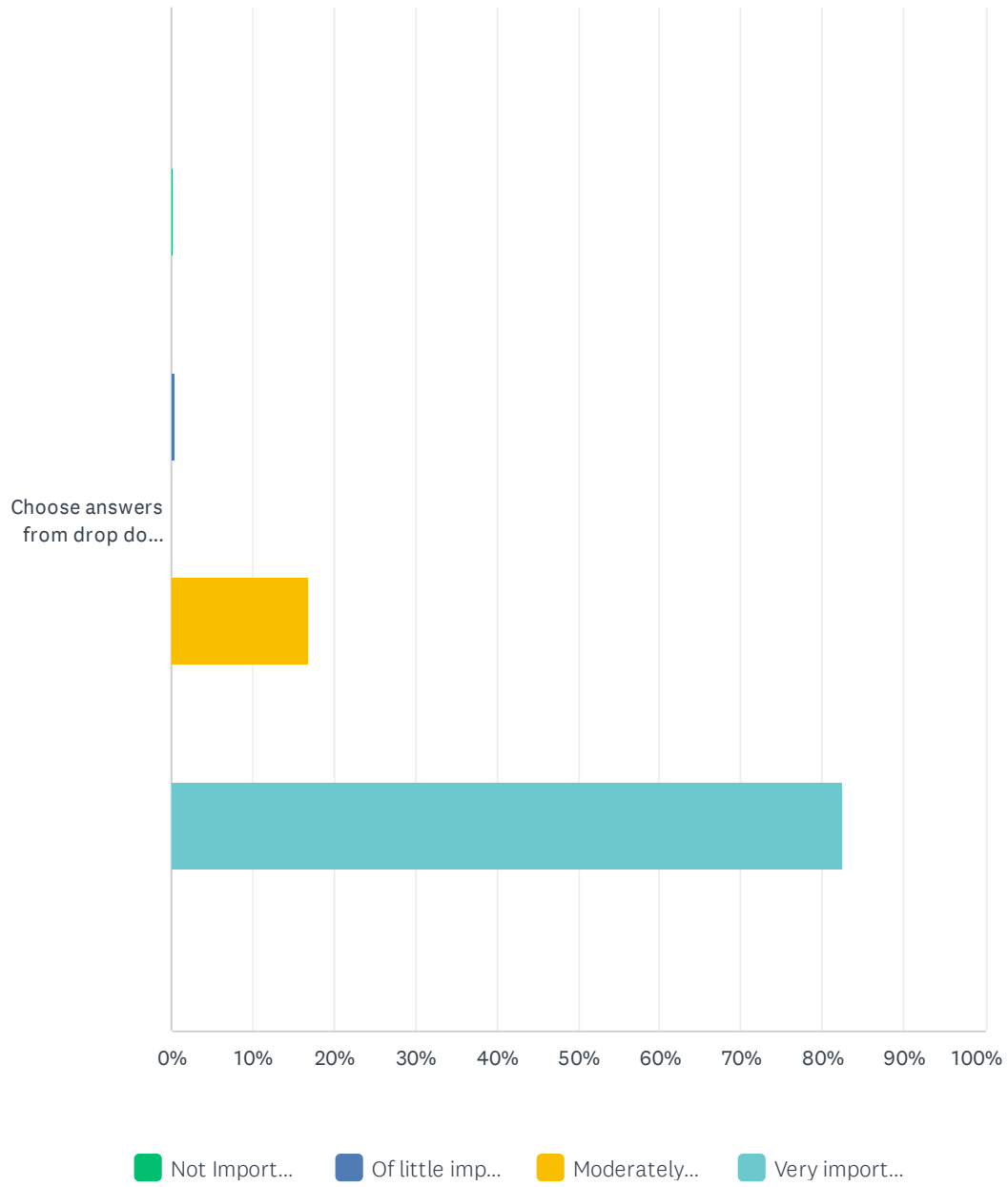
Answered: 590 Skipped: 620

Frequency



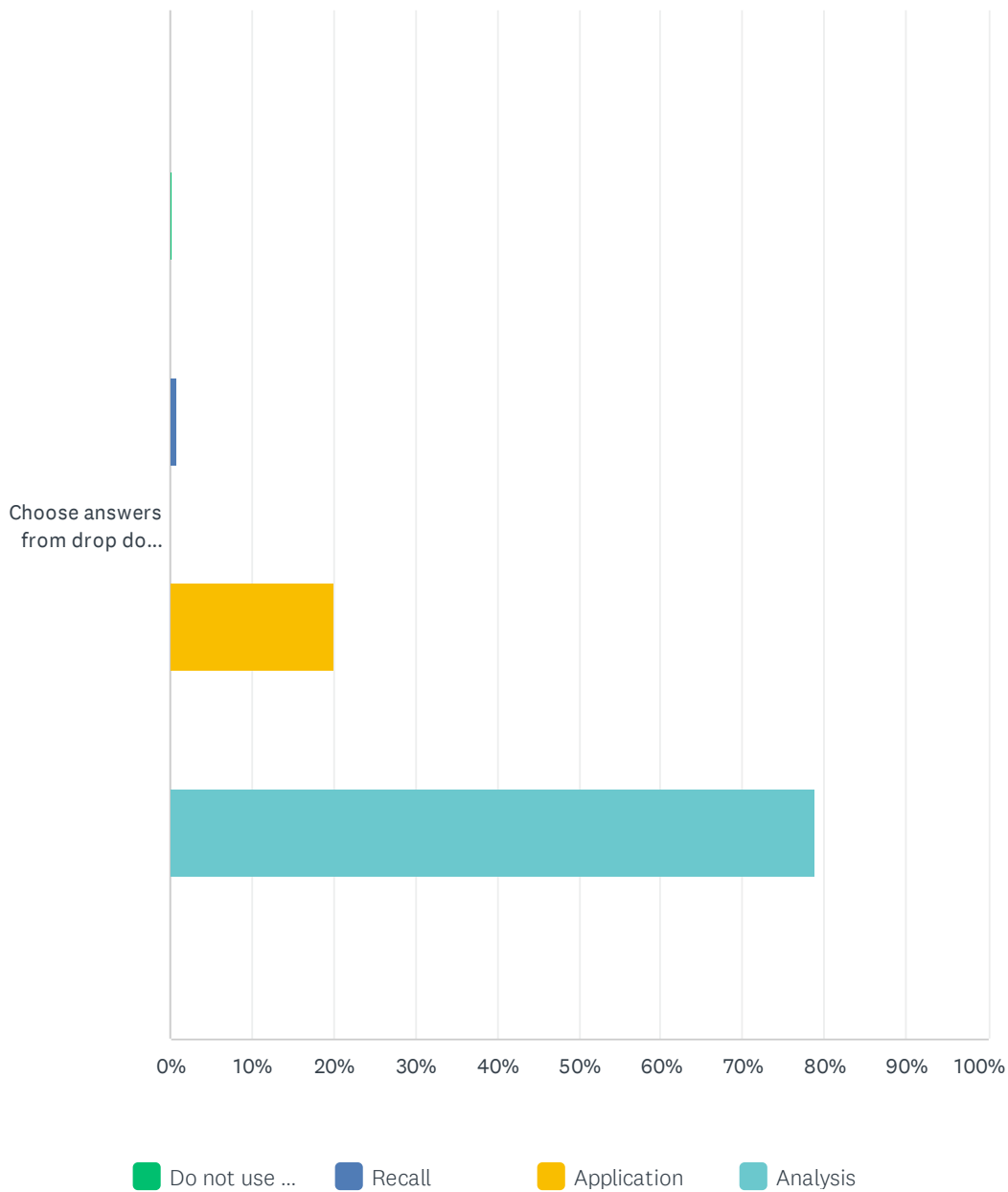
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.17% 1	0.34% 2	1.02% 6	10.68% 63	87.80% 518	590

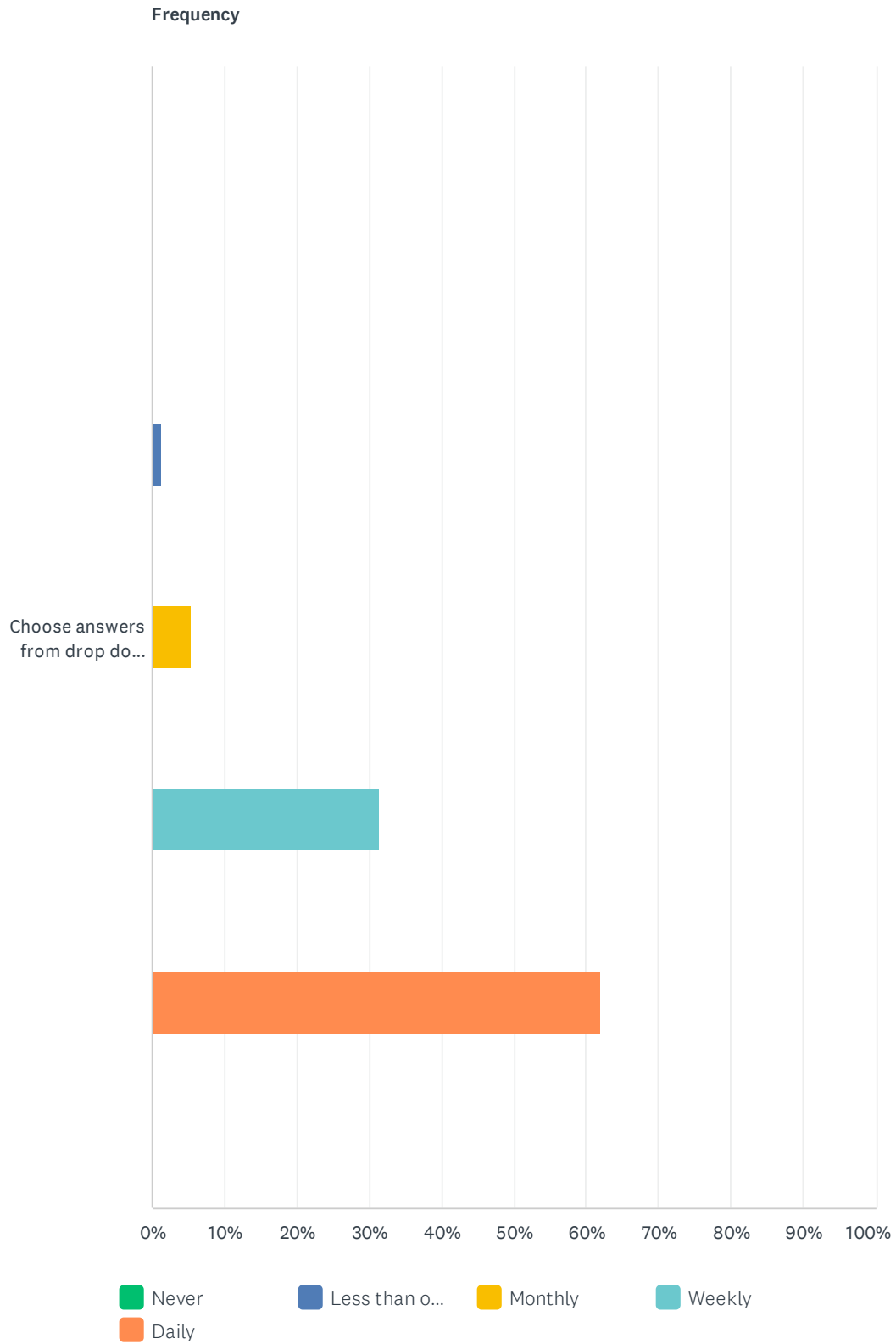
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.18% 1	0.53% 3	16.87% 96	82.43% 469	569

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.18%	0.91%	20.07%	78.83%	
	1	5	110	432	548

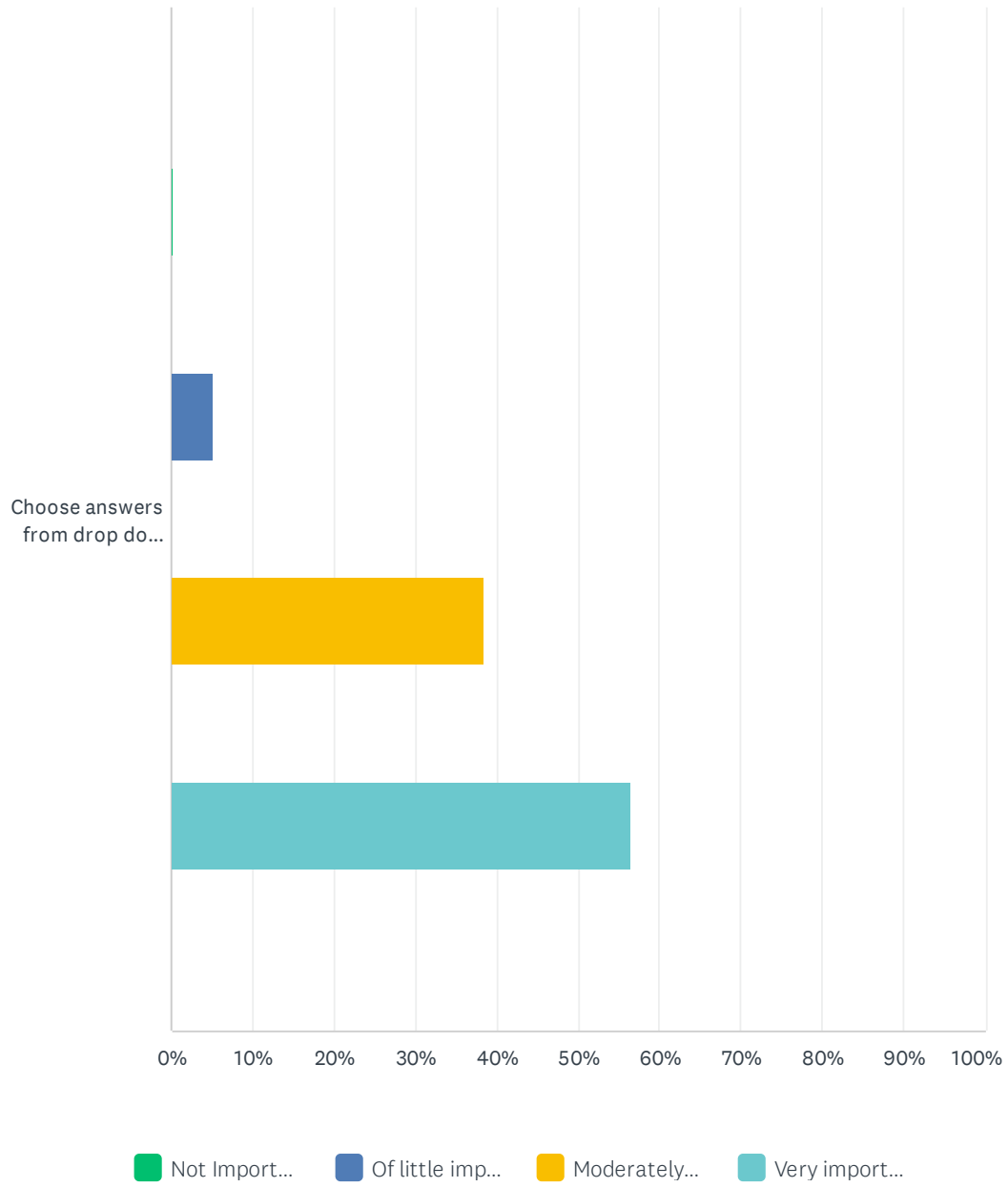
Q11 1.1.2.3 Ergonomics.

Answered: 589 Skipped: 621



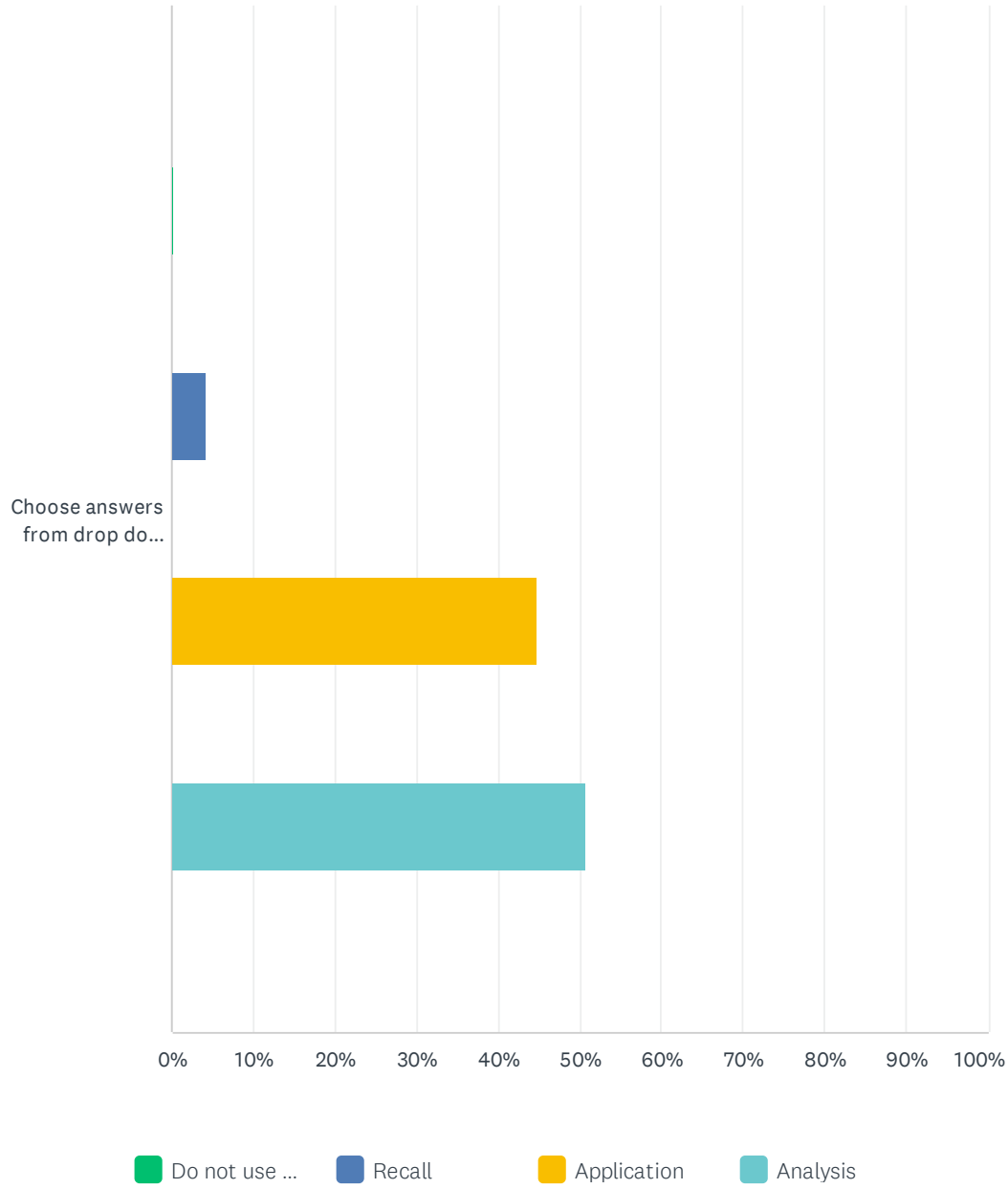
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.17% 1	1.19% 7	5.26% 31	31.41% 185	61.97% 365	589

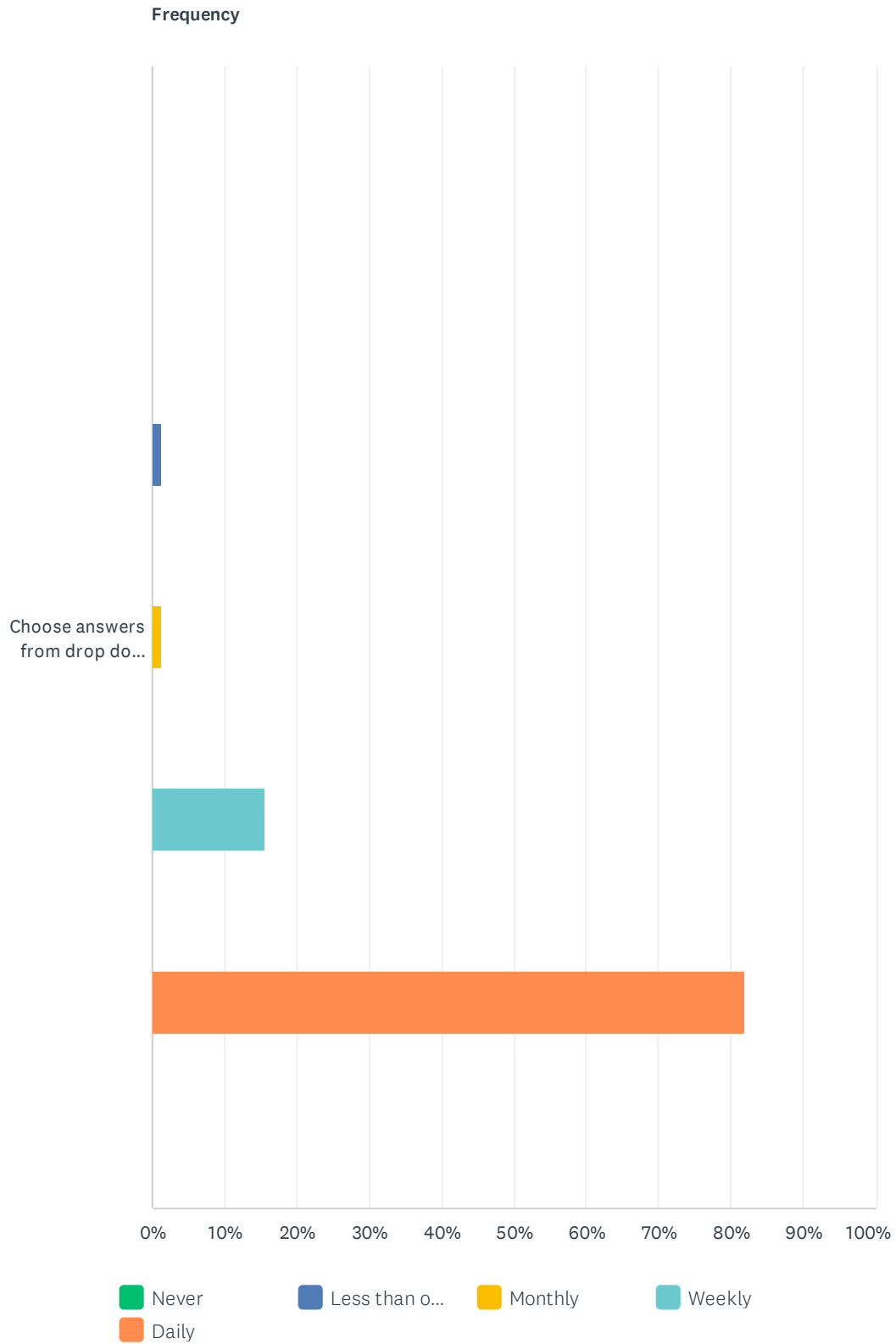
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.18% 1	5.10% 29	38.31% 218	56.41% 321	569

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.18%	4.19%	44.81%	50.82%	
	1	23	246	279	549

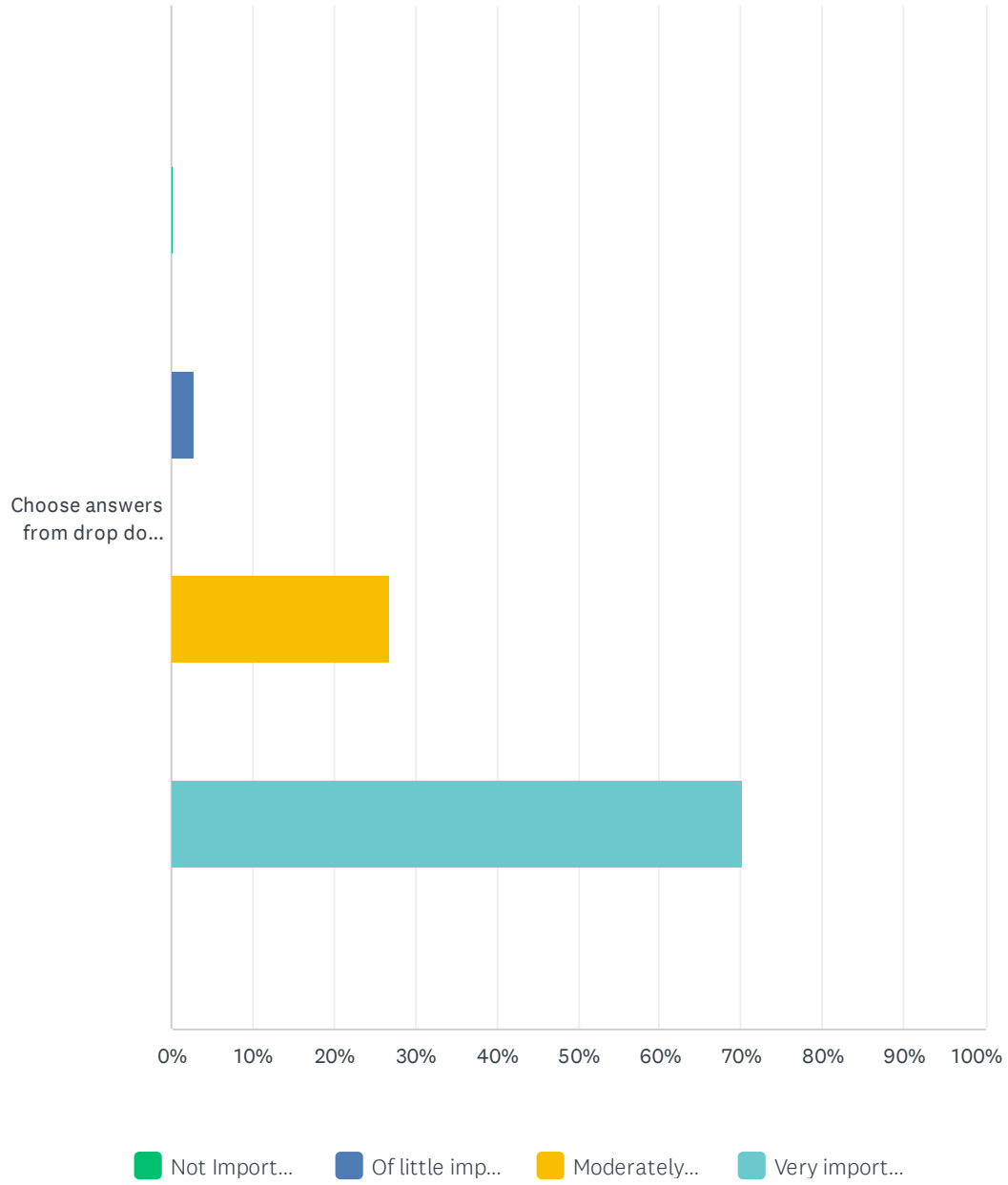
Q12 1.1.2.4 Locomotion.

Answered: 589 Skipped: 621



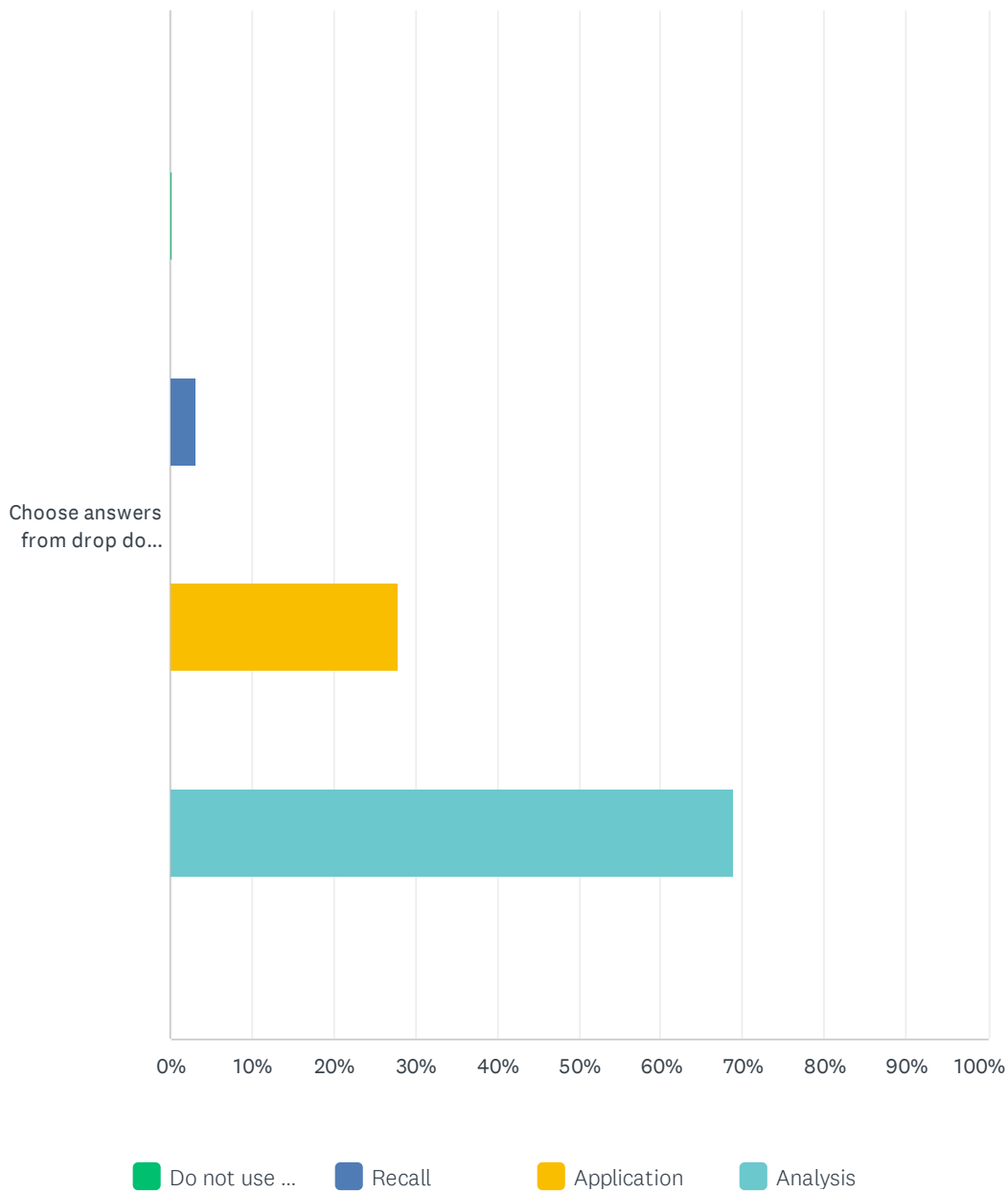
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.19% 7	1.36% 8	15.62% 92	81.83% 482	589

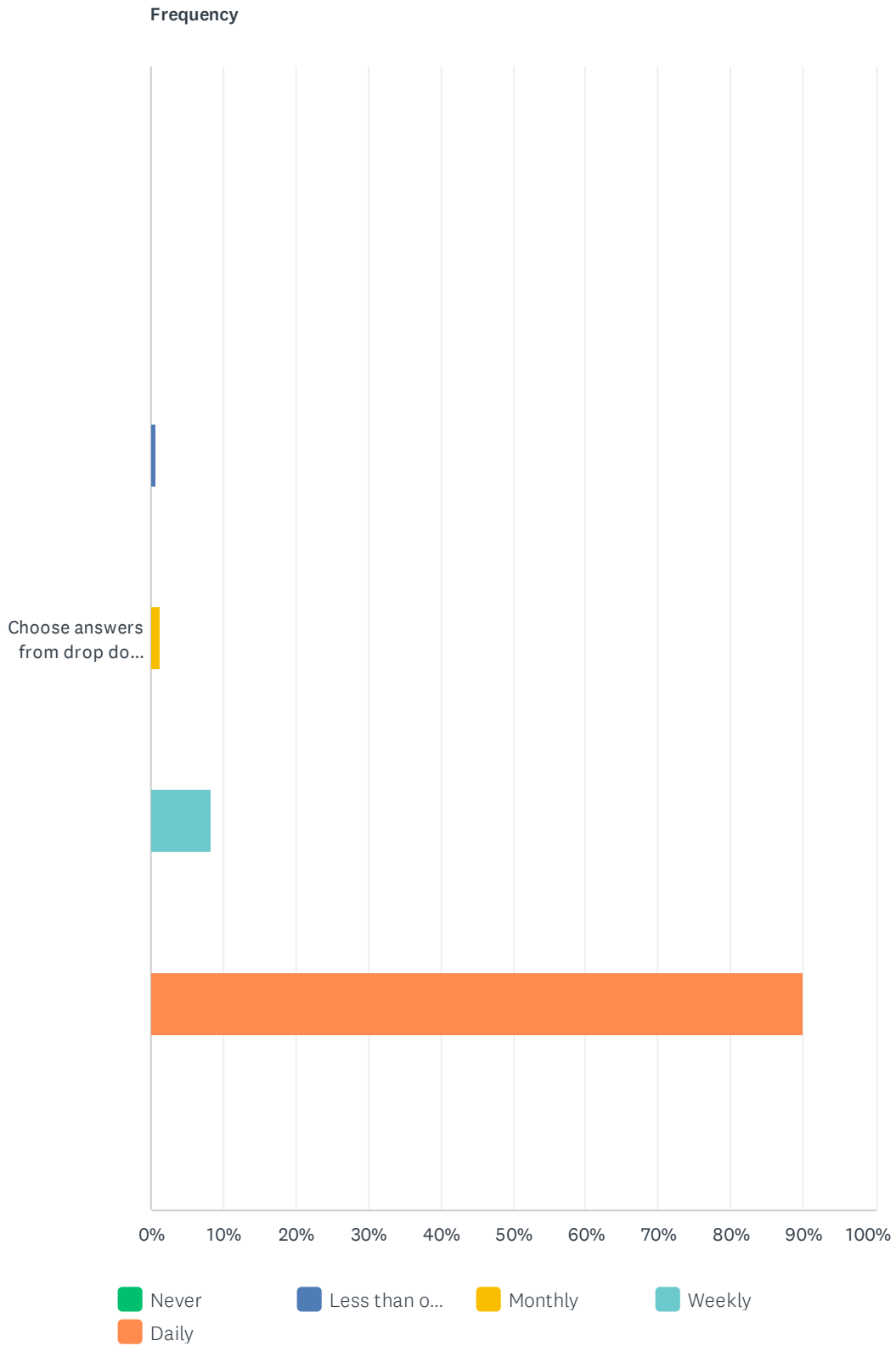
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.18% 1	2.81% 16	26.89% 153	70.12% 399	569

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.18%	3.10%	27.87%	68.85%	
	1	17	153	378	549

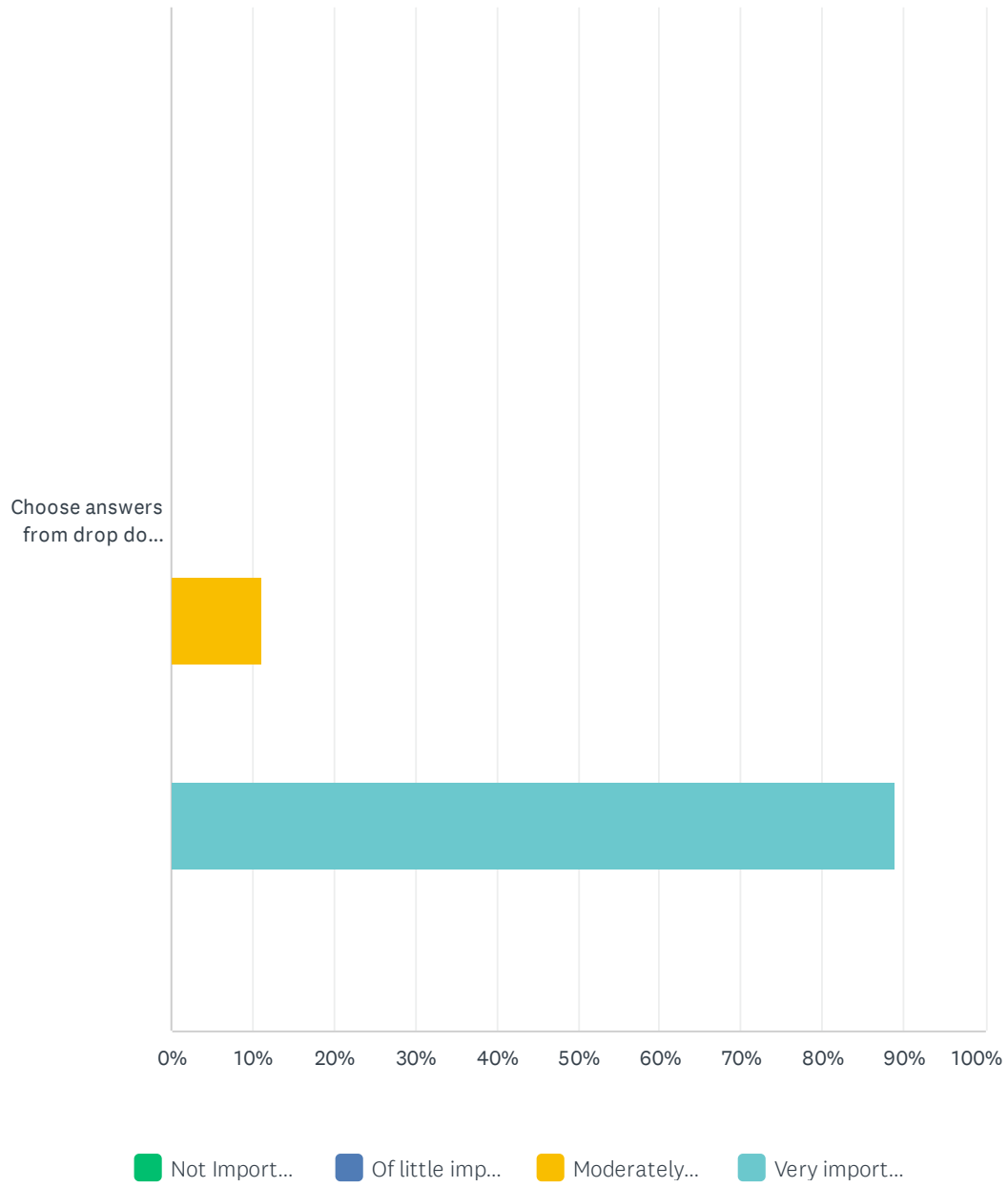
Q13 1.2.1.1 Signs and symptoms of disease/injury.

Answered: 534 Skipped: 676



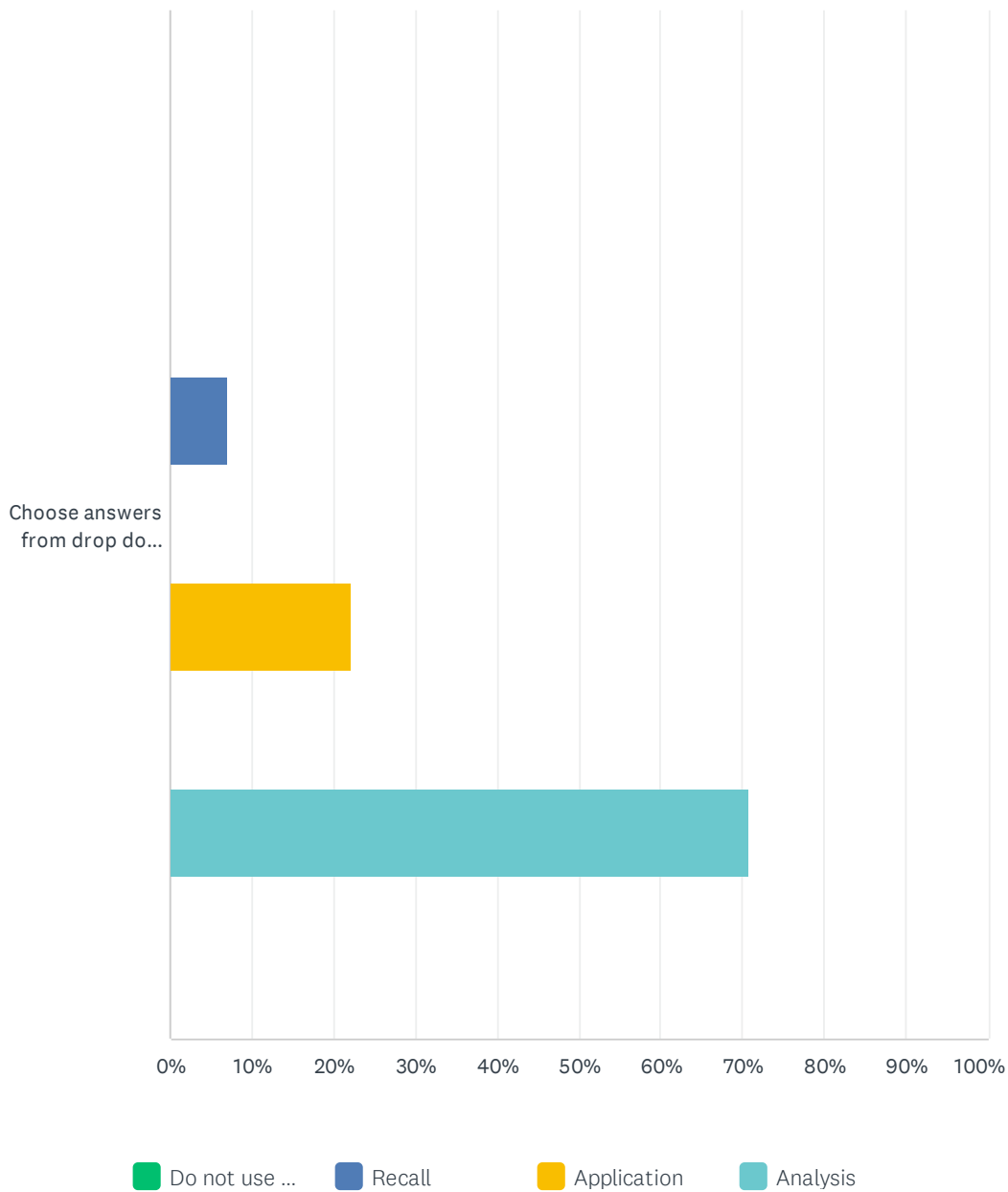
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.56% 3	1.31% 7	8.24% 44	89.89% 480	534

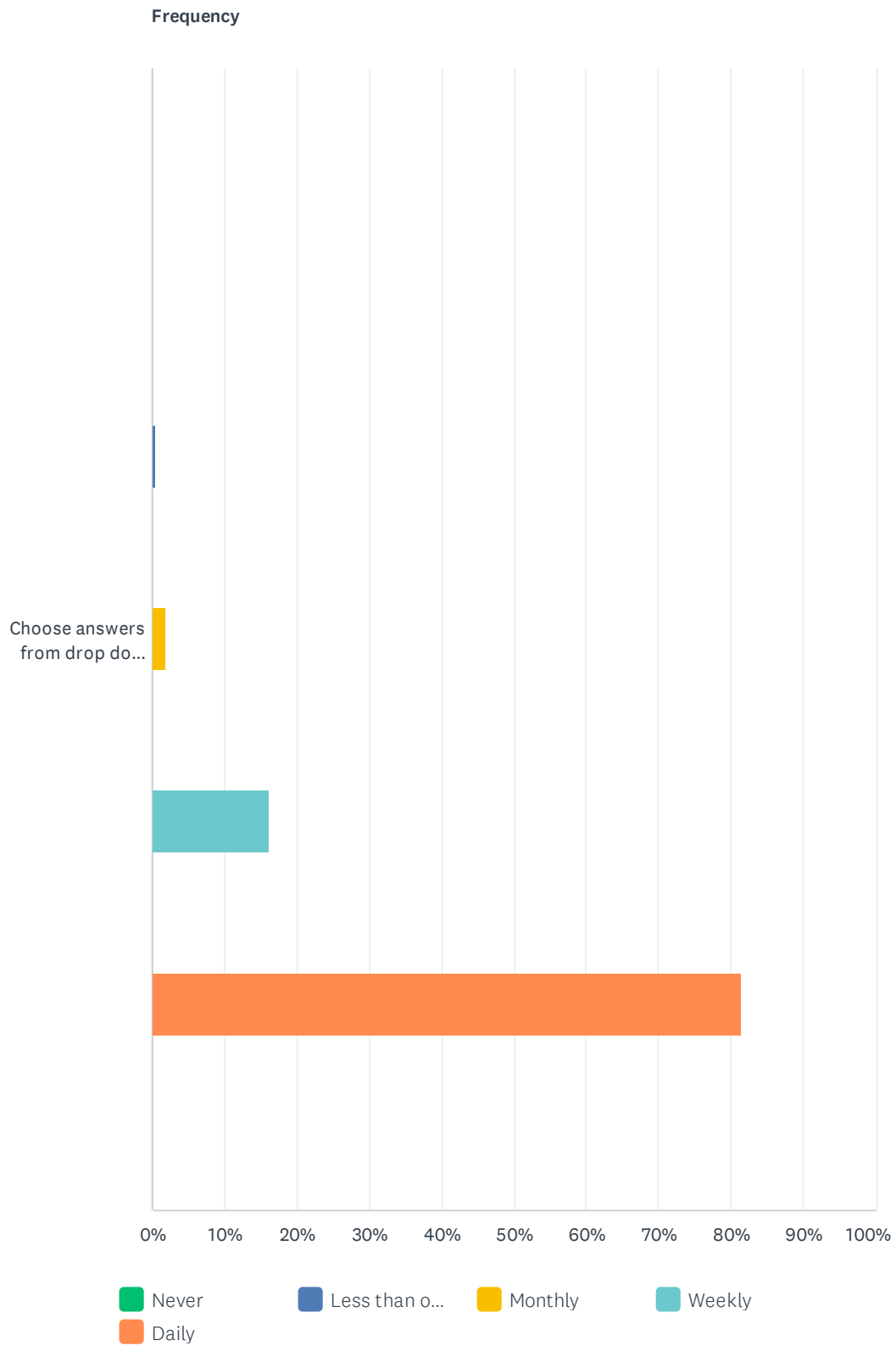
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	11.07% 57	88.93% 458	515

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00%	7.07%	22.22%	70.71%	
	0	35	110	350	495

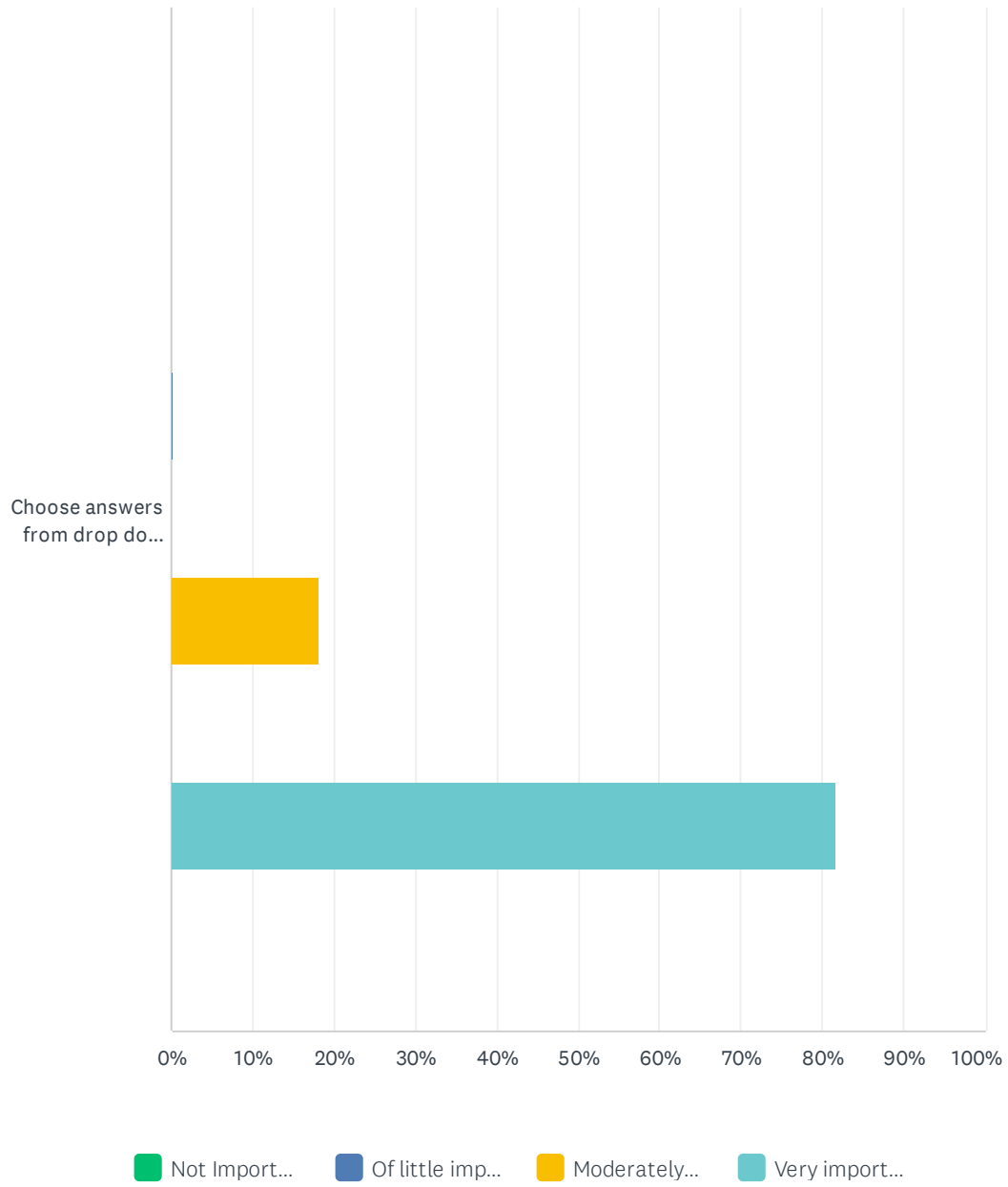
Q14 1.2.1.2 Progression of disease/injury processes.

Answered: 535 Skipped: 675

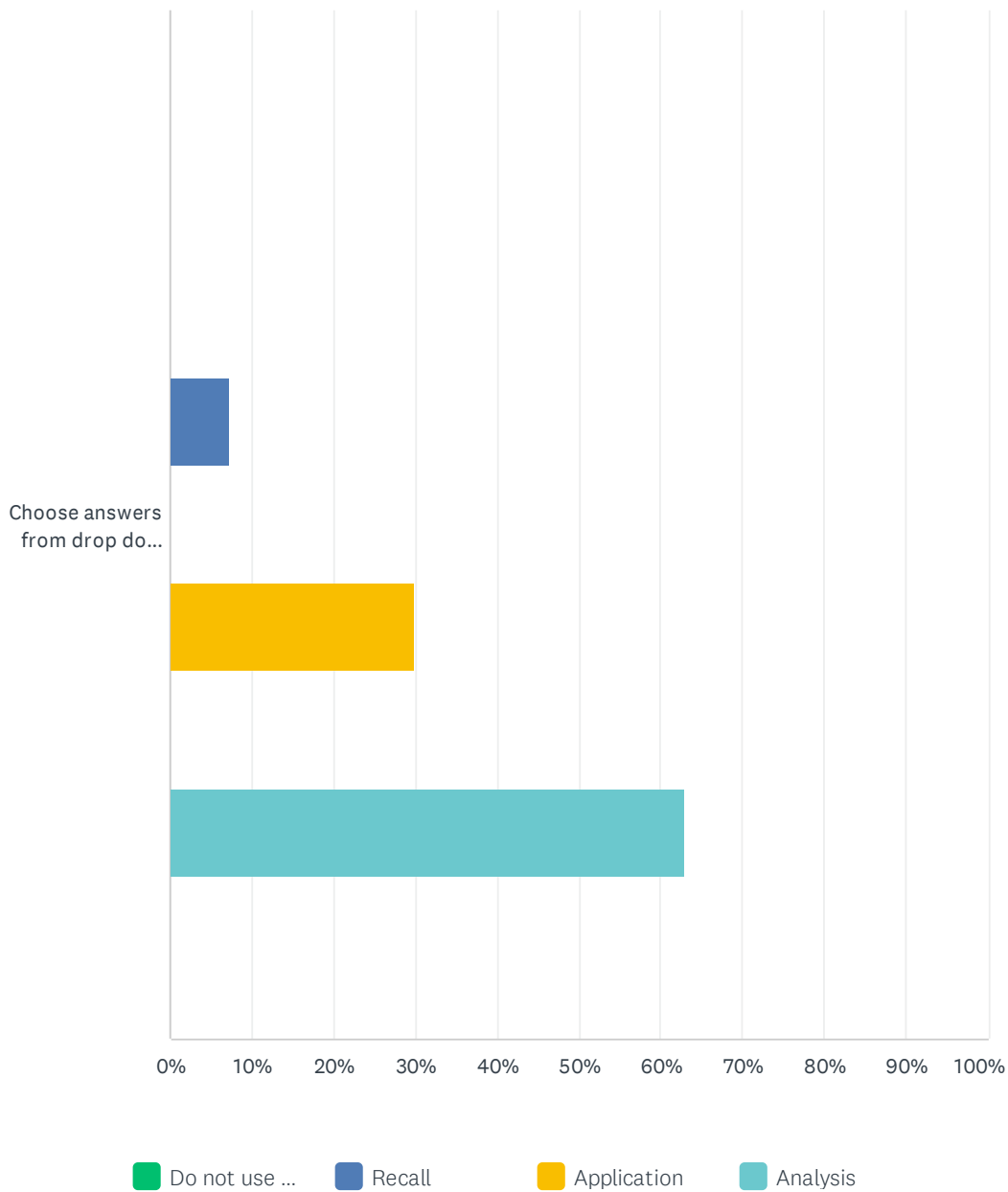


Spine Validation Practice Analysis Survey 2022

Importance



Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.37% 2	1.87% 10	16.26% 87	81.50% 436	535

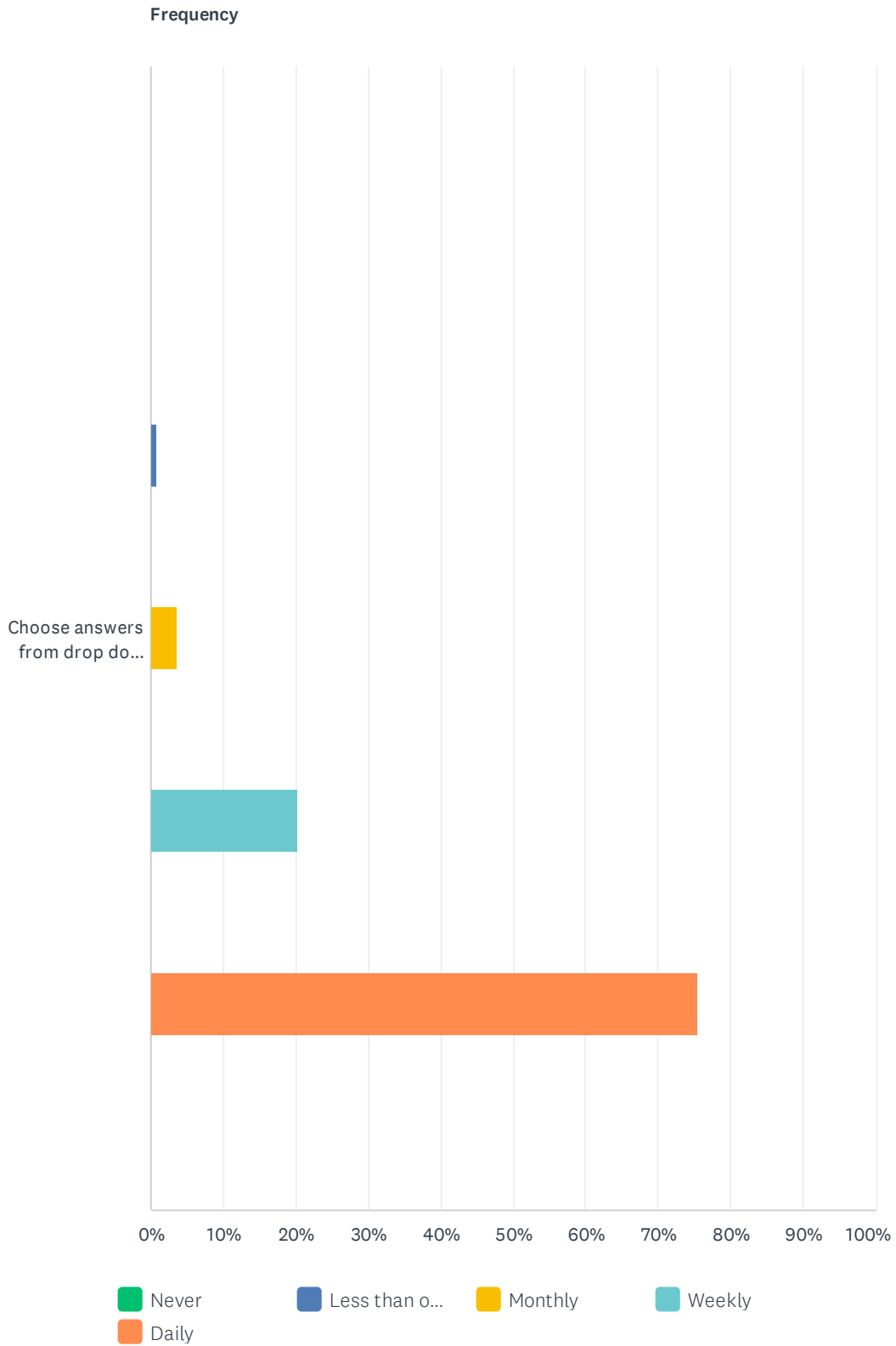
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.19% 1	18.22% 94	81.59% 421	516

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	7.26% 36	29.84% 148	62.90% 312	496

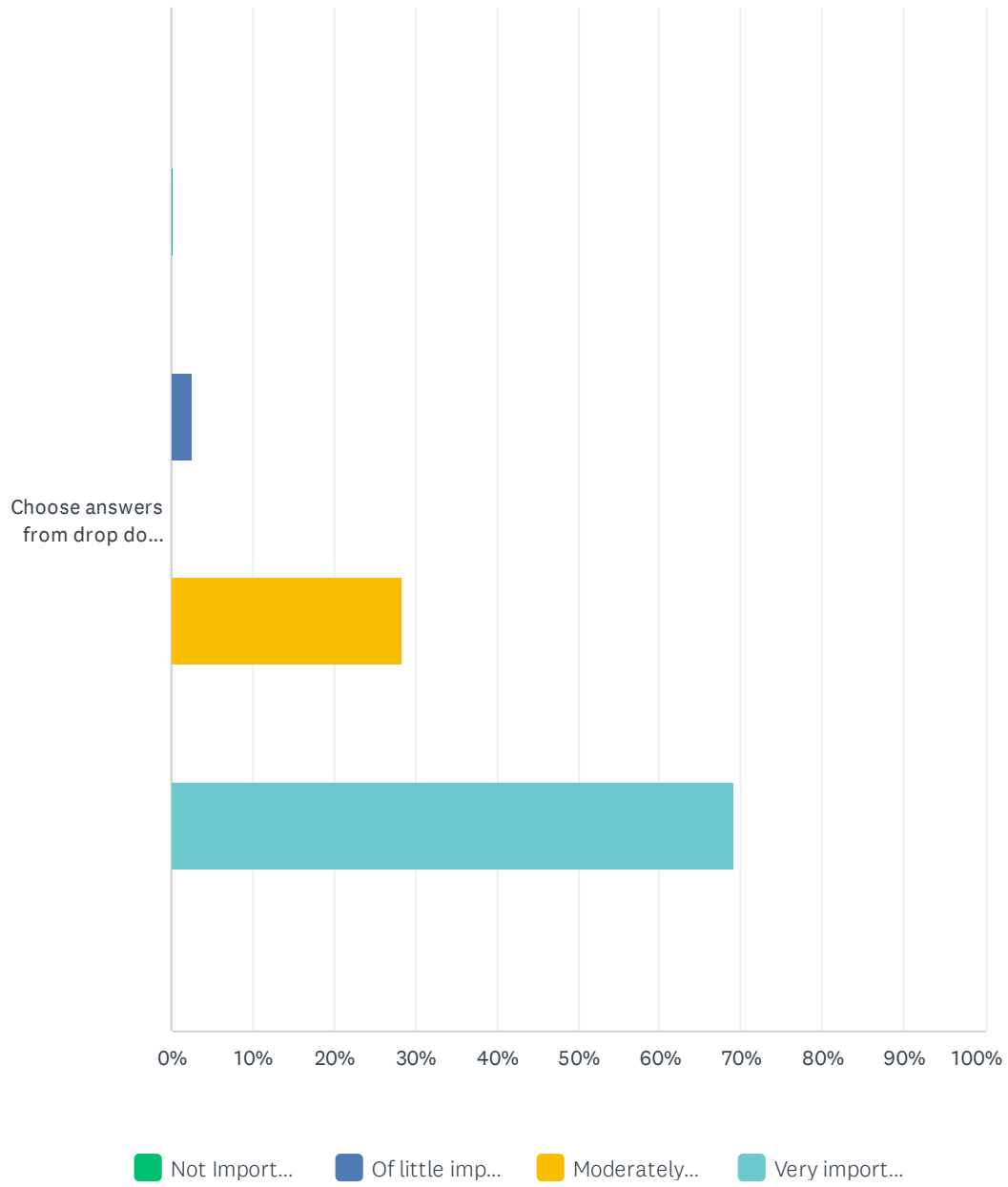
Q15 1.2.1.3 Pathokinesiology.

Answered: 534 Skipped: 676



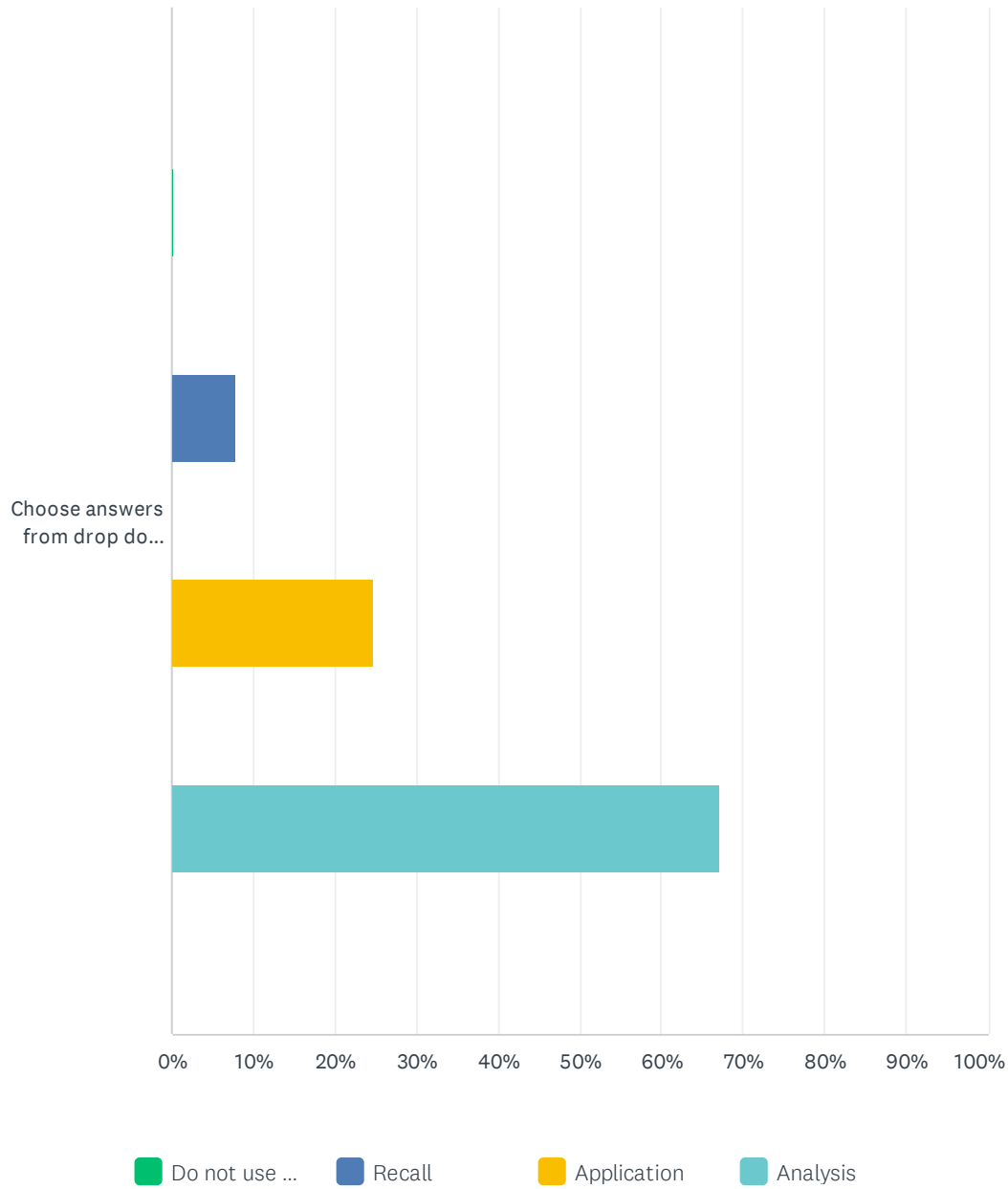
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.75% 4	3.56% 19	20.22% 108	75.47% 403	534

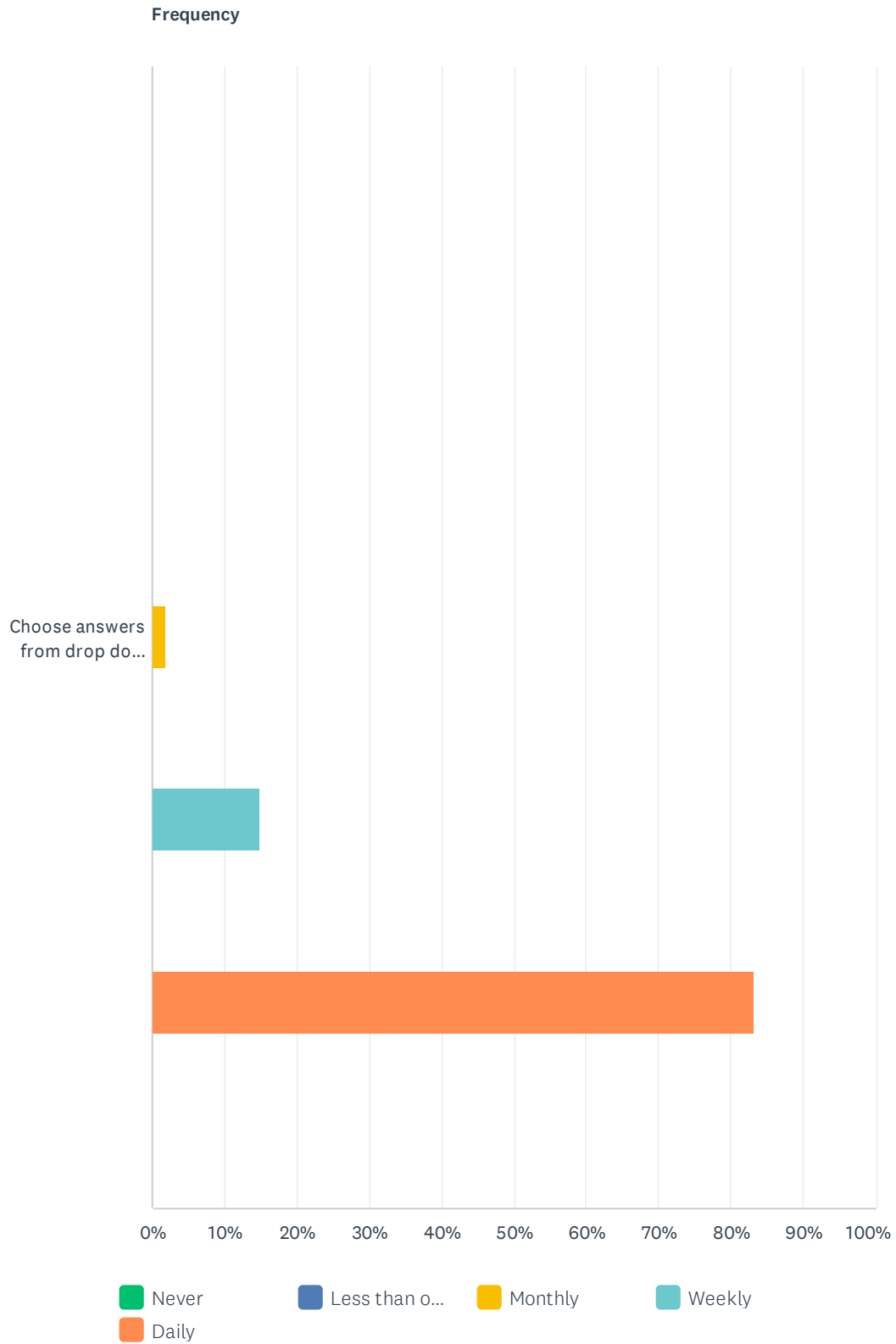
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.19% 1	2.52% 13	28.29% 146	68.99% 356	516

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.20%	7.85%	24.75%	67.20%	
	1	39	123	334	497

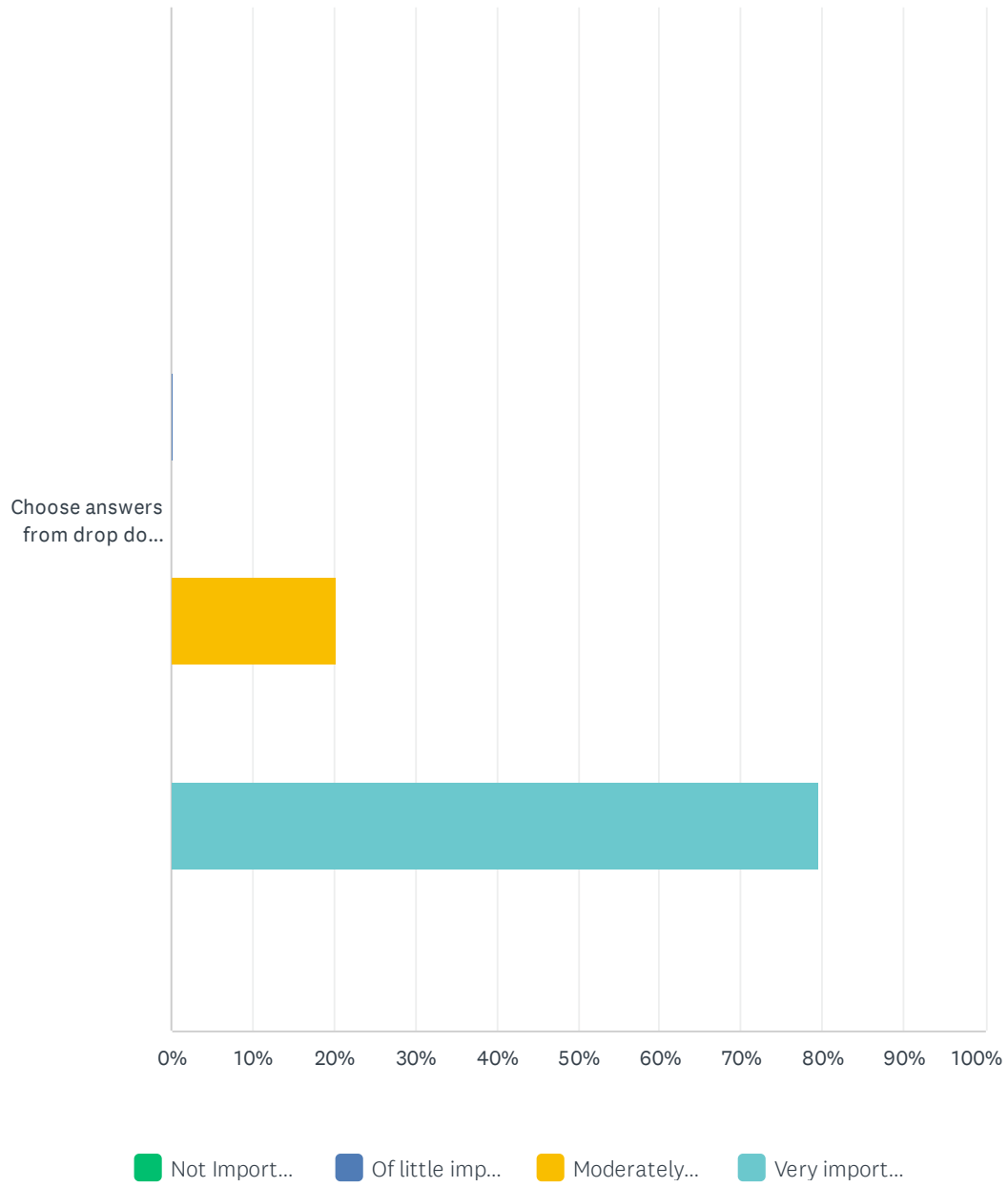
Q16 1.2.1.4 Tissue inflammation, healing, and repair.

Answered: 536 Skipped: 674



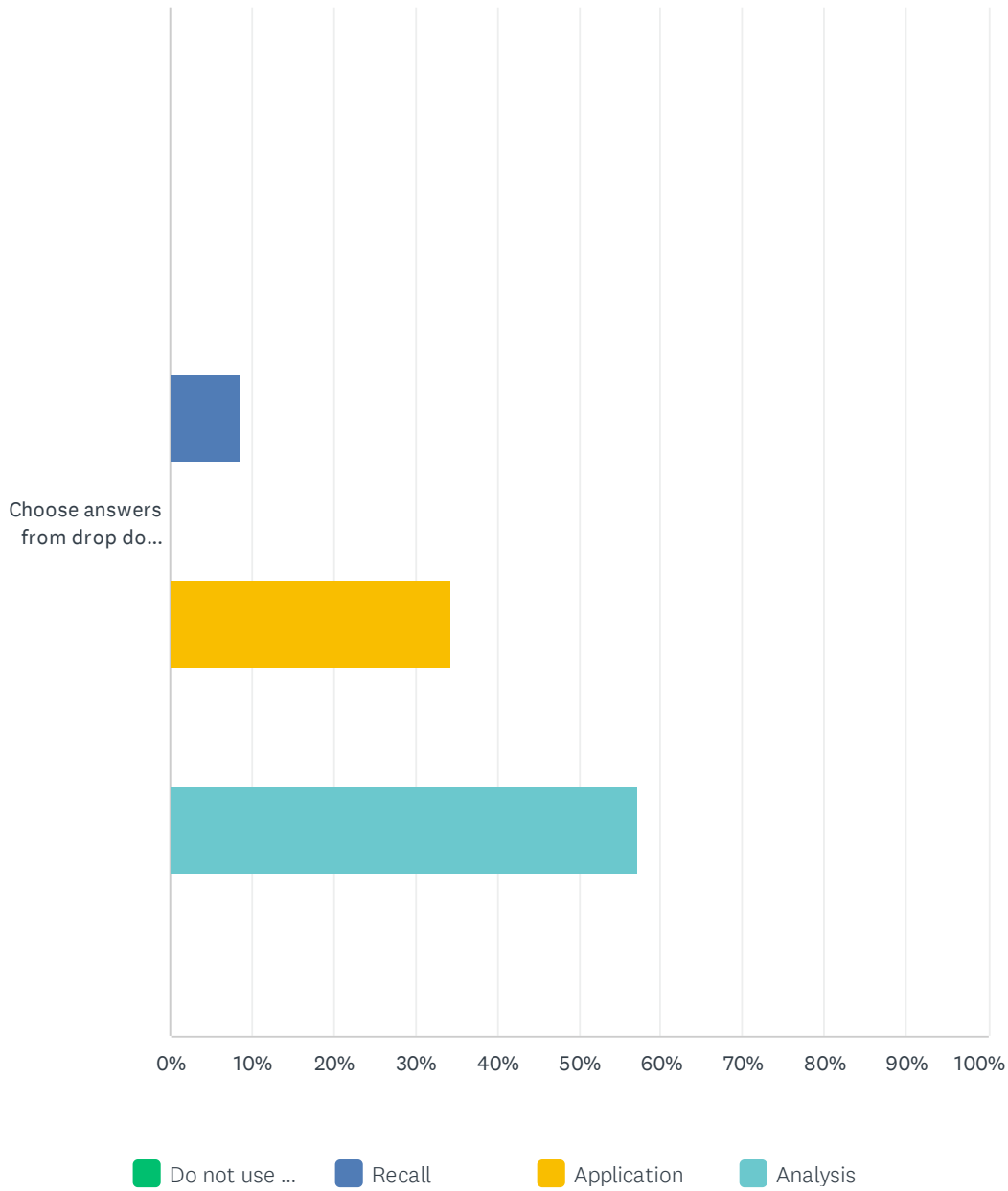
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	1.87% 10	14.93% 80	83.21% 446	536

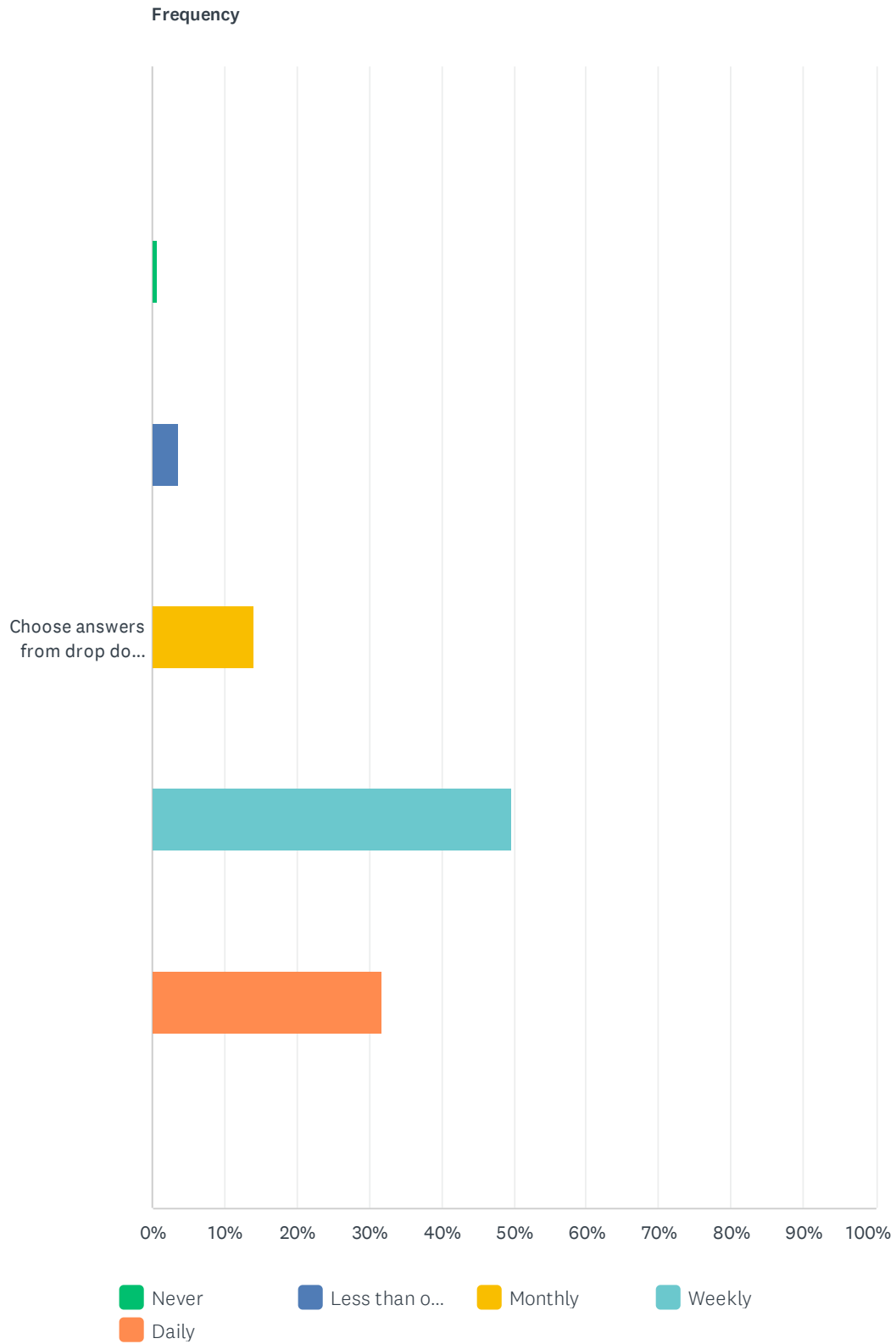
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.19% 1	20.31% 105	79.50% 411	517

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	8.45% 42	34.41% 171	57.14% 284	497

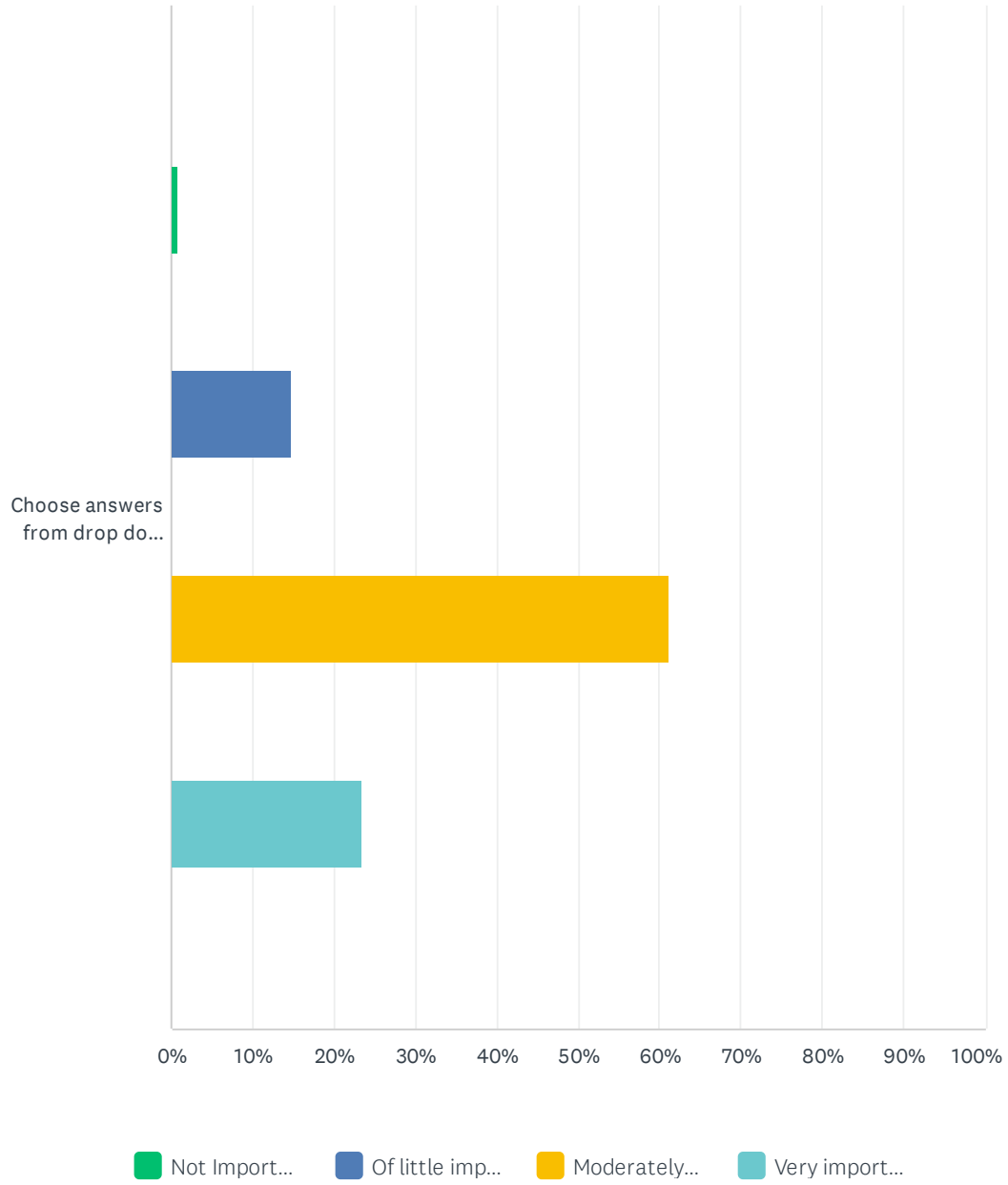
Q17 1.2.2.1 Imaging studies.

Answered: 536 Skipped: 674



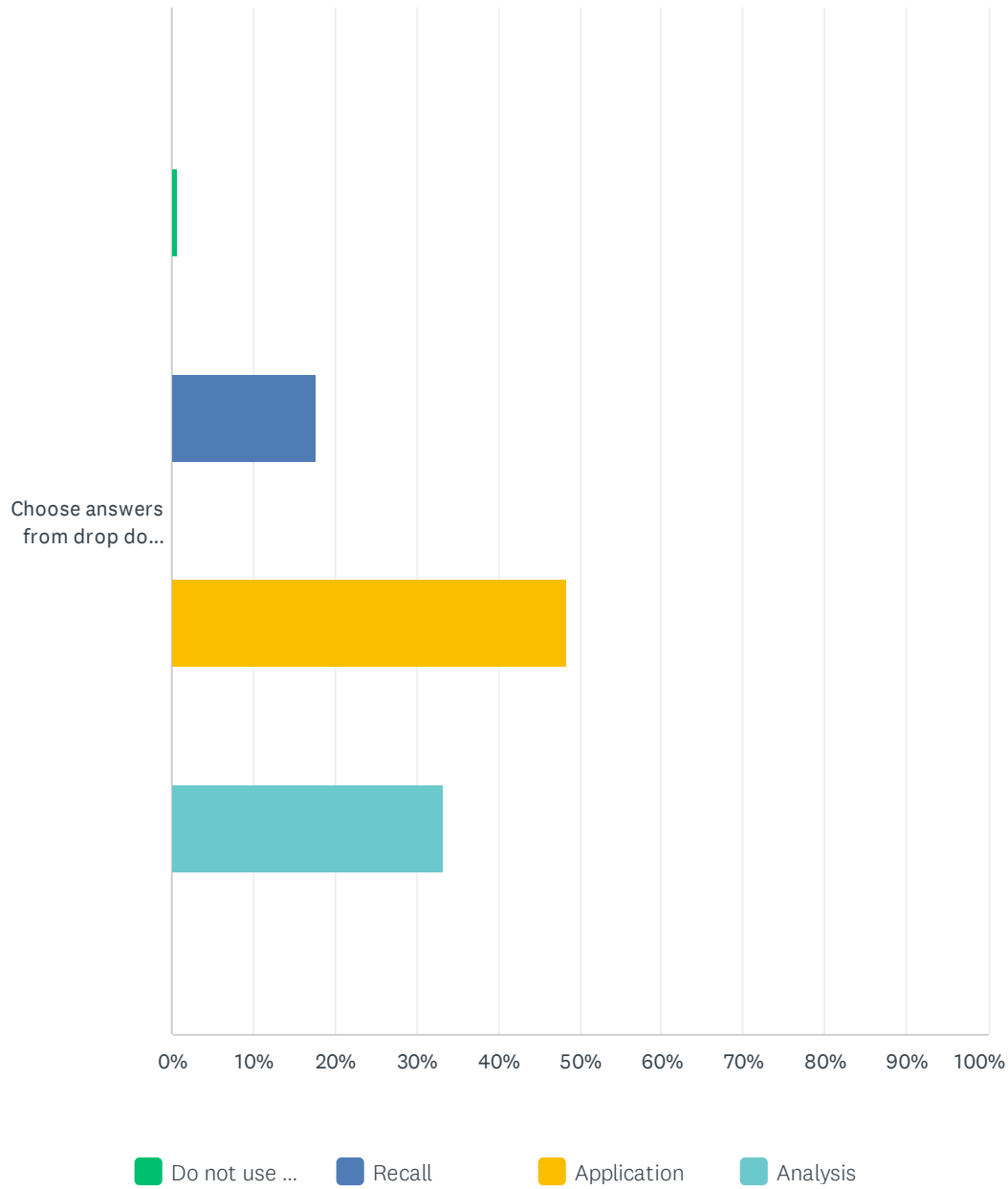
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.75% 4	3.73% 20	14.18% 76	49.63% 266	31.72% 170	536

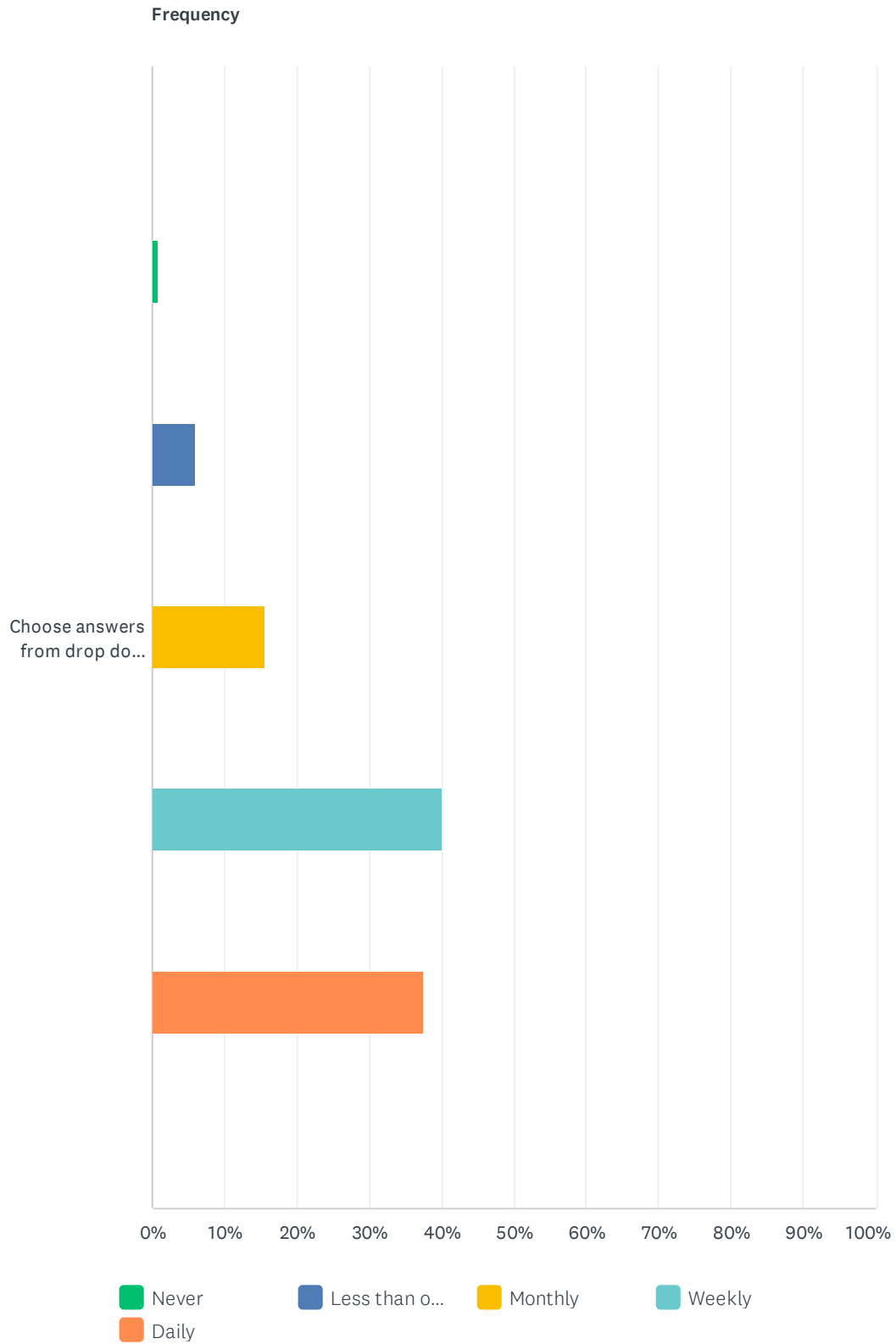
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.77% 4	14.67% 76	61.20% 317	23.36% 121	518

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.60%	17.64%	48.50%	33.27%	
	3	88	242	166	499

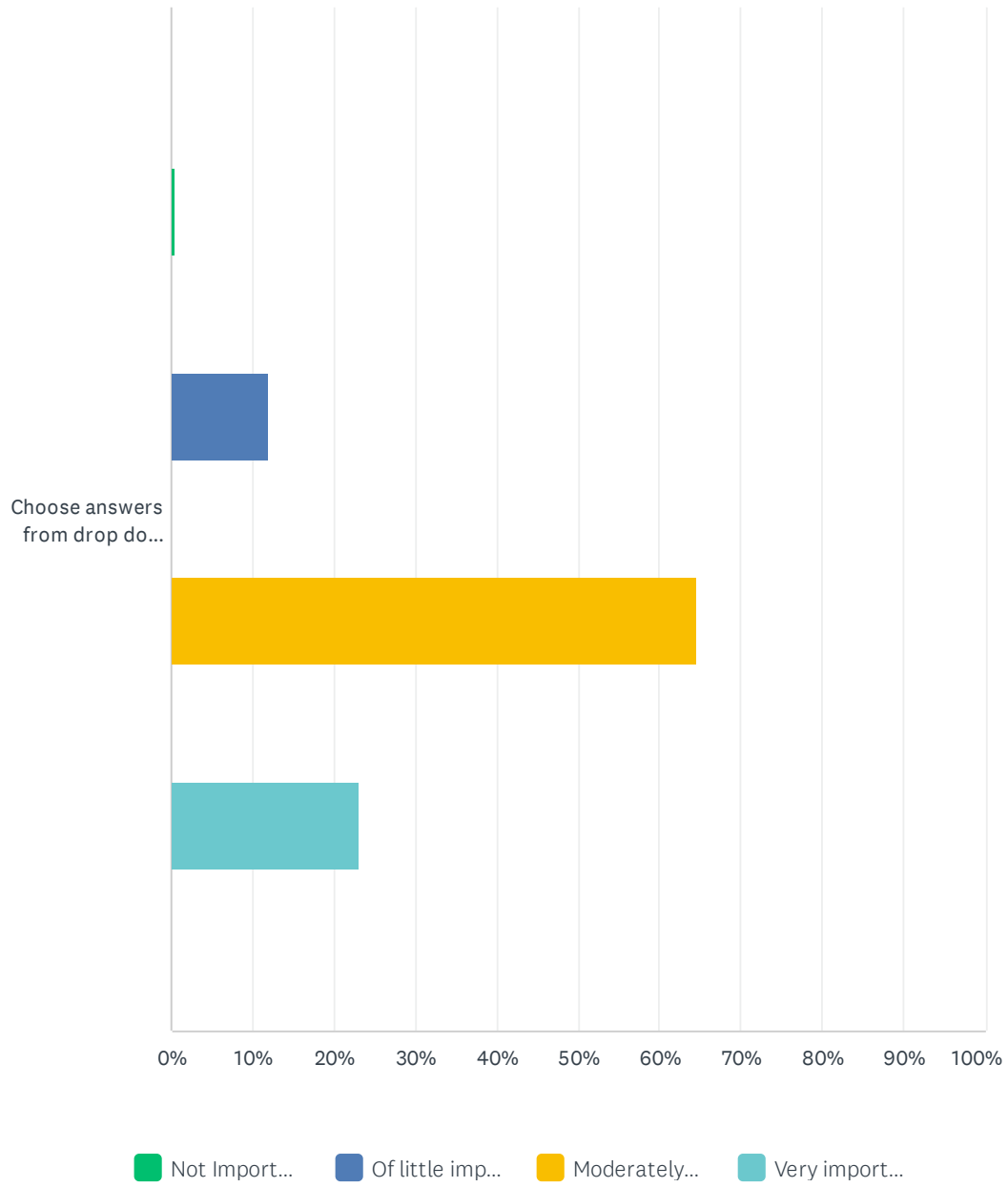
Q18 1.2.2.2 Pharmacology.

Answered: 535 Skipped: 675



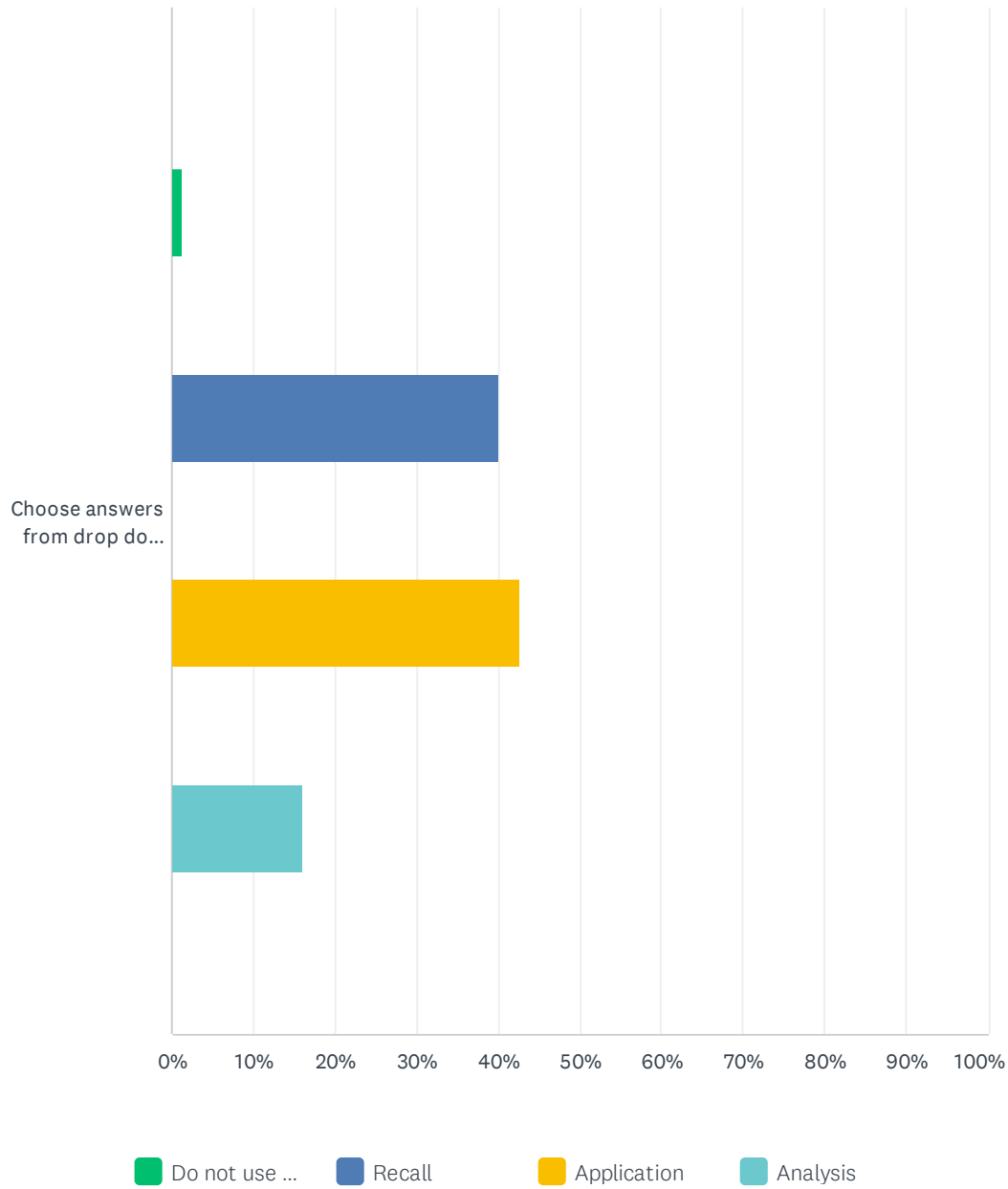
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.75% 4	5.98% 32	15.51% 83	40.19% 215	37.57% 201	535

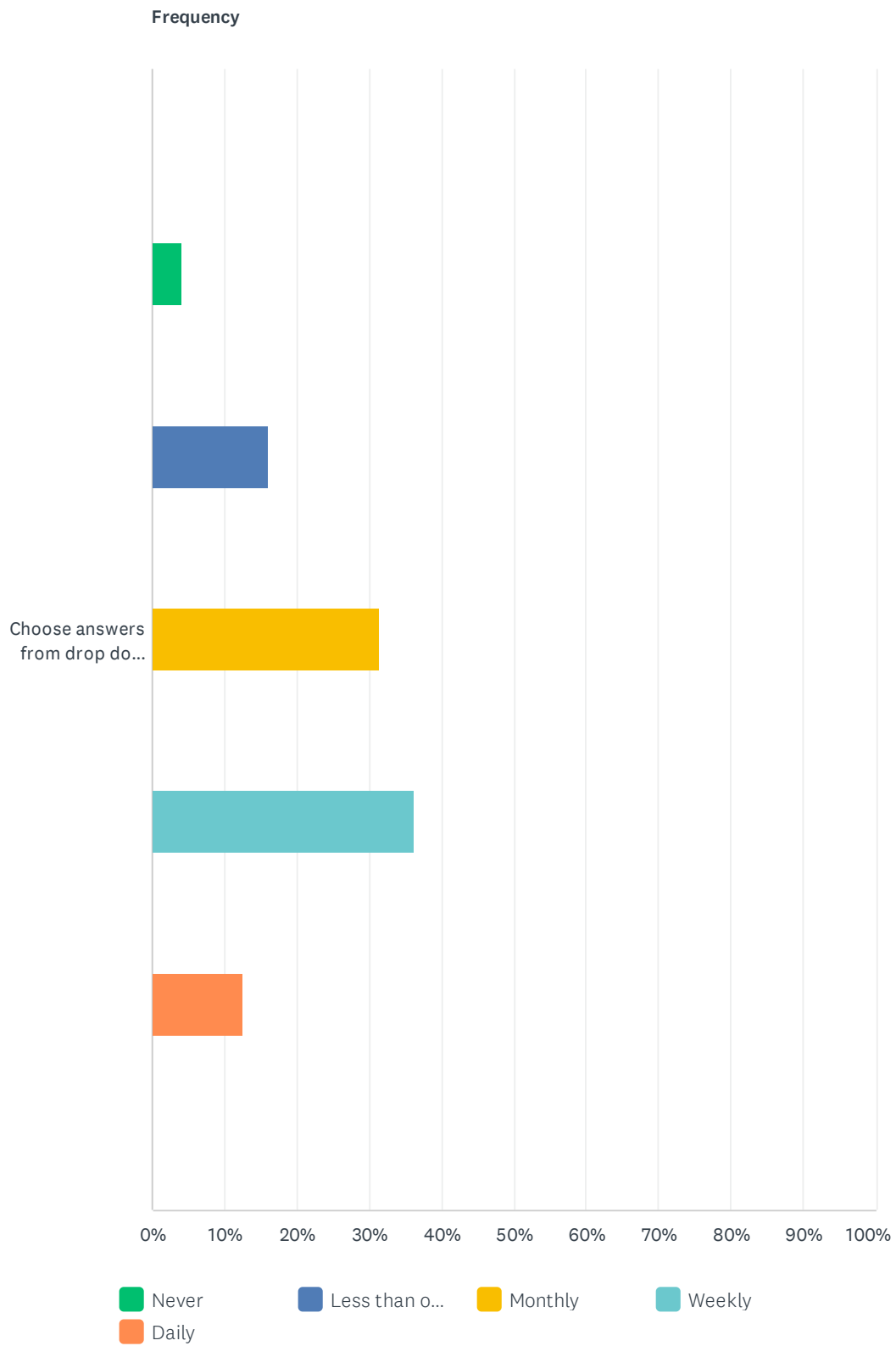
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.39% 2	11.99% 62	64.60% 334	23.02% 119	517

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	1.20% 6	40.16% 200	42.57% 212	16.06% 80	498

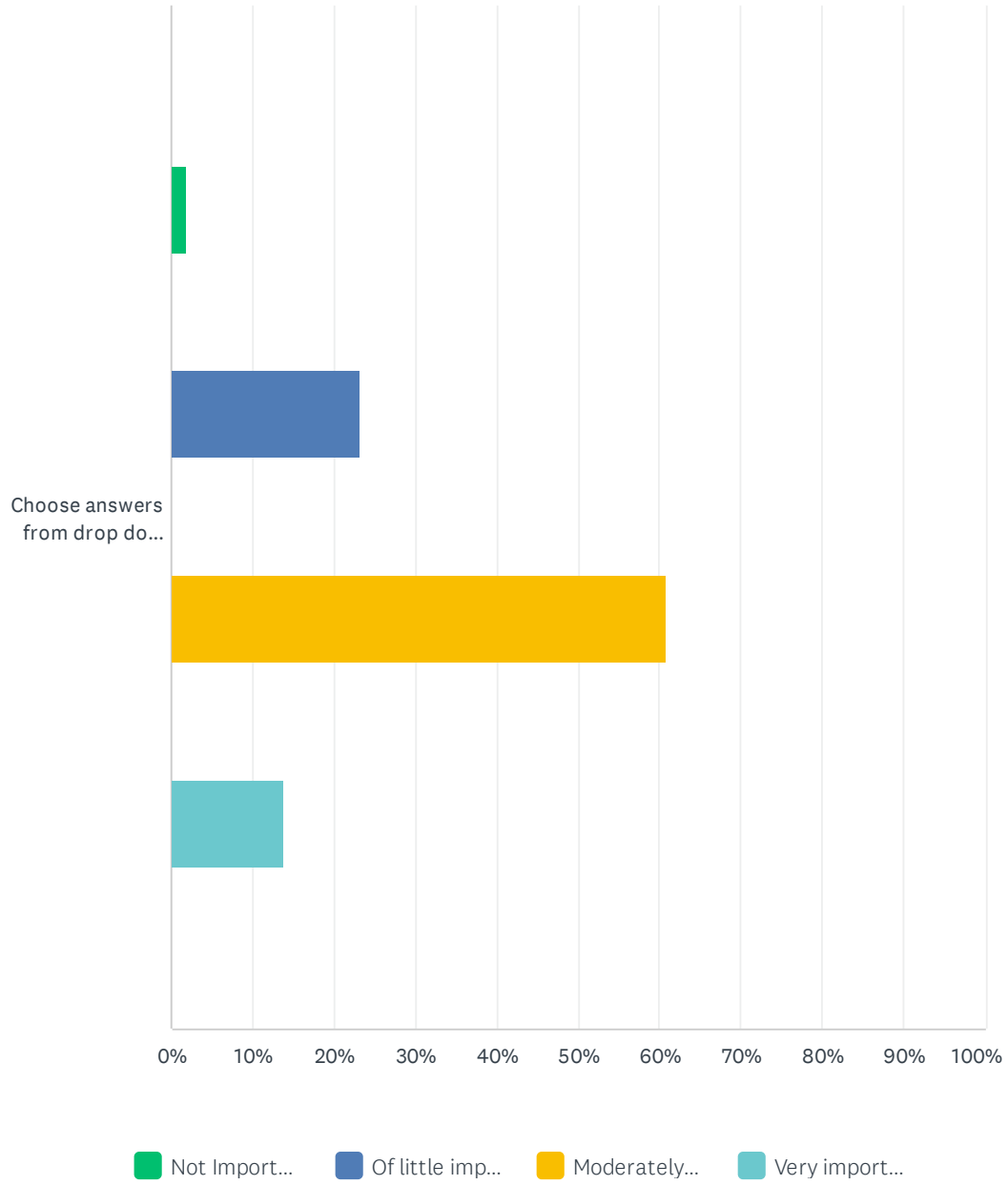
Q19 1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrophysiological exams).

Answered: 534 Skipped: 676



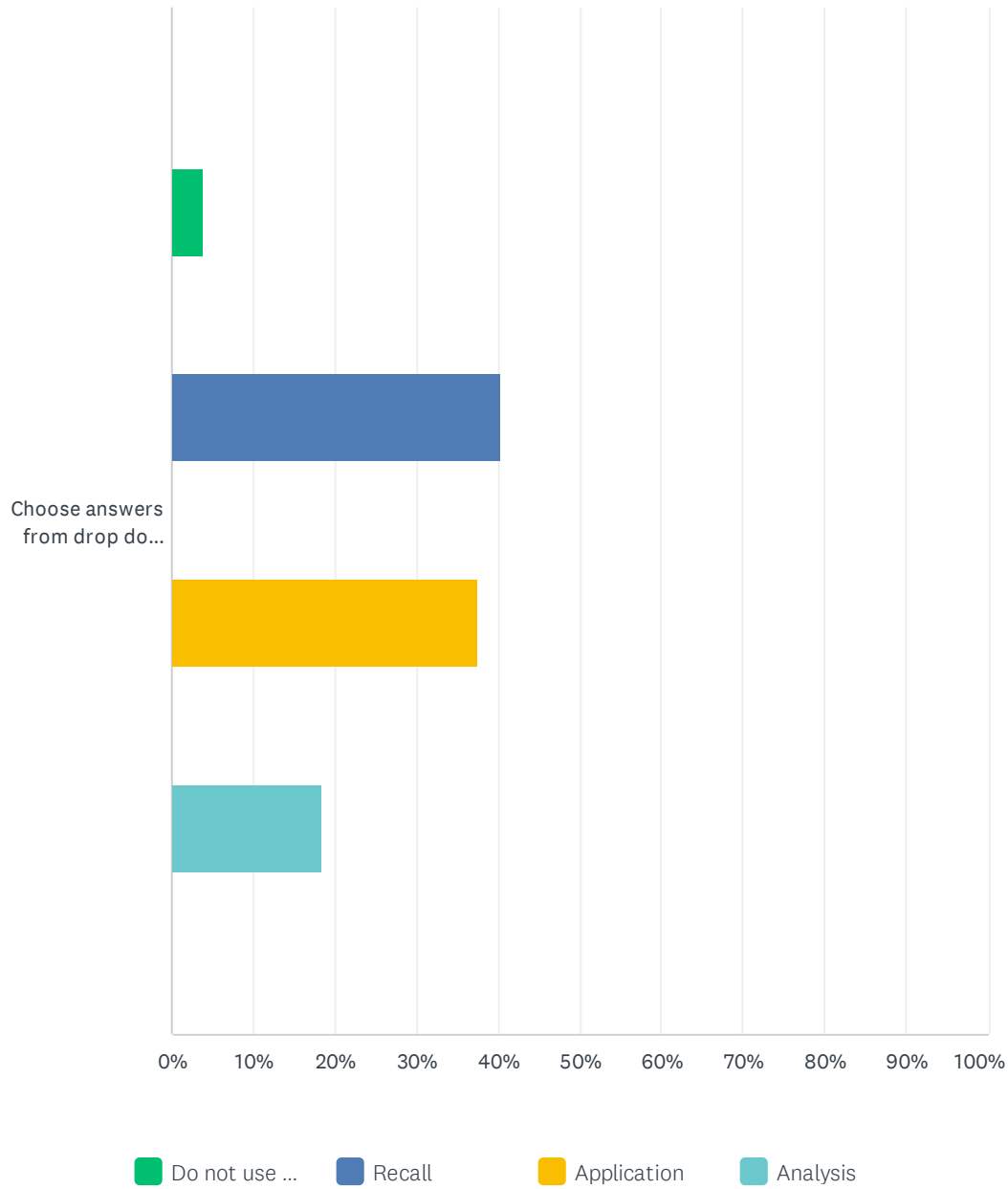
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	4.12% 22	15.92% 85	31.27% 167	36.14% 193	12.55% 67	534

Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.94% 10	23.26% 120	60.85% 314	13.95% 72	516

Spine Validation Practice Analysis Survey 2022

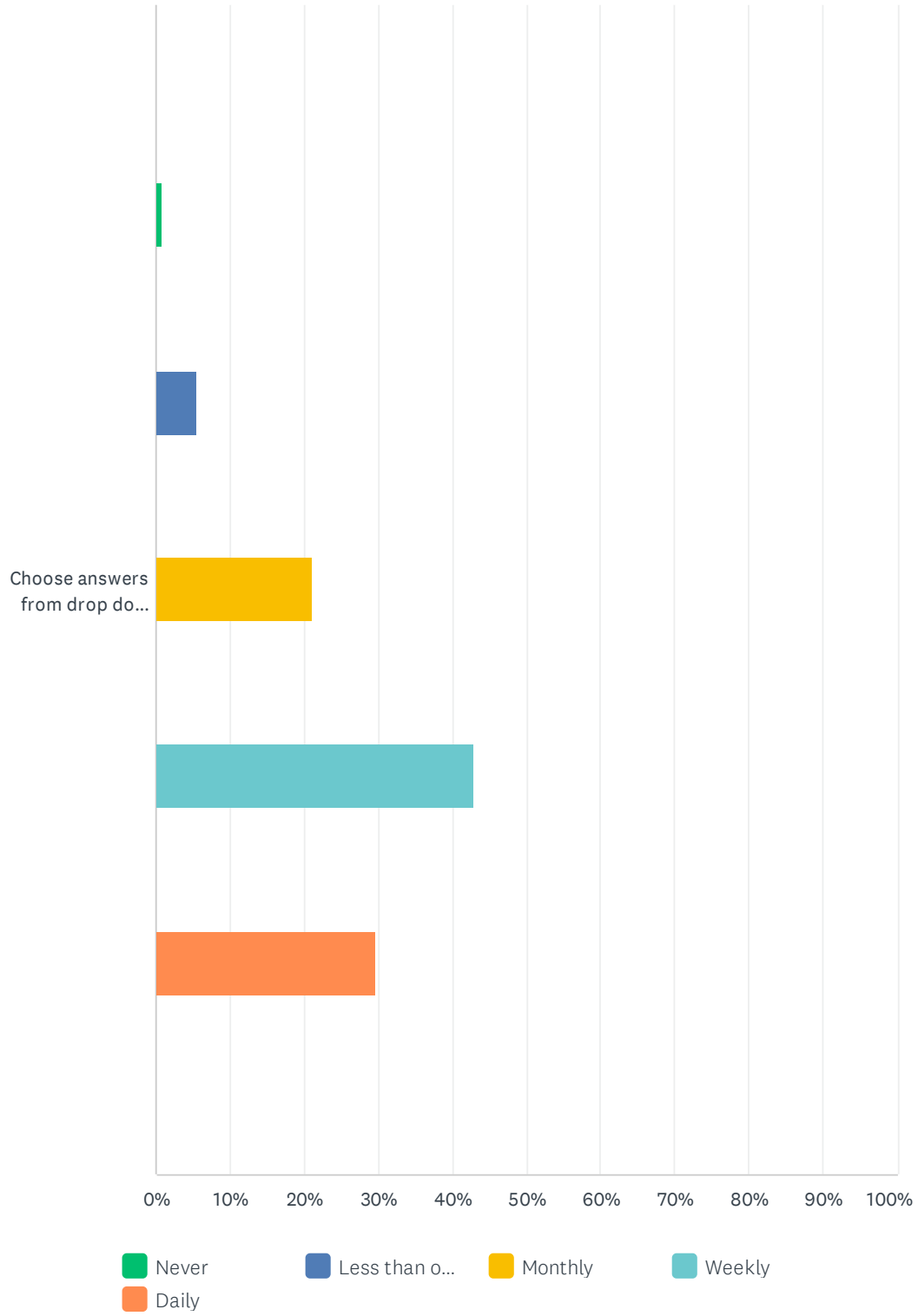
Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	3.83% 19	40.32% 200	37.50% 186	18.35% 91	496

Q20 1.2.2.4 Nonsurgical interventional spine procedures (e.g., injections, radial ablation, denervation procedures) and their indications, contraindications, and precautions for orthopaedic spine physical therapy.

Answered: 533 Skipped: 677

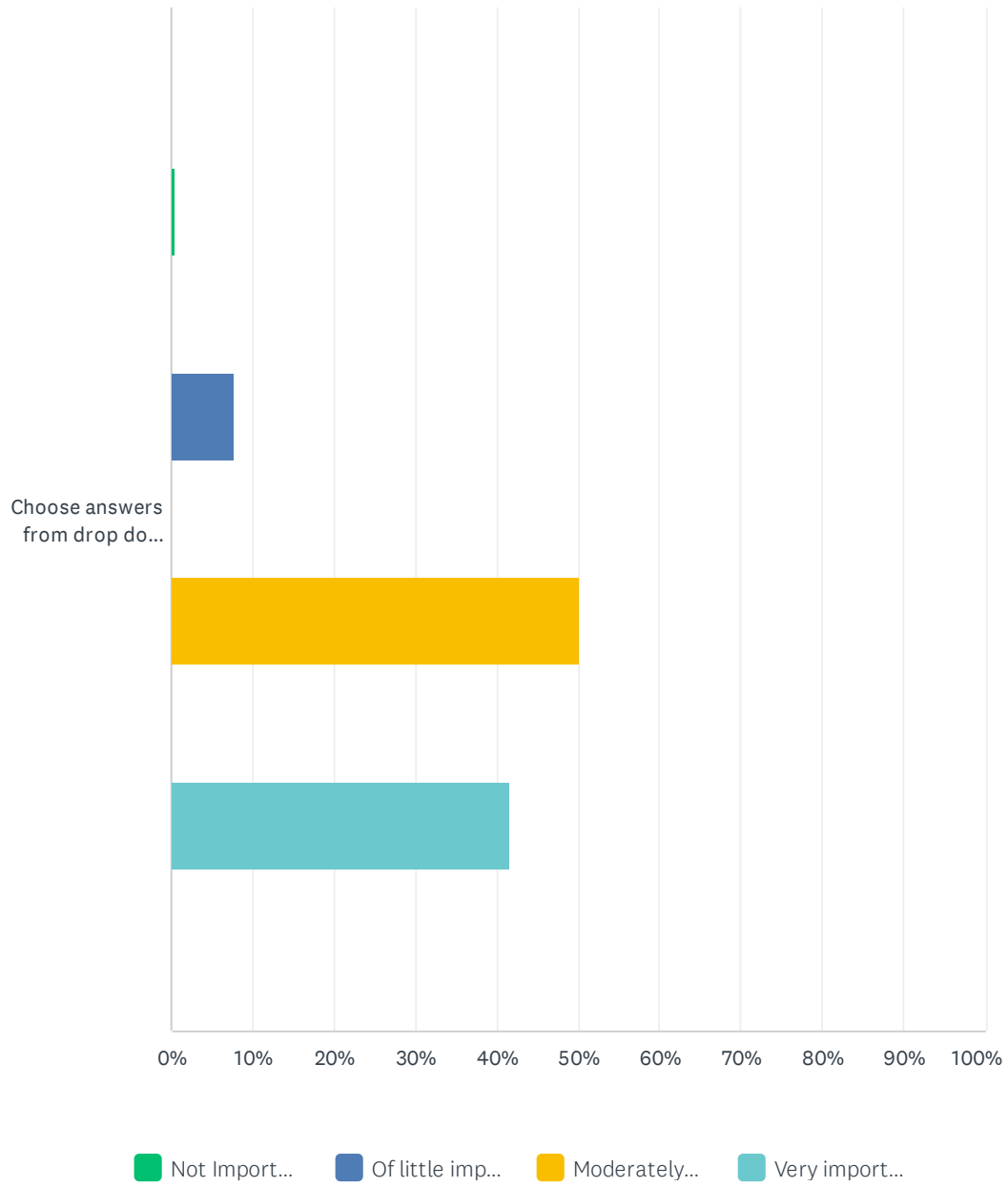
Spine Validation Practice Analysis Survey 2022

Frequency



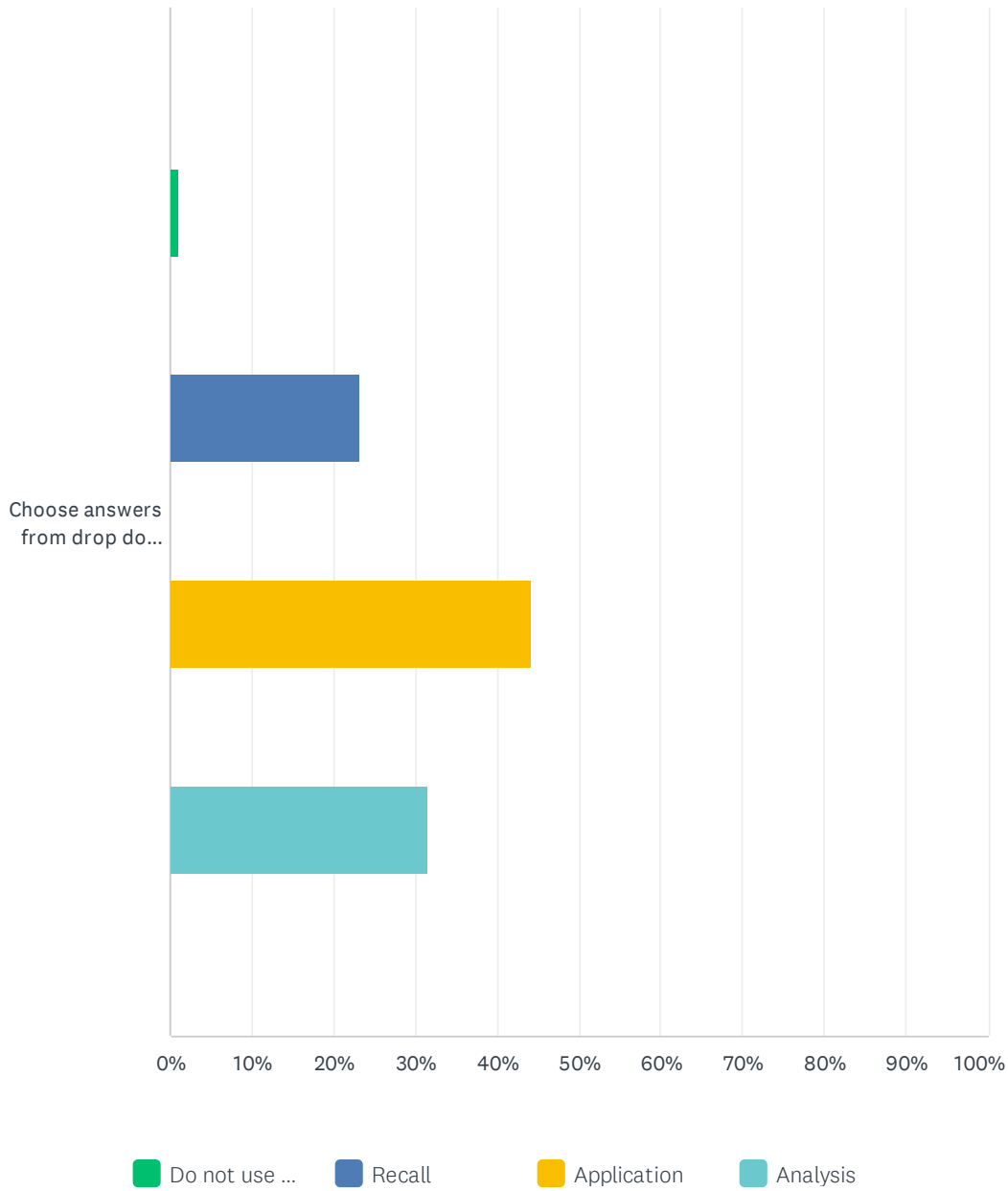
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.94%	5.44%	21.20%	42.78%	29.64%	
	5	29	113	228	158	533

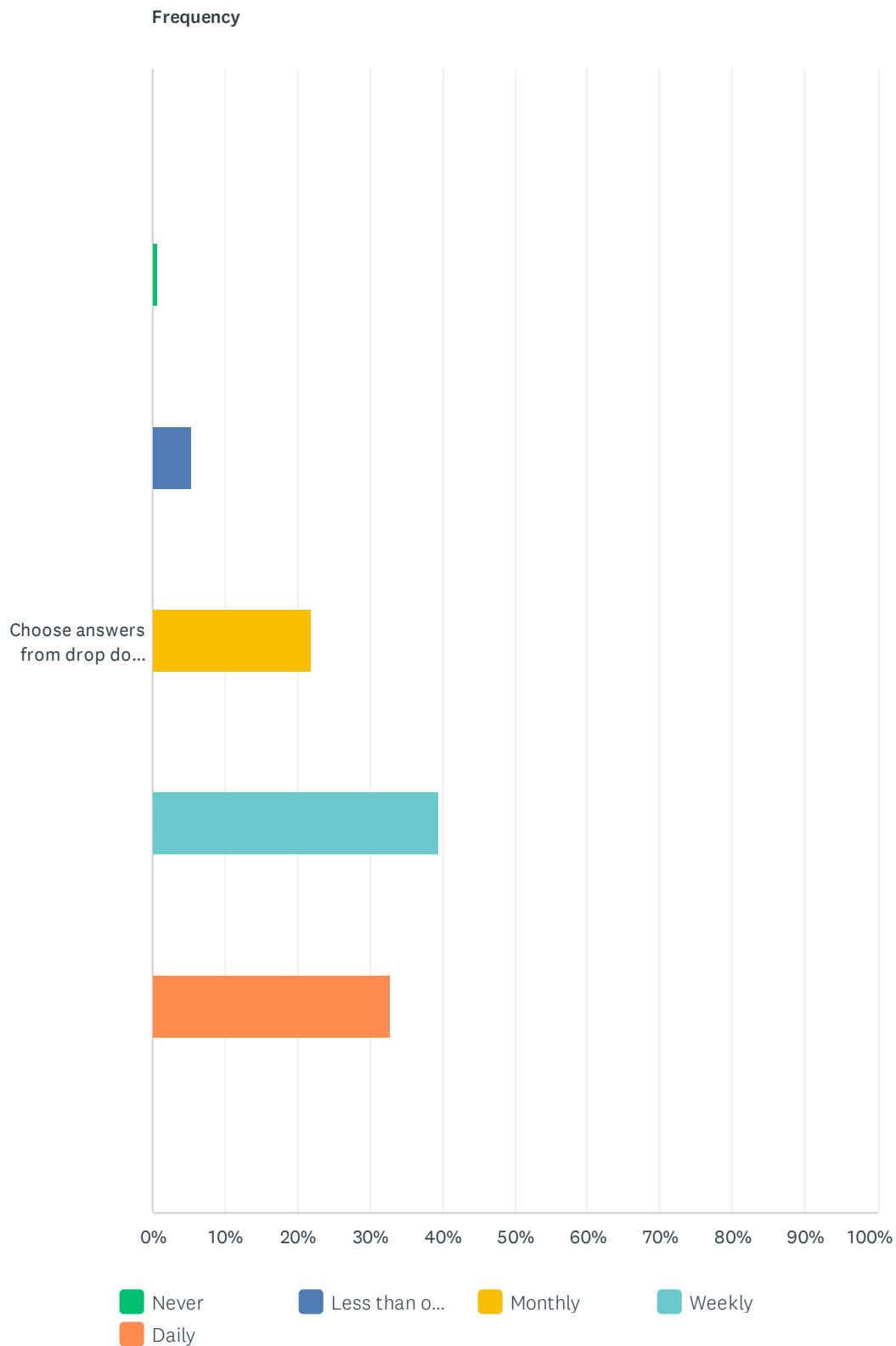
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.39%	7.78%	50.19%	41.63%	
	2	40	258	214	514

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	1.01%	23.34%	44.06%	31.59%	
	5	116	219	157	497

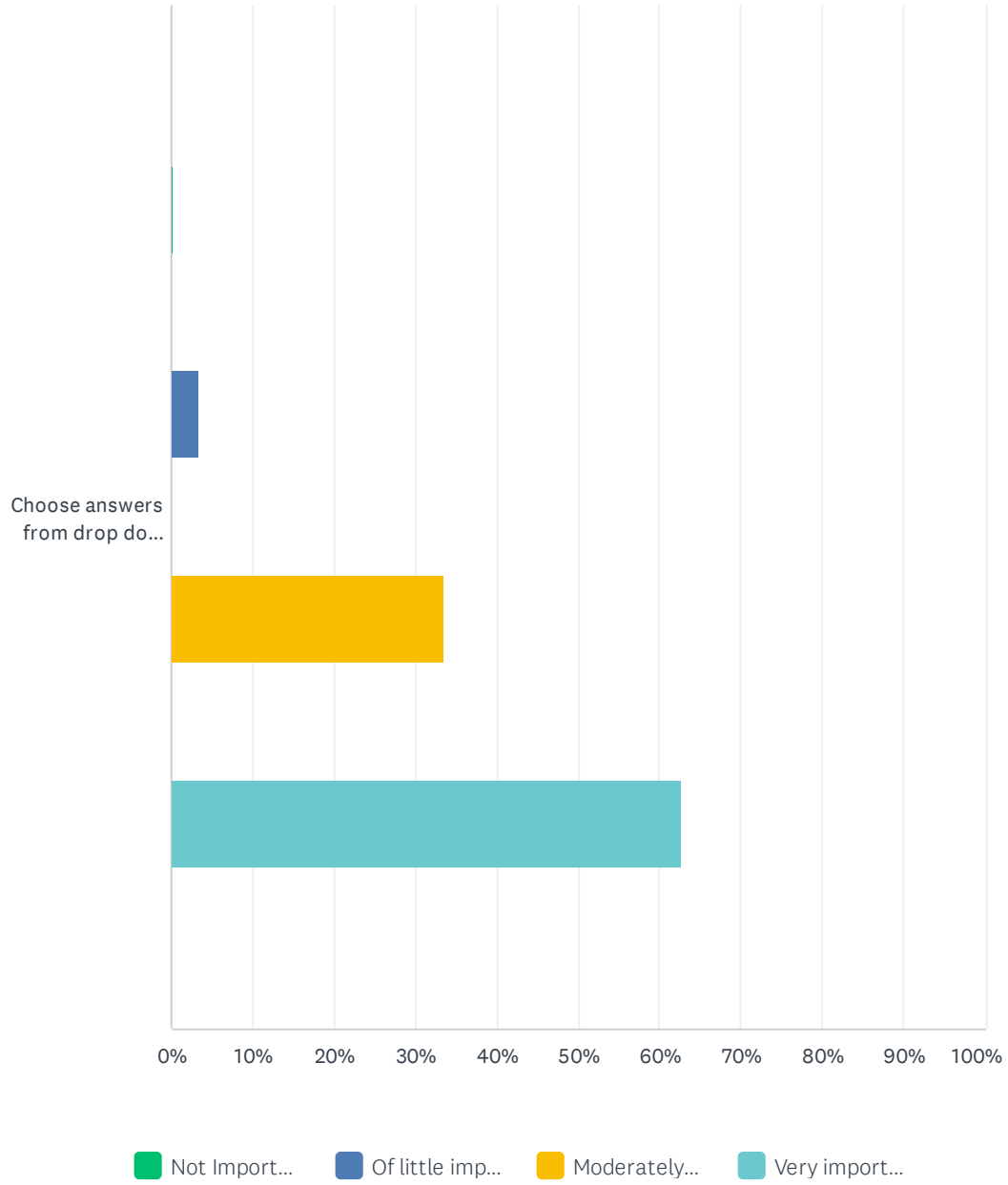
Q21 1.2.2.5 Spine surgical interventions and their indications, contraindications, and precautions for orthopaedic spine physical therapy.

Answered: 534 Skipped: 676



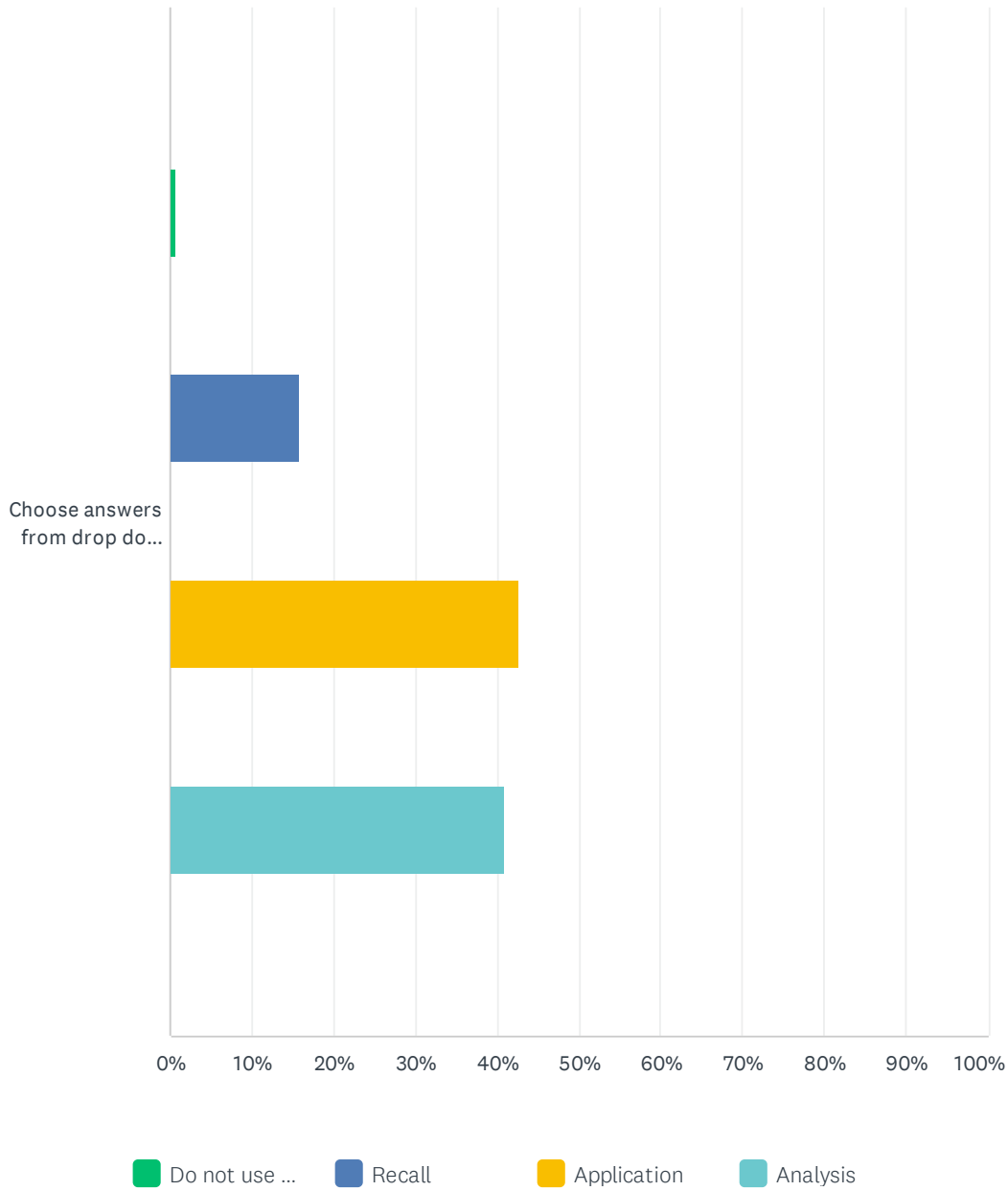
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.56% 3	5.24% 28	21.91% 117	39.51% 211	32.77% 175	534

Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.19% 1	3.49% 18	33.53% 173	62.79% 324	516

Spine Validation Practice Analysis Survey 2022

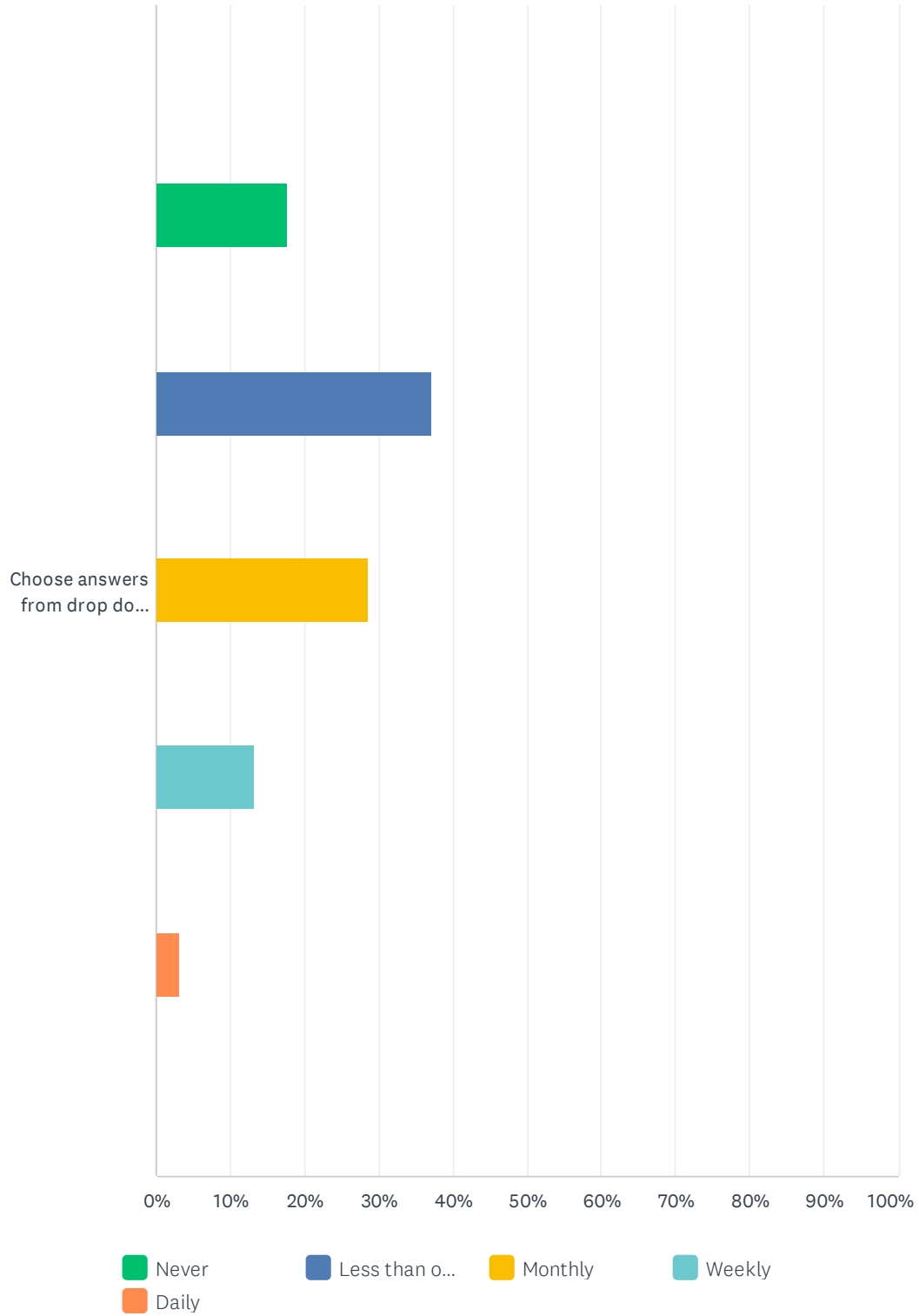
Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.60%	15.86%	42.57%	40.96%	
	3	79	212	204	498

Q22 1.2.2.6 Developments in genetics/regenerative medicine (e.g., genetic markers, stem cell applications, genetic-based alterations to pharmacological interventions, immunity).

Answered: 534 Skipped: 676

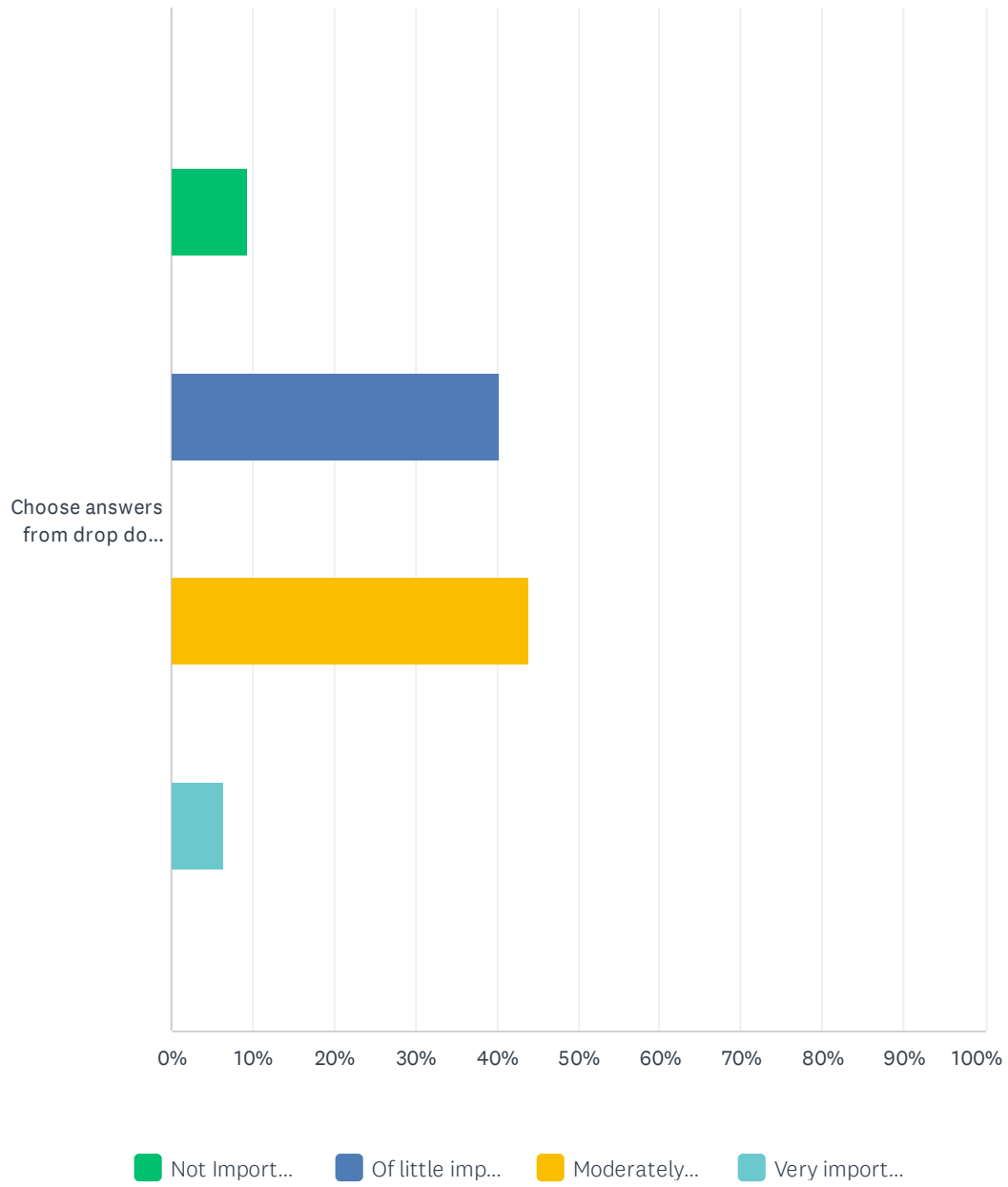
Spine Validation Practice Analysis Survey 2022

Frequency



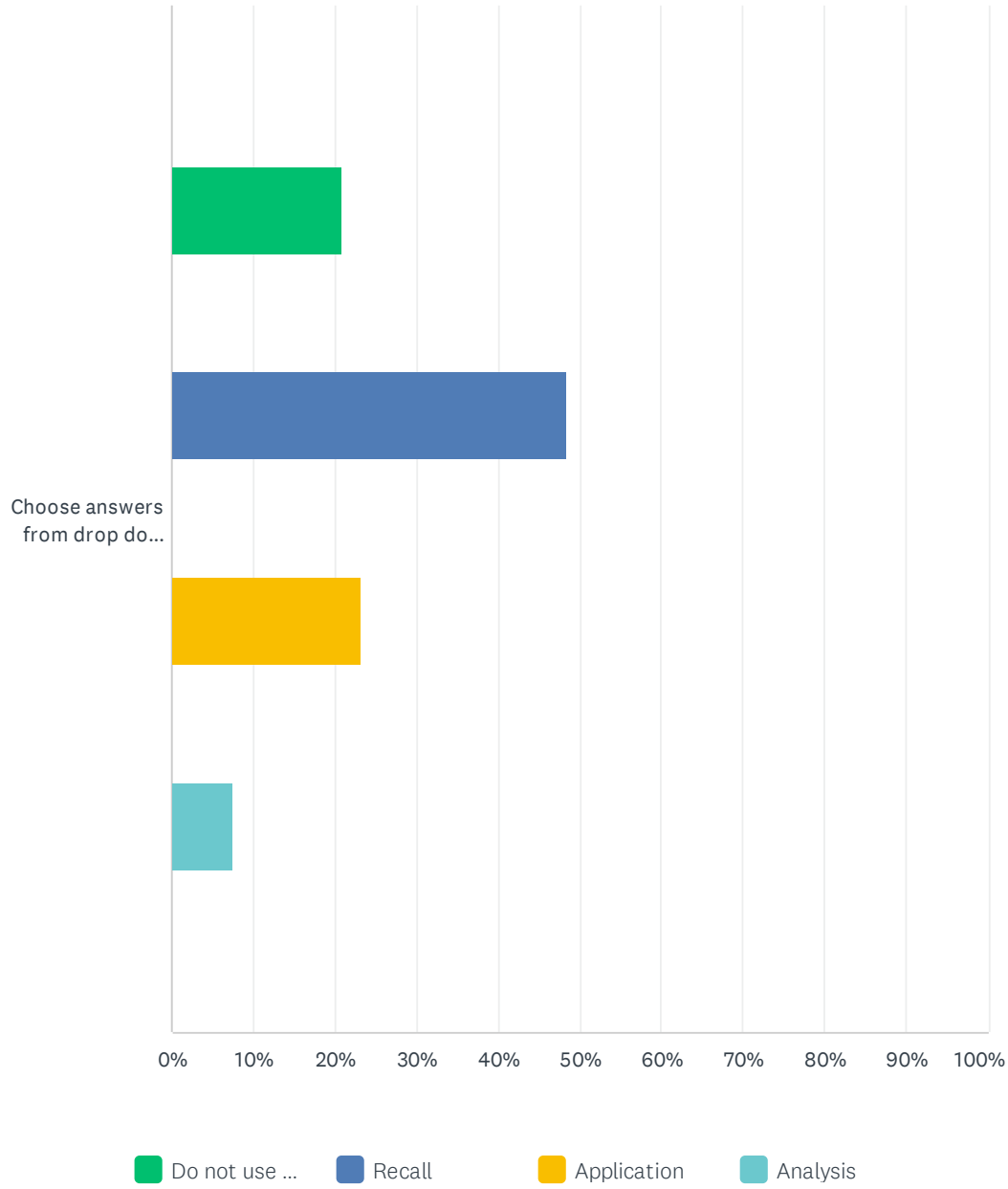
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	17.79% 95	37.08% 198	28.65% 153	13.30% 71	3.18% 17	534

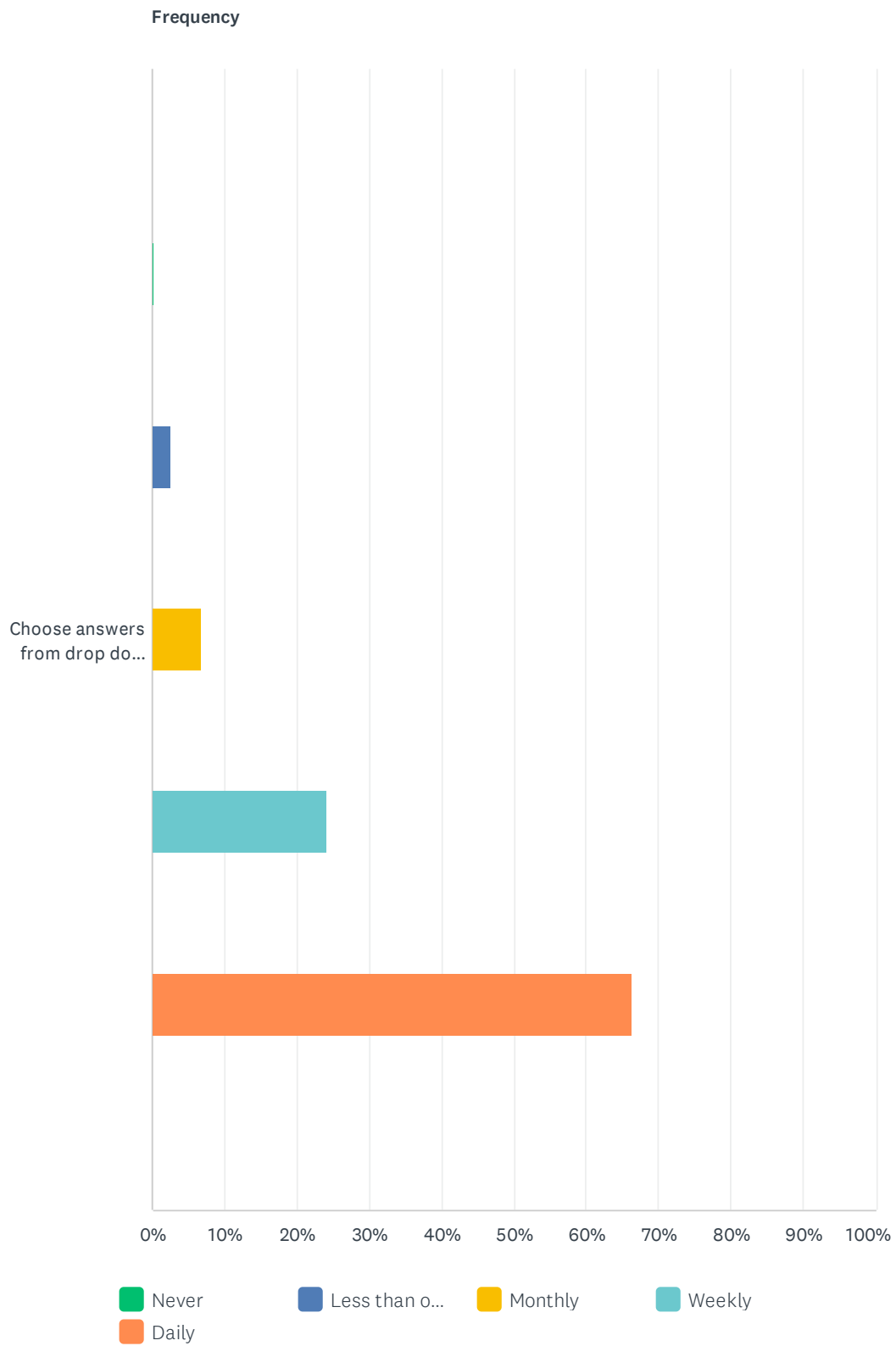
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	9.34% 48	40.27% 207	43.97% 226	6.42% 33	514

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	20.97% 104	48.39% 240	23.19% 115	7.46% 37	496

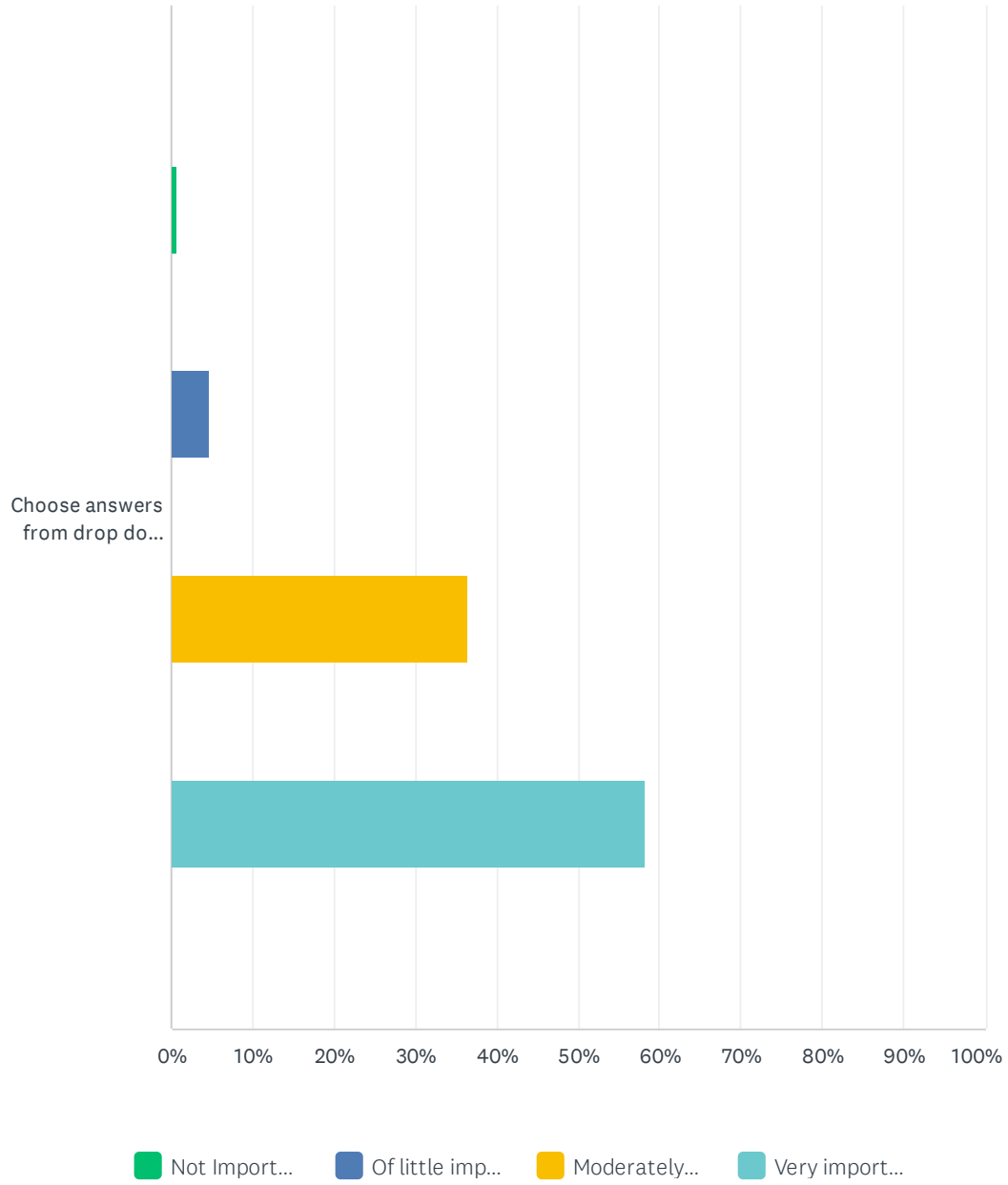
Q23 1.3.1.1 External environmental factors (e.g., expected behaviors and social pressures).

Answered: 489 Skipped: 721



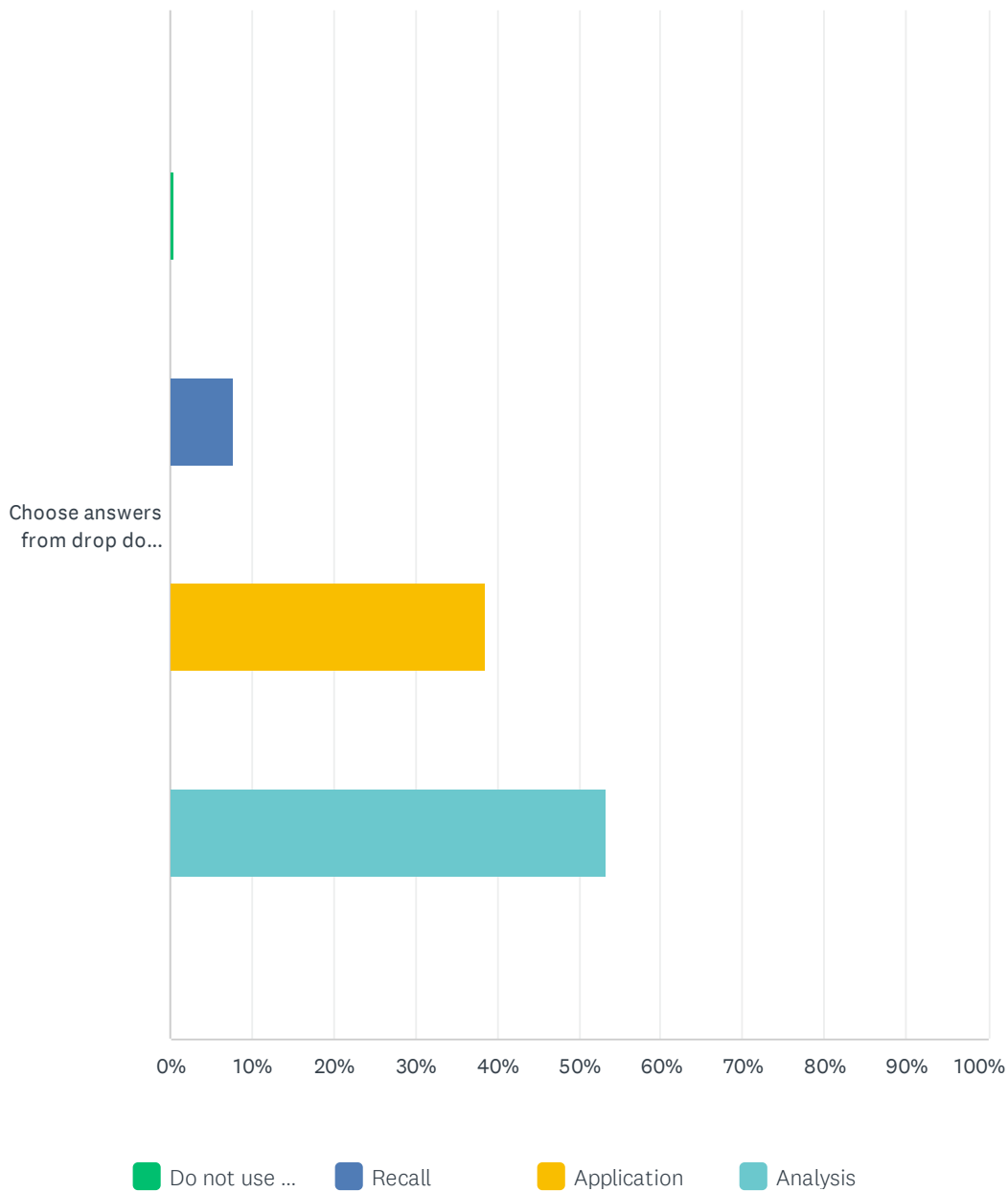
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.20% 1	2.66% 13	6.75% 33	24.13% 118	66.26% 324	489

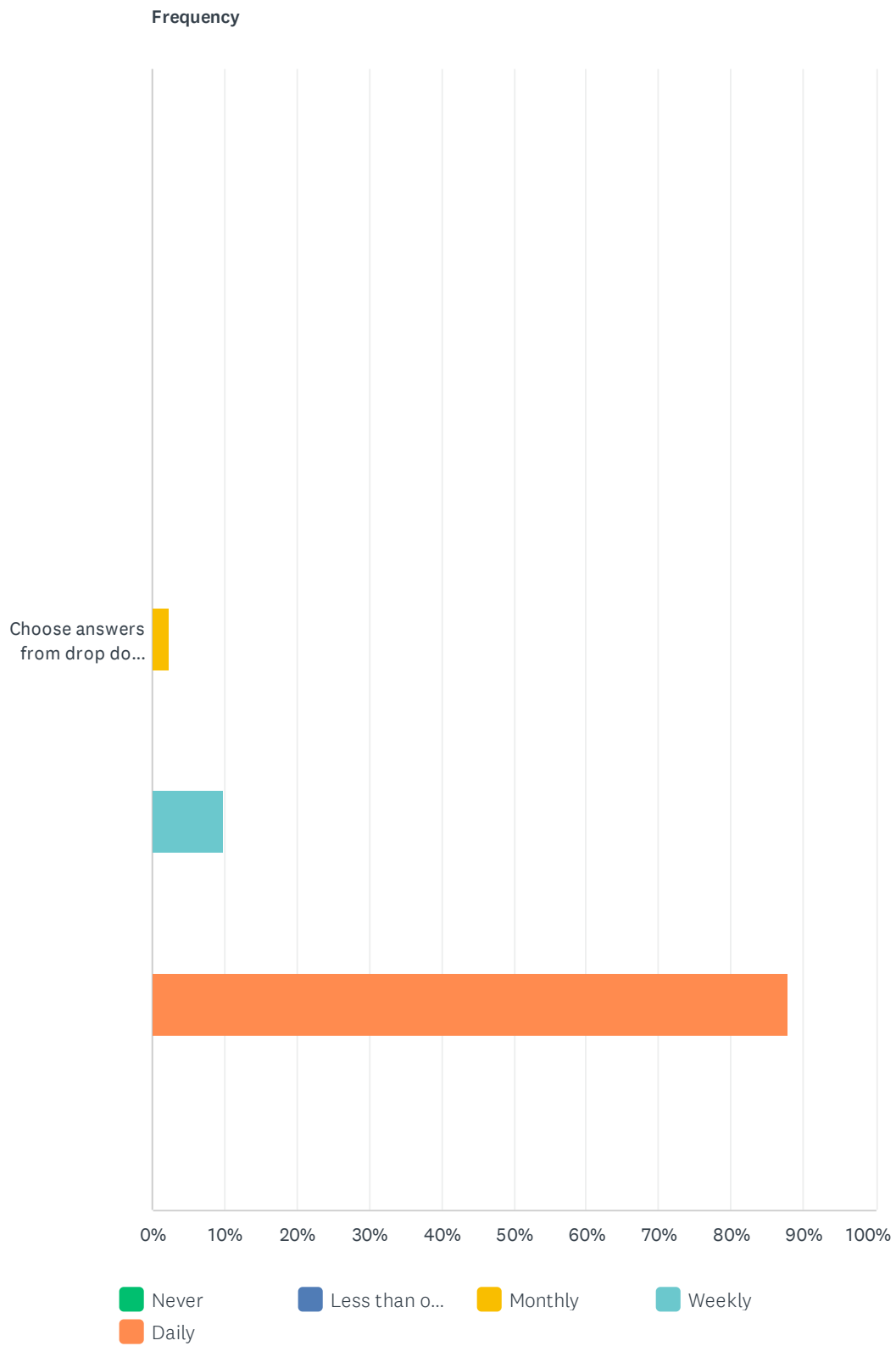
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.64% 3	4.67% 22	36.52% 172	58.17% 274	471

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.44% 2	7.73% 35	38.63% 175	53.20% 241	453

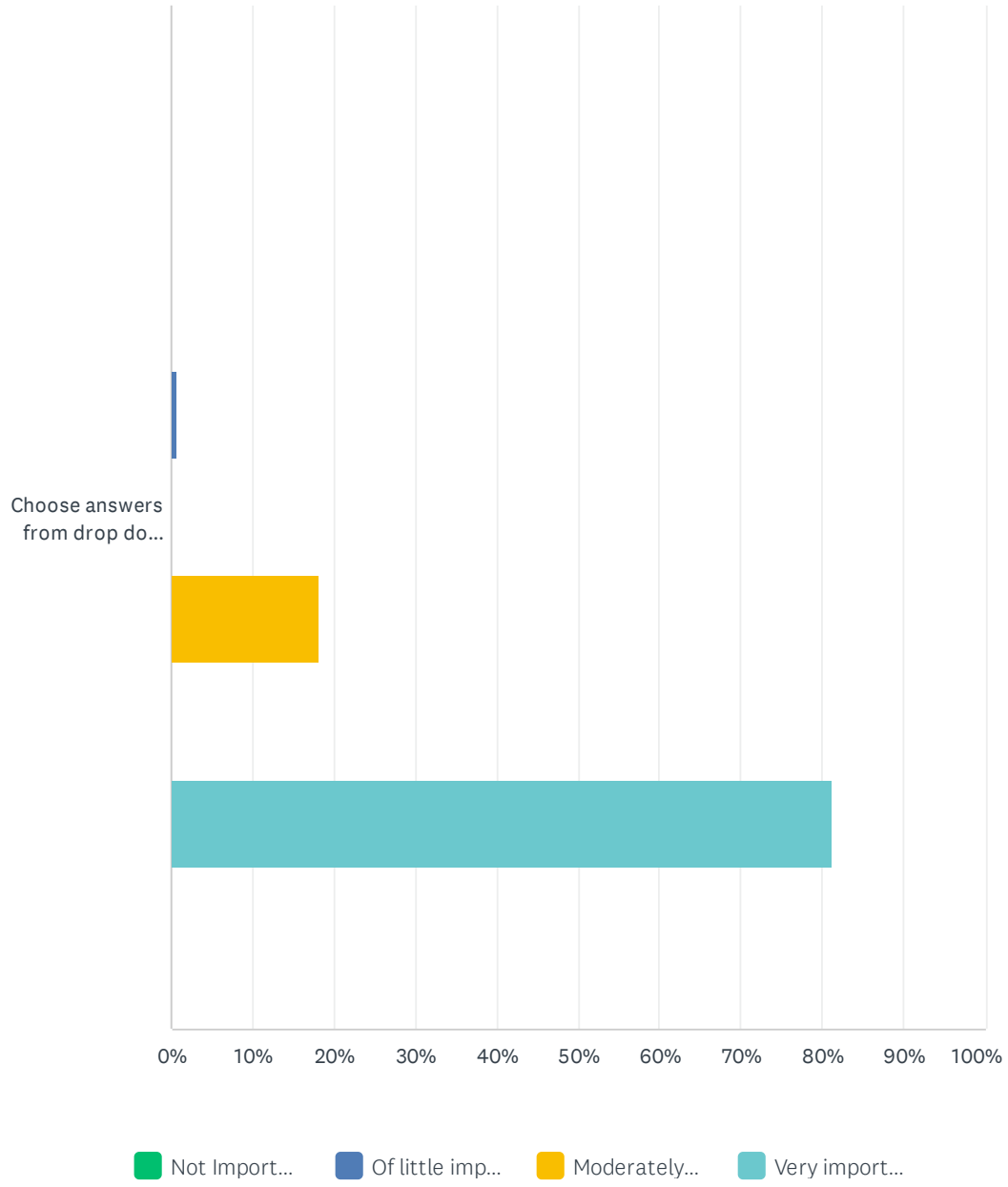
Q24 1.3.1.2 Personal factors (e.g., compliance, body awareness, pain perception, and related psychosocial factors).

Answered: 487 Skipped: 723



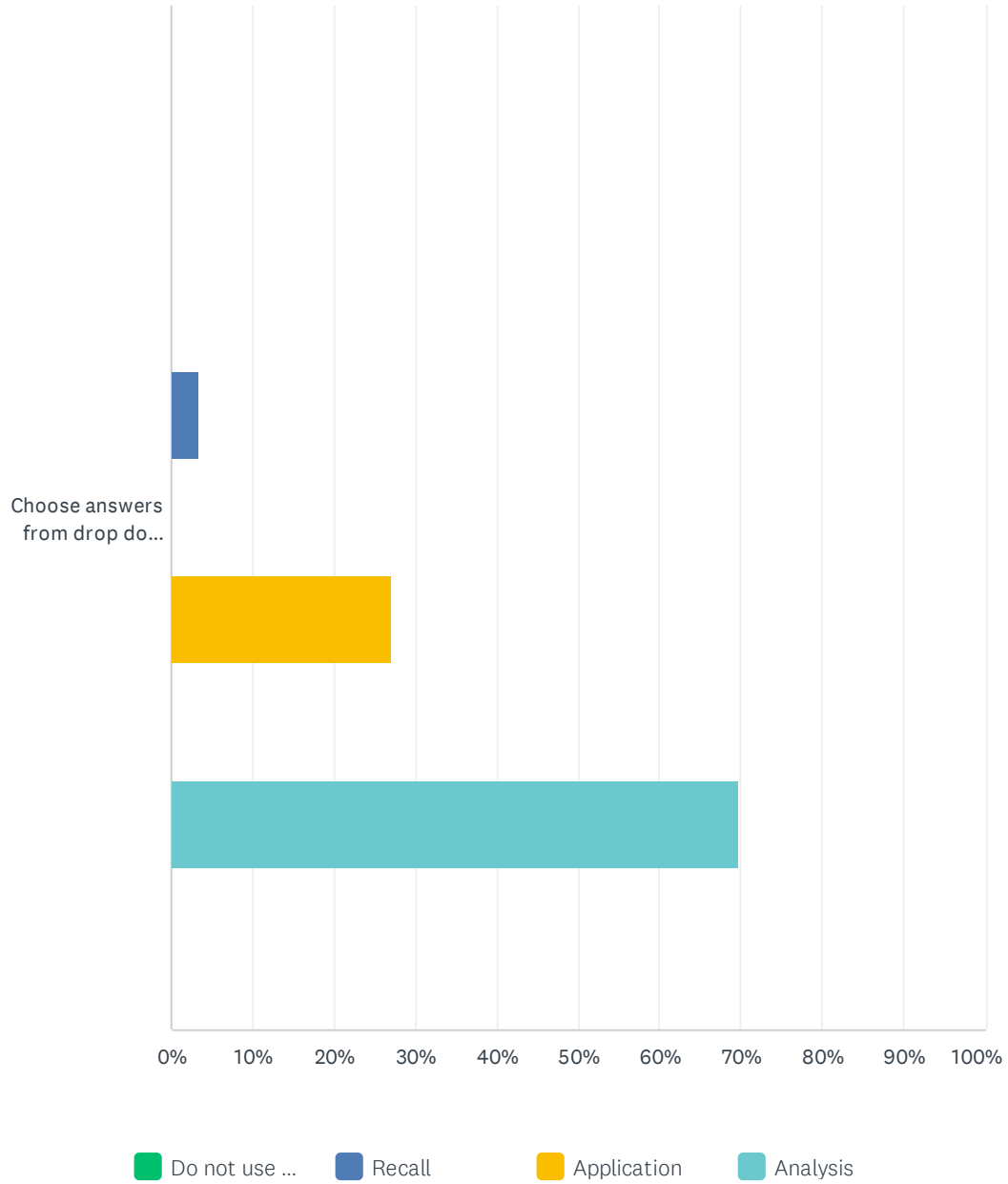
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	2.26% 11	9.86% 48	87.89% 428	487

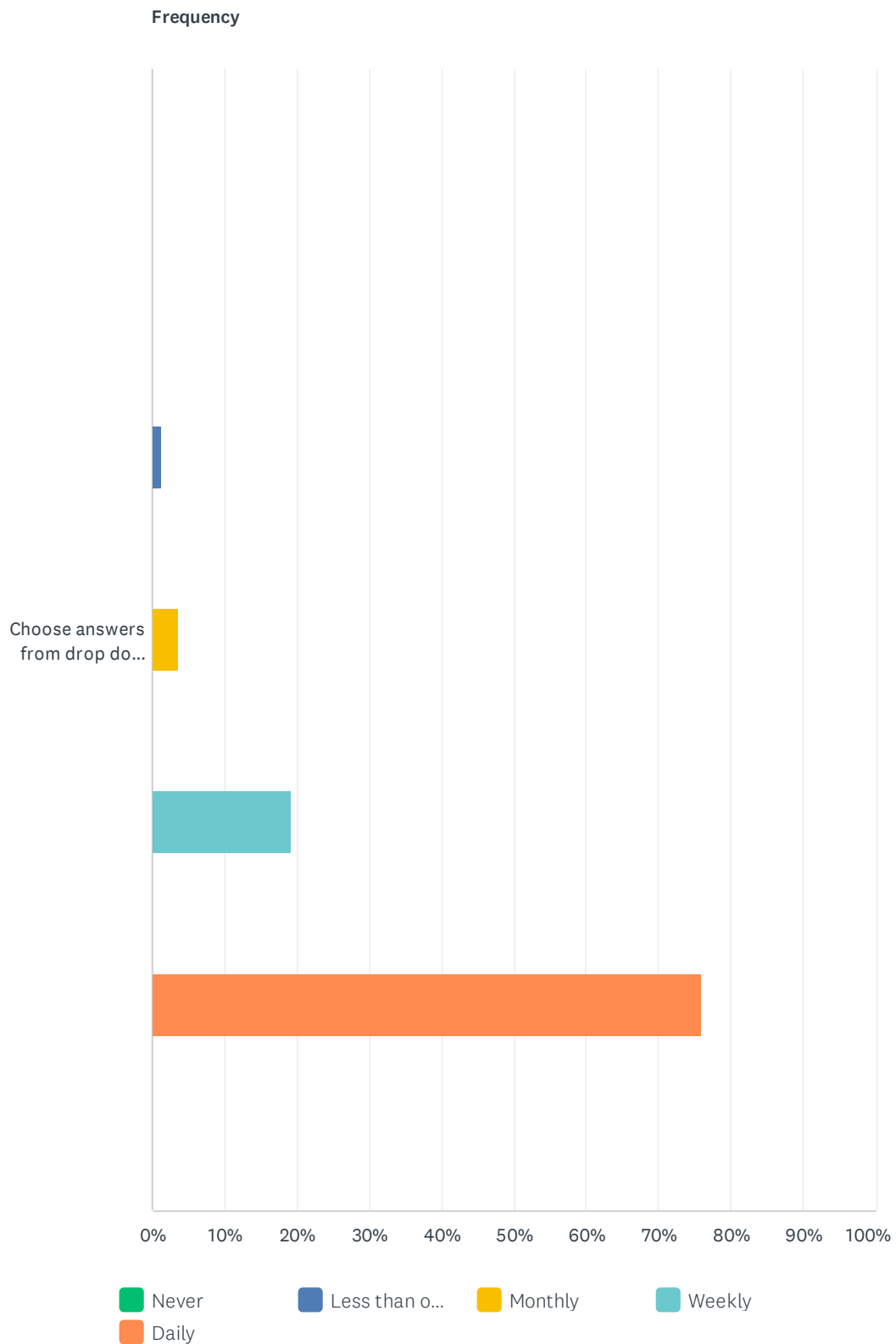
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.64% 3	18.09% 85	81.28% 382	470

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	3.32% 15	26.99% 122	69.69% 315	452

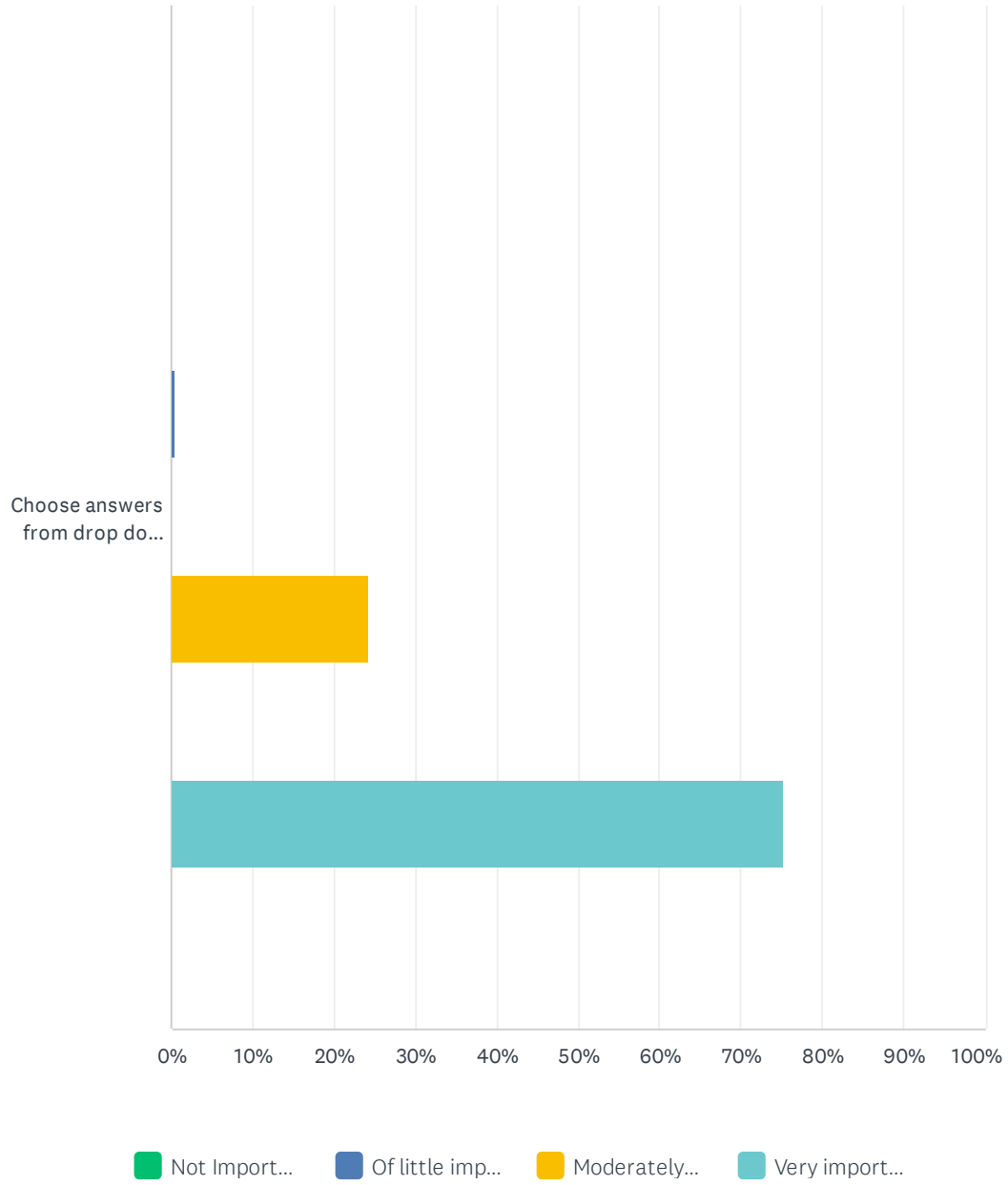
Q25 1.3.1.3 Psychological/emotional conditions (e.g., anxiety, depression, catastrophization).

Answered: 488 Skipped: 722



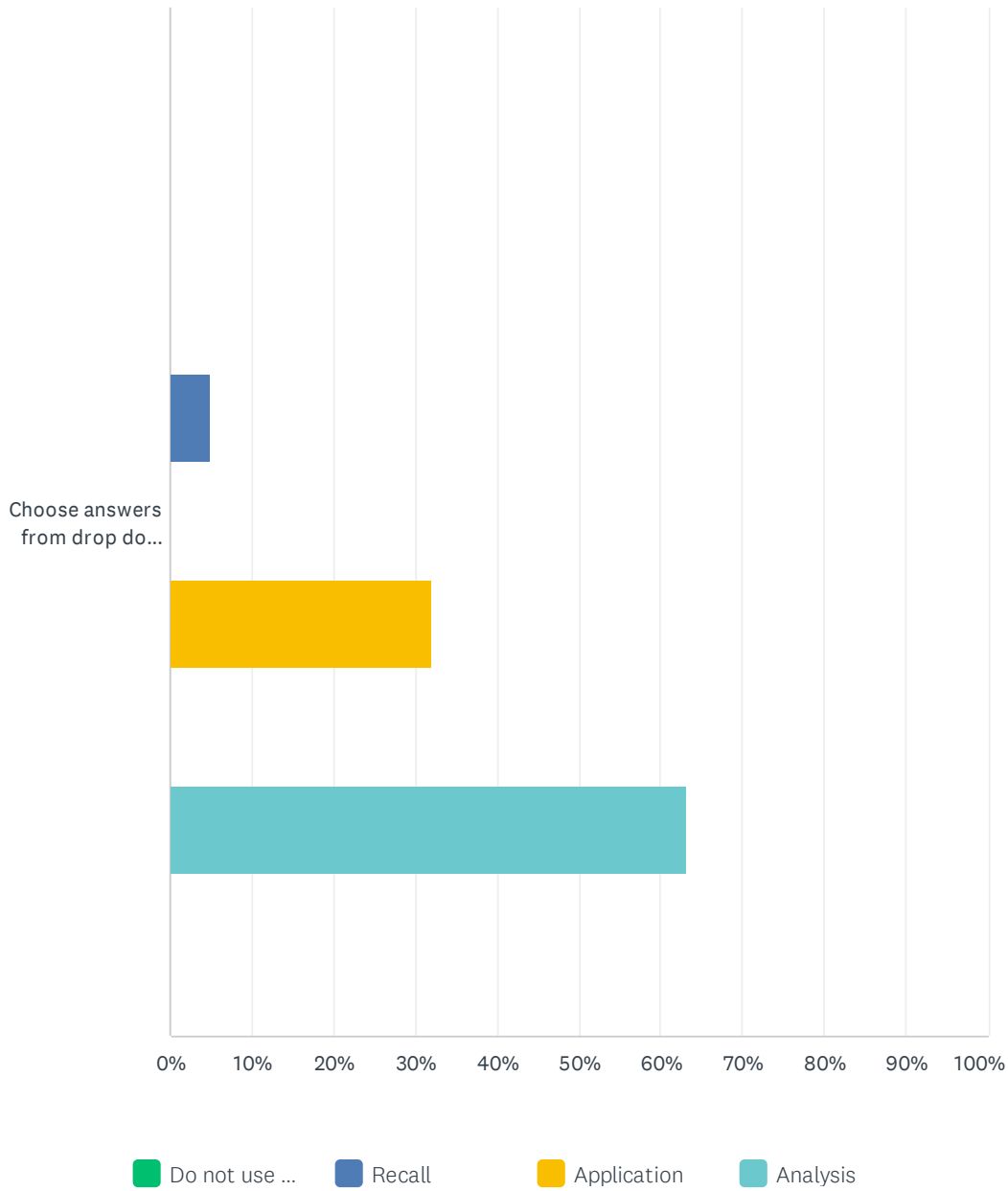
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.23% 6	3.69% 18	19.26% 94	75.82% 370	488

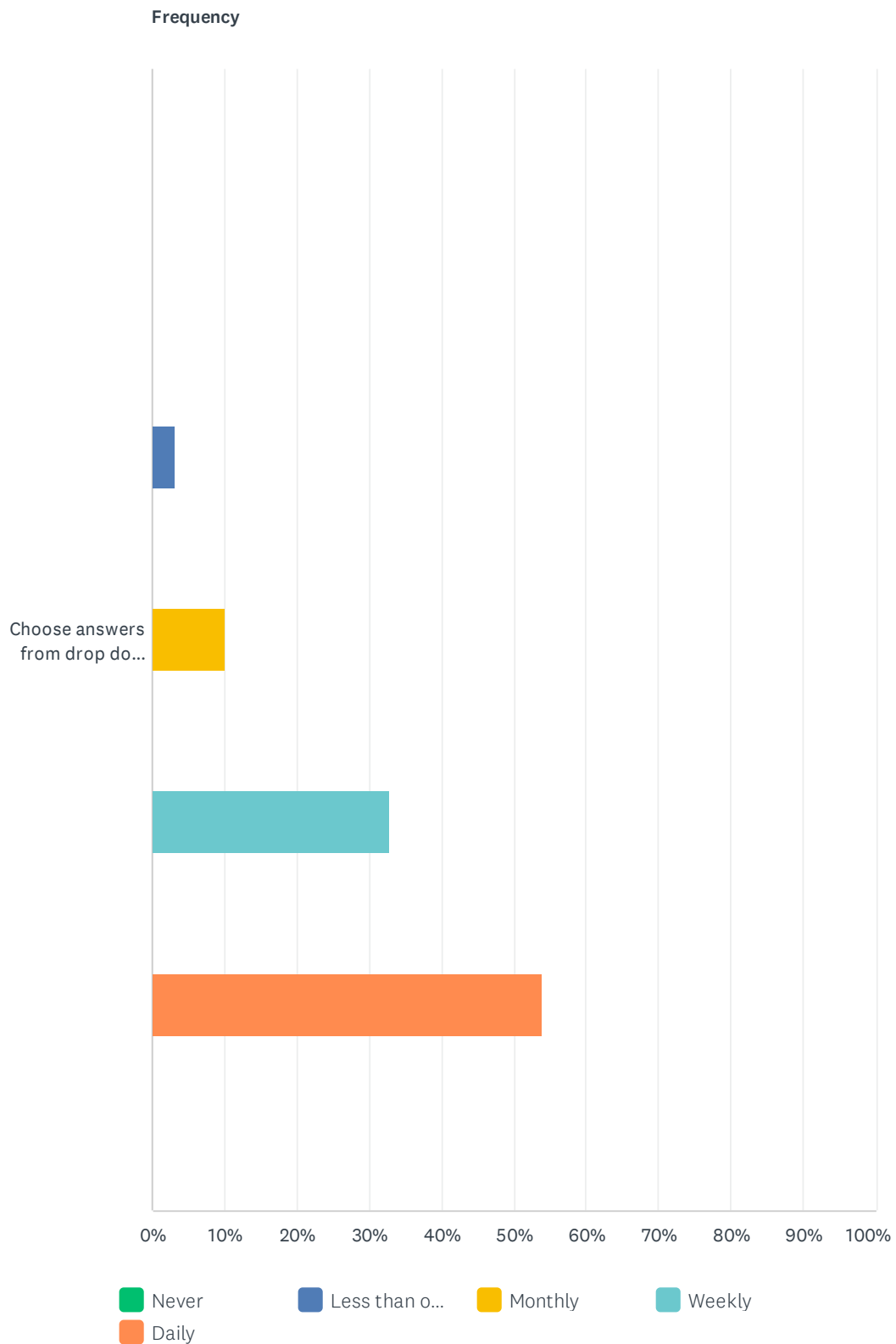
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.42% 2	24.20% 114	75.37% 355	471

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	4.87% 22	32.08% 145	63.05% 285	452

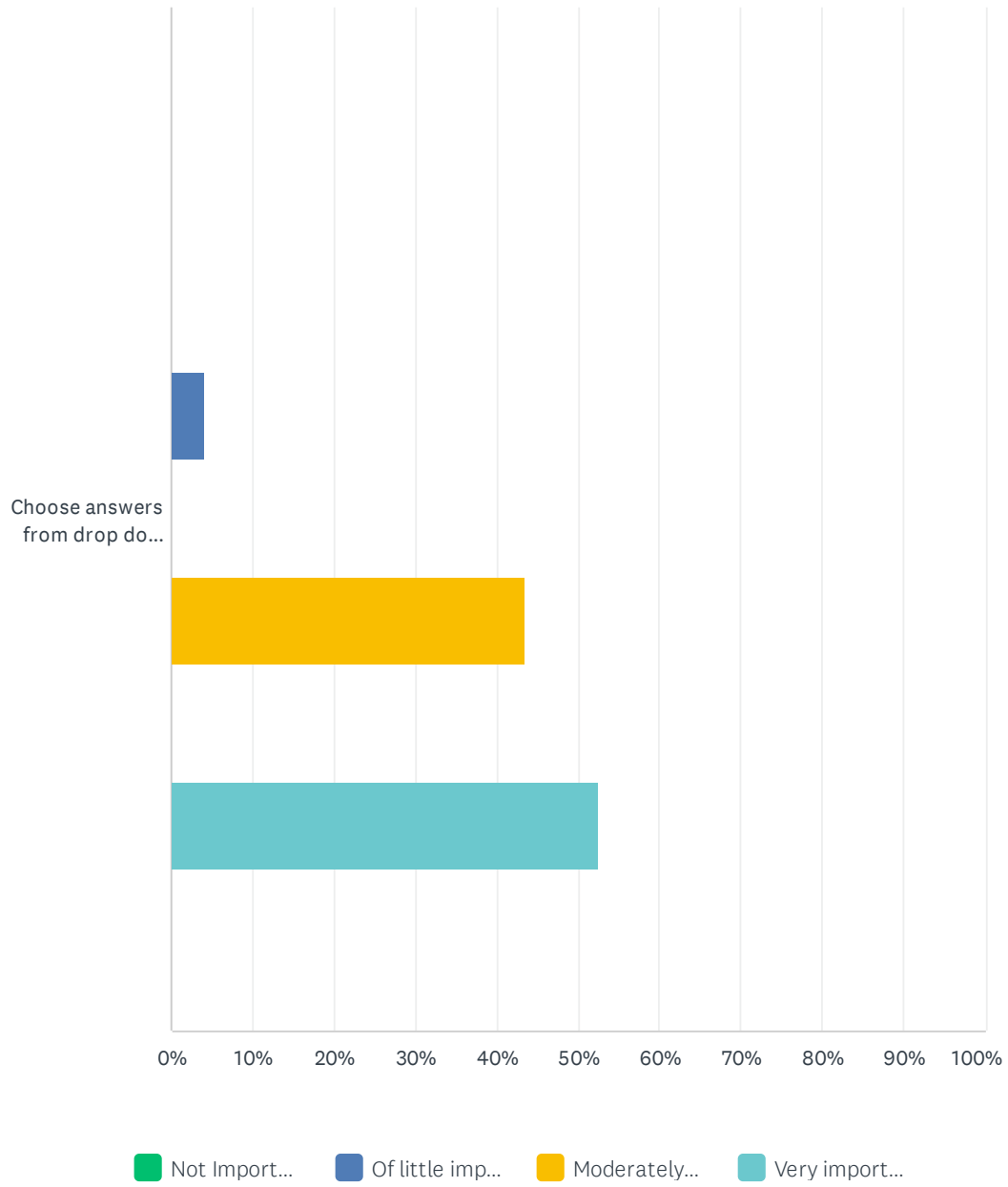
Q26 1.3.1.4 Impact of behavioral health risk factors (e.g., smoking effects on healing rates).

Answered: 488 Skipped: 722



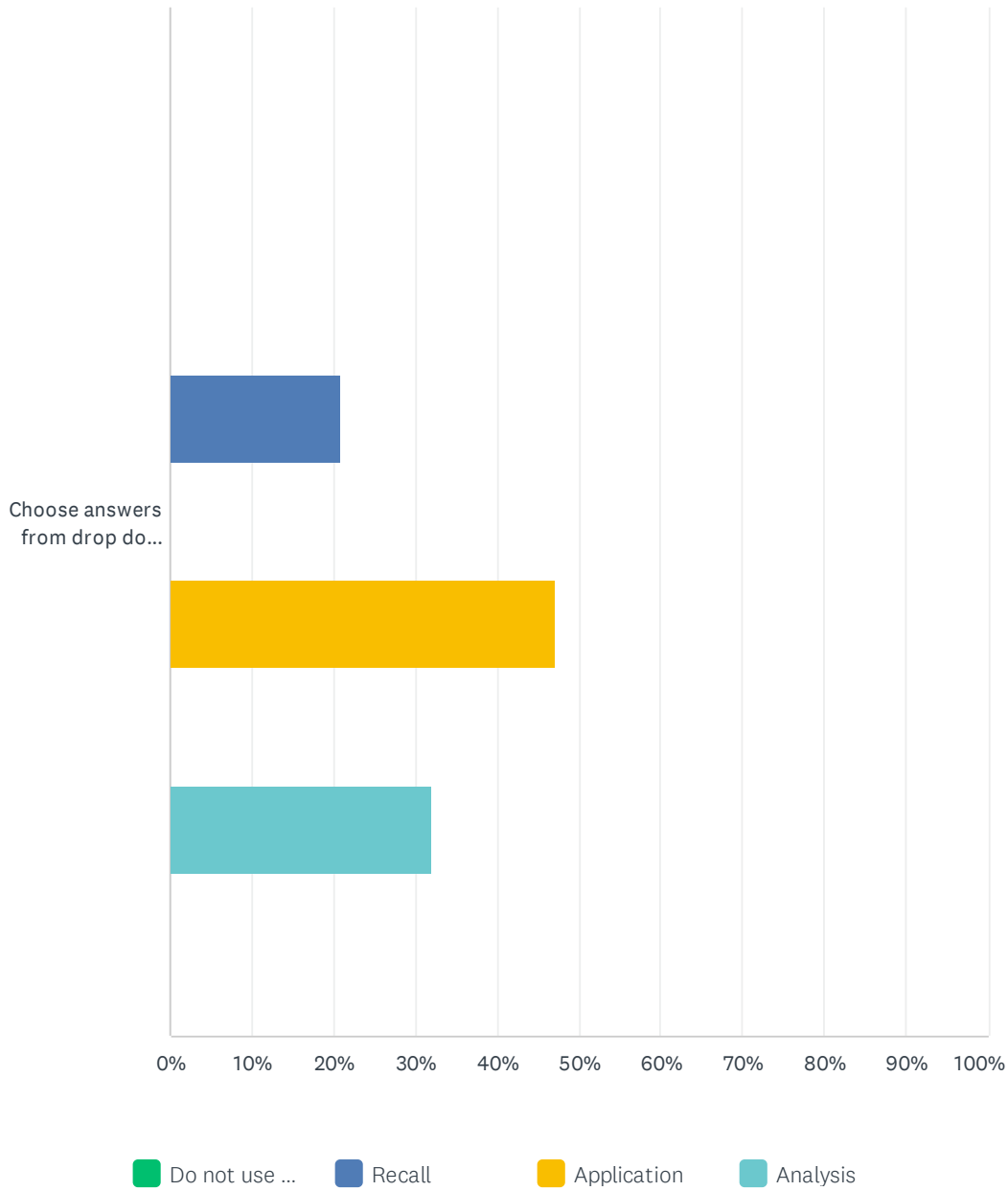
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	3.28% 16	10.04% 49	32.79% 160	53.89% 263	488

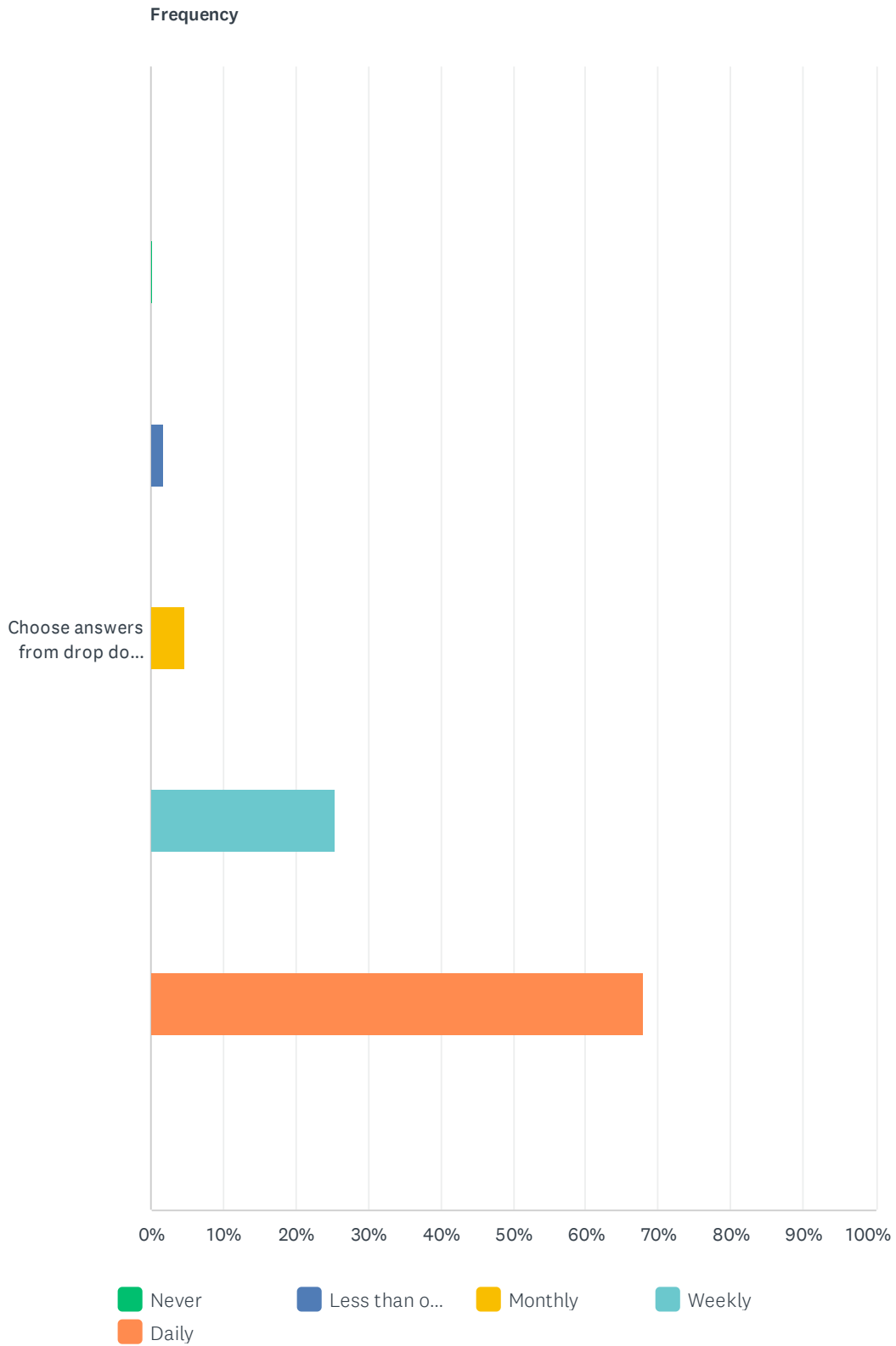
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	4.03% 19	43.52% 205	52.44% 247	471

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	20.80% 94	47.12% 213	32.08% 145	452

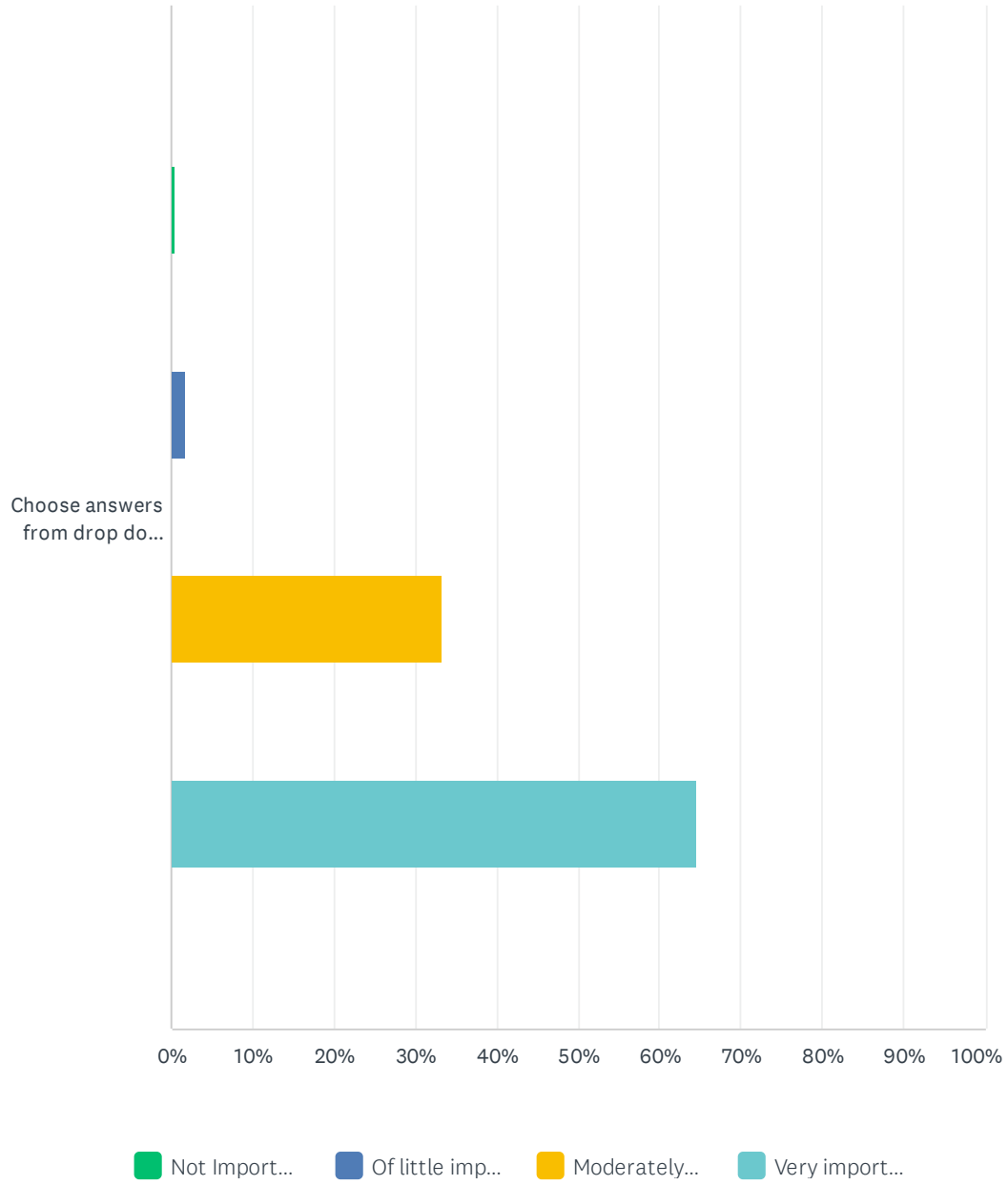
Q27 1.3.2.1 Peripheral nociceptive pain physiology.

Answered: 486 Skipped: 724



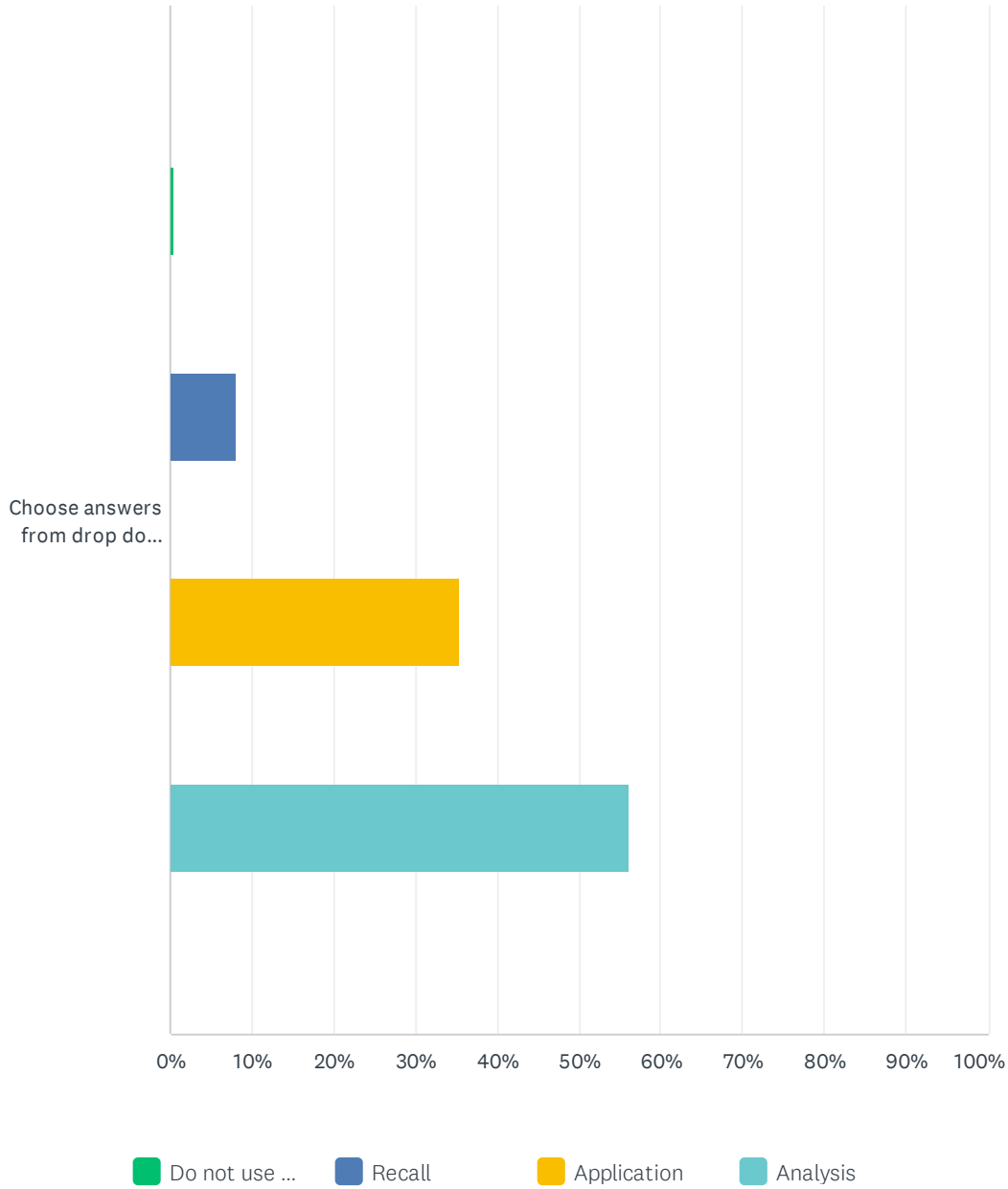
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.21% 1	1.65% 8	4.73% 23	25.31% 123	68.11% 331	486

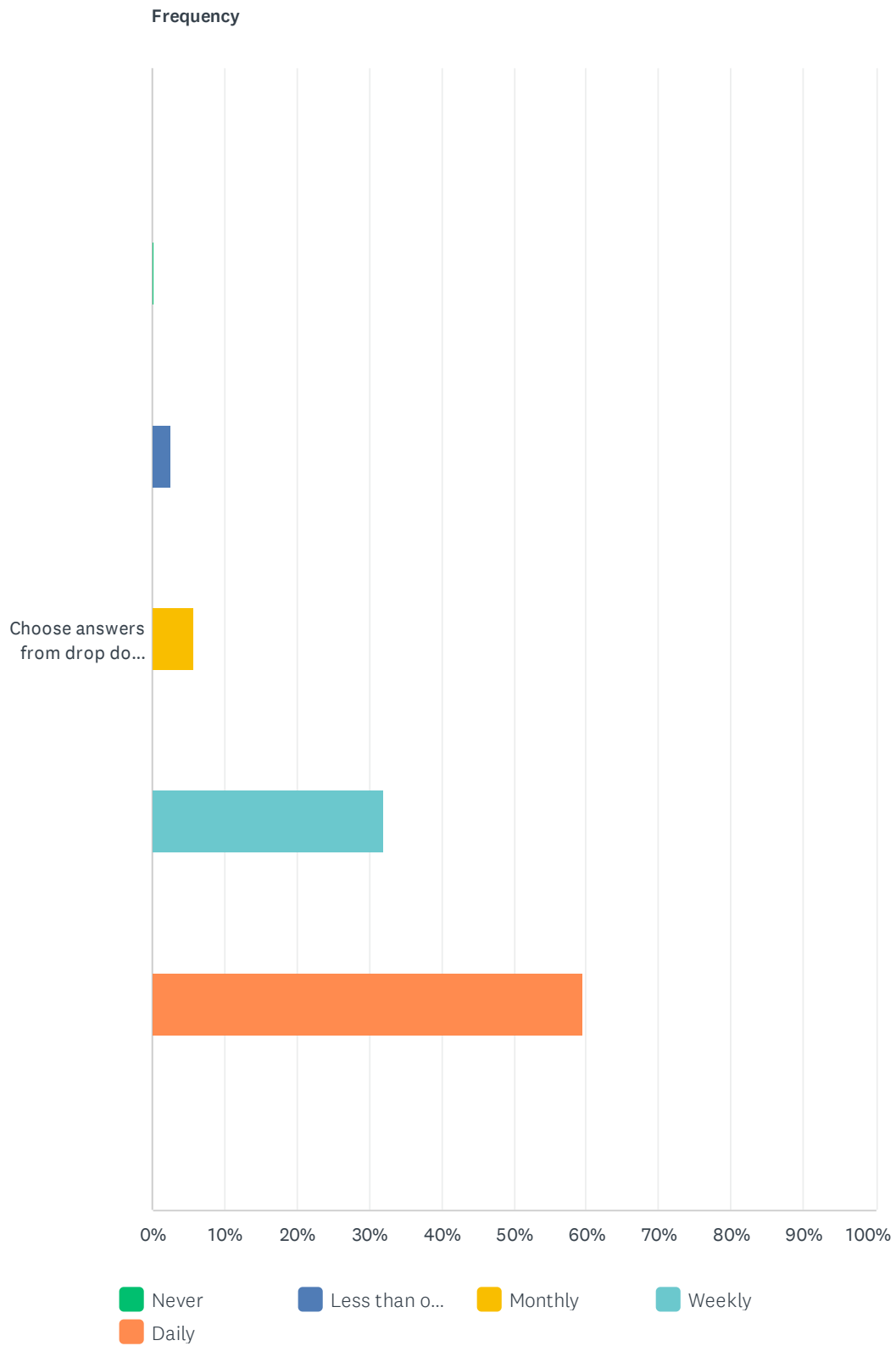
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.43% 2	1.71% 8	33.26% 156	64.61% 303	469

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.44%	8.19%	35.40%	55.97%	
	2	37	160	253	452

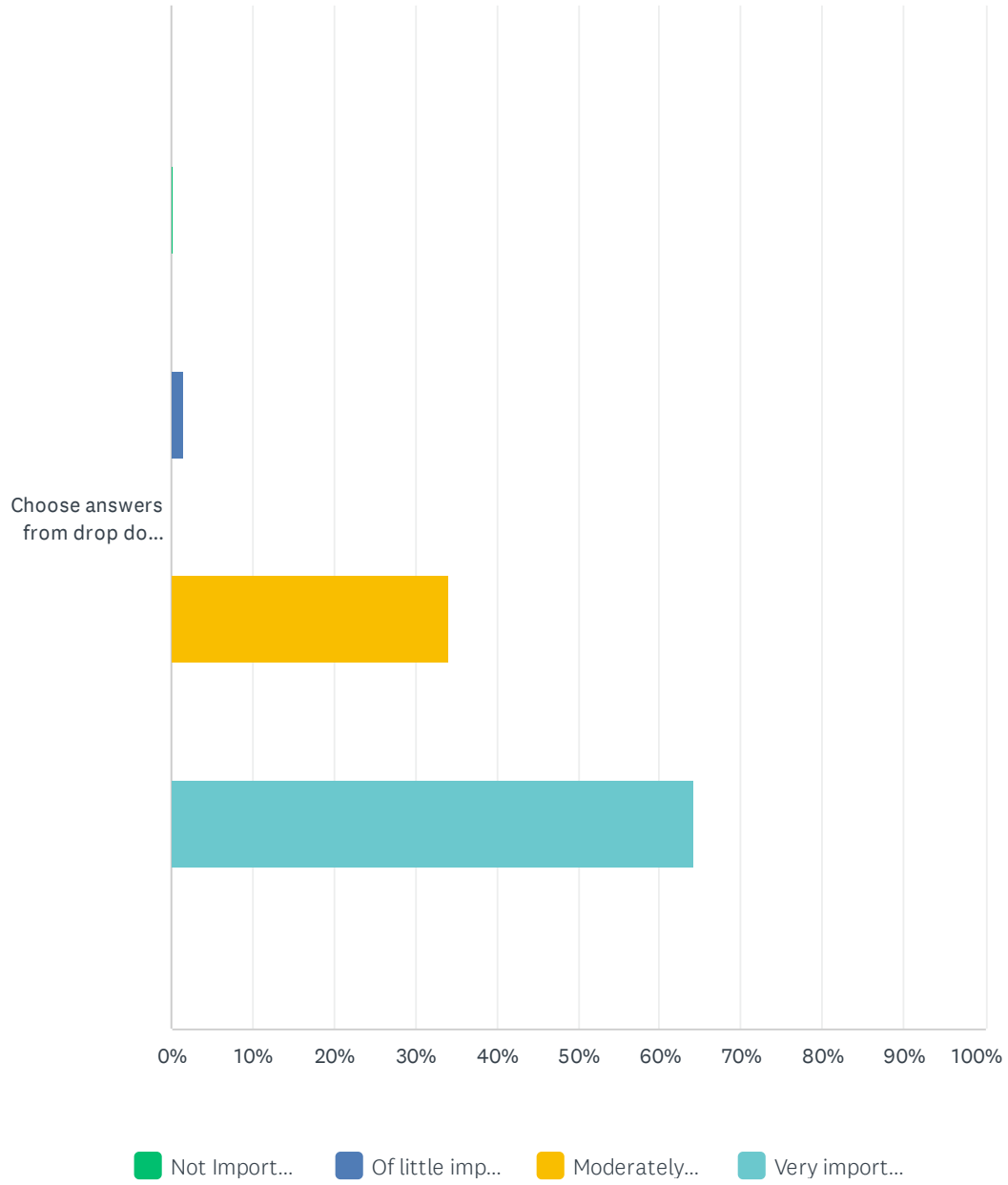
Q28 1.3.2.2 Peripheral neurogenic/neuropathic pain physiology.

Answered: 487 Skipped: 723



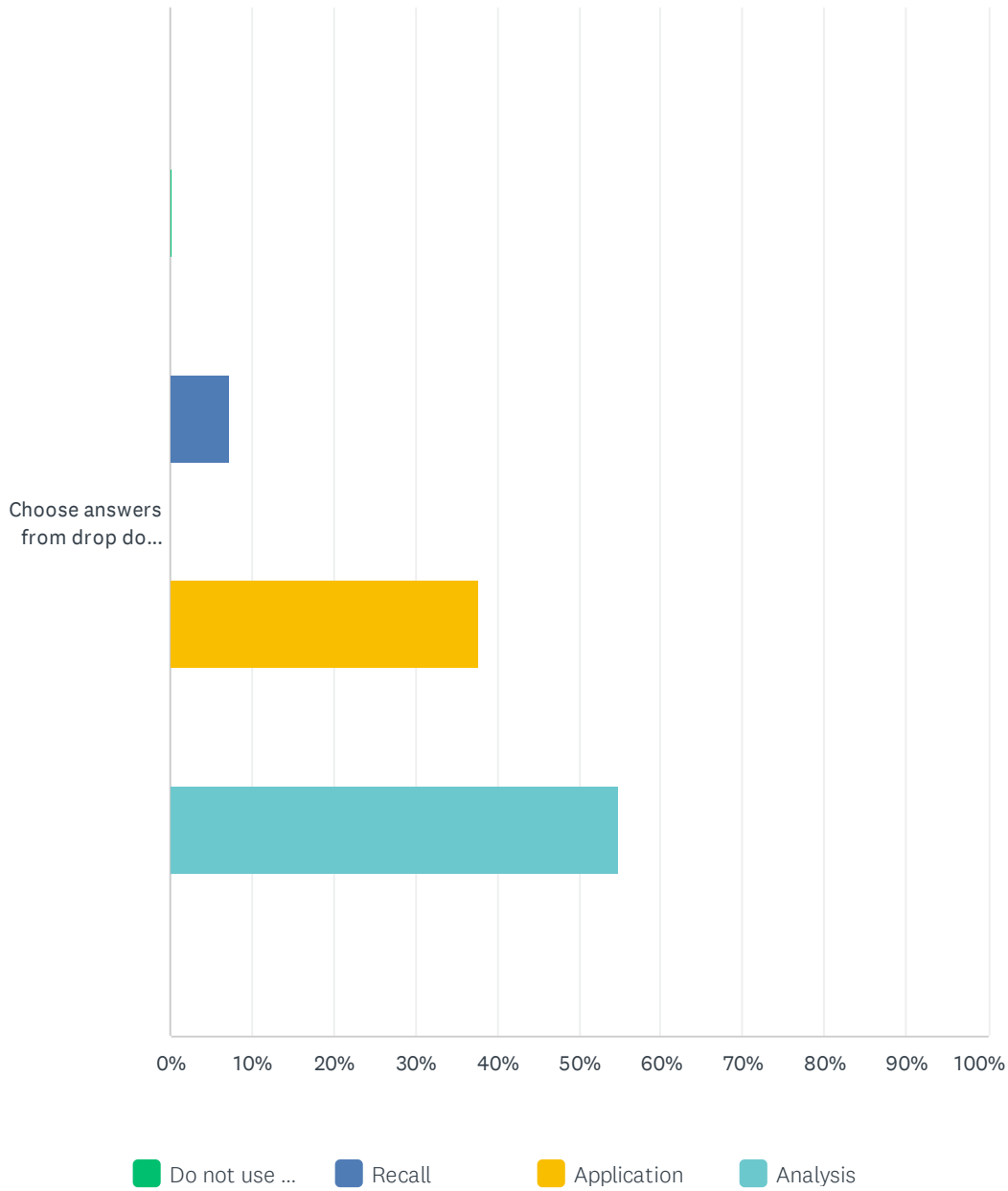
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.21% 1	2.46% 12	5.75% 28	32.03% 156	59.55% 290	487

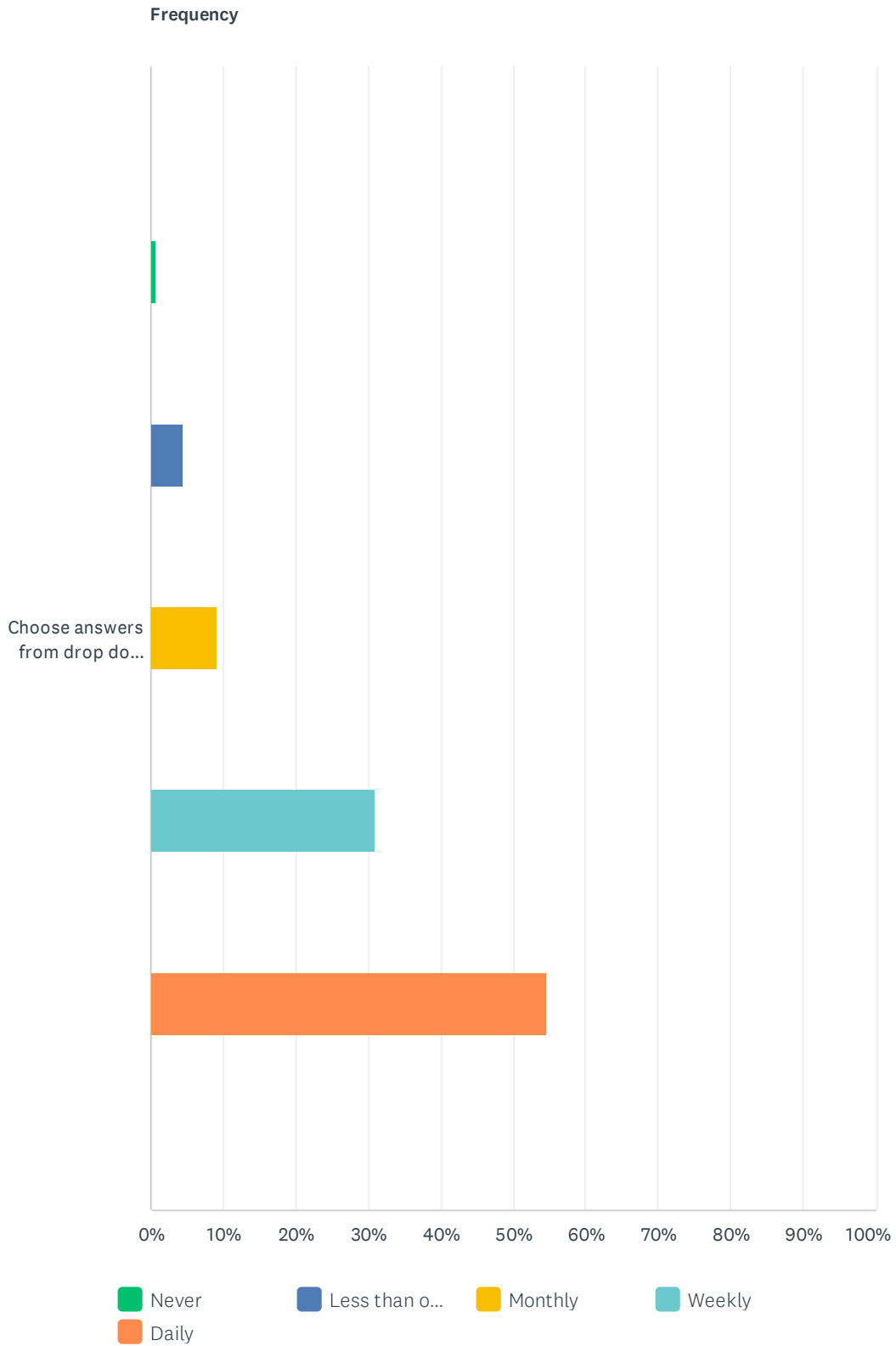
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.21% 1	1.49% 7	34.04% 160	64.26% 302	470

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.22%	7.32%	37.69%	54.77%	
	1	33	170	247	451

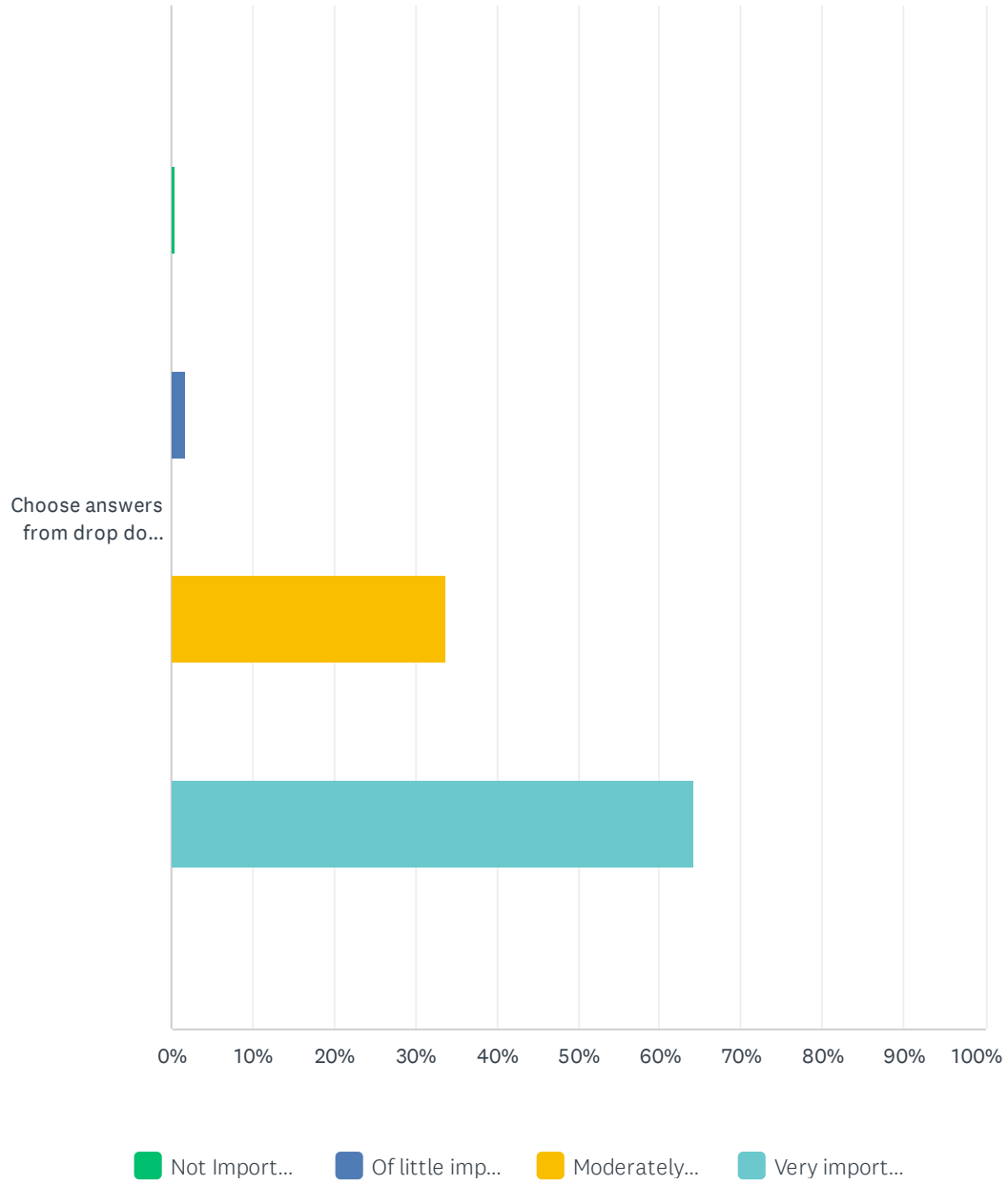
Q29 1.3.2.3 Central nervous system/nociplastic pain physiology.

Answered: 487 Skipped: 723



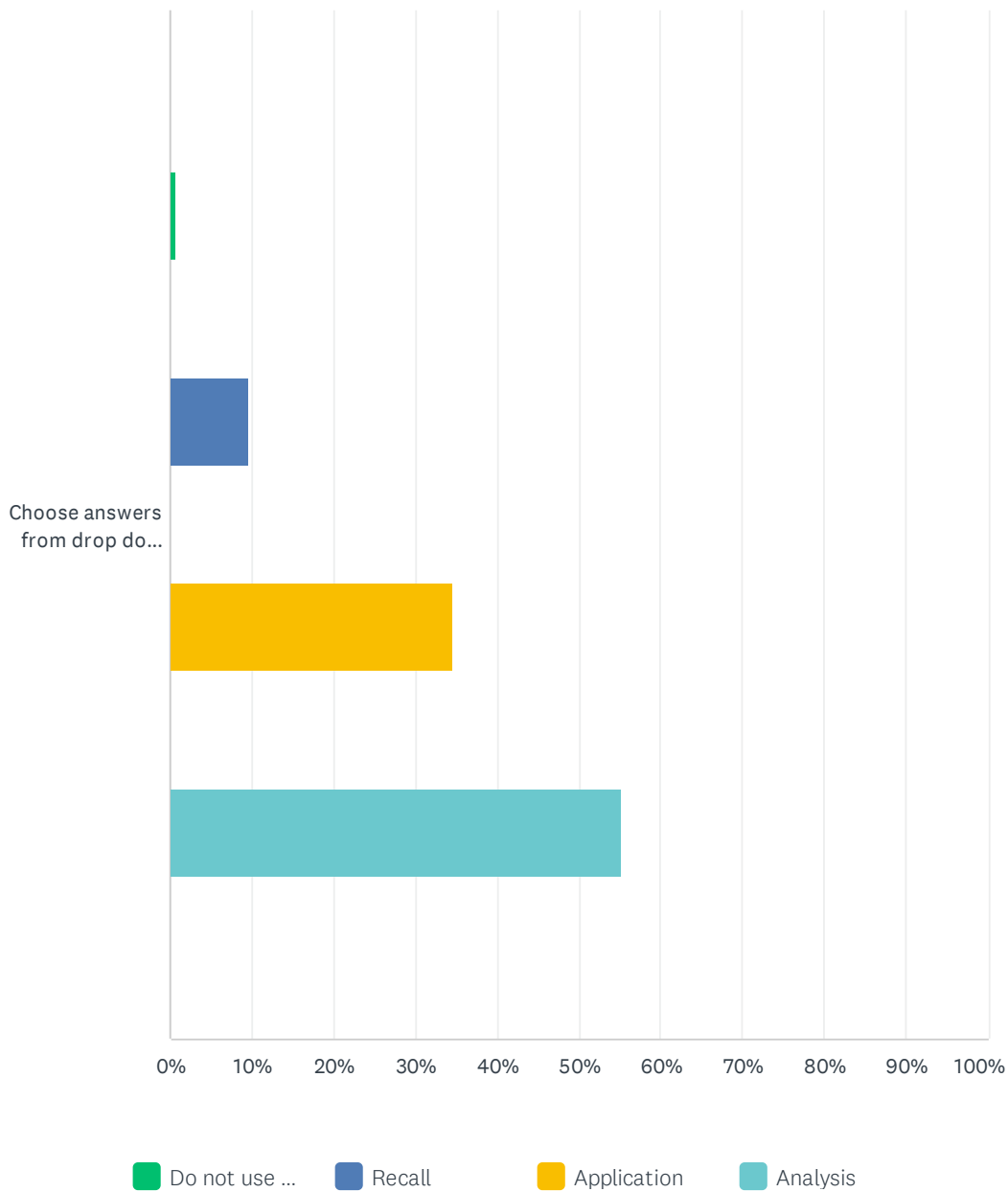
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.62% 3	4.52% 22	9.24% 45	31.01% 151	54.62% 266	487

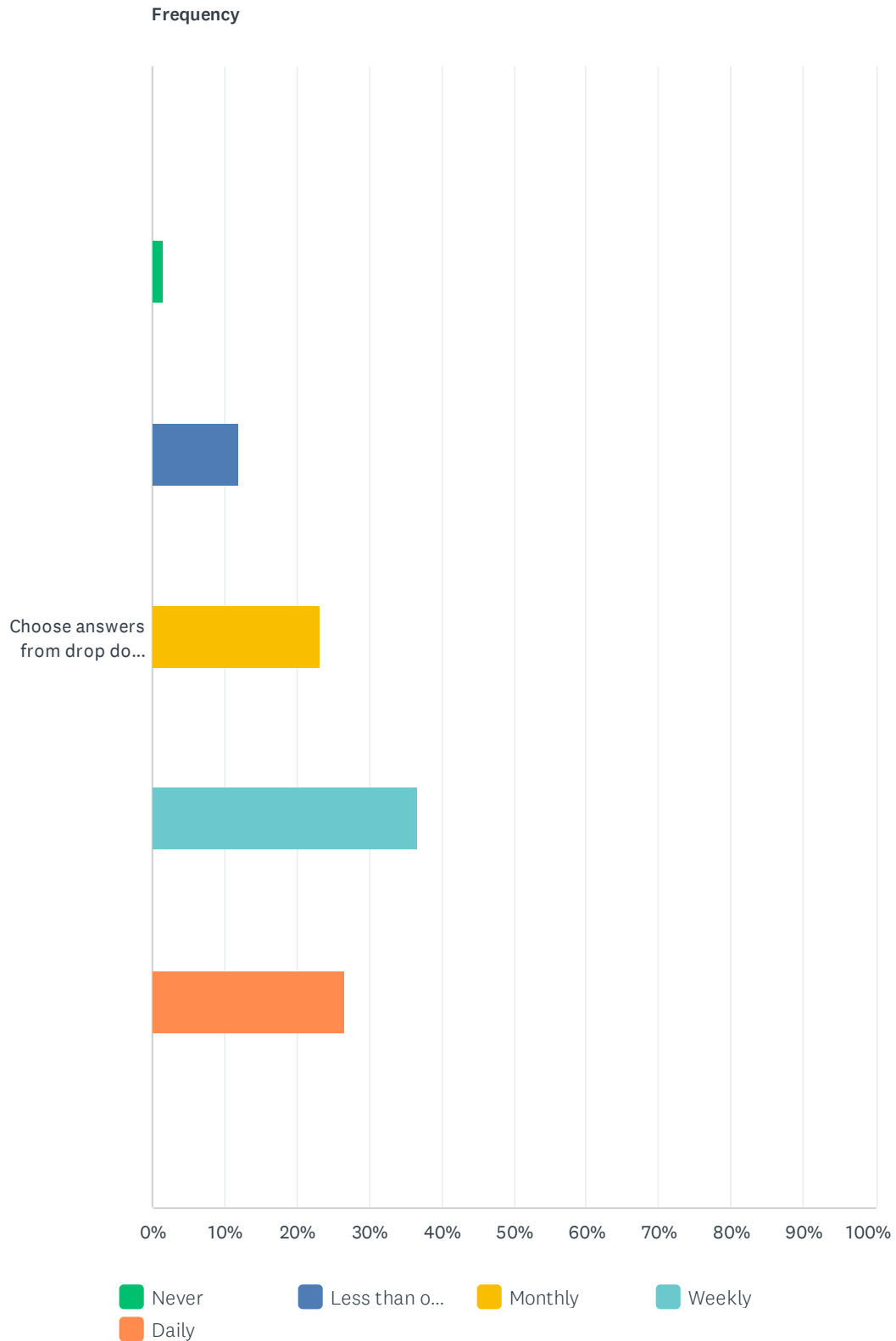
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.43% 2	1.70% 8	33.62% 158	64.26% 302	470

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.66% 3	9.51% 43	34.51% 156	55.31% 250	452

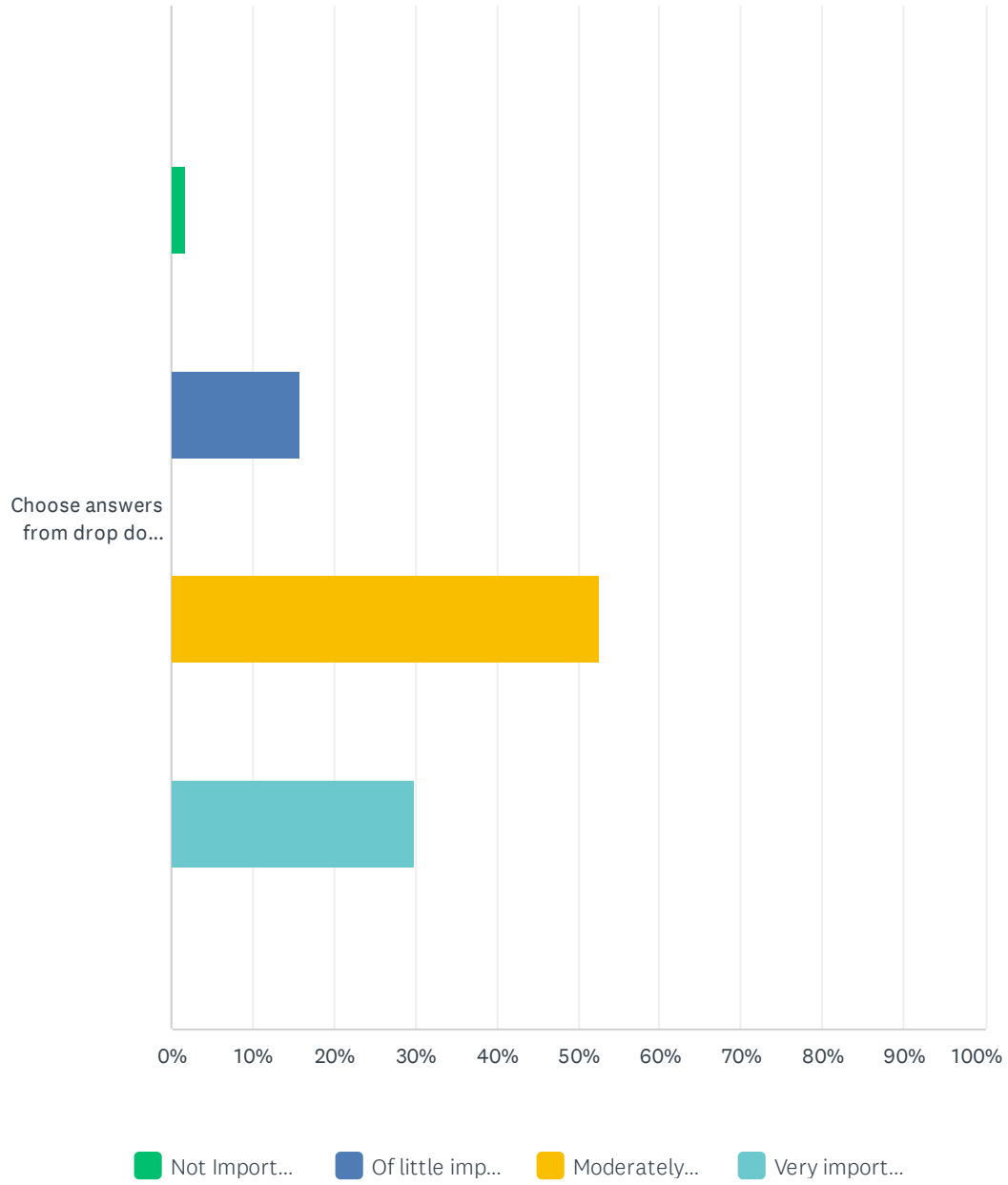
Q30 1.3.2.4 Output mechanisms and expressions (e.g., immune, endocrine, sympathetic, behavioral).

Answered: 487 Skipped: 723



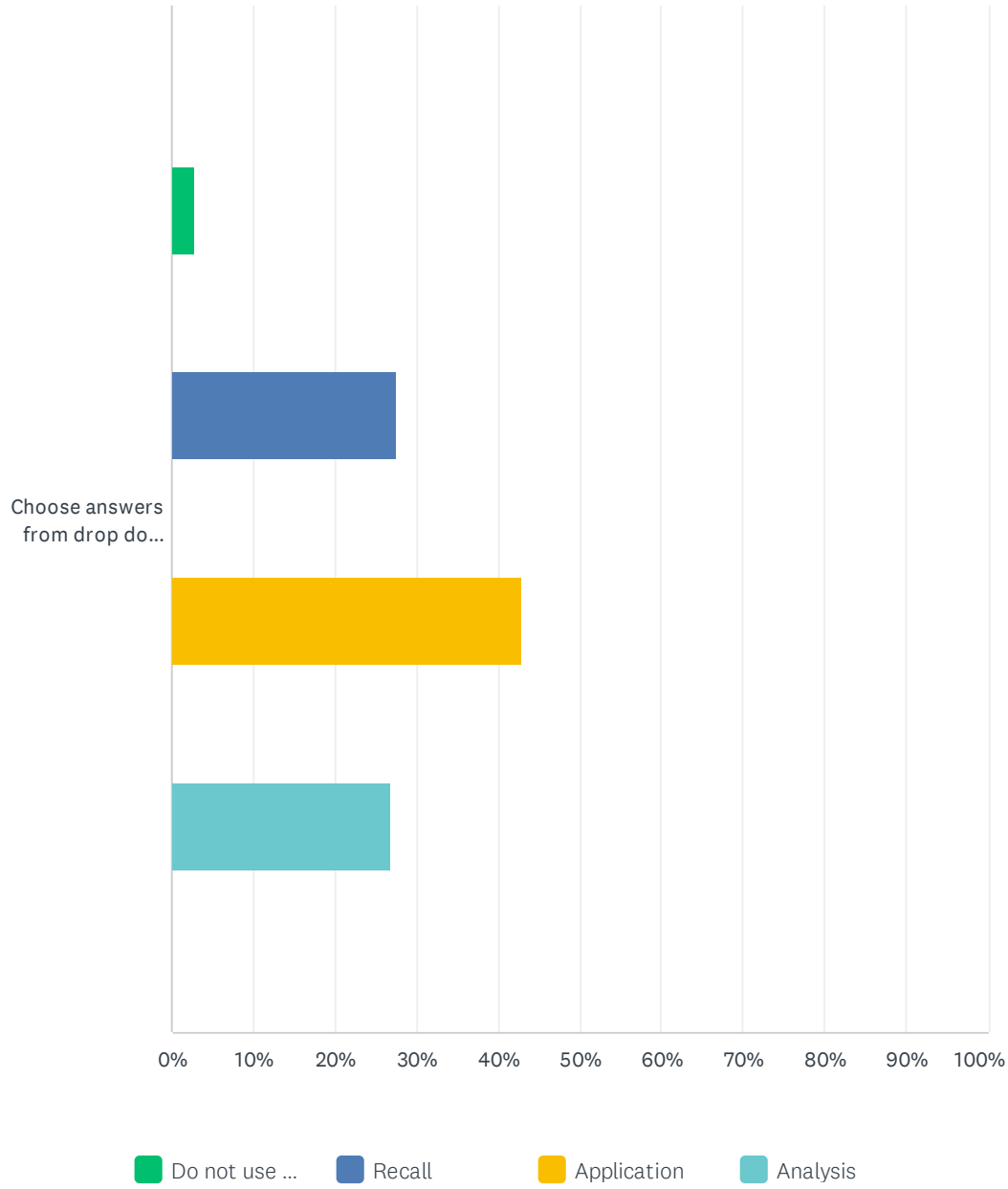
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.44% 7	11.91% 58	23.20% 113	36.76% 179	26.69% 130	487

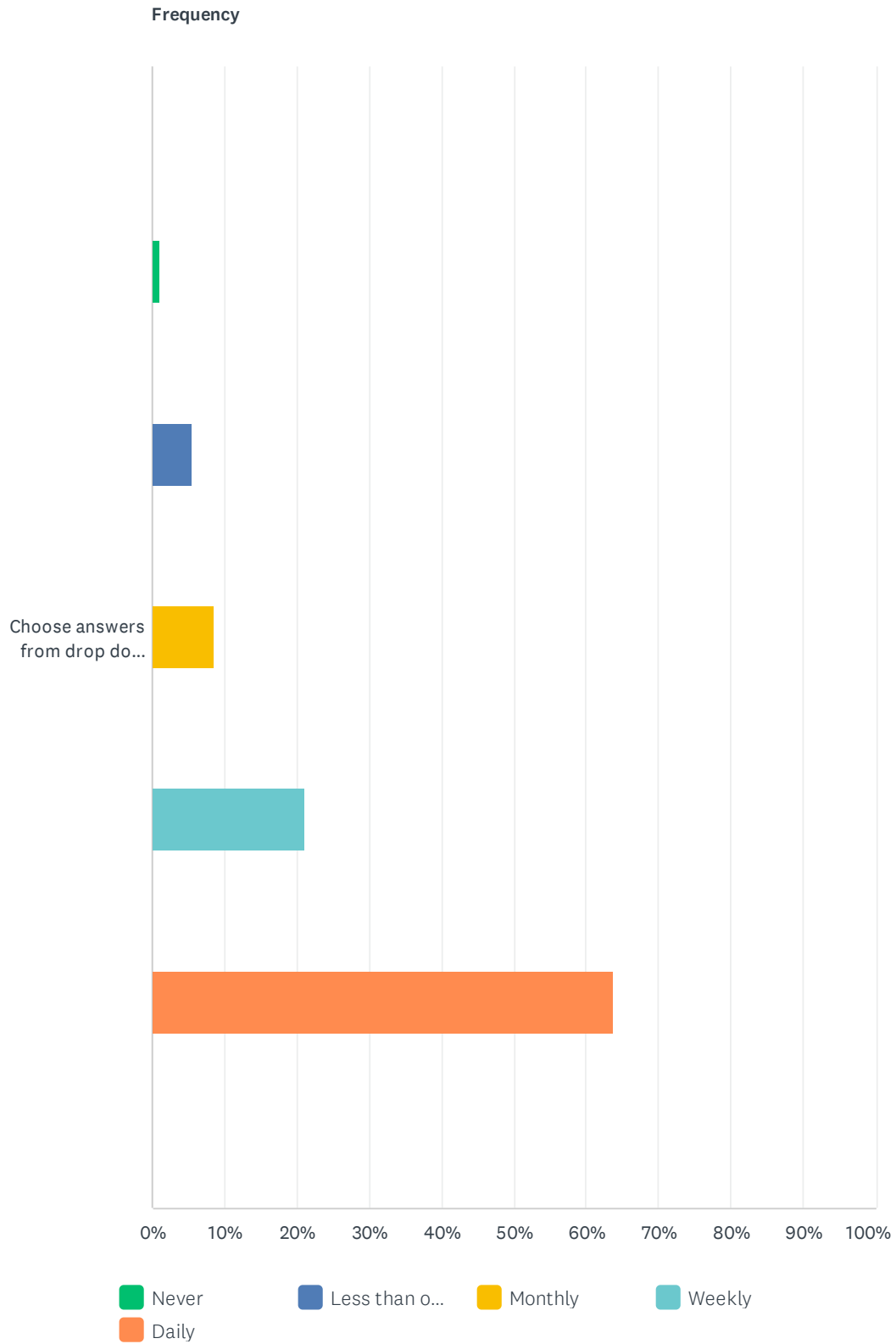
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.70% 8	15.74% 74	52.77% 248	29.79% 140	470

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	2.67% 12	27.56% 124	42.89% 193	26.89% 121	450

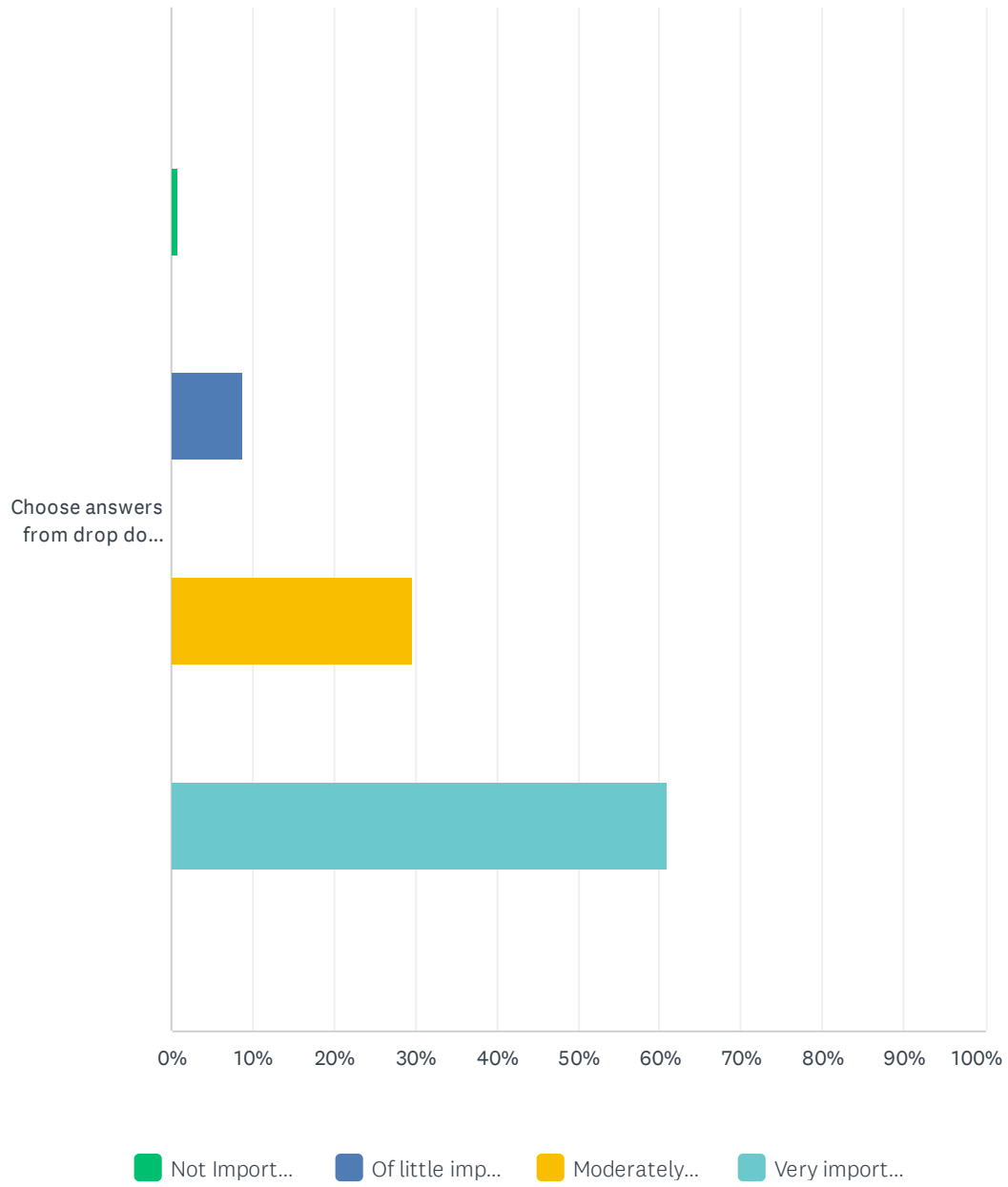
Q31 1.3.3.1 Biopsychosocial model.

Answered: 452 Skipped: 758



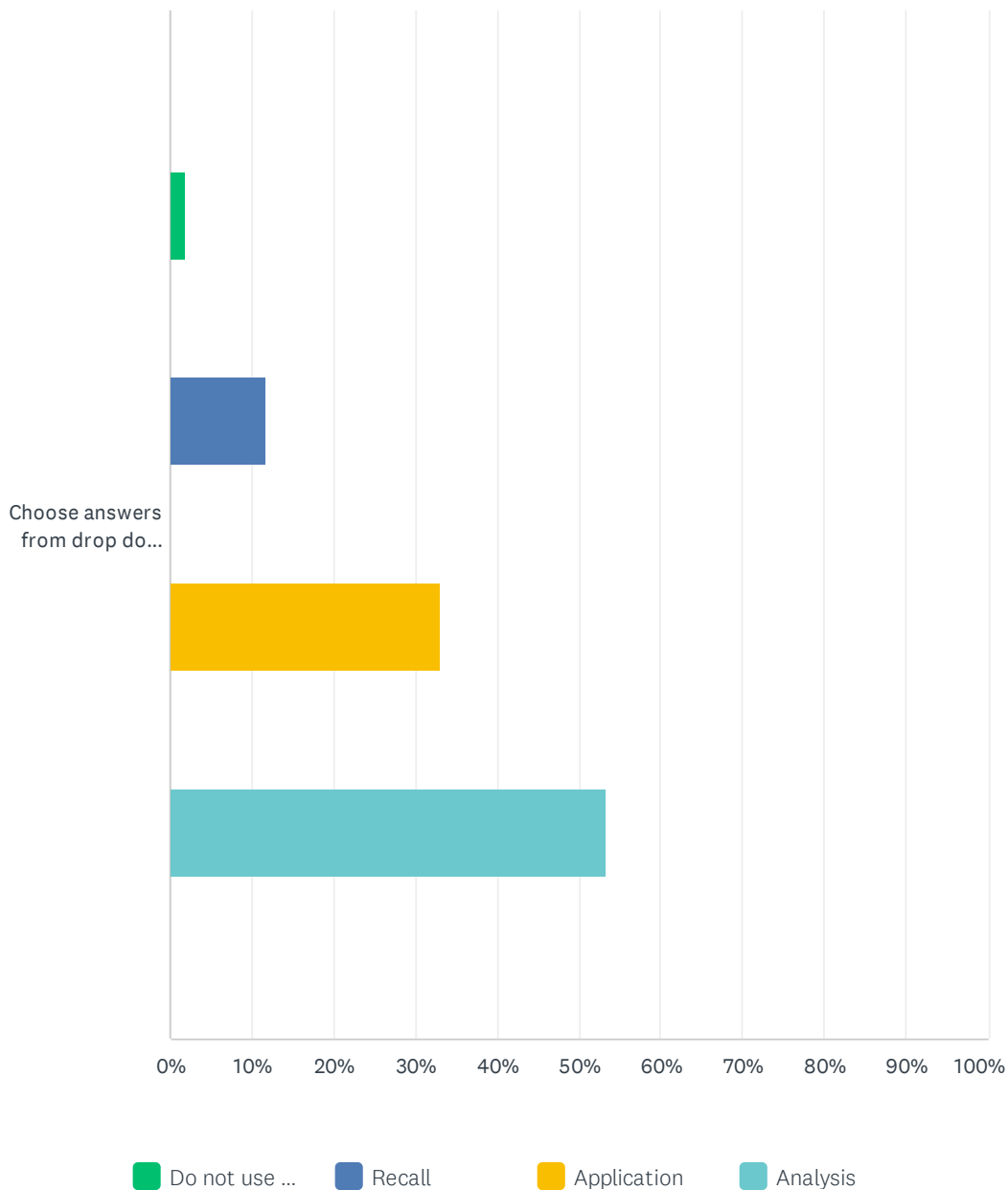
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.11% 5	5.54% 25	8.43% 38	21.06% 95	63.86% 288	451

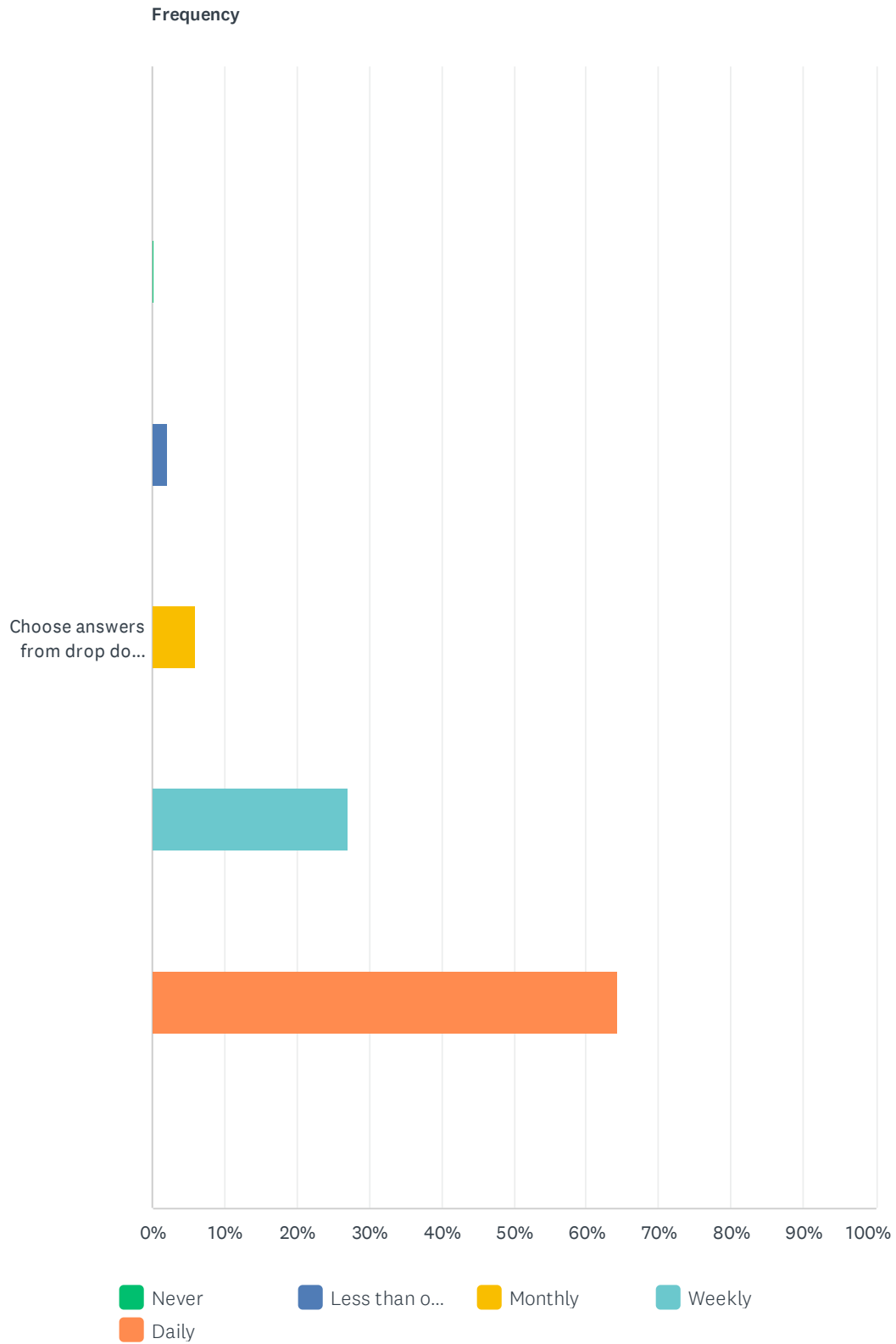
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.91% 4	8.64% 38	29.55% 130	60.91% 268	440

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	1.89% 8	11.79% 50	33.02% 140	53.30% 226	424

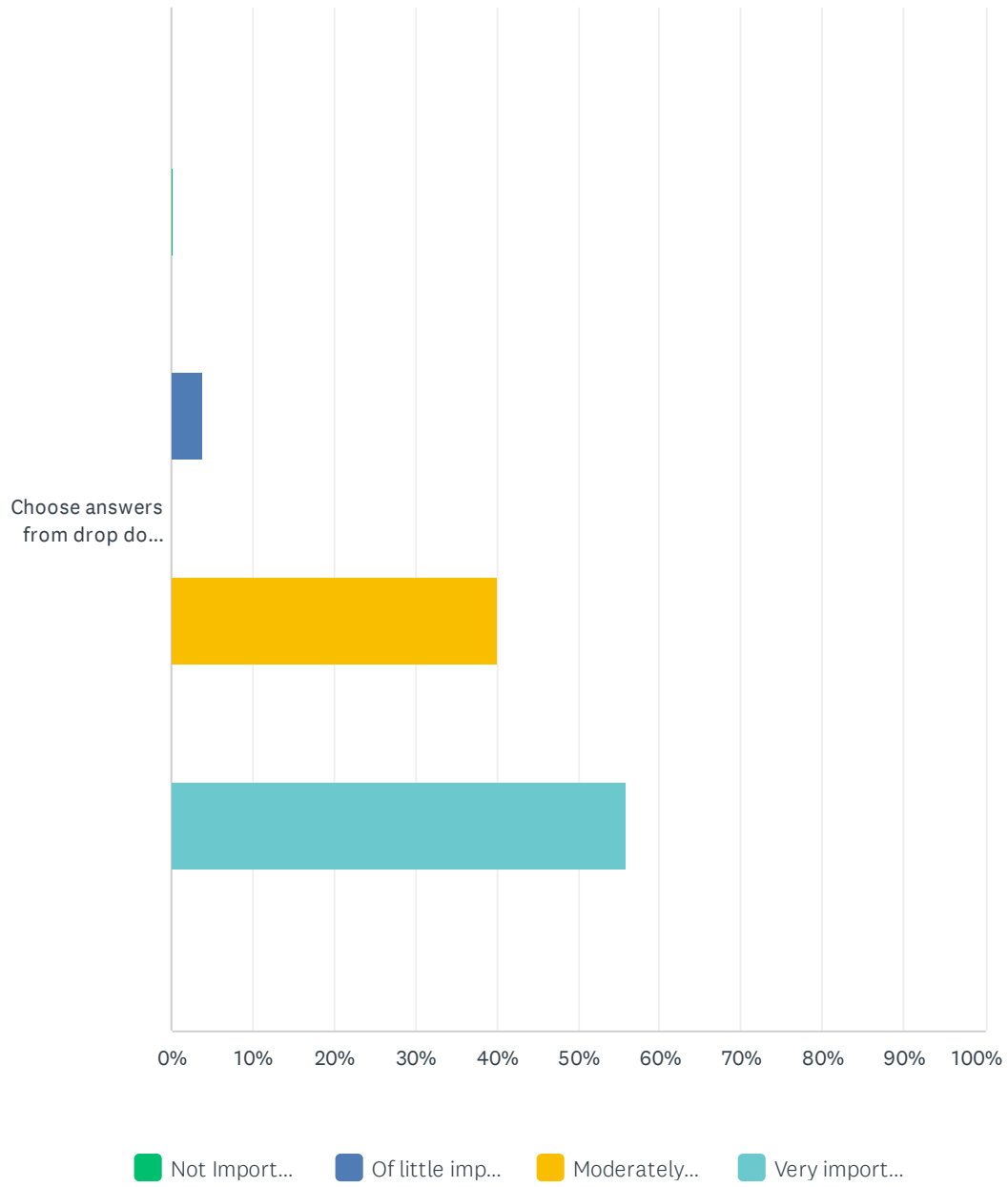
Q32 1.3.3.2 Exercise physiology across the lifespan.

Answered: 453 Skipped: 757



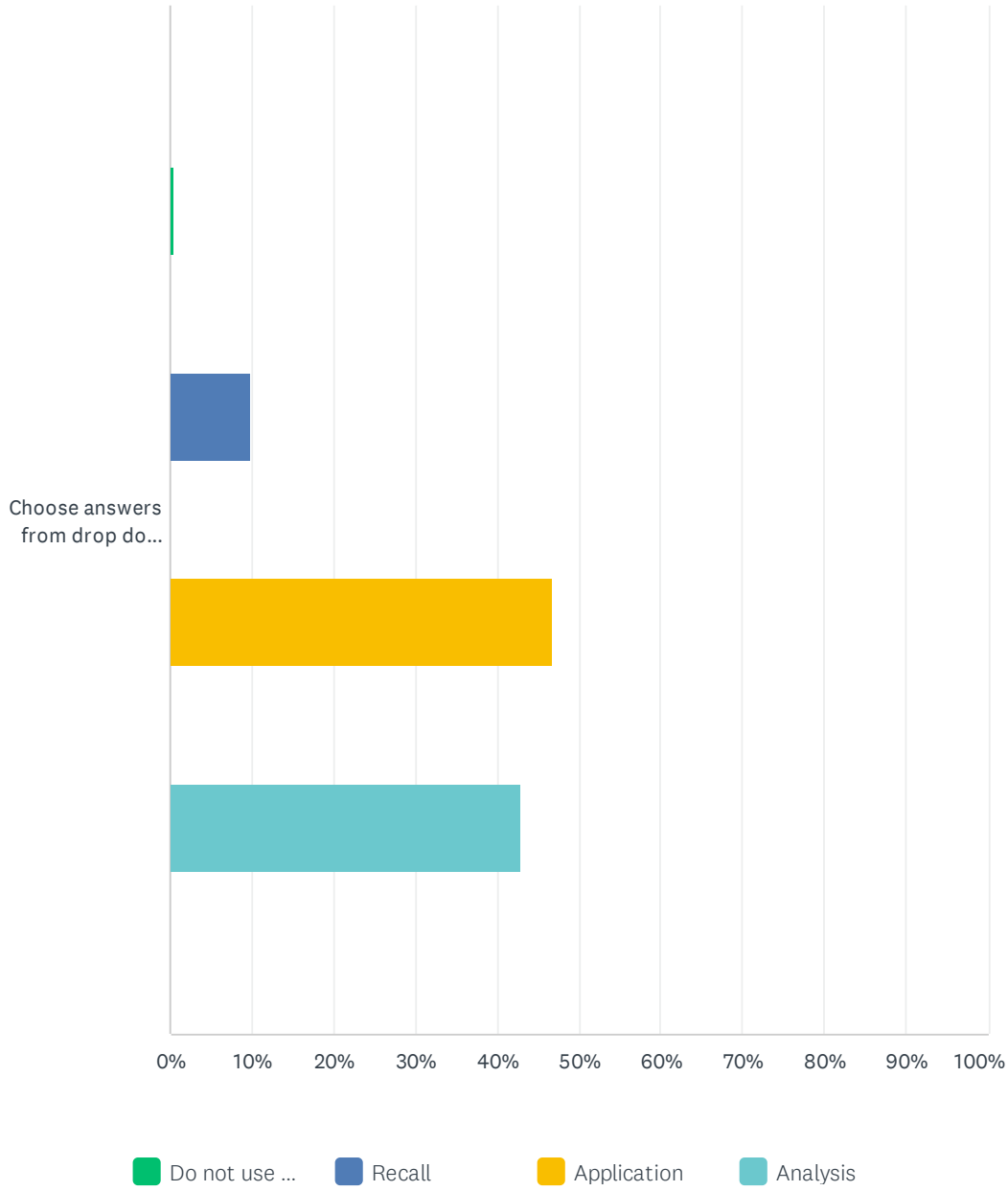
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.22% 1	2.21% 10	5.96% 27	27.15% 123	64.46% 292	453

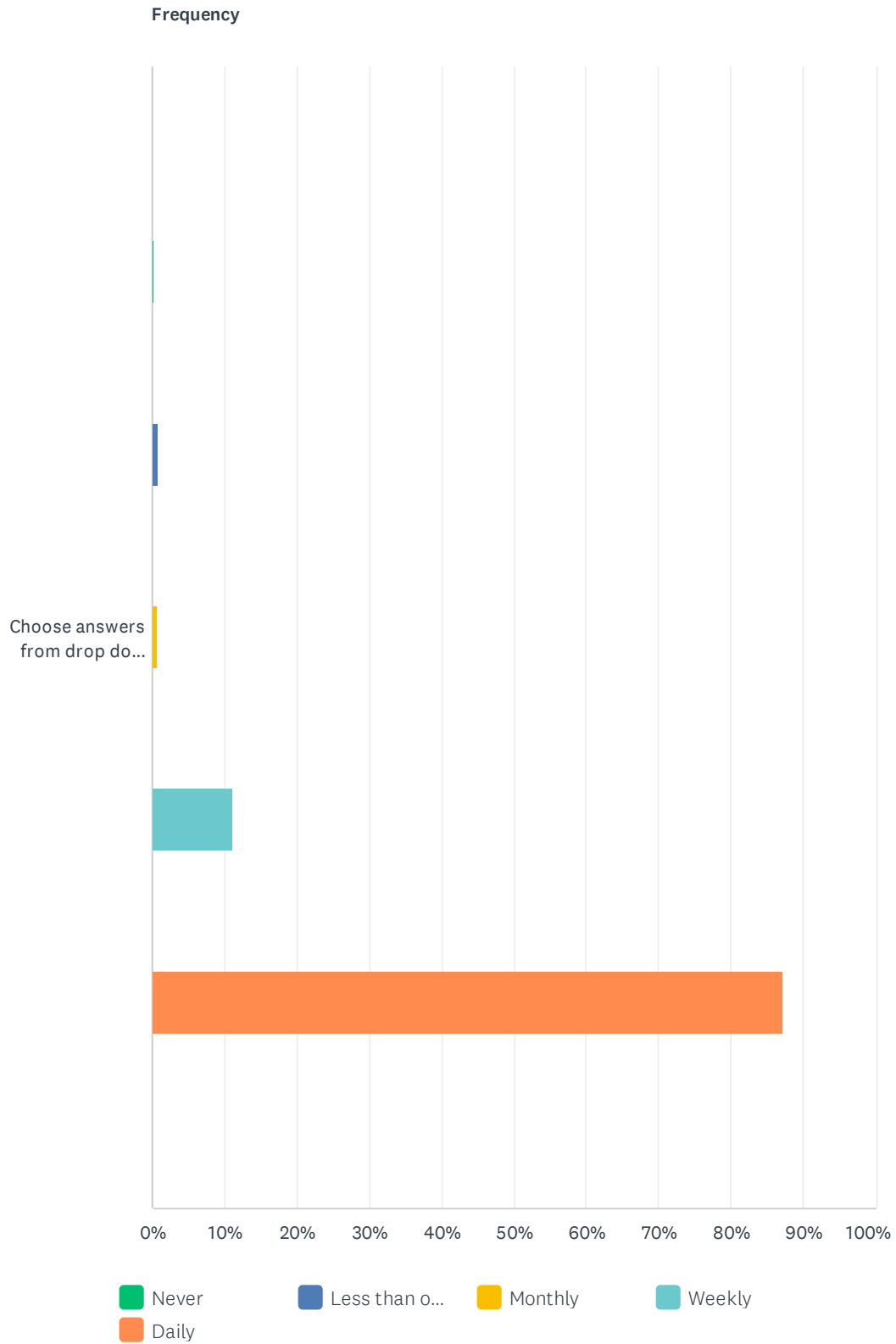
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.23% 1	3.87% 17	40.09% 176	55.81% 245	439

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.47%	9.91%	46.70%	42.92%	
	2	42	198	182	424

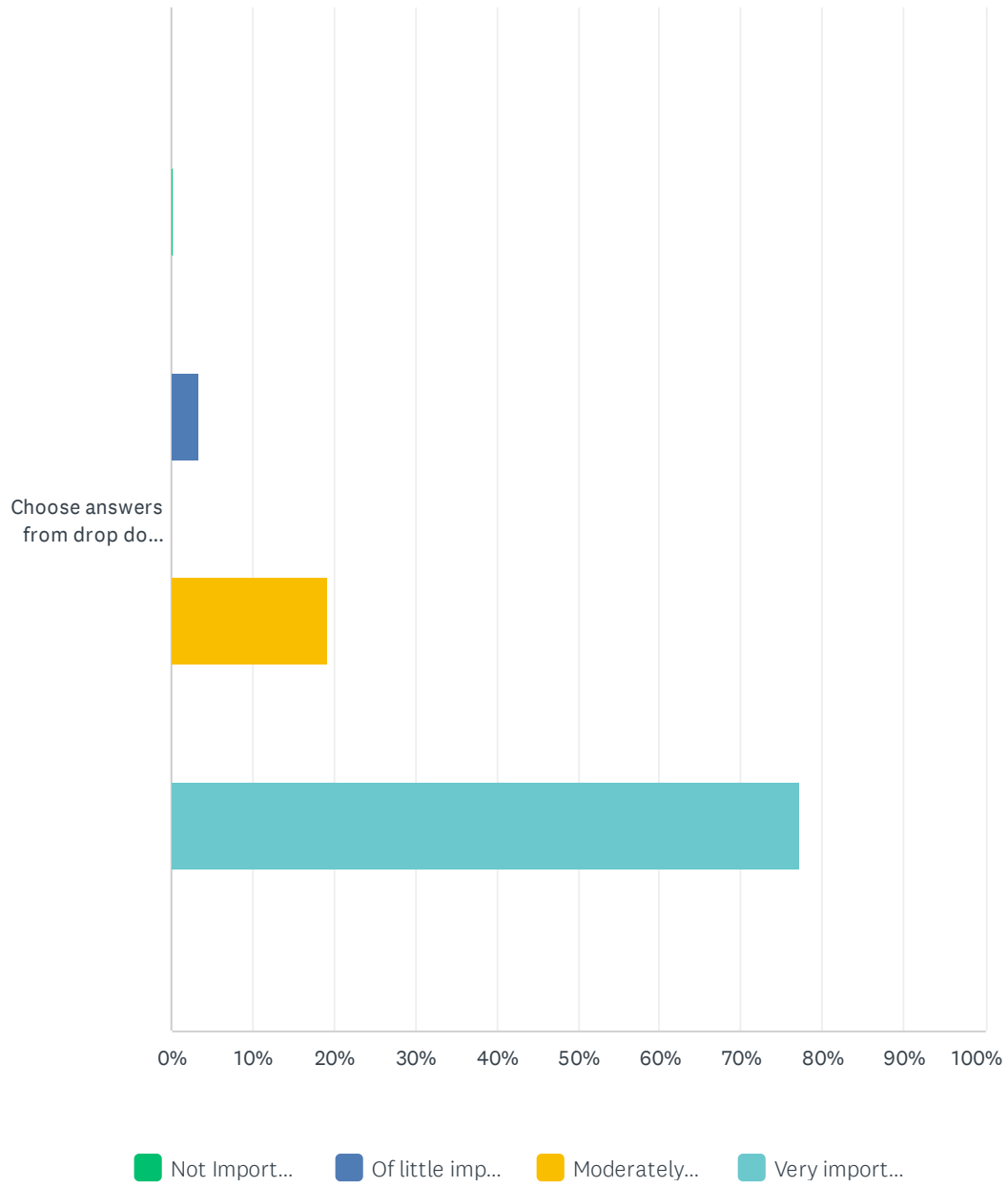
Q33 1.3.3.3 Manual therapy techniques.

Answered: 453 Skipped: 757



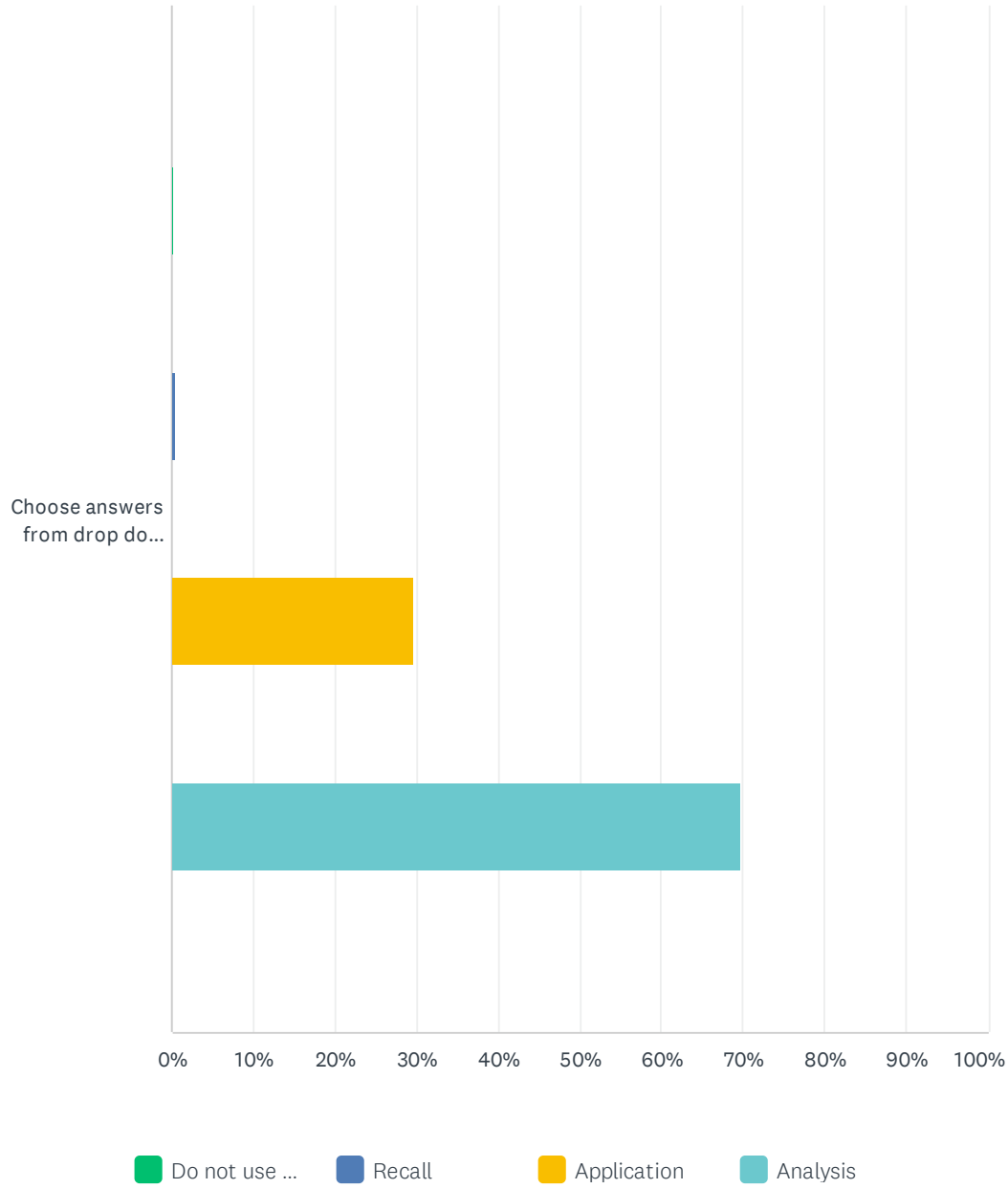
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.22% 1	0.88% 4	0.66% 3	11.06% 50	87.17% 394	452

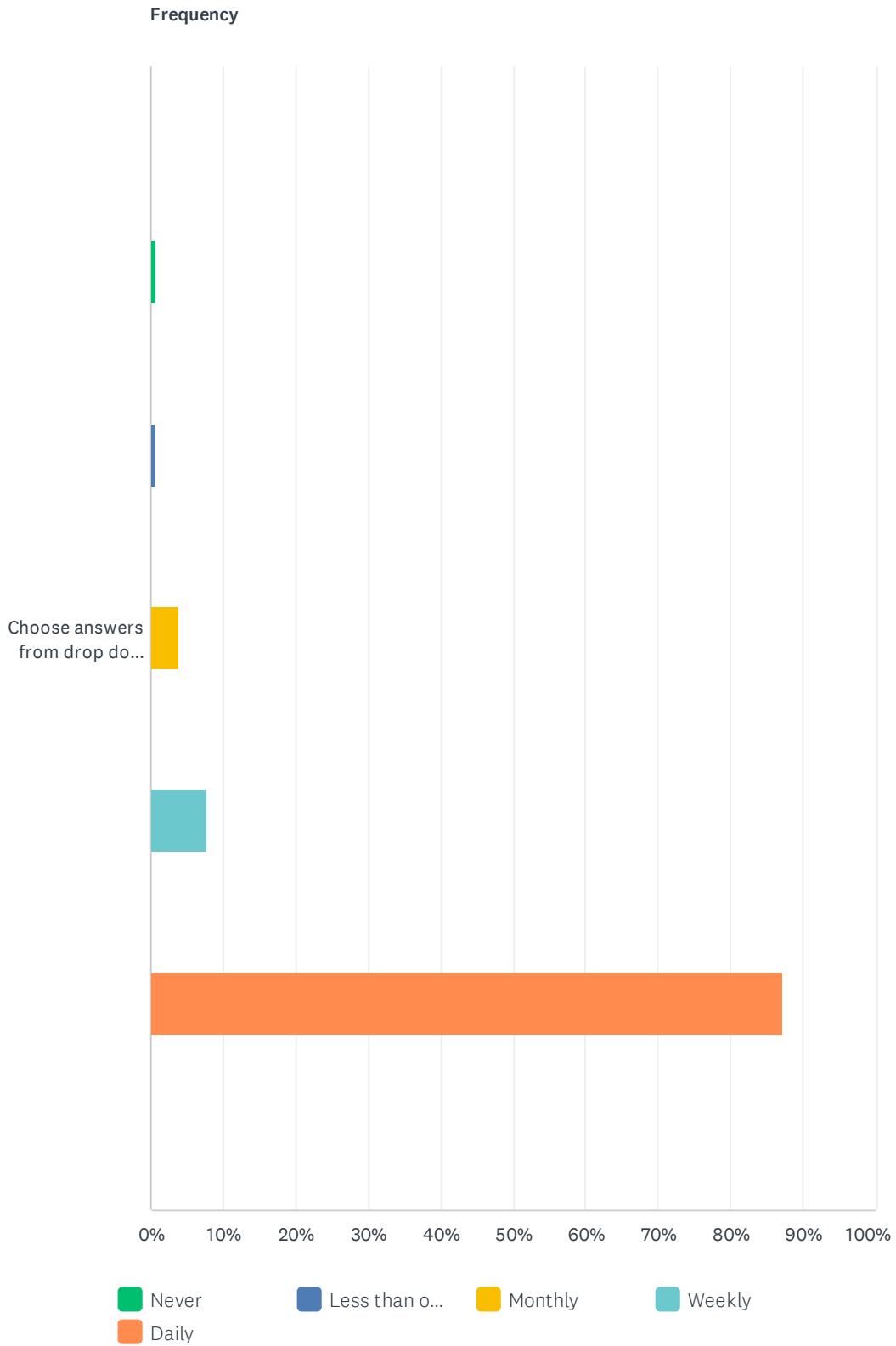
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.23% 1	3.39% 15	19.23% 85	77.15% 341	442

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.23%	0.47%	29.58%	69.72%	
	1	2	126	297	426

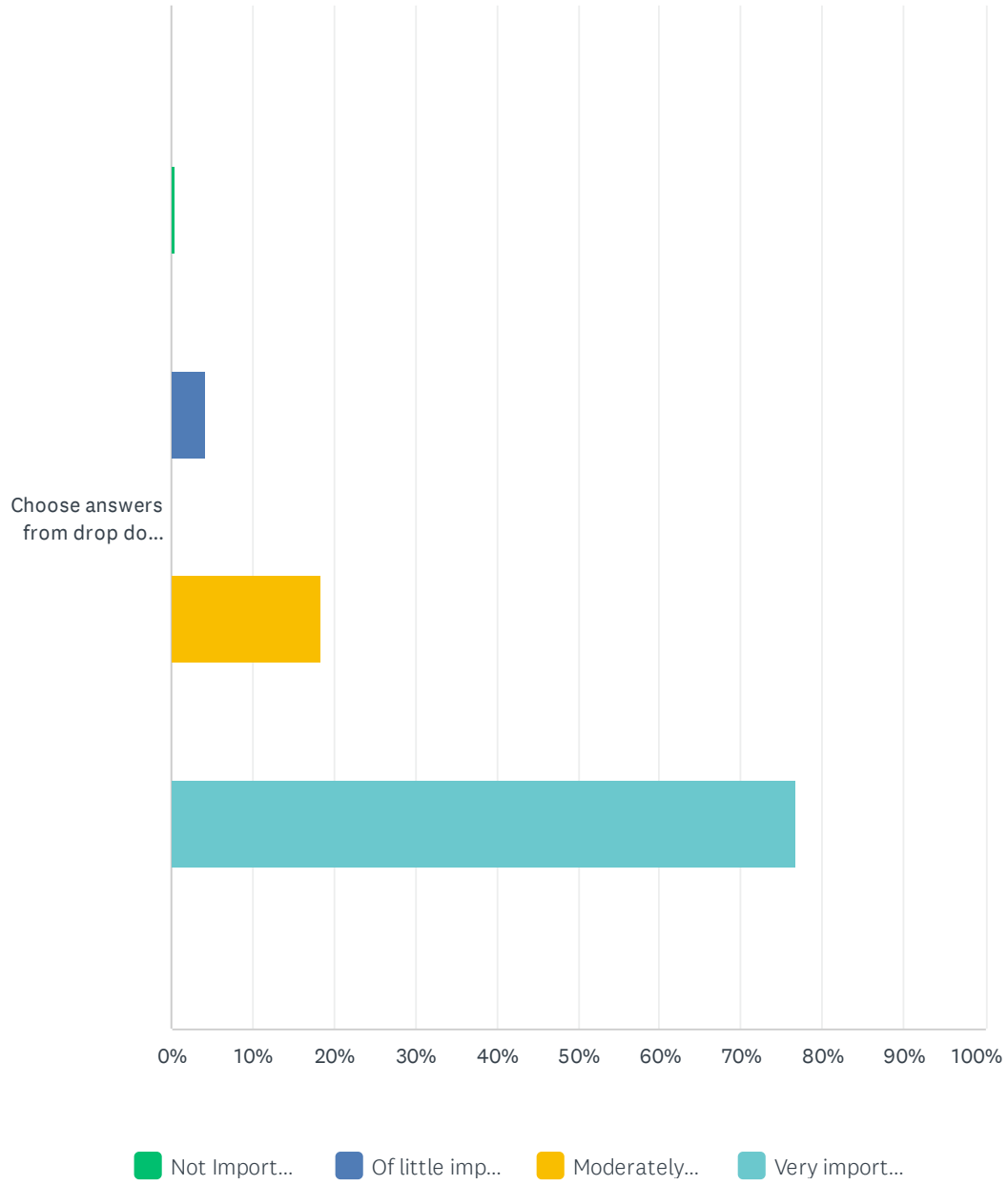
Q34 1.3.3.4 Movement systems impairments.

Answered: 452 Skipped: 758



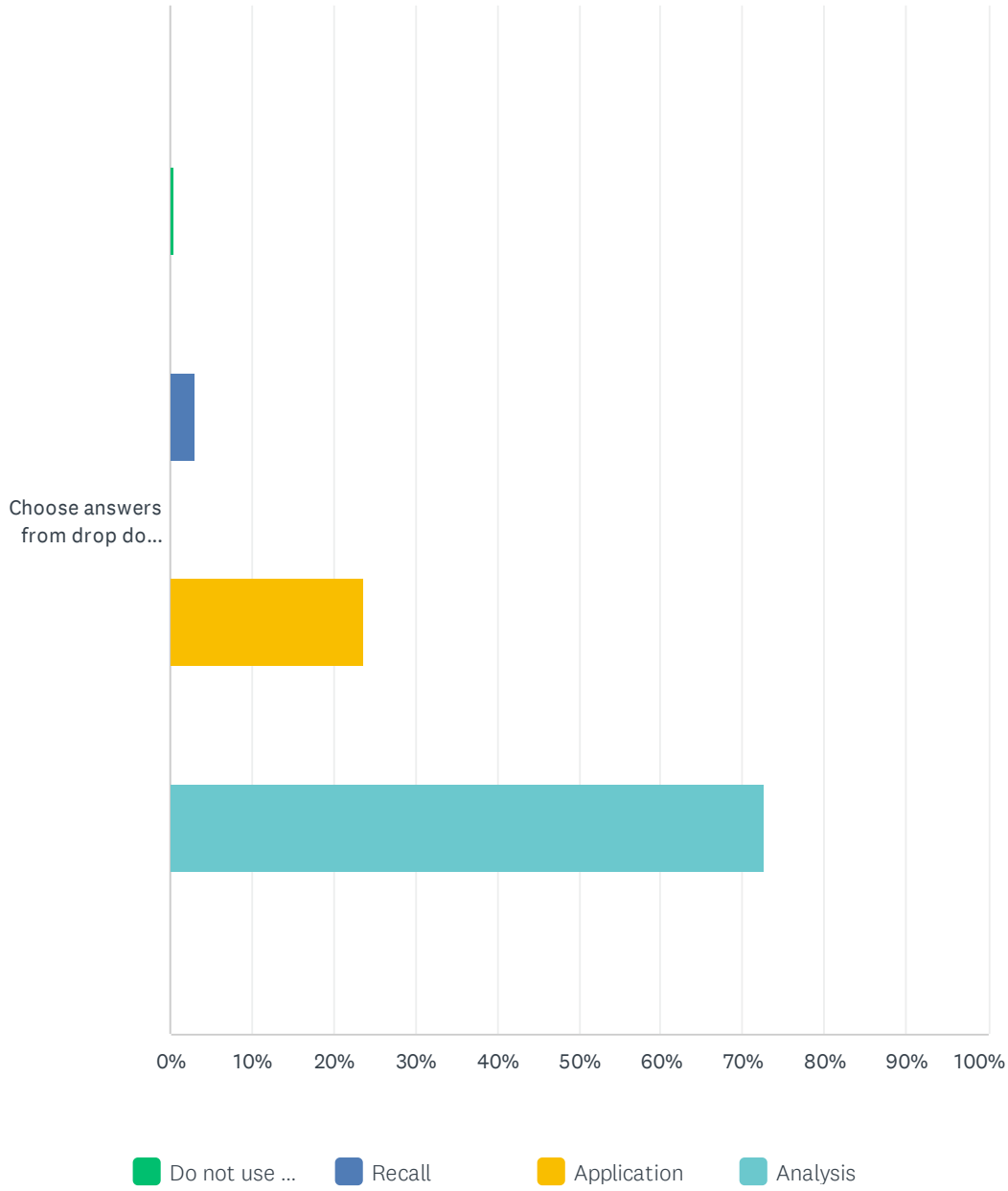
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.66% 3	0.66% 3	3.76% 17	7.74% 35	87.17% 394	452

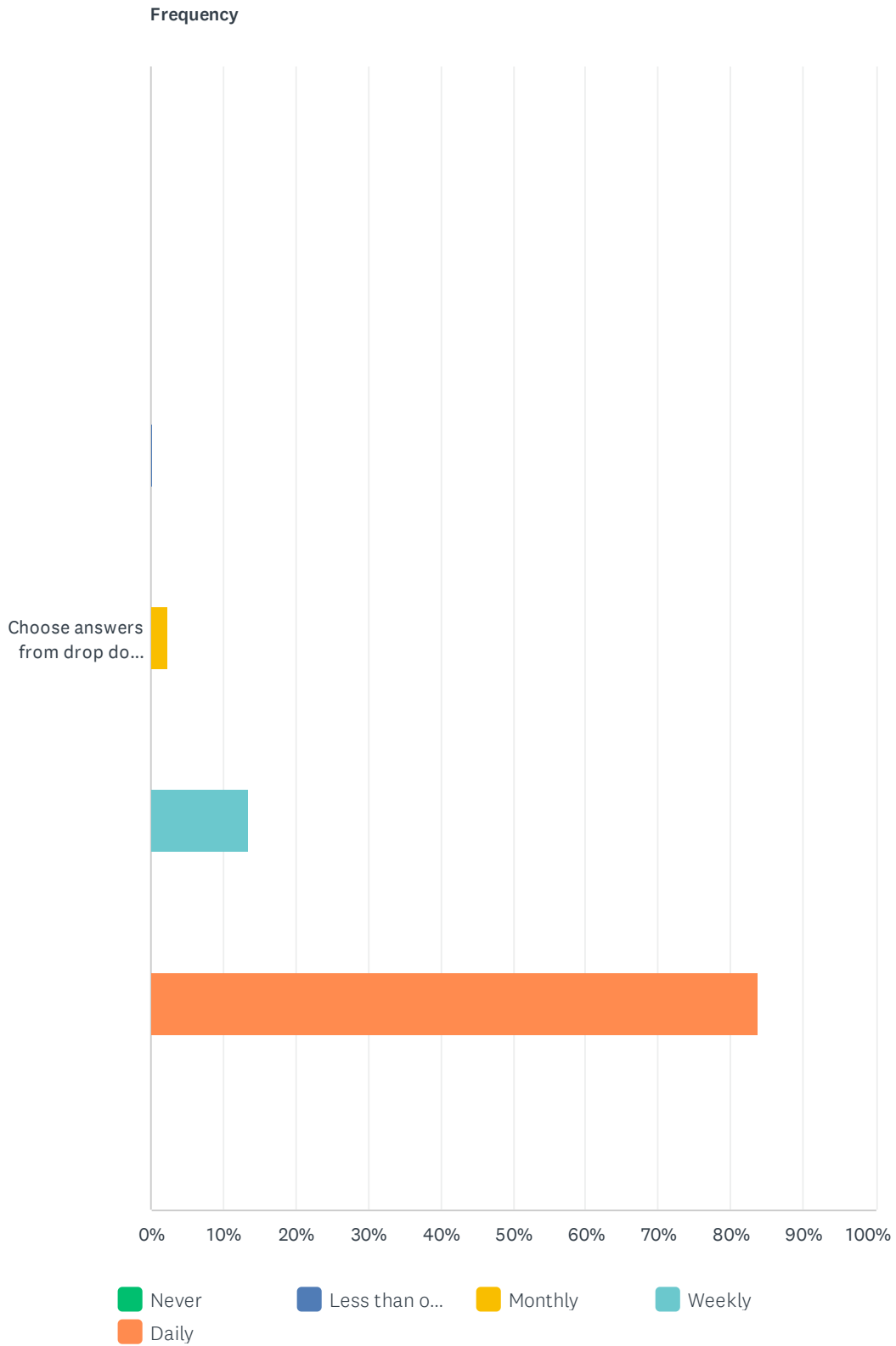
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.45% 2	4.32% 19	18.41% 81	76.82% 338	440

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.47%	3.06%	23.76%	72.71%	
	2	13	101	309	425

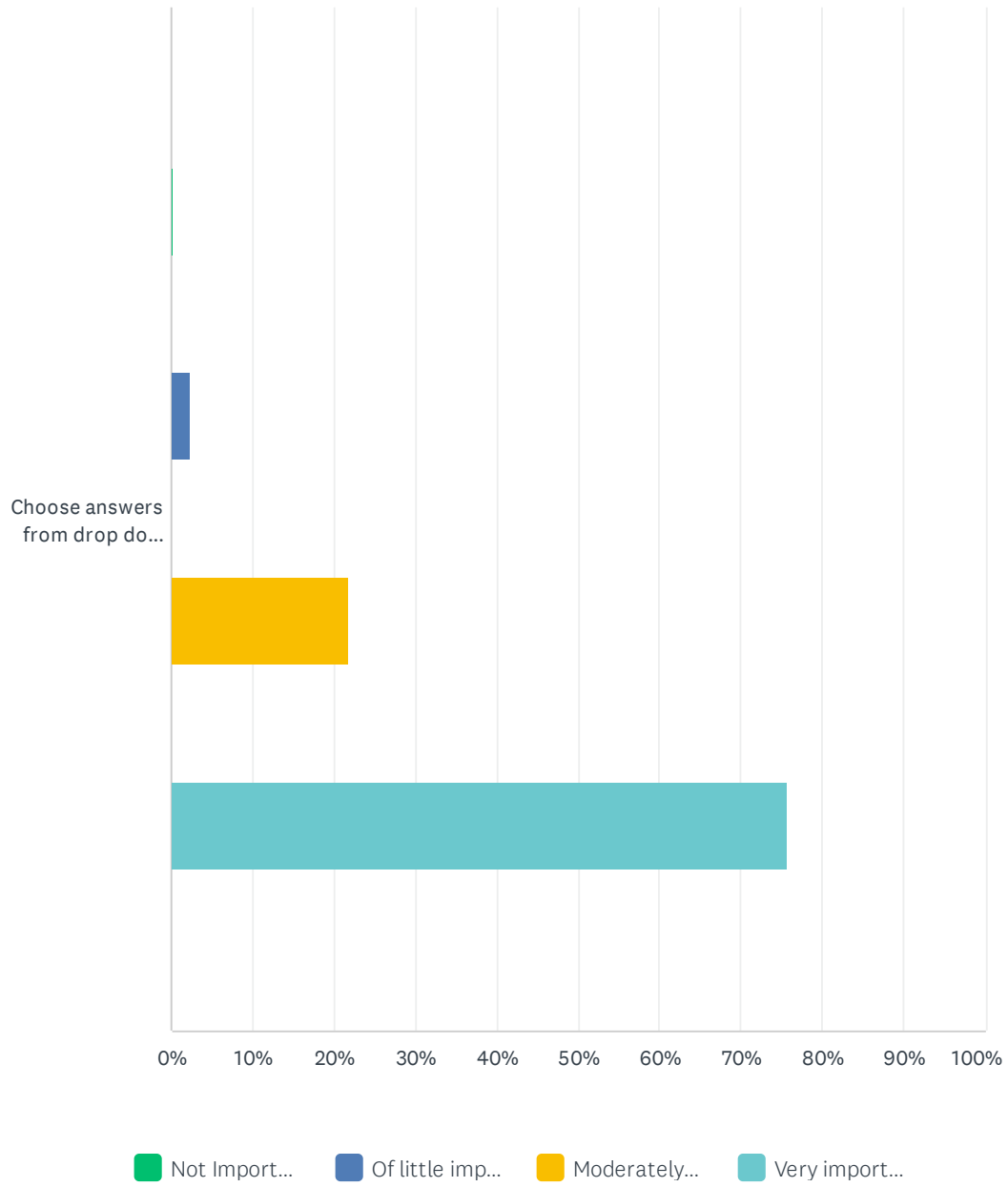
Q35 1.3.3.5 Motor control and motor learning.

Answered: 453 Skipped: 757



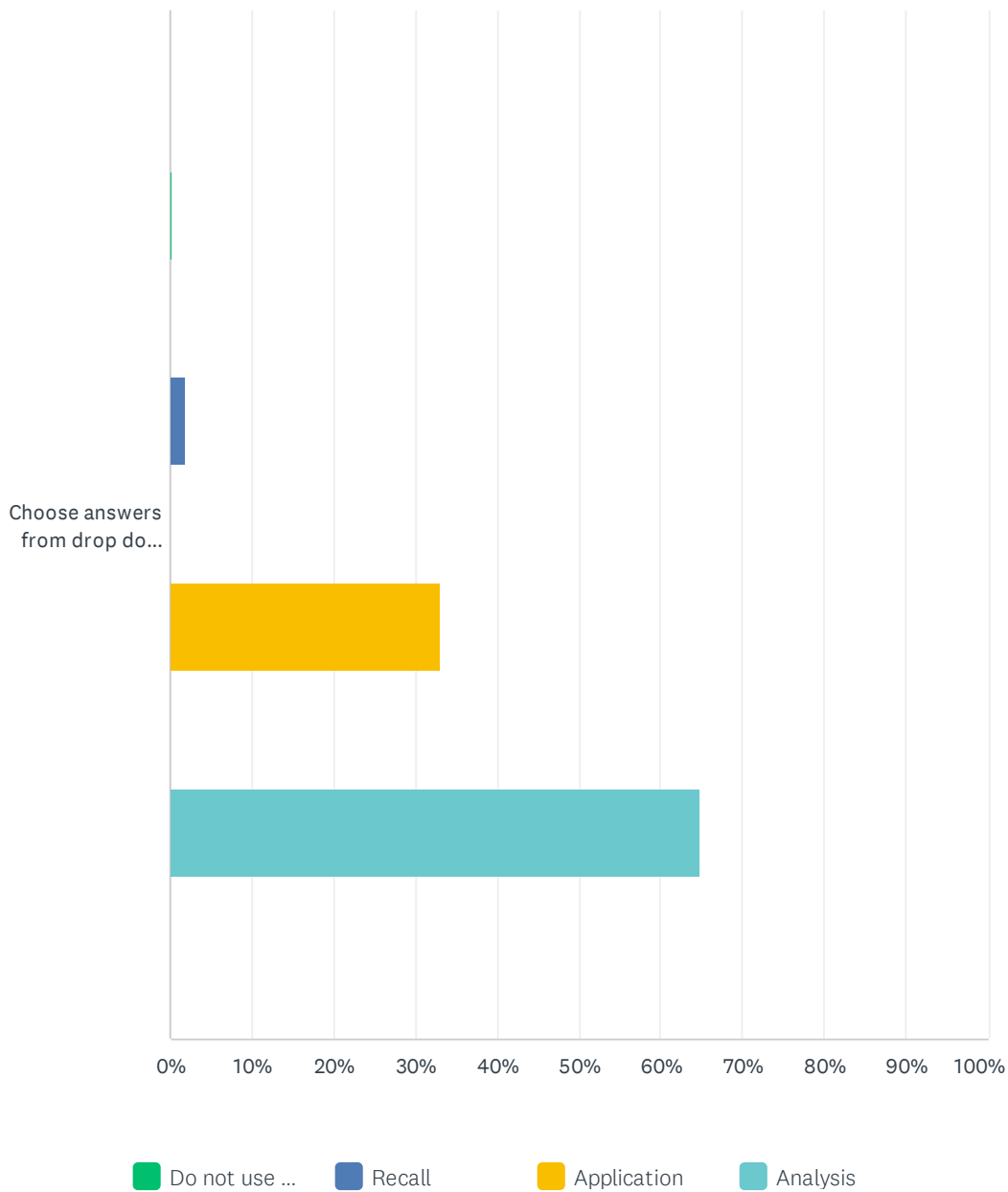
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.22% 1	2.43% 11	13.47% 61	83.89% 380	453

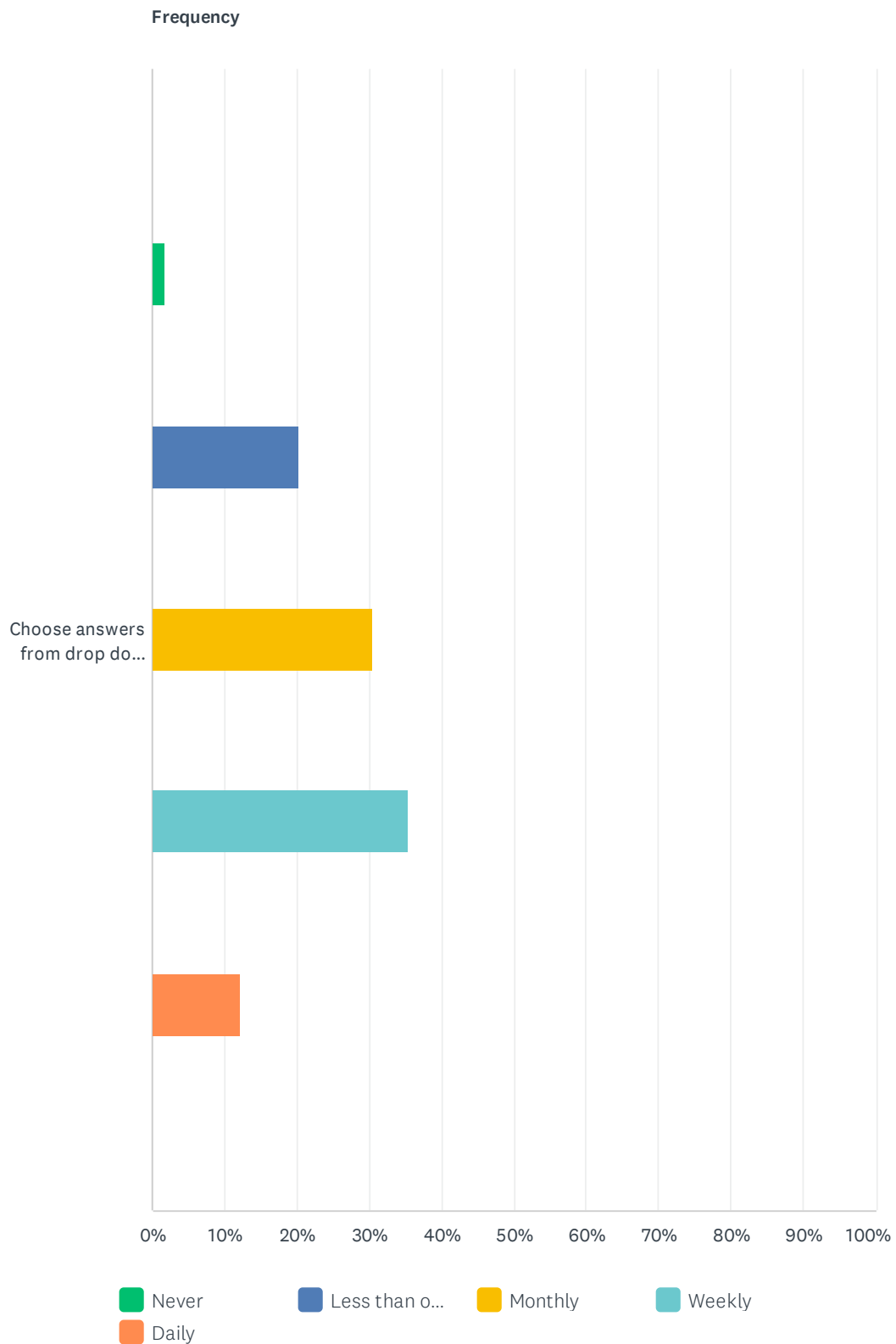
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.23% 1	2.26% 10	21.72% 96	75.79% 335	442

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.23%	1.88%	33.10%	64.79%	
	1	8	141	276	426

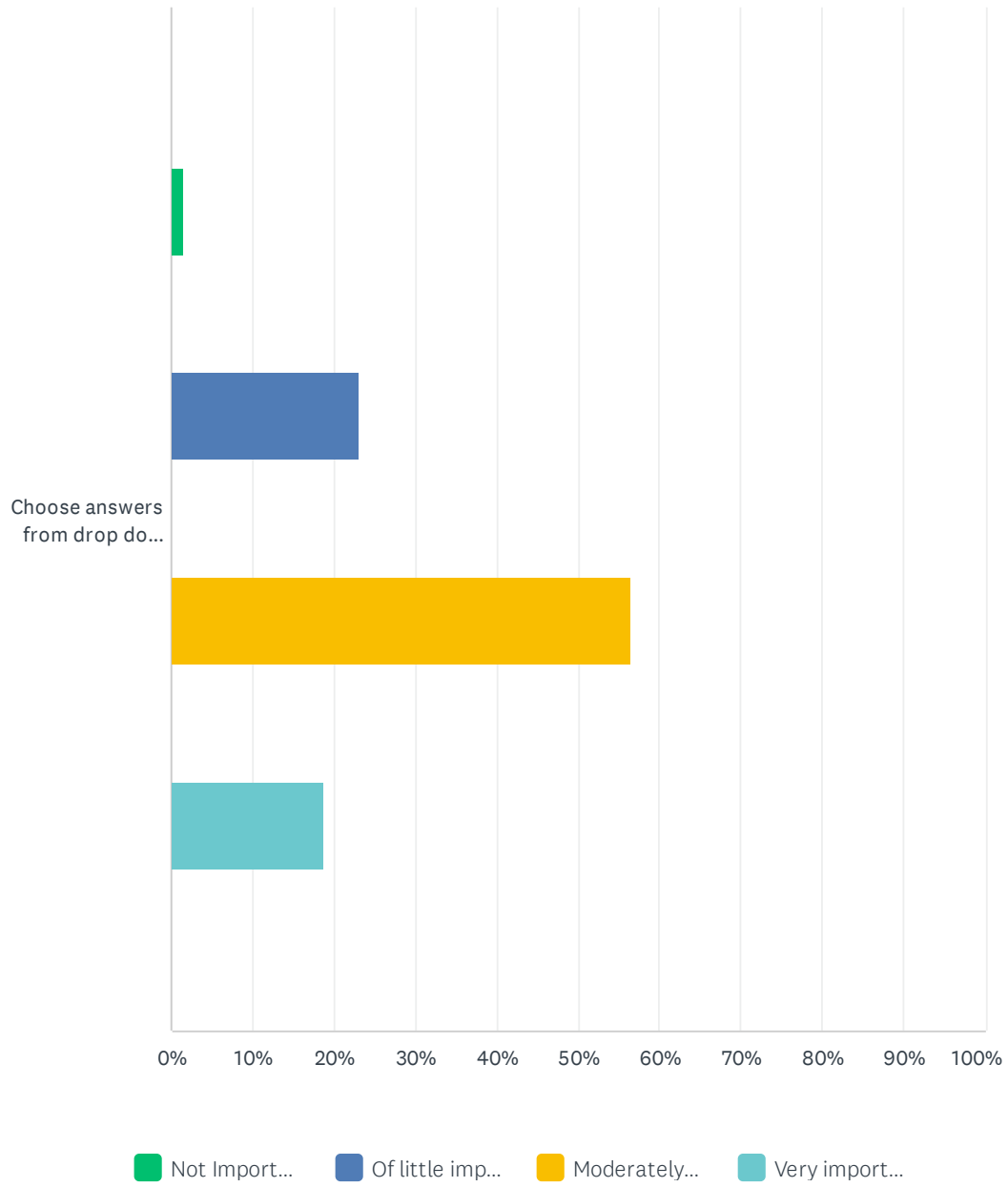
Q36 1.3.3.6 Theory and application of orthotic, protective, and supportive devices.

Answered: 454 Skipped: 756



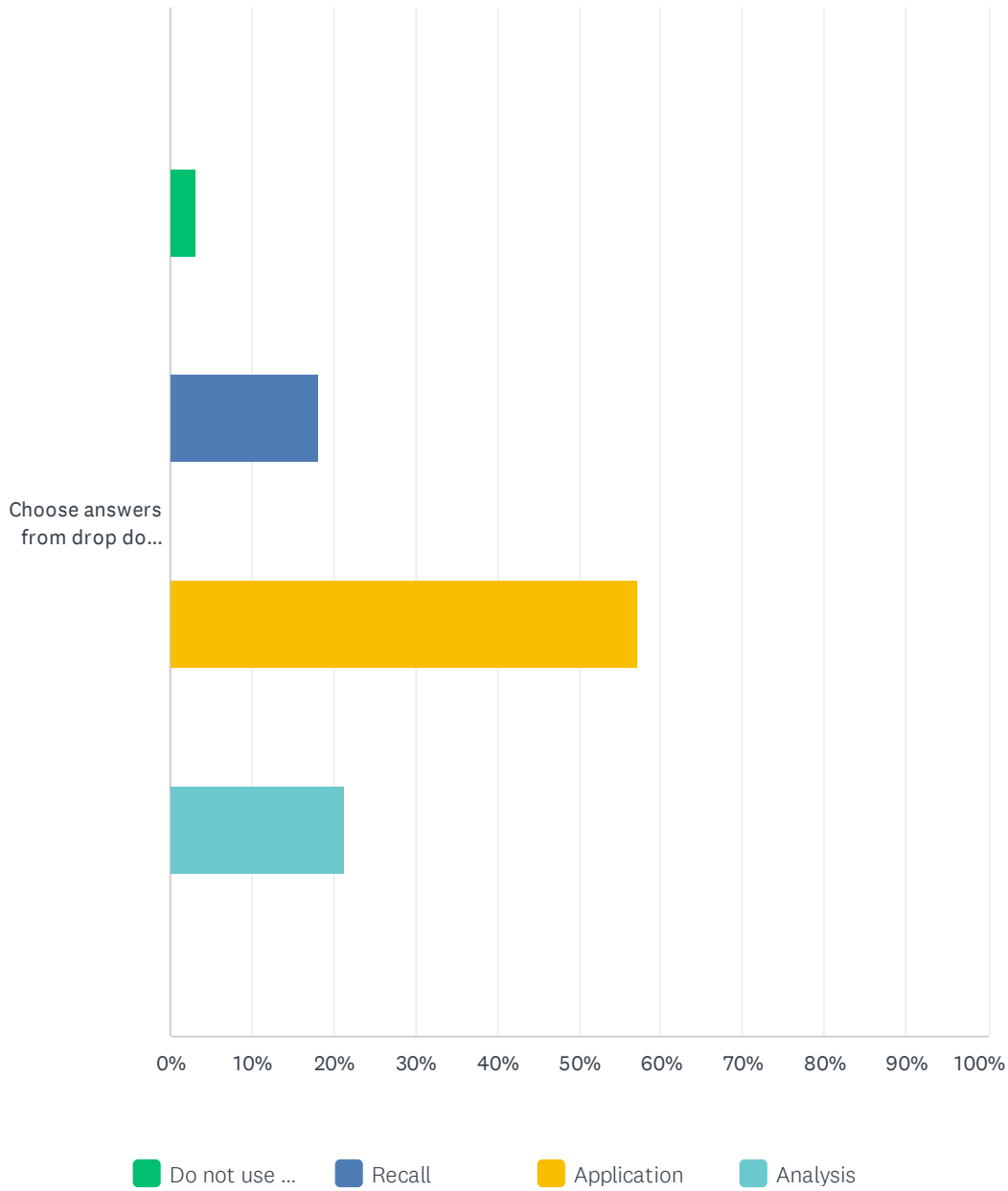
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.76% 8	20.26% 92	30.40% 138	35.46% 161	12.11% 55	454

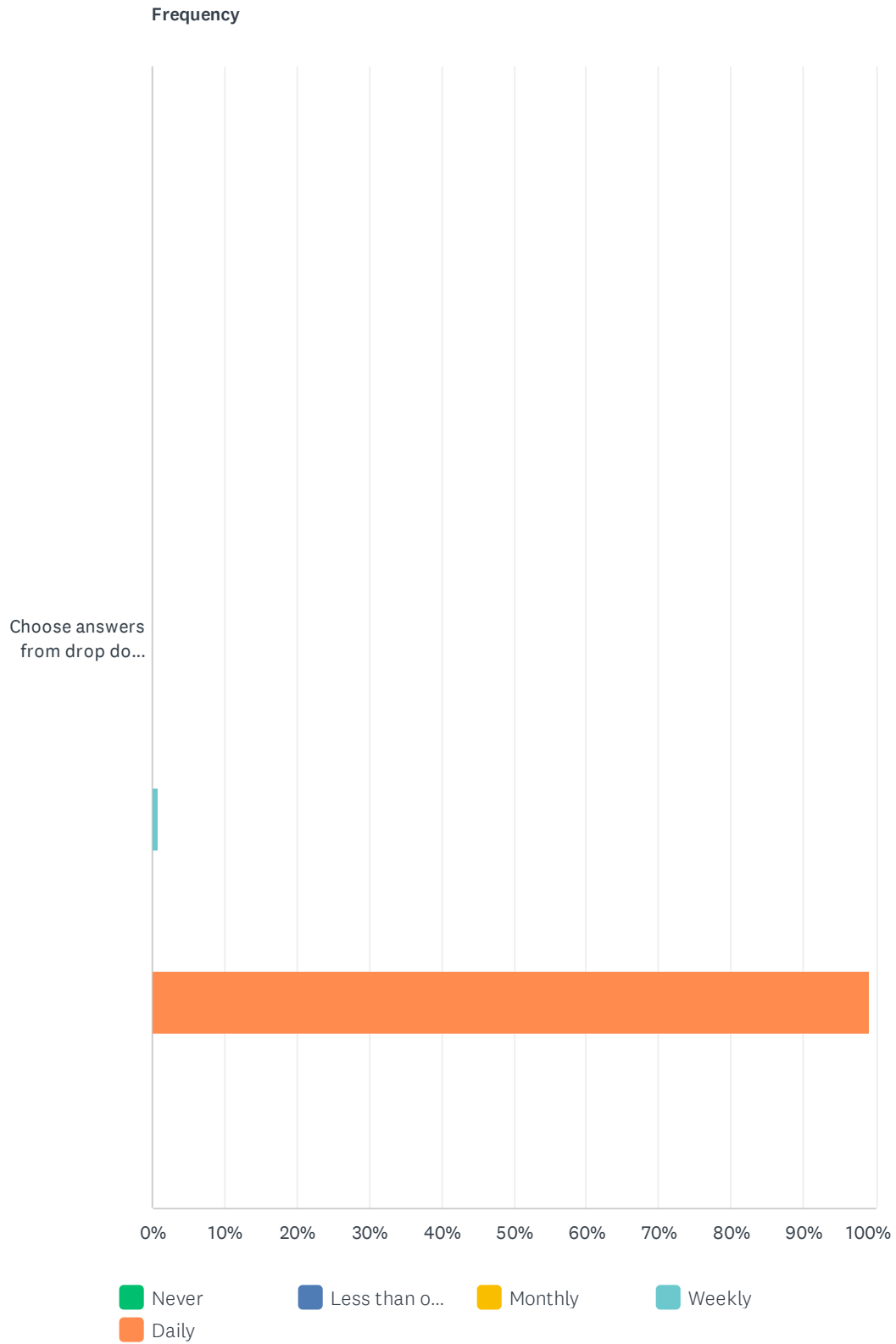
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.58% 7	23.08% 102	56.56% 250	18.78% 83	442

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	3.29% 14	18.12% 77	57.18% 243	21.41% 91	425

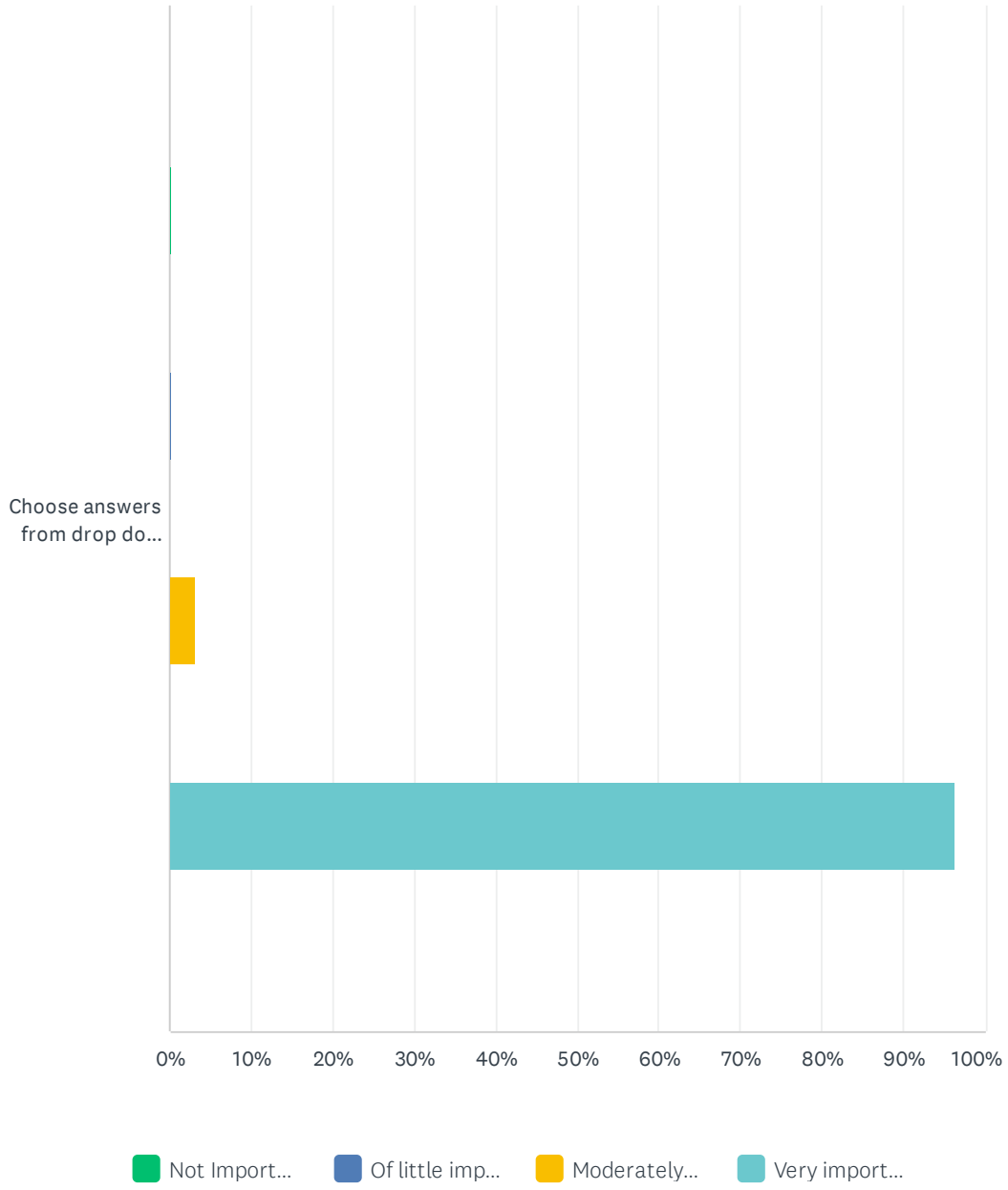
Q37 1.3.3.7 Therapeutic exercise.

Answered: 453 Skipped: 757



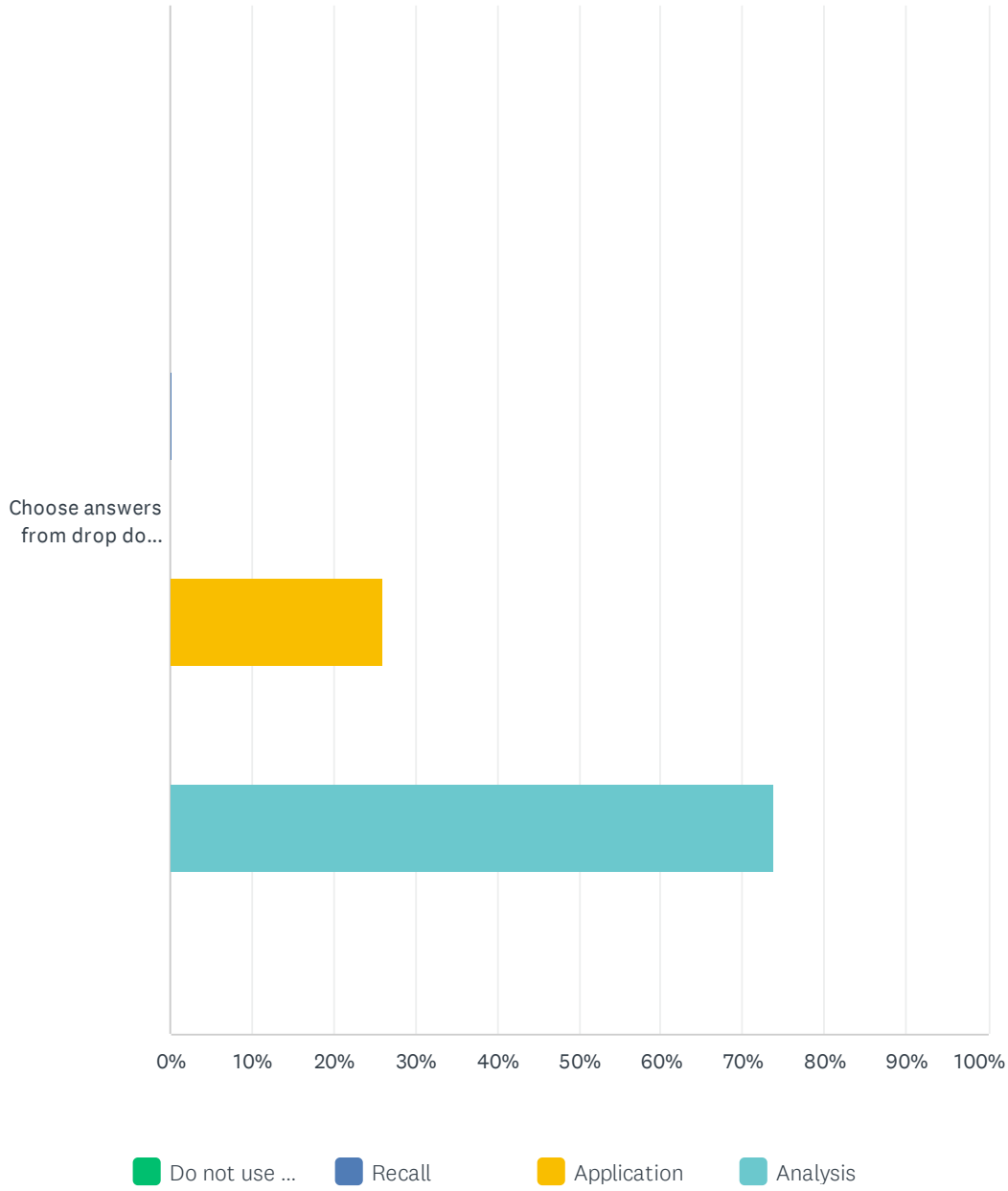
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.00% 0	0.88% 4	99.12% 449	453

Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.23% 1	0.23% 1	3.17% 14	96.38% 426	442

Spine Validation Practice Analysis Survey 2022

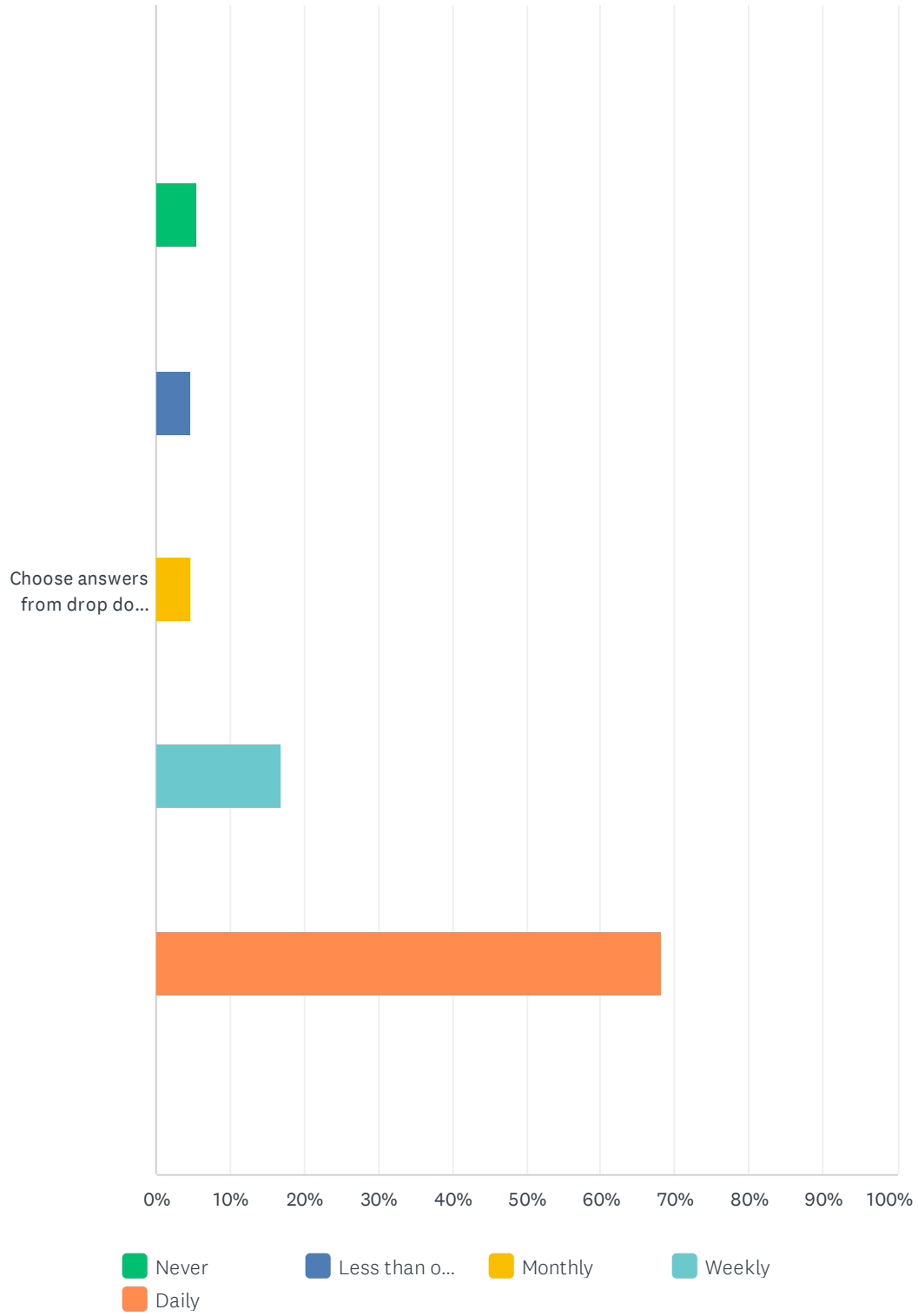
Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	0.23% 1	26.00% 111	73.77% 315	427

Q38 1.3.3.8 Models of differential diagnosis and clinical reasoning (e.g., hypothesis-oriented algorithm for clinicians (HOAC) model, prospect theory).

Answered: 447 Skipped: 763

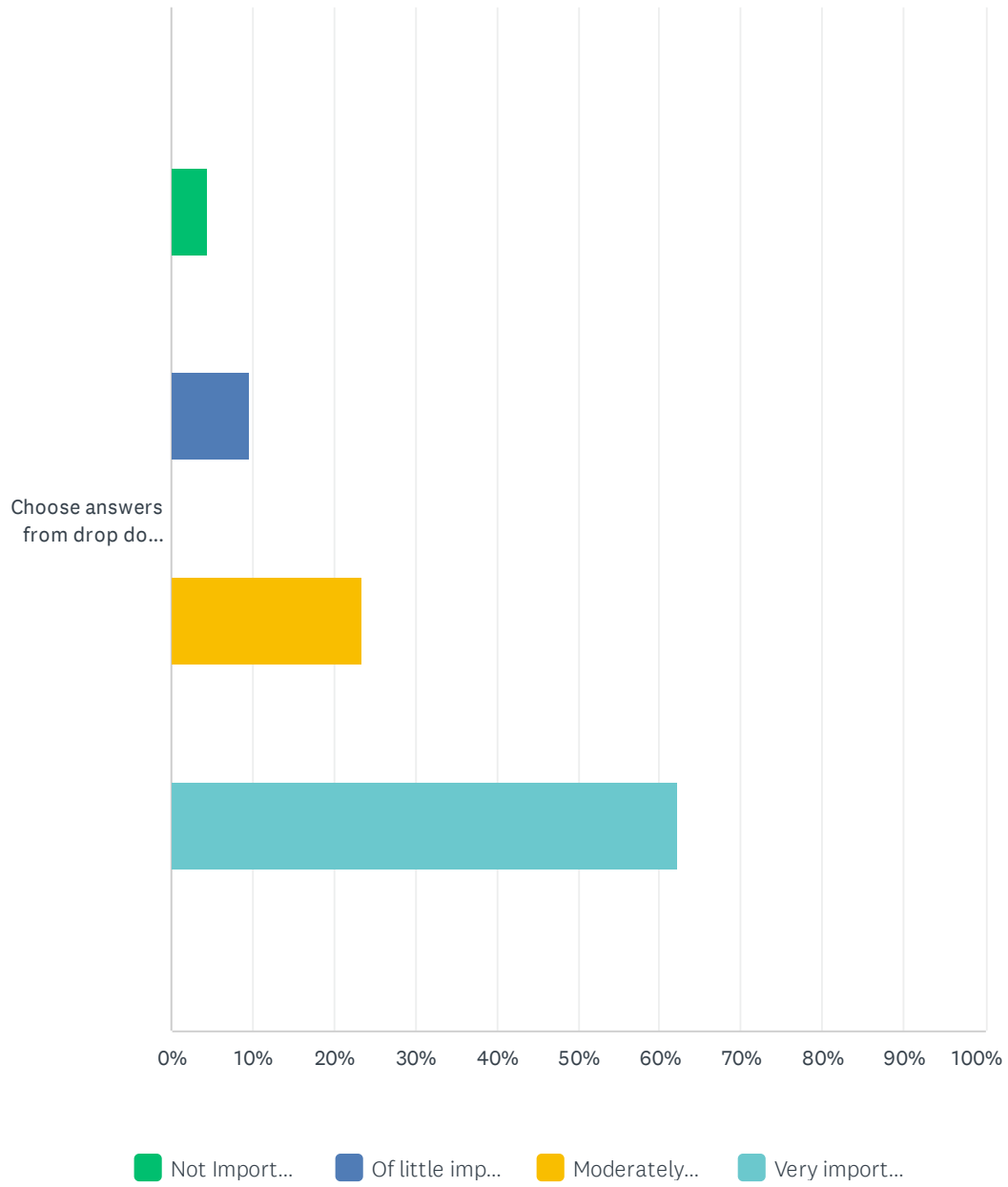
Spine Validation Practice Analysis Survey 2022

Frequency



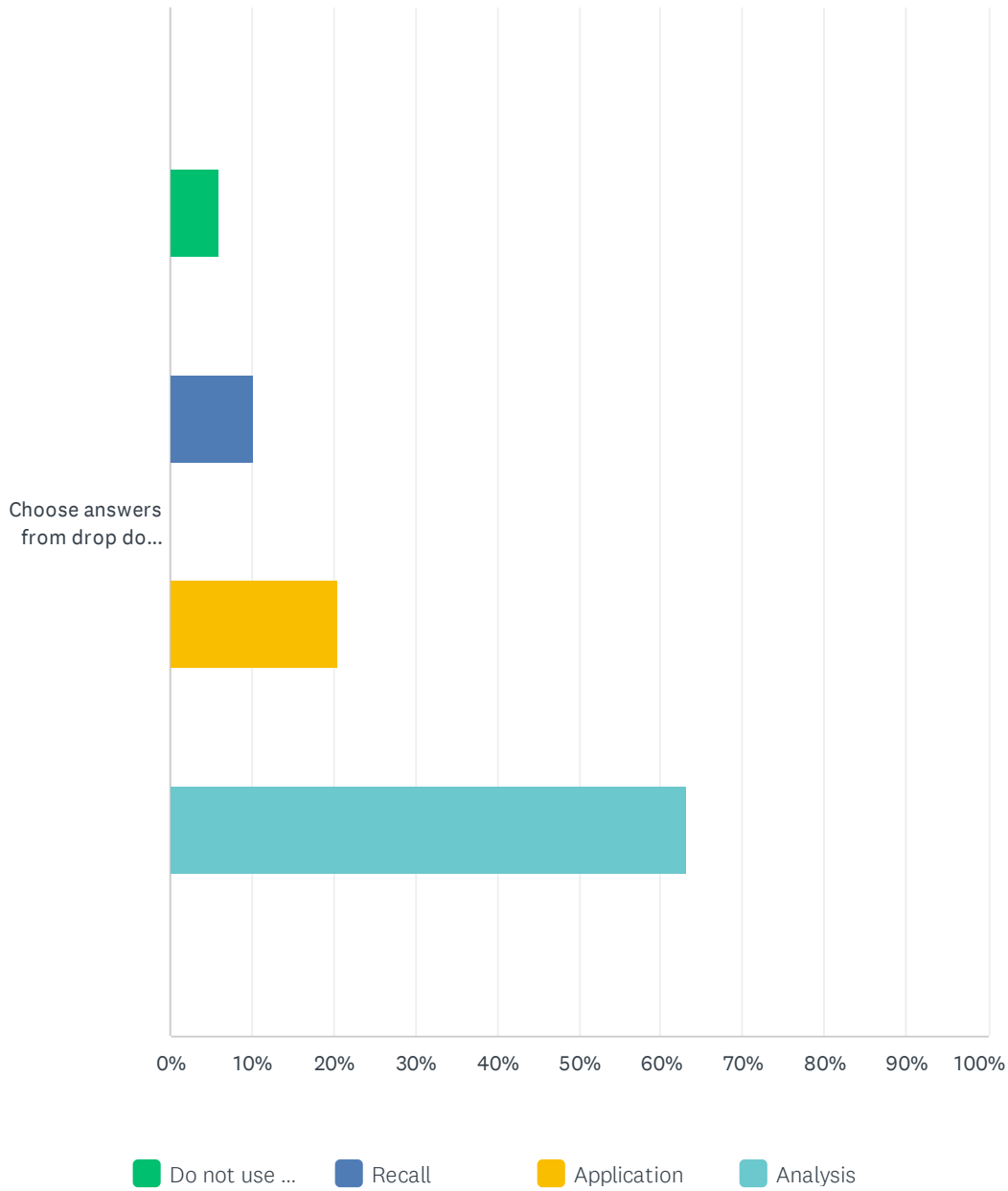
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	5.59% 25	4.70% 21	4.70% 21	16.78% 75	68.23% 305	447

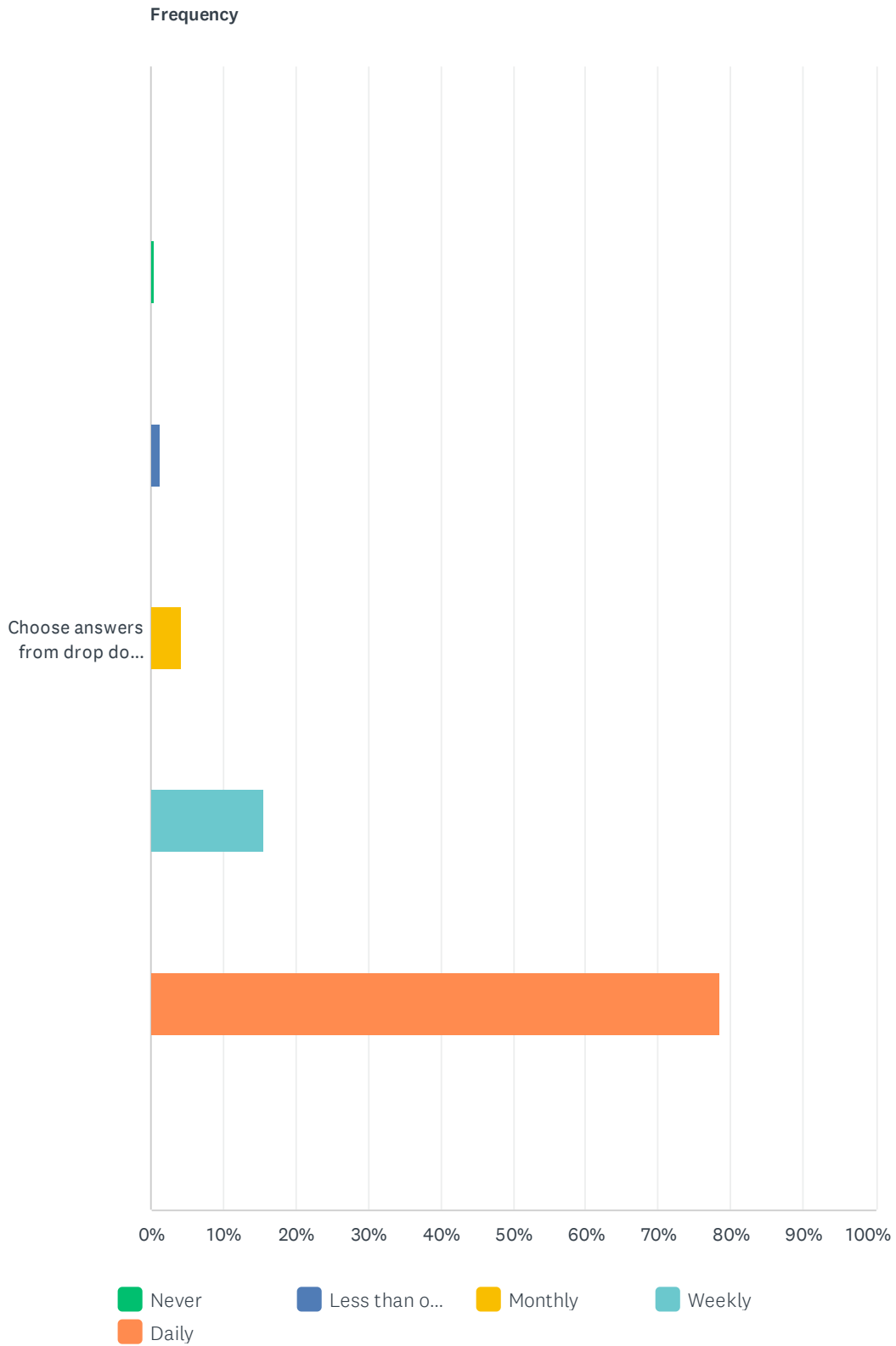
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	4.39% 19	9.70% 42	23.56% 102	62.36% 270	433

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	5.98% 25	10.29% 43	20.57% 86	63.16% 264	418

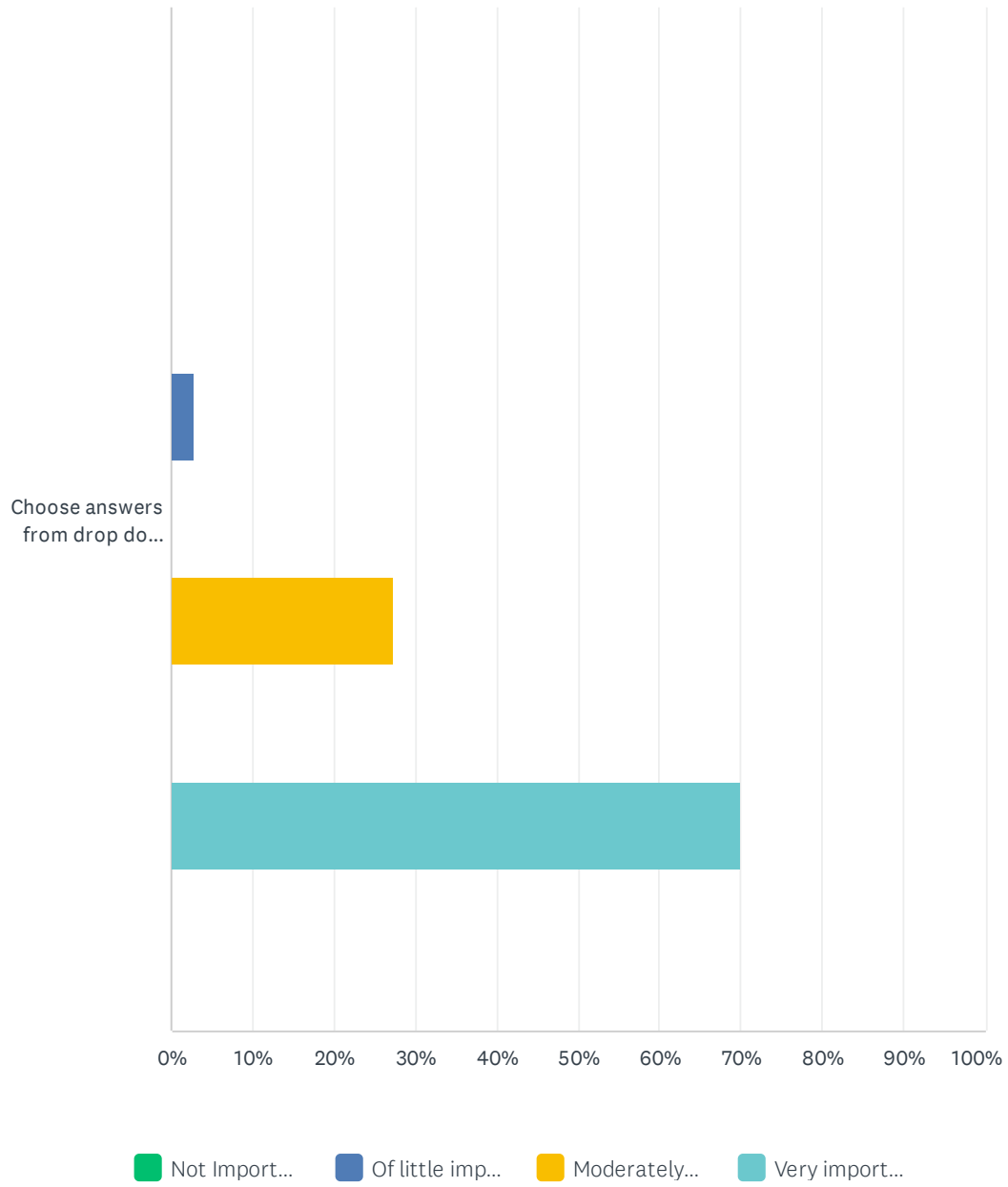
Q39 1.3.3.9 Principles of teaching and learning.

Answered: 454 Skipped: 756



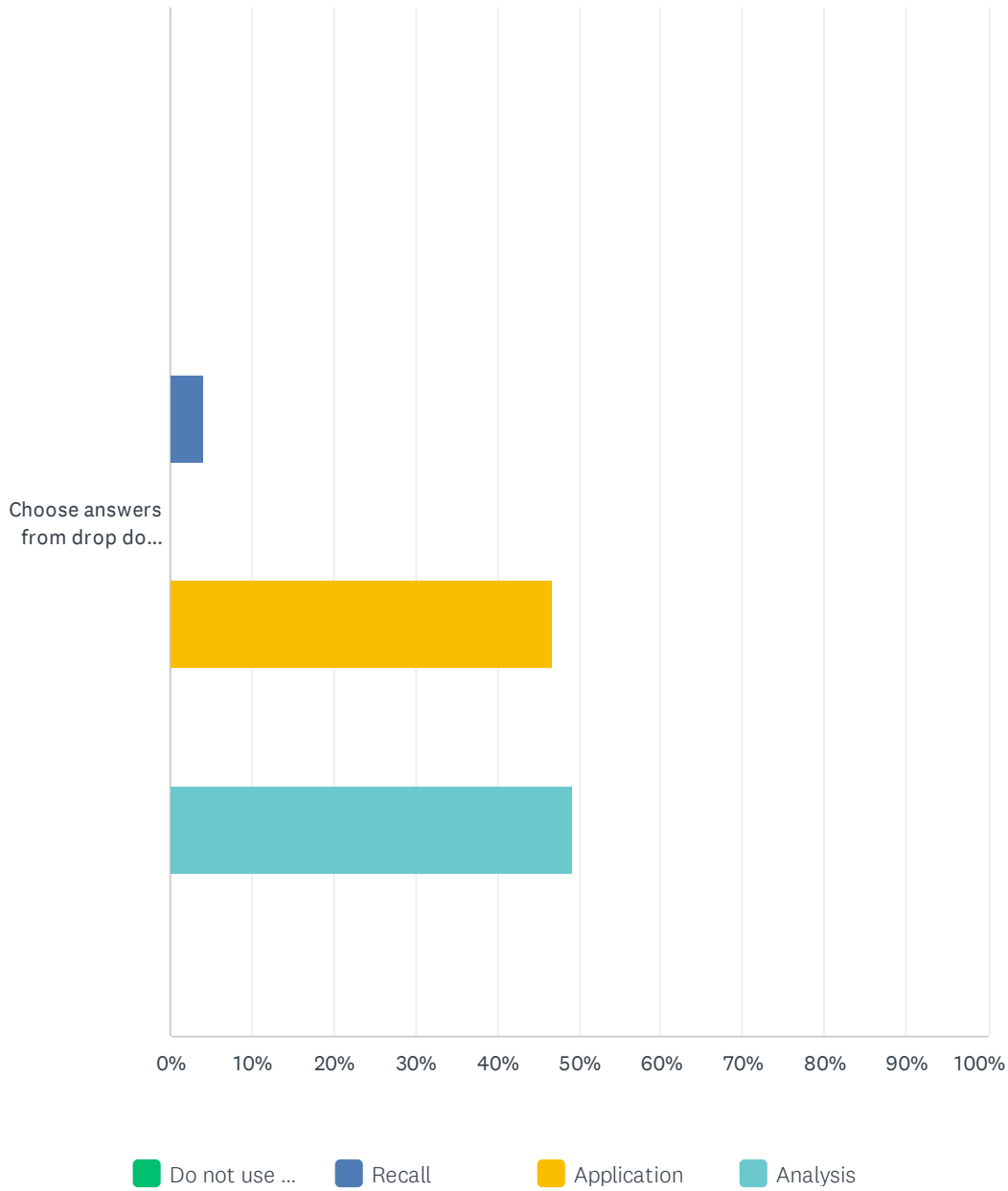
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.44% 2	1.32% 6	4.19% 19	15.64% 71	78.41% 356	454

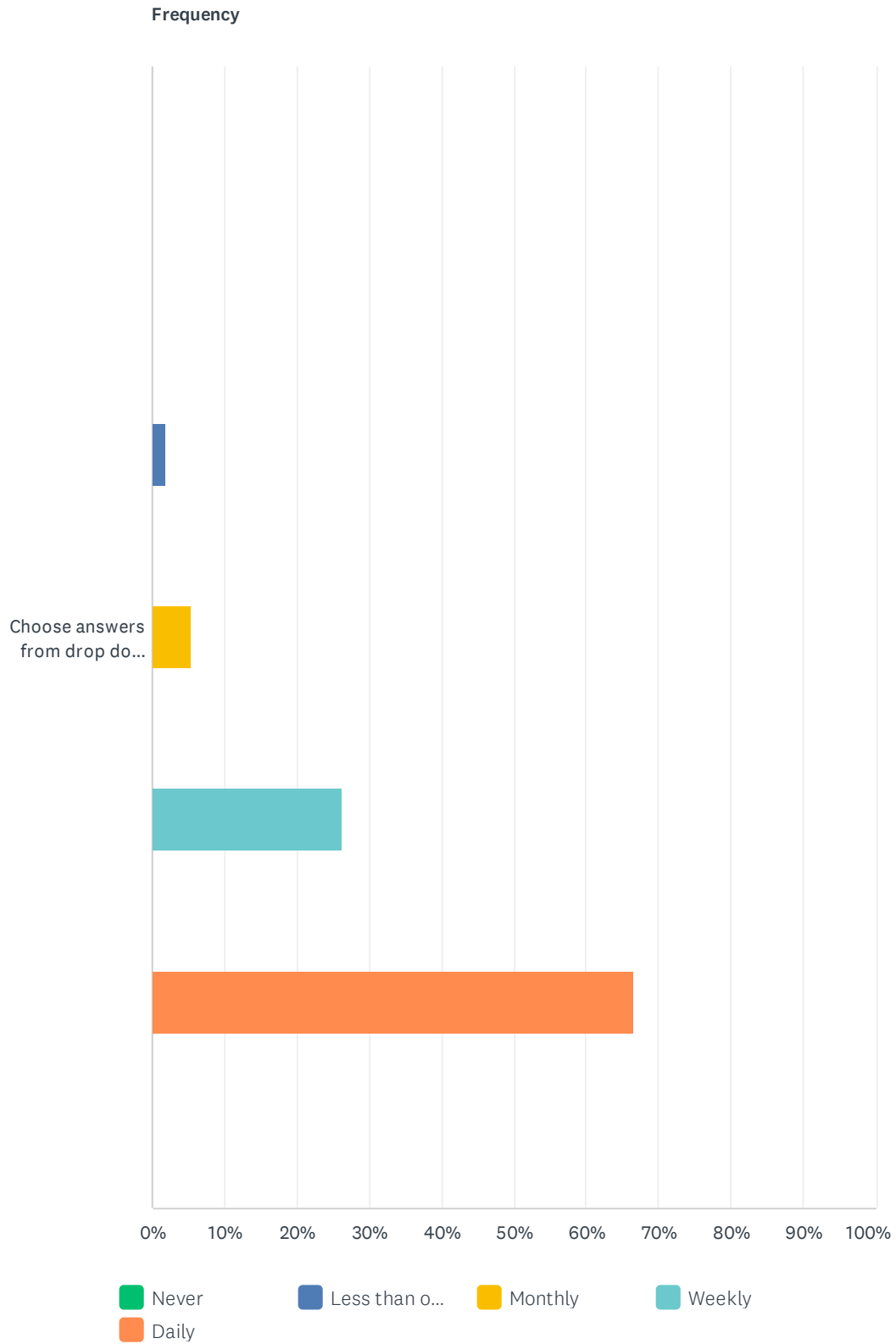
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	2.71% 12	27.38% 121	69.91% 309	442

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.00% 0	3.97% 17	46.73% 200	49.30% 211	428

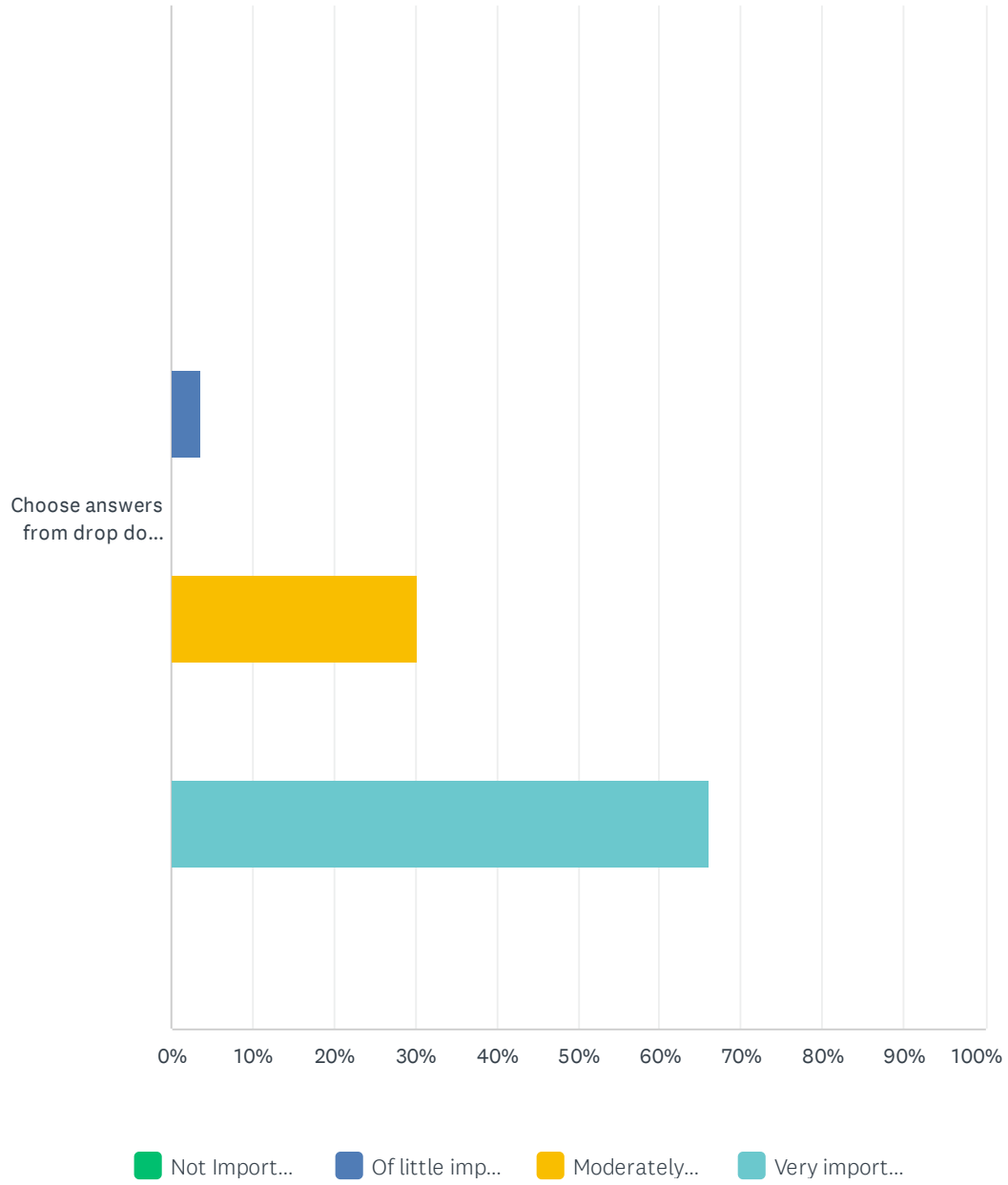
Q40 1.3.3.10 Principles of prevention and wellness.

Answered: 454 Skipped: 756



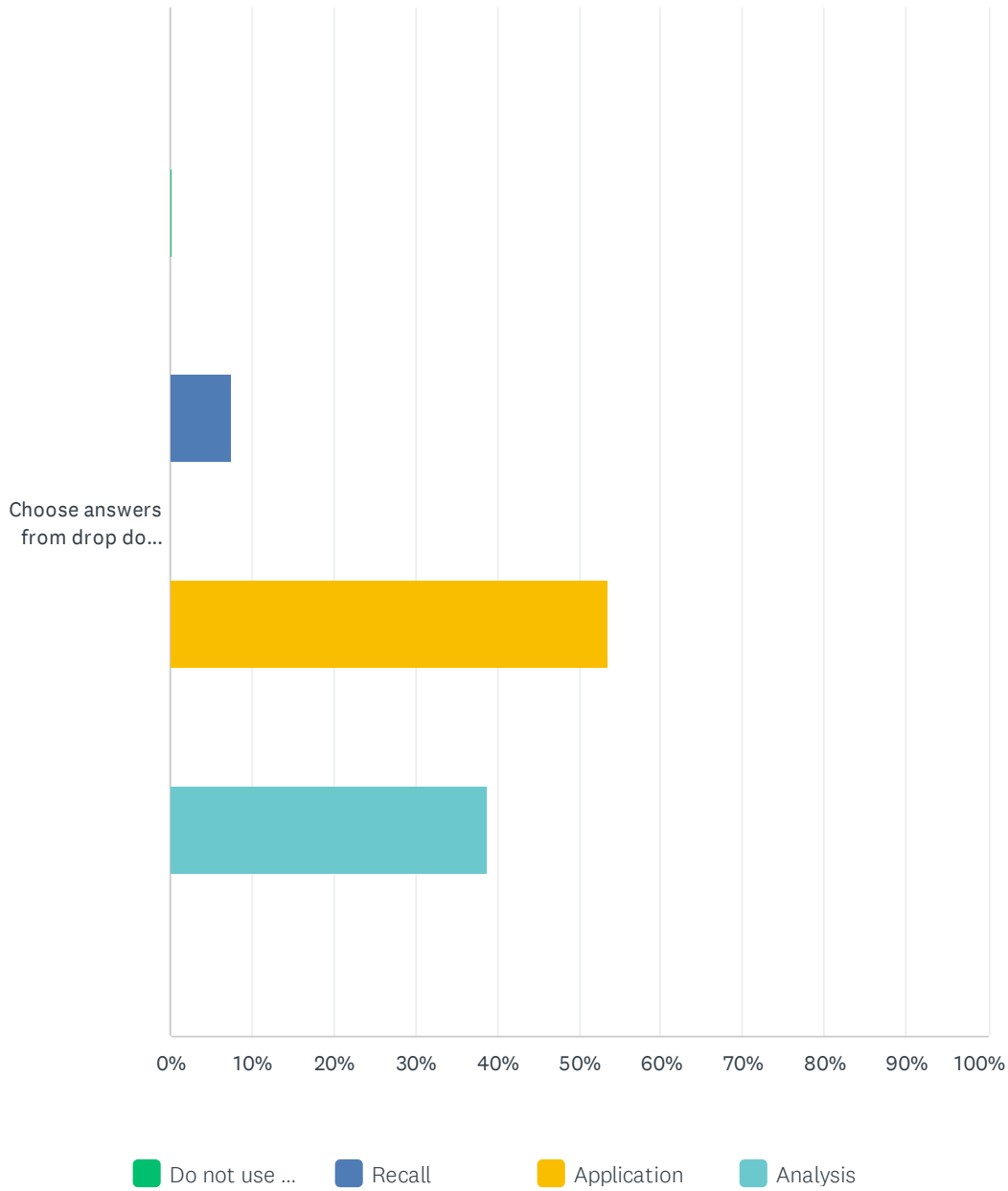
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.98% 9	5.29% 24	26.21% 119	66.52% 302	454

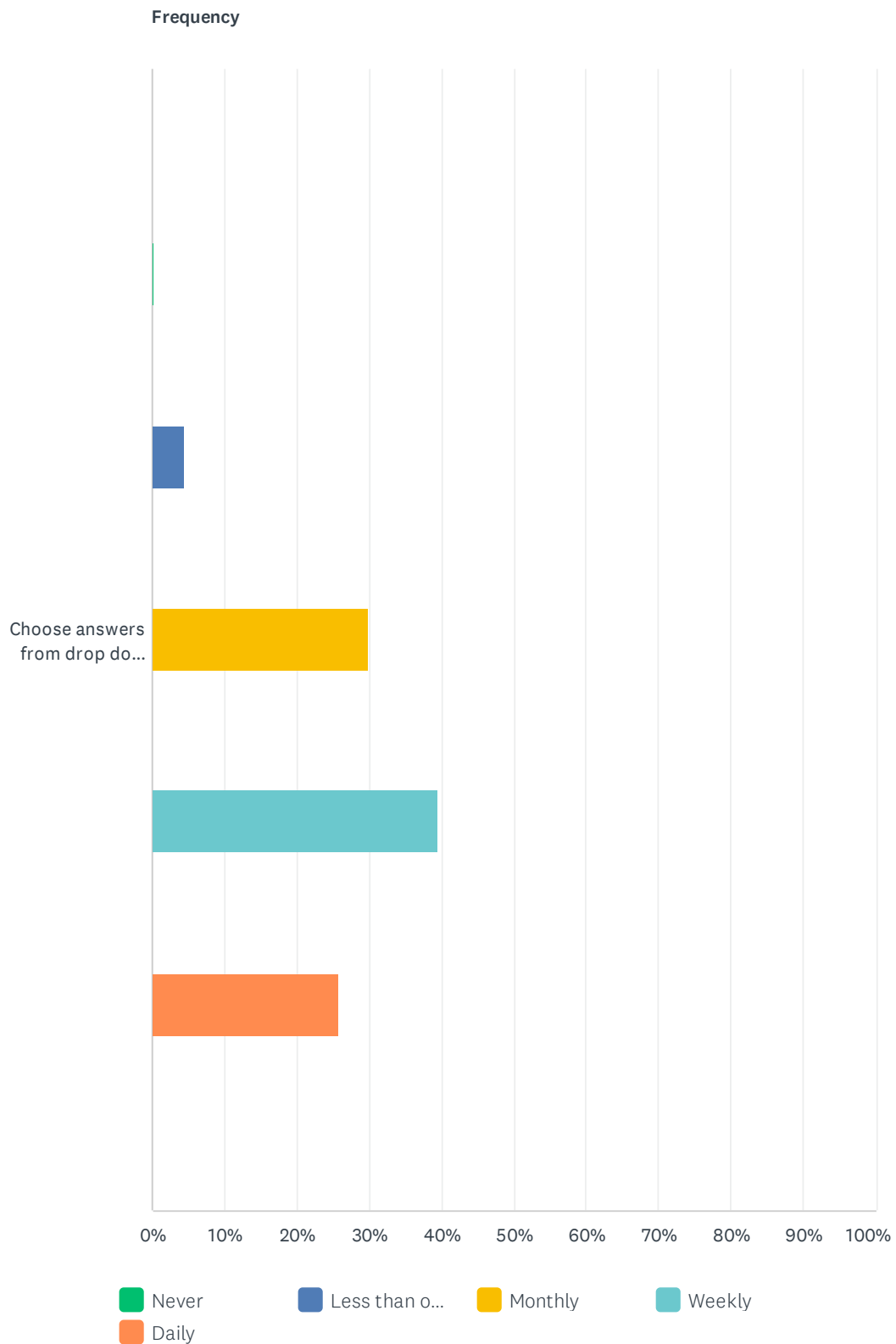
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.61% 16	30.25% 134	66.14% 293	443

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.23%	7.48%	53.50%	38.79%	
	1	32	229	166	428

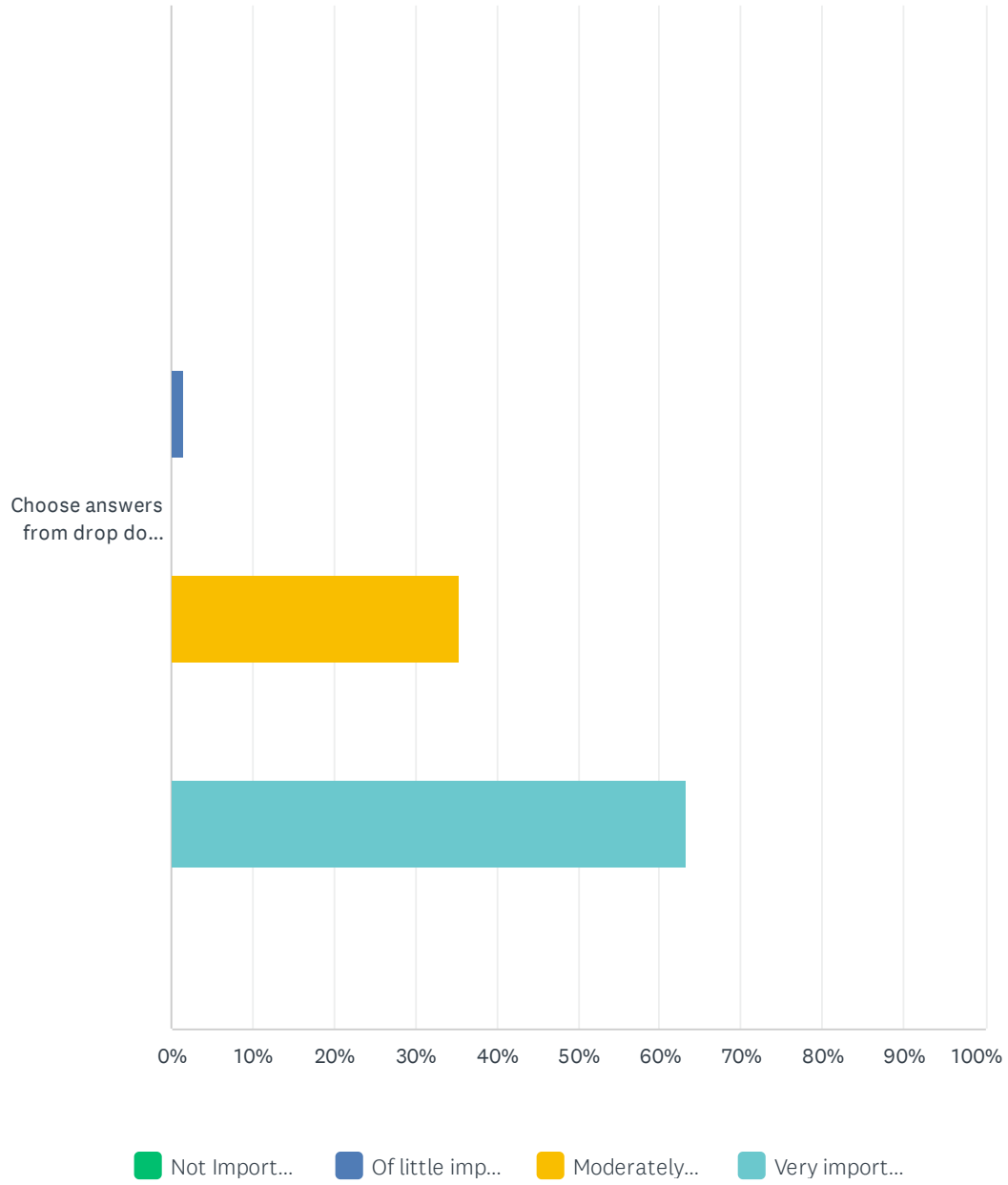
Q41 1.4.1 Critical interpretation of research findings on orthopaedic spine physical therapy practice.

Answered: 441 Skipped: 769



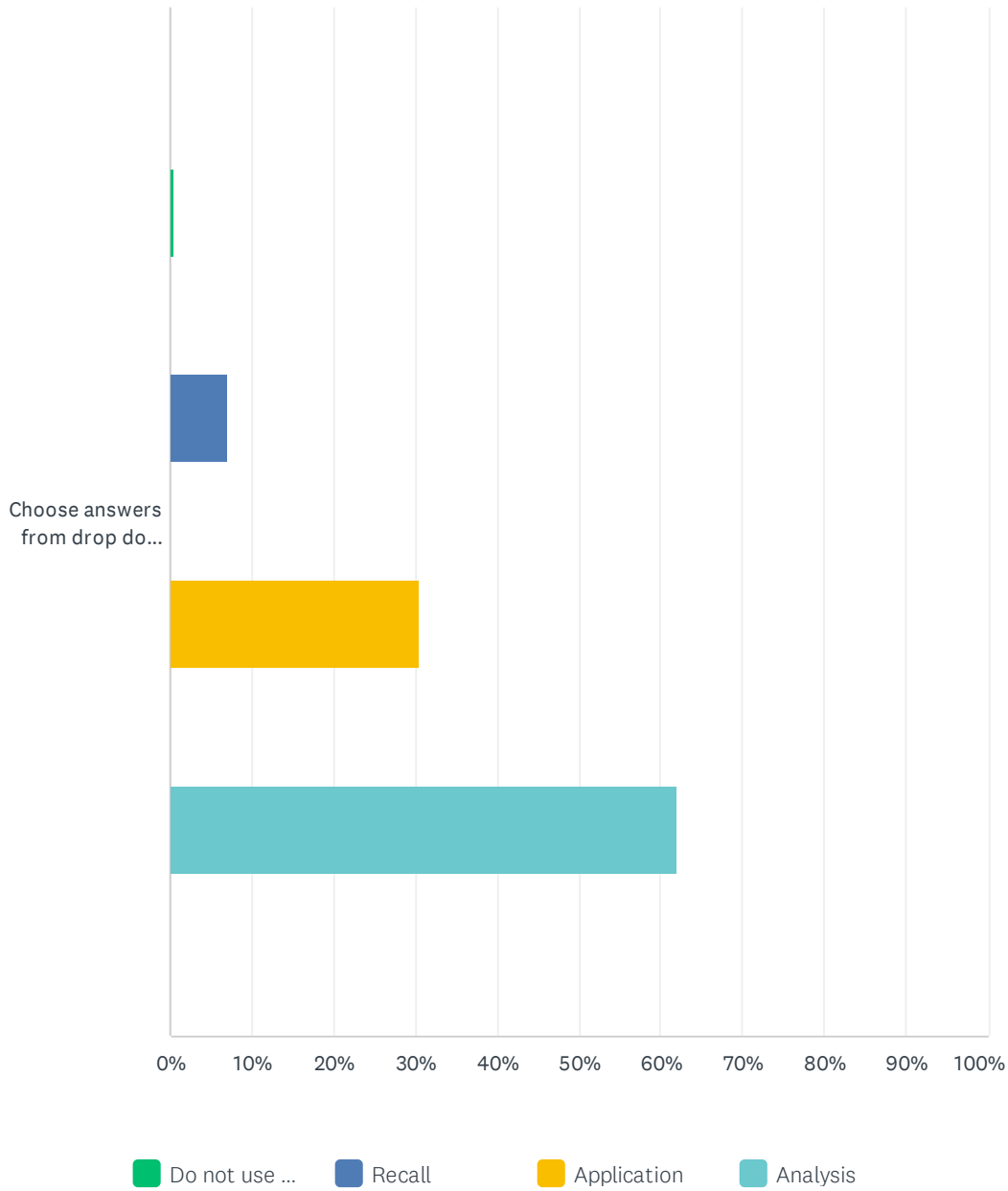
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.23% 1	4.54% 20	29.93% 132	39.46% 174	25.85% 114	441

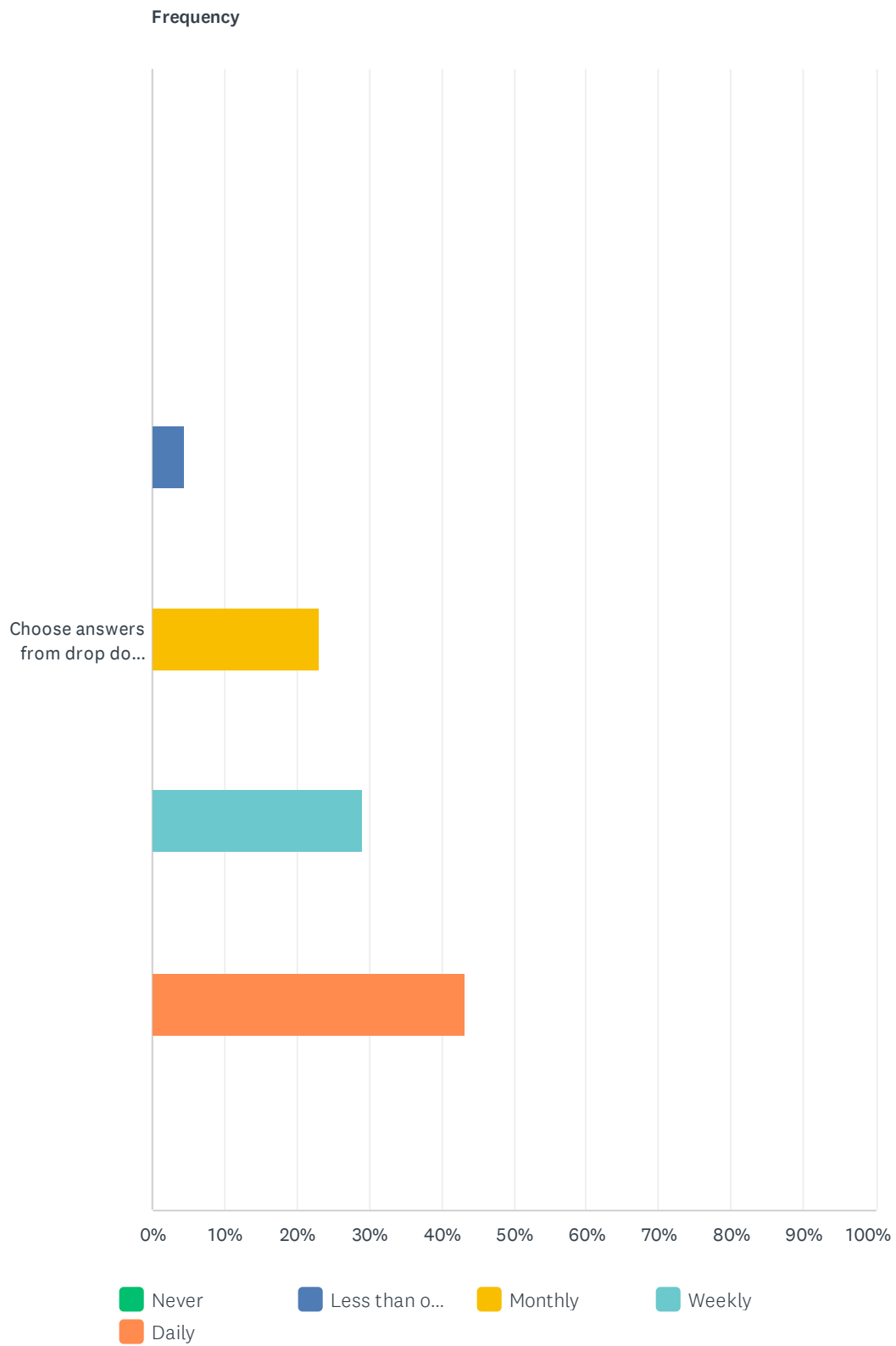
Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.40% 6	35.35% 152	63.26% 272	430

Spine Validation Practice Analysis Survey 2022

Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.48%	6.97%	30.53%	62.02%	
	2	29	127	258	416

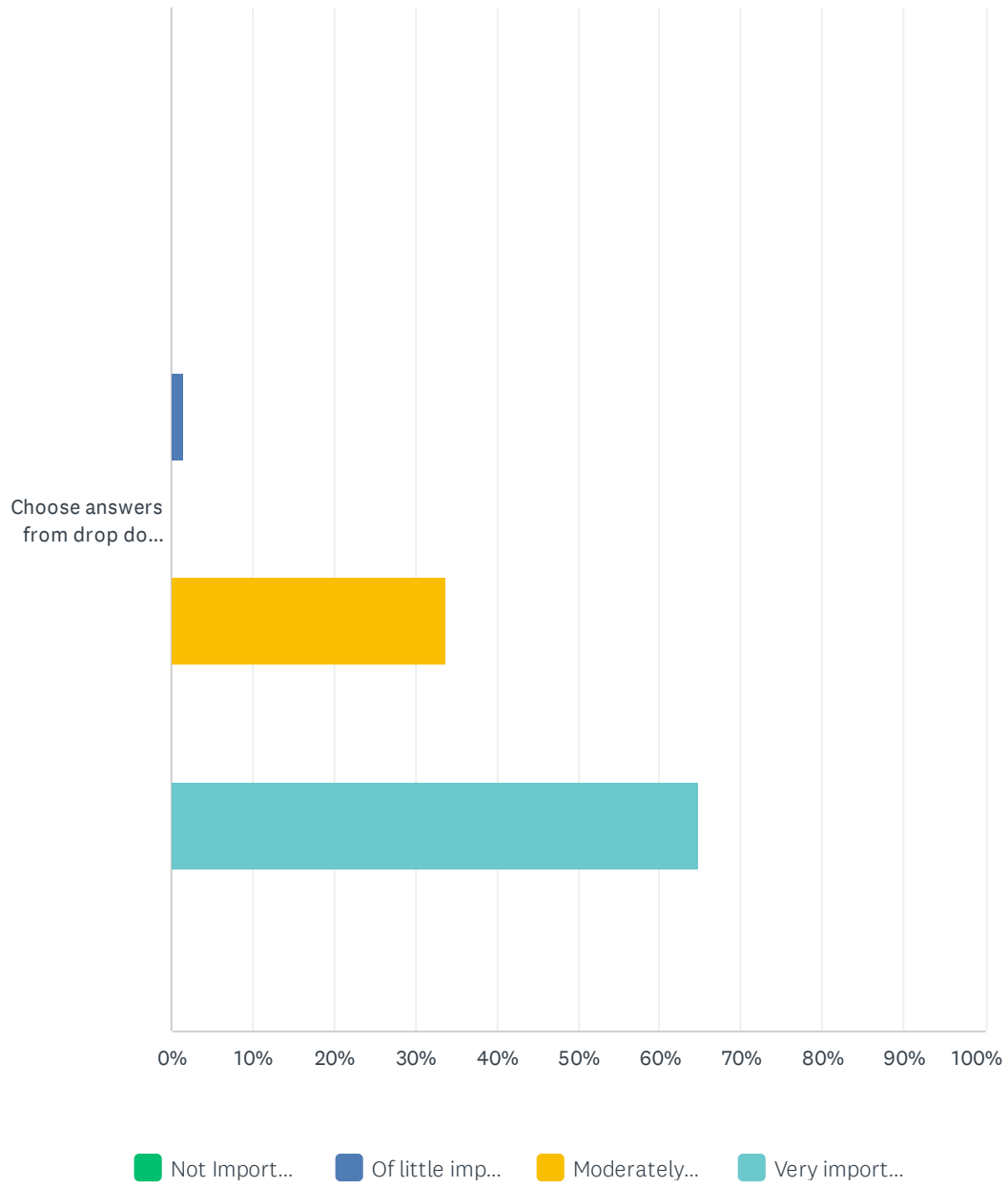
Q42 1.4.2 Application of research findings to orthopaedic spine physical therapy practice.

Answered: 441 Skipped: 769



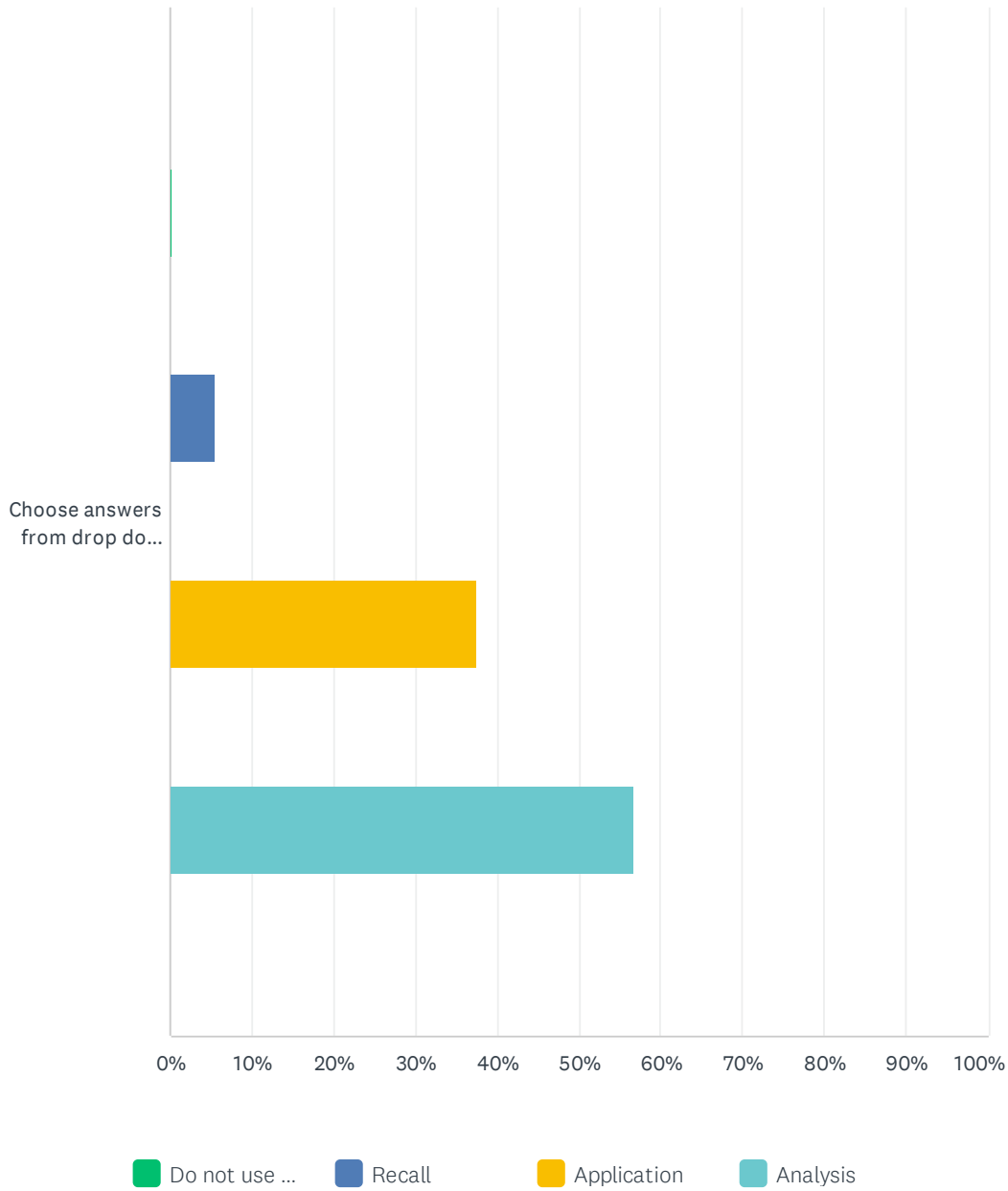
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Judgment



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	4.54% 20	23.13% 102	29.02% 128	43.31% 191	441

Importance					
	NOT IMPORTANT	OF LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.40% 6	33.72% 145	64.88% 279	430

Spine Validation Practice Analysis Survey 2022

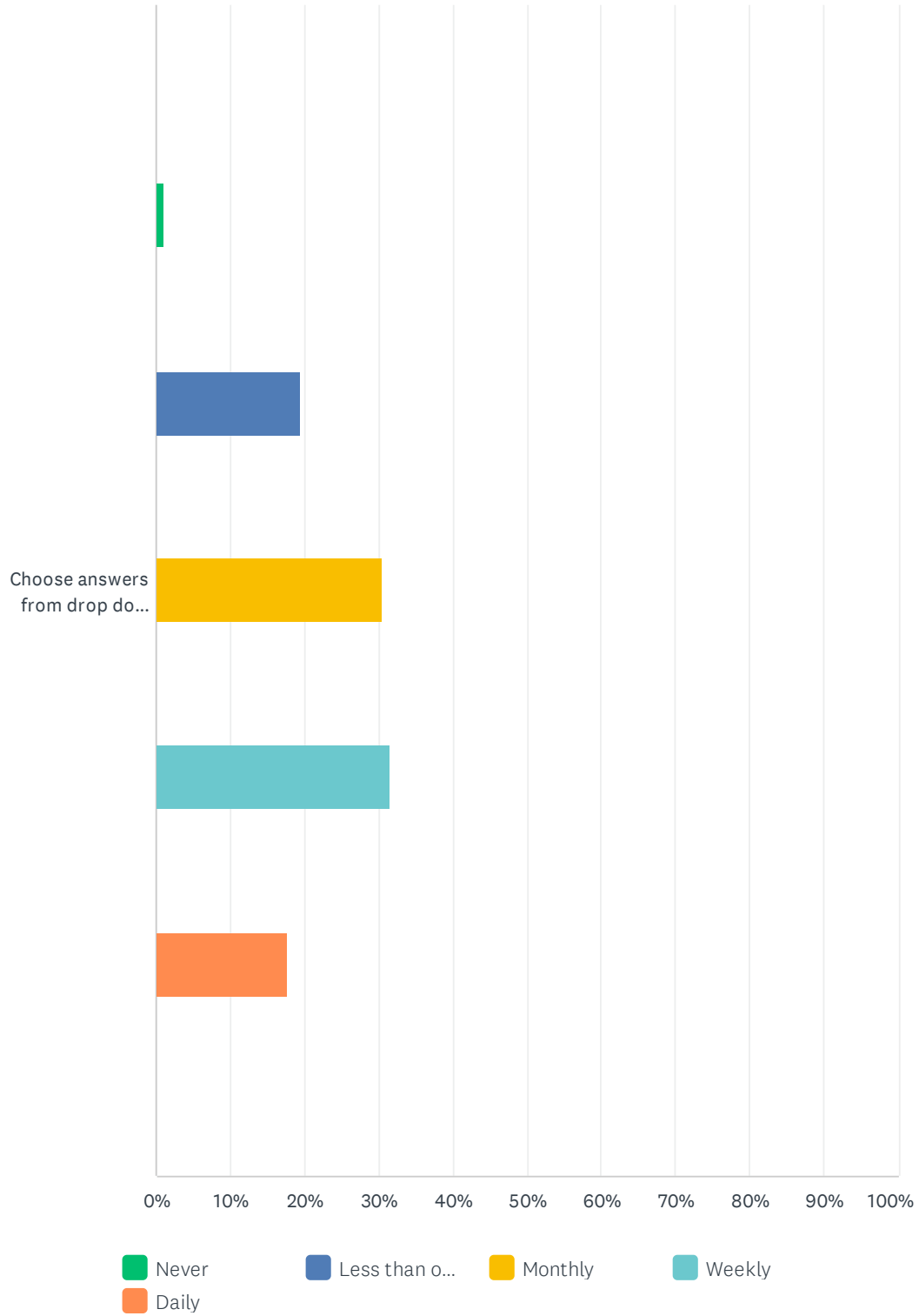
Level of Judgment					
	DO NOT USE IN THEIR WORK	RECALL	APPLICATION	ANALYSIS	TOTAL
Choose answers from drop down menus.	0.24%	5.56%	37.44%	56.76%	
	1	23	155	235	414

Q43 2.1.1 Consulting with and/or educating peers, colleagues, other health care professionals, community, agencies, legislative and/or regulatory organizations regarding issues of orthopaedic spine physical therapy practice.

Answered: 408 Skipped: 802

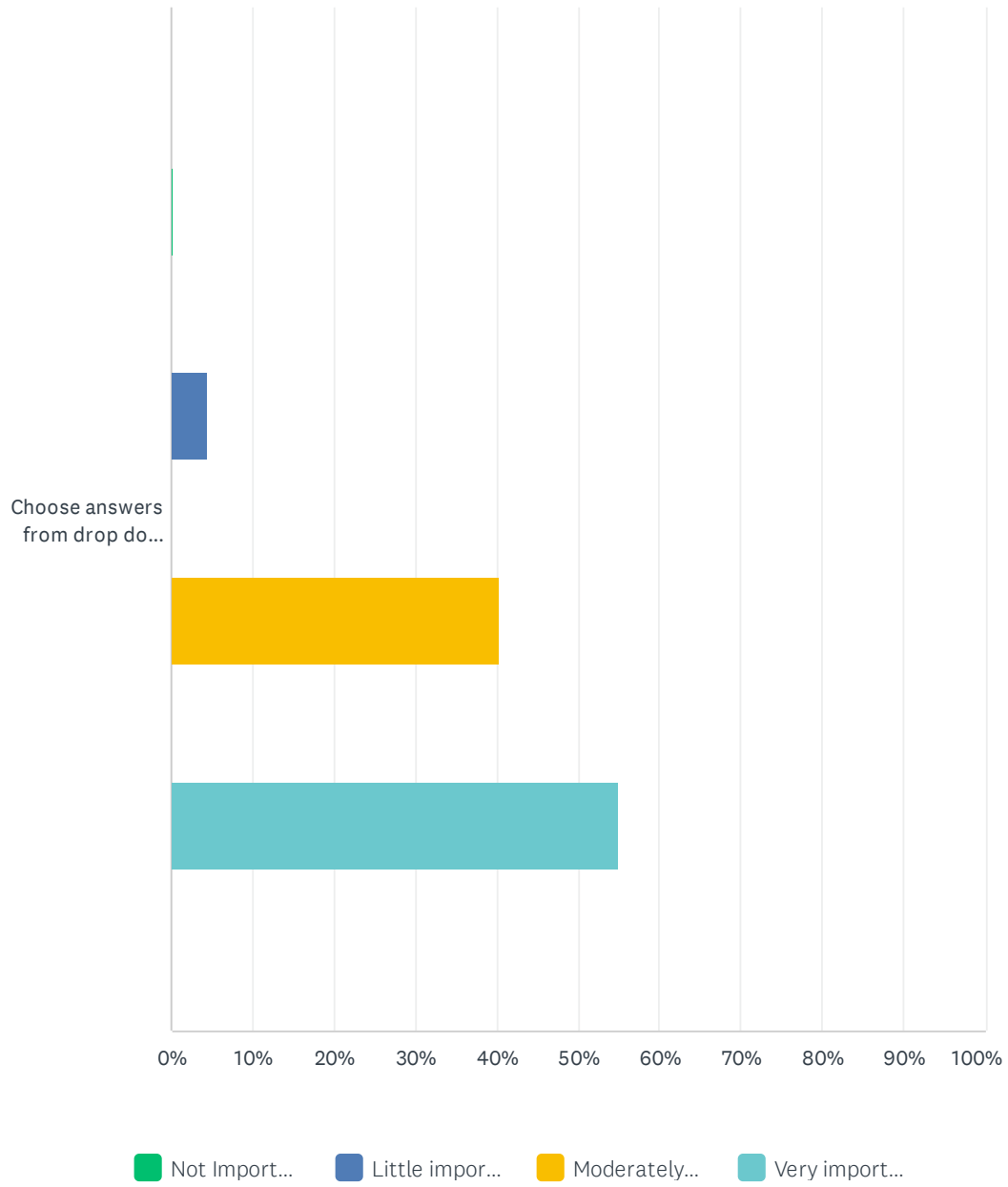
Spine Validation Practice Analysis Survey 2022

Frequency



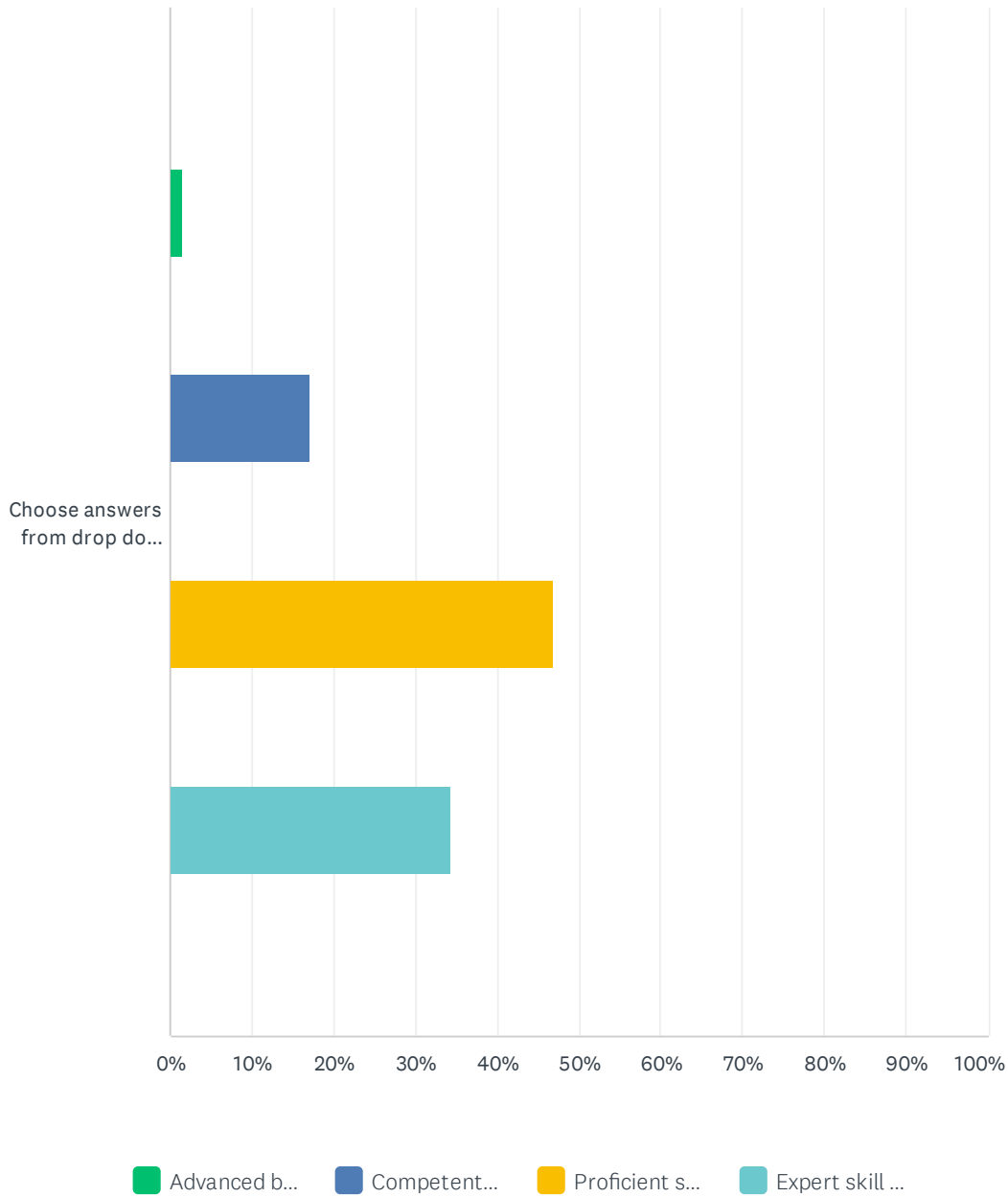
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.98% 4	19.36% 79	30.39% 124	31.62% 129	17.65% 72	408

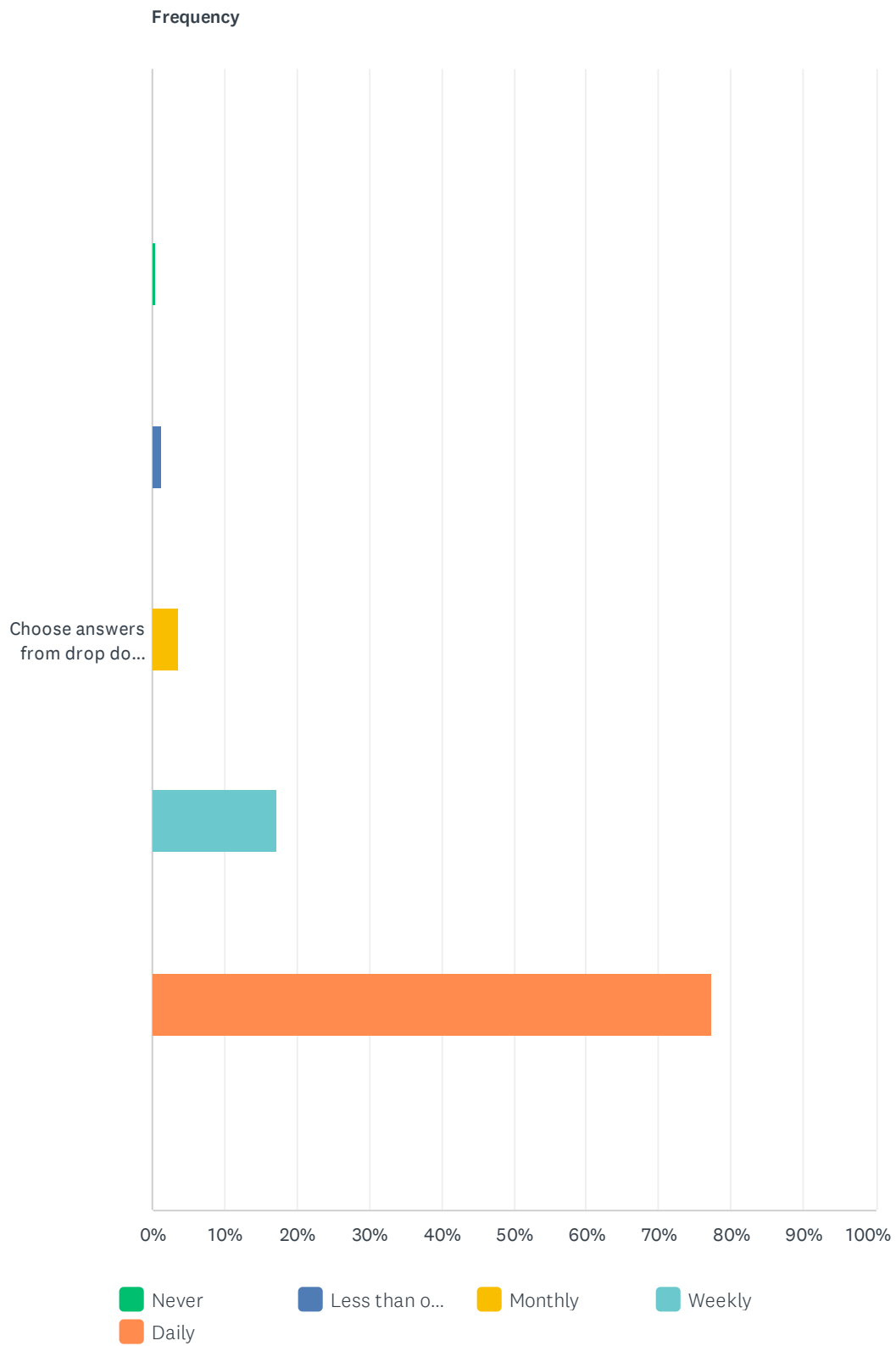
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.25% 1	4.53% 18	40.30% 160	54.91% 218	397

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.56% 6	17.14% 66	47.01% 181	34.29% 132	385

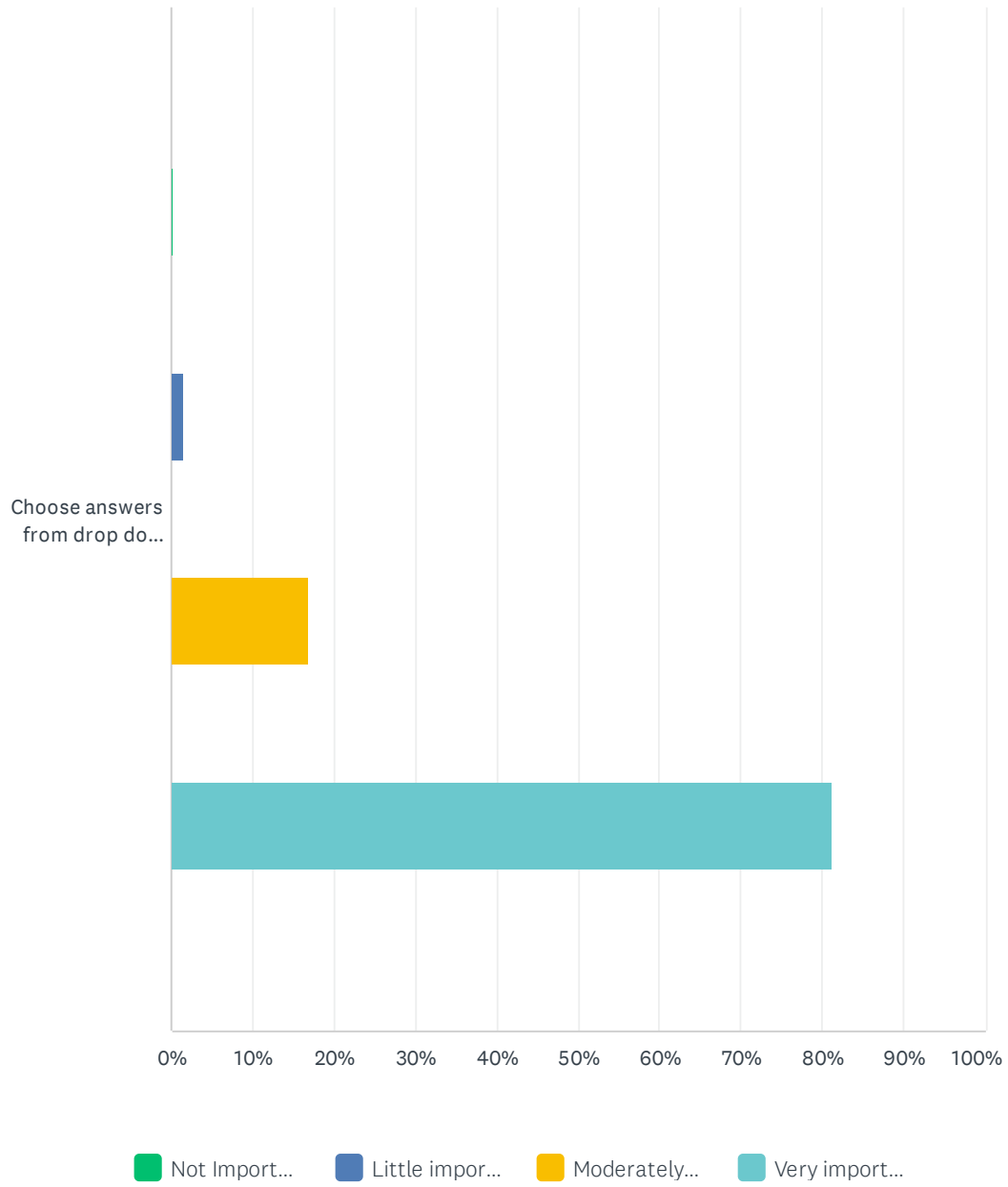
Q44 2.1.2 Using patient-centered ethics and values in complex clinical decision making.

Answered: 407 Skipped: 803



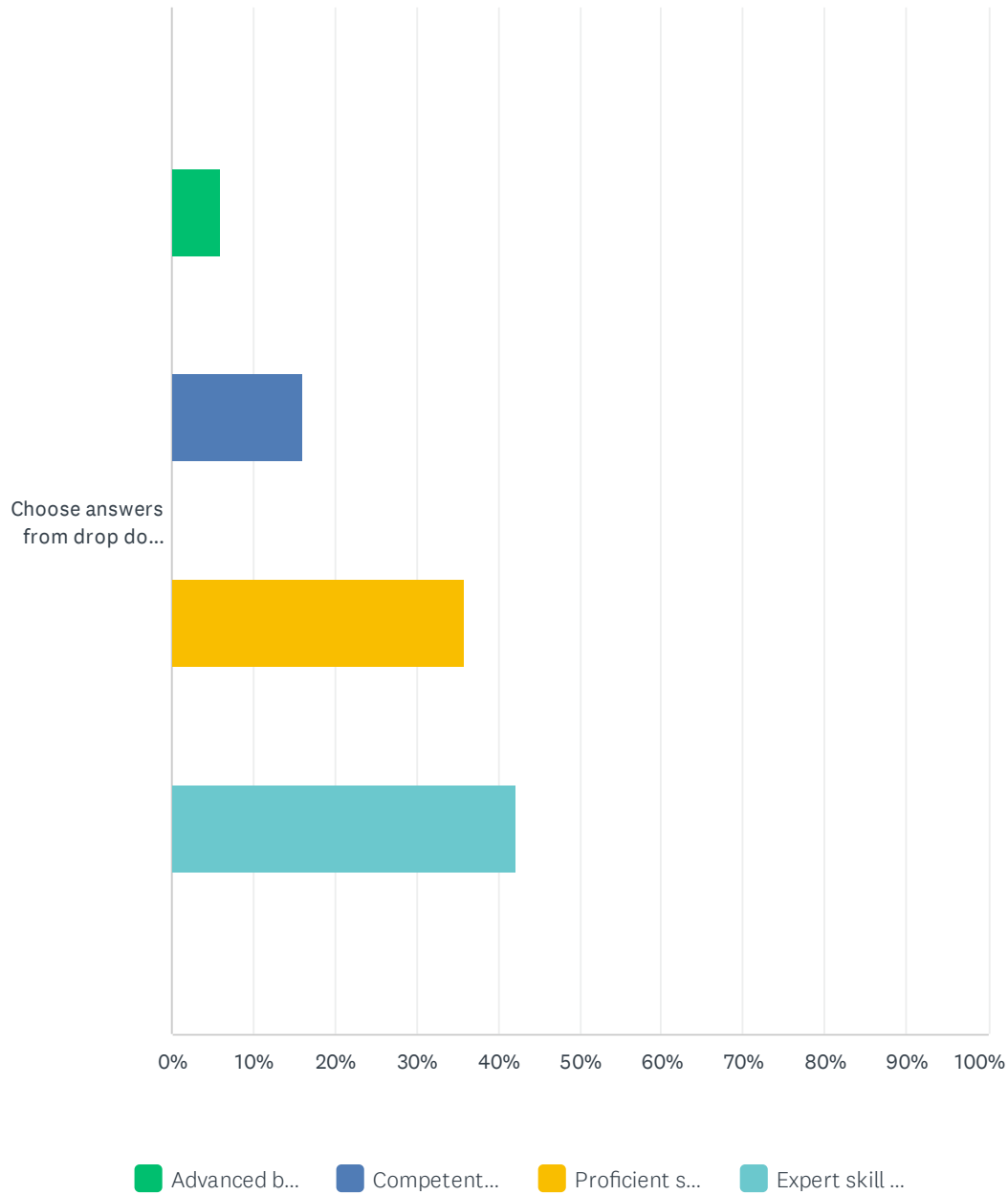
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.49% 2	1.23% 5	3.69% 15	17.20% 70	77.40% 315	407

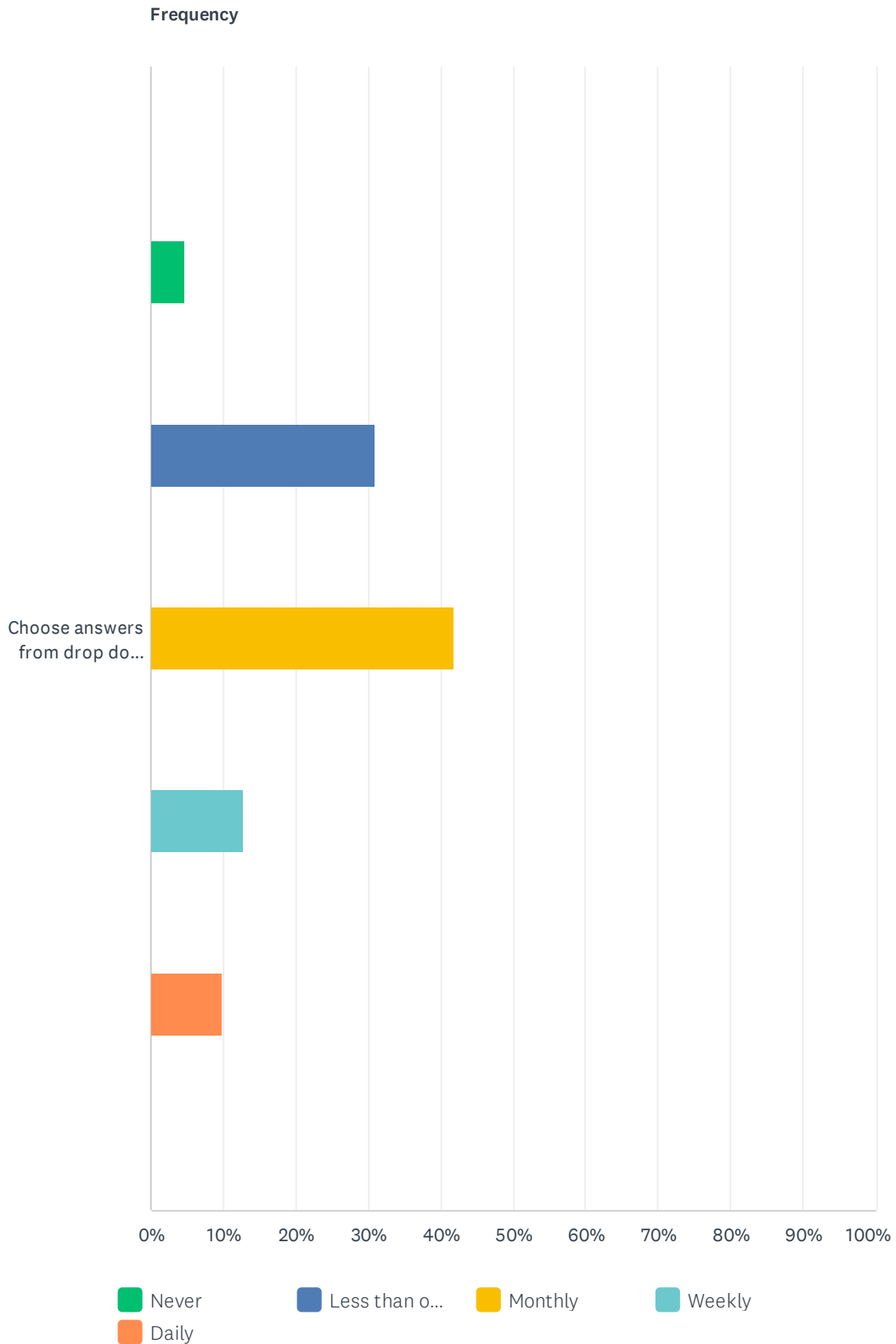
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.25% 1	1.52% 6	16.92% 67	81.31% 322	396

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.02% 23	15.97% 61	35.86% 137	42.15% 161	382

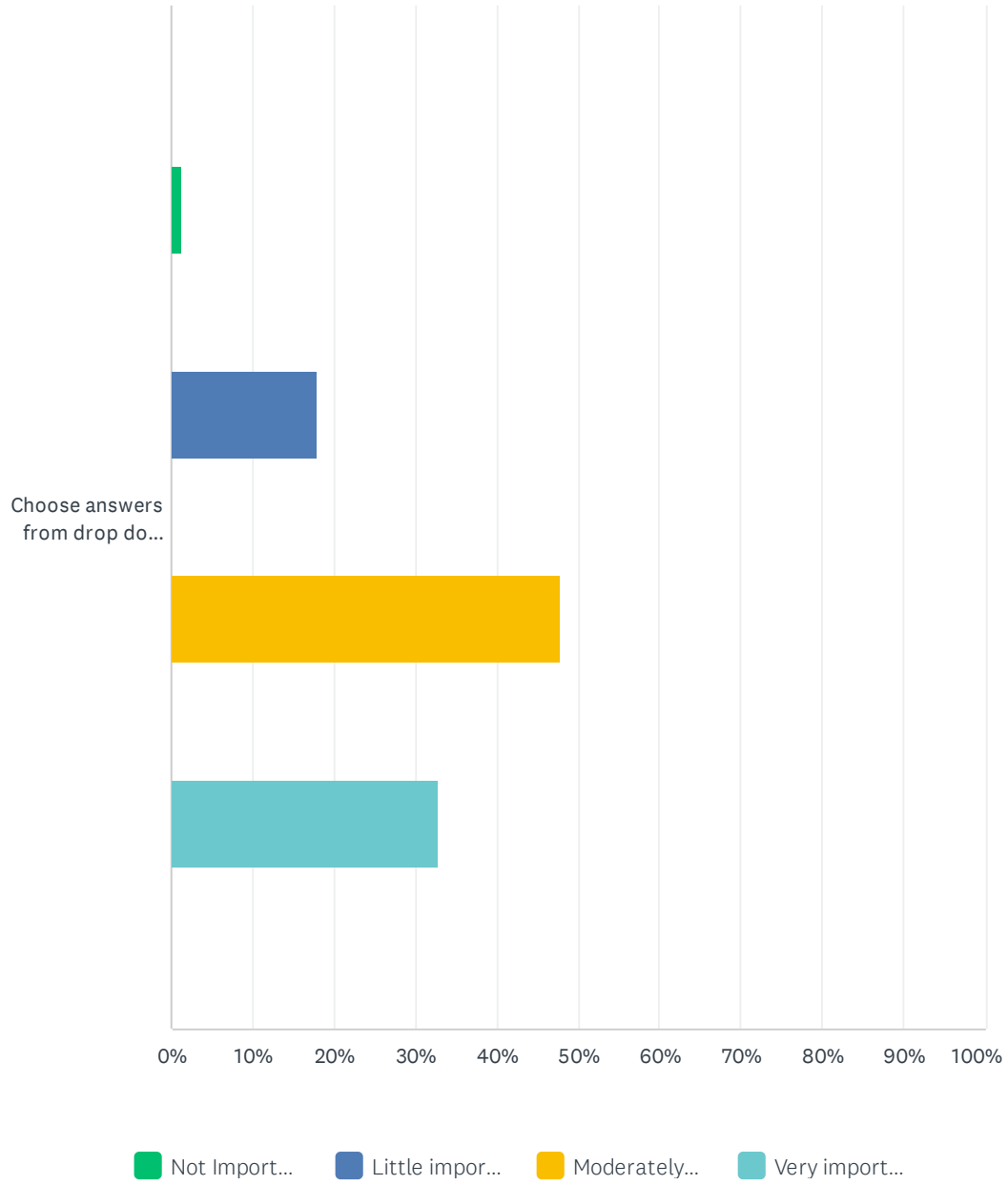
Q45 2.1.3 Maintaining active participation in professional organizations that address issues related to orthopaedic spine care.

Answered: 405 Skipped: 805



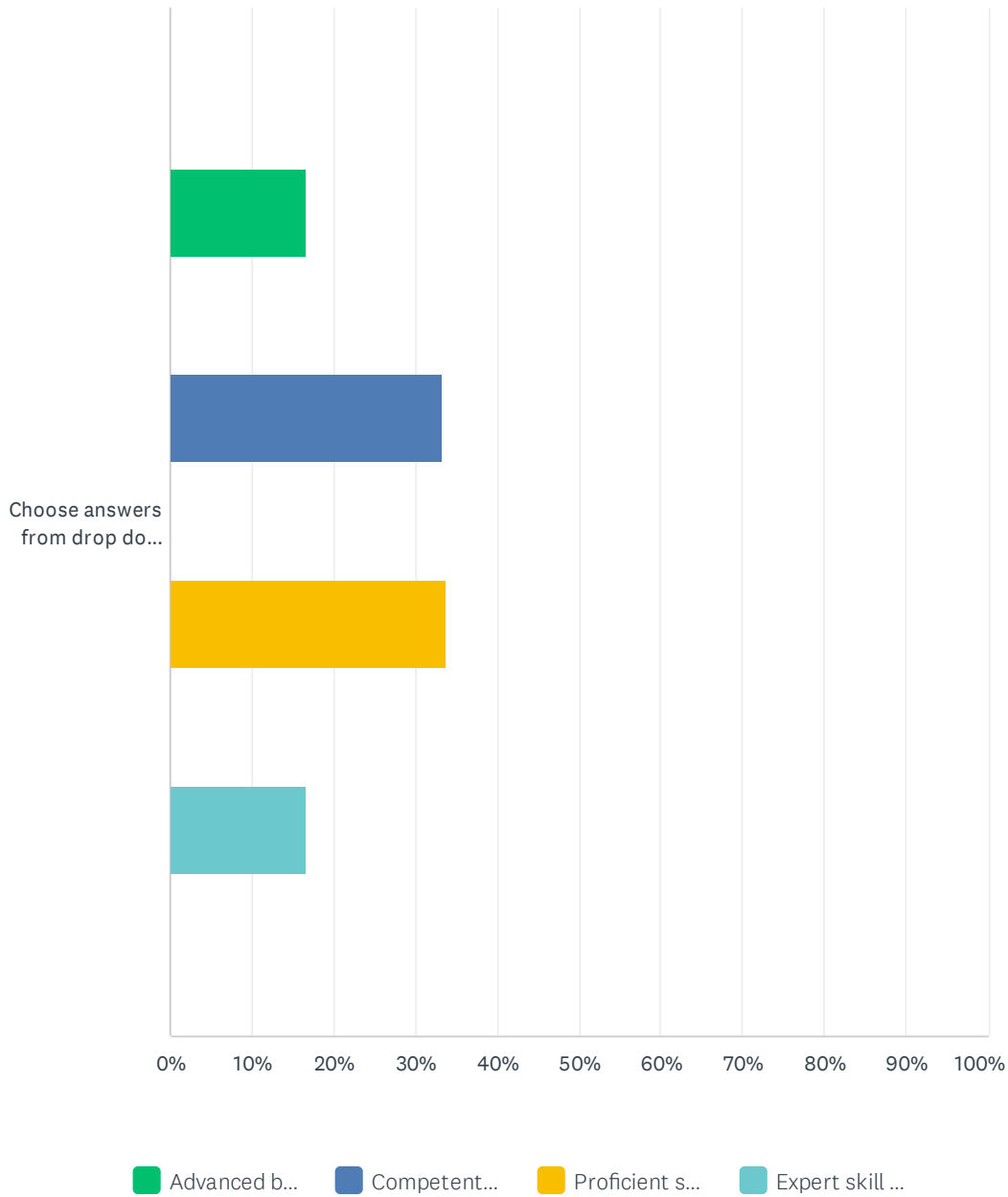
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	4.69% 19	30.86% 125	41.73% 169	12.84% 52	9.88% 40	405

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.27% 5	17.97% 71	47.85% 189	32.91% 130	395

Spine Validation Practice Analysis Survey 2022

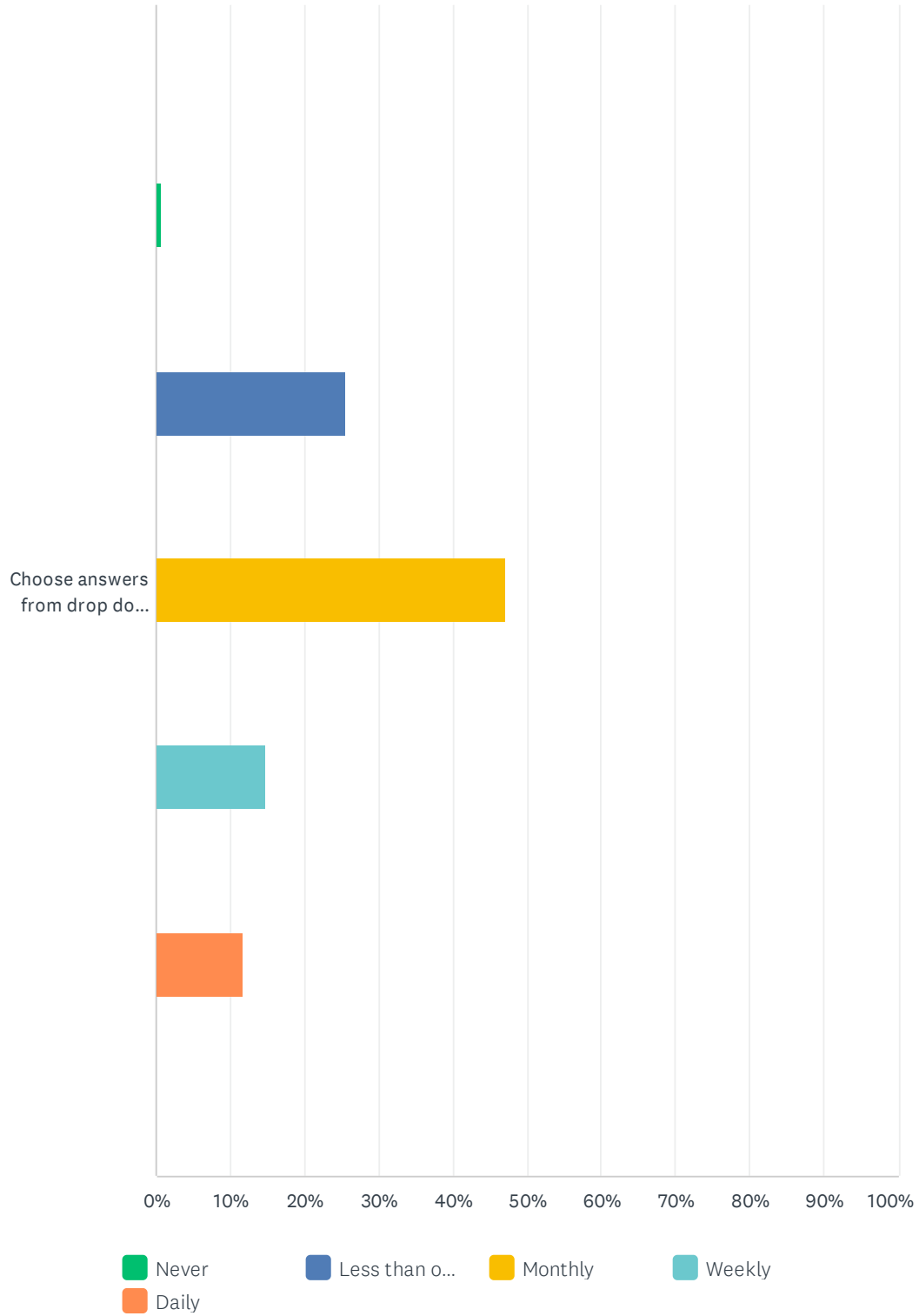
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	16.54% 63	33.33% 127	33.60% 128	16.54% 63	381

Q46 2.1.4 Maintaining state-of-the-art knowledge and skills by seeking own mentors and participating in continuing professional development (e.g., seminars, structured study, journal clubs, etc.).

Answered: 407 Skipped: 803

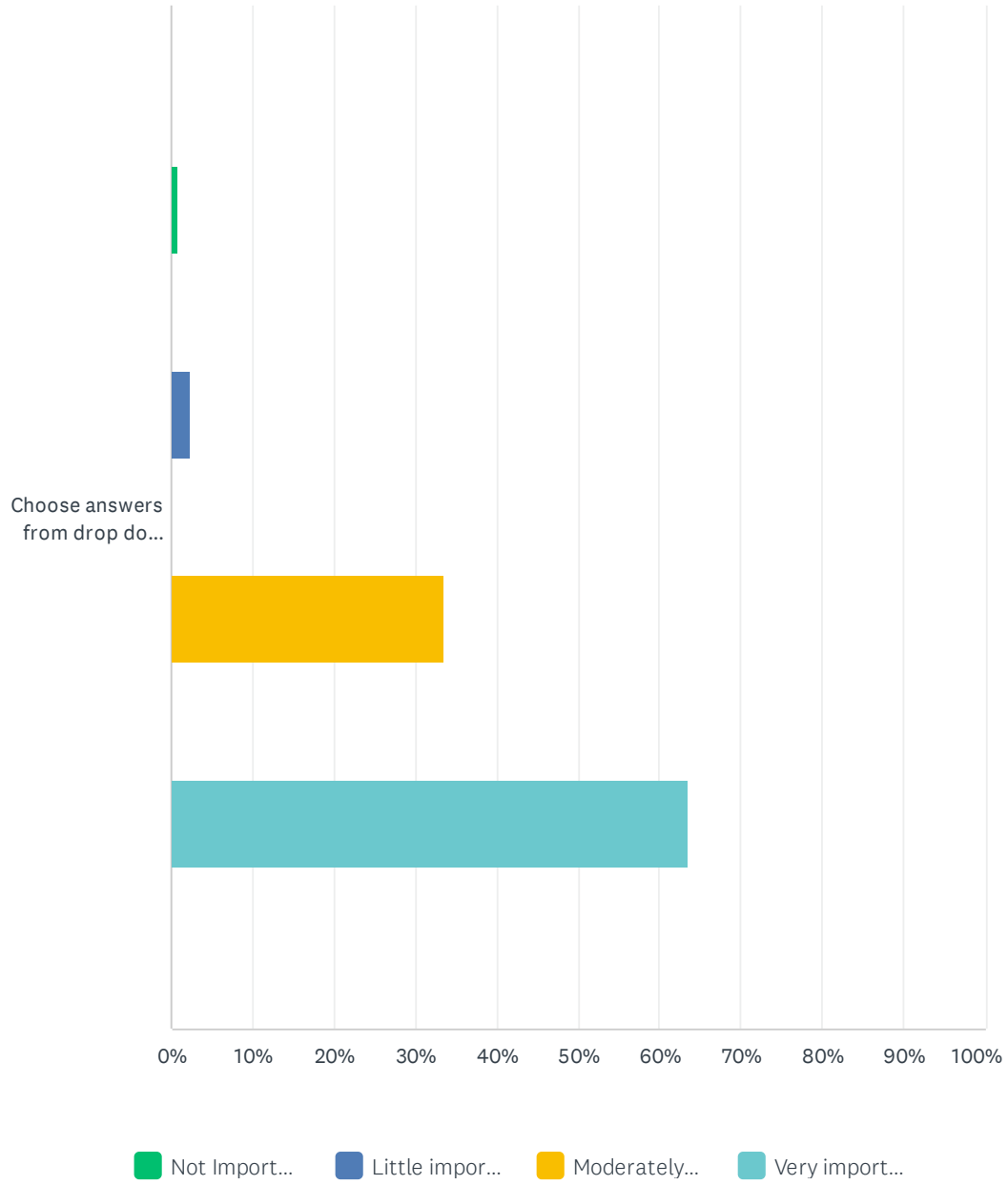
Spine Validation Practice Analysis Survey 2022

Frequency



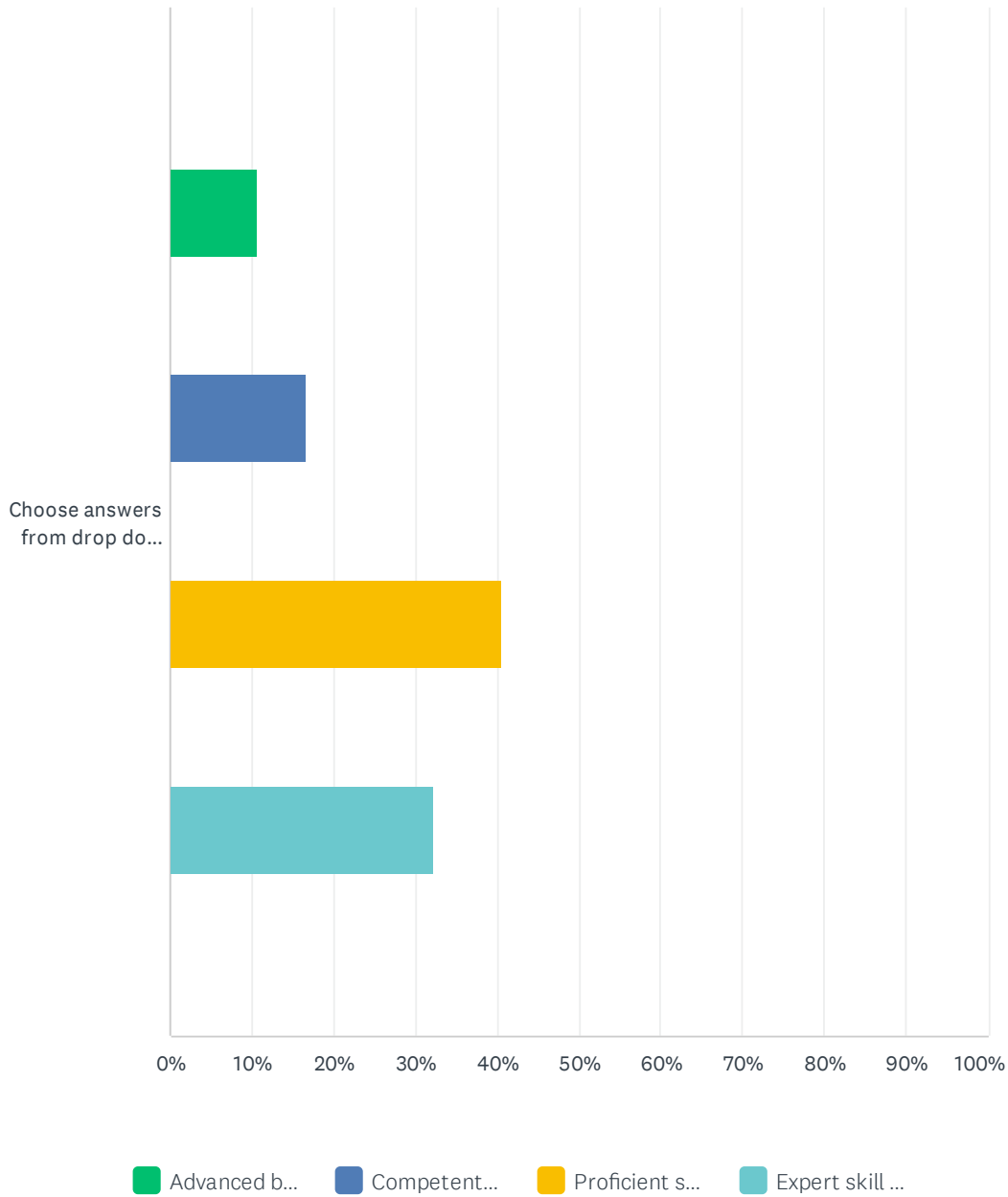
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.74% 3	25.55% 104	47.17% 192	14.74% 60	11.79% 48	407

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.76% 3	2.27% 9	33.50% 133	63.48% 252	397

Spine Validation Practice Analysis Survey 2022

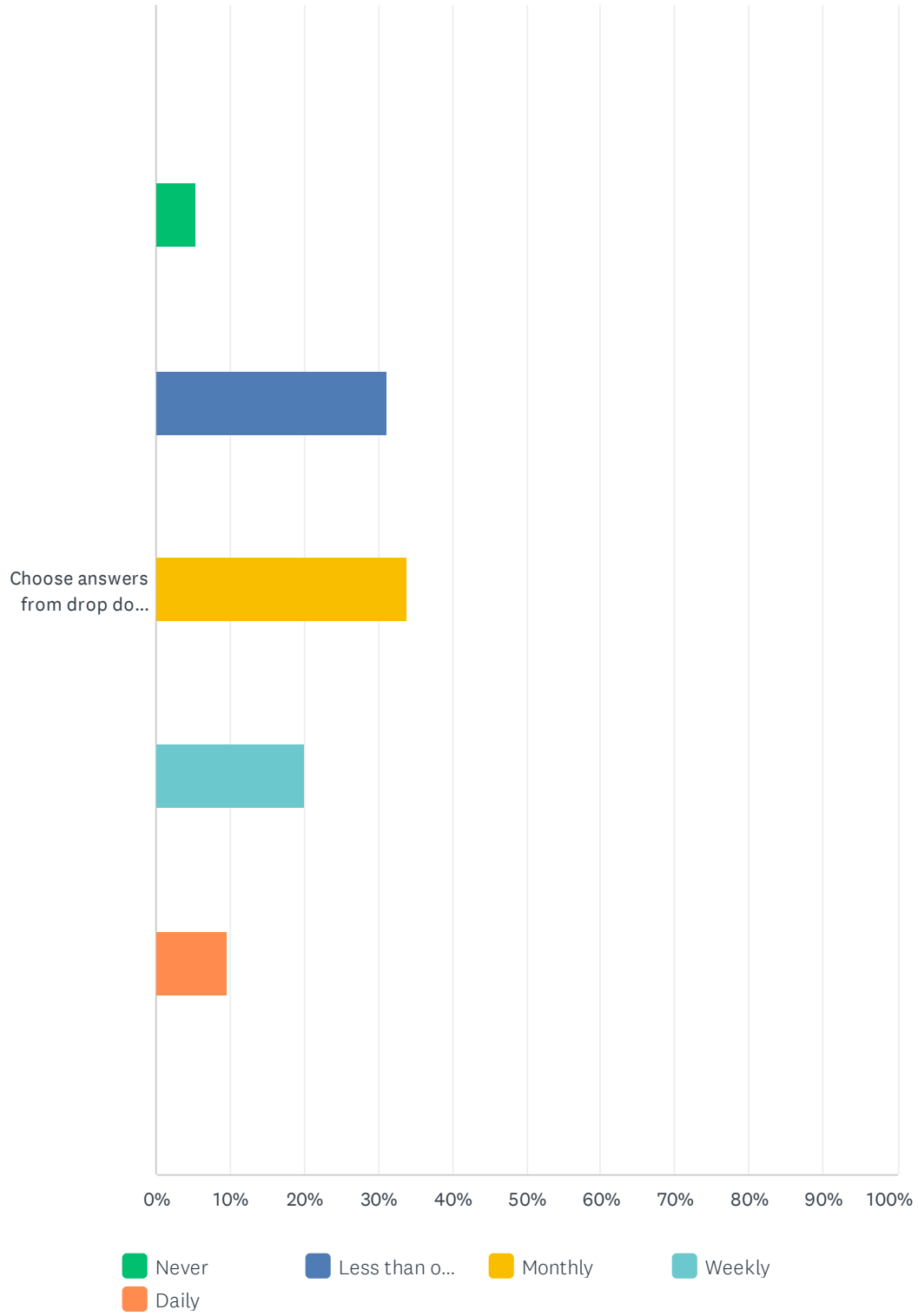
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.70% 41	16.71% 64	40.47% 155	32.11% 123	383

Q47 2.2.1 Representing orthopaedic spine physical therapy and interacting with other professionals and organizations (e.g., inter-professional interaction and mentoring).

Answered: 398 Skipped: 812

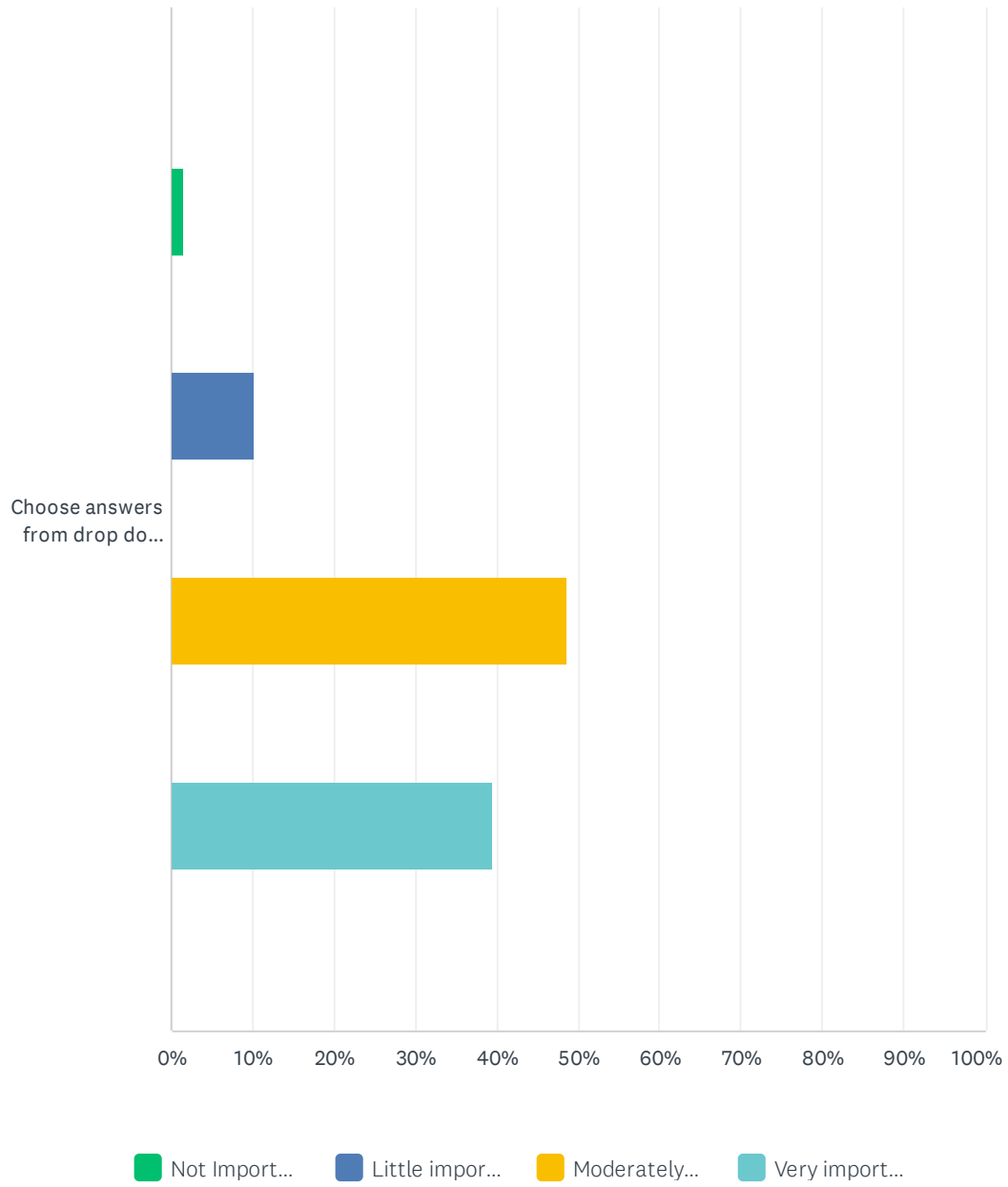
Spine Validation Practice Analysis Survey 2022

Frequency



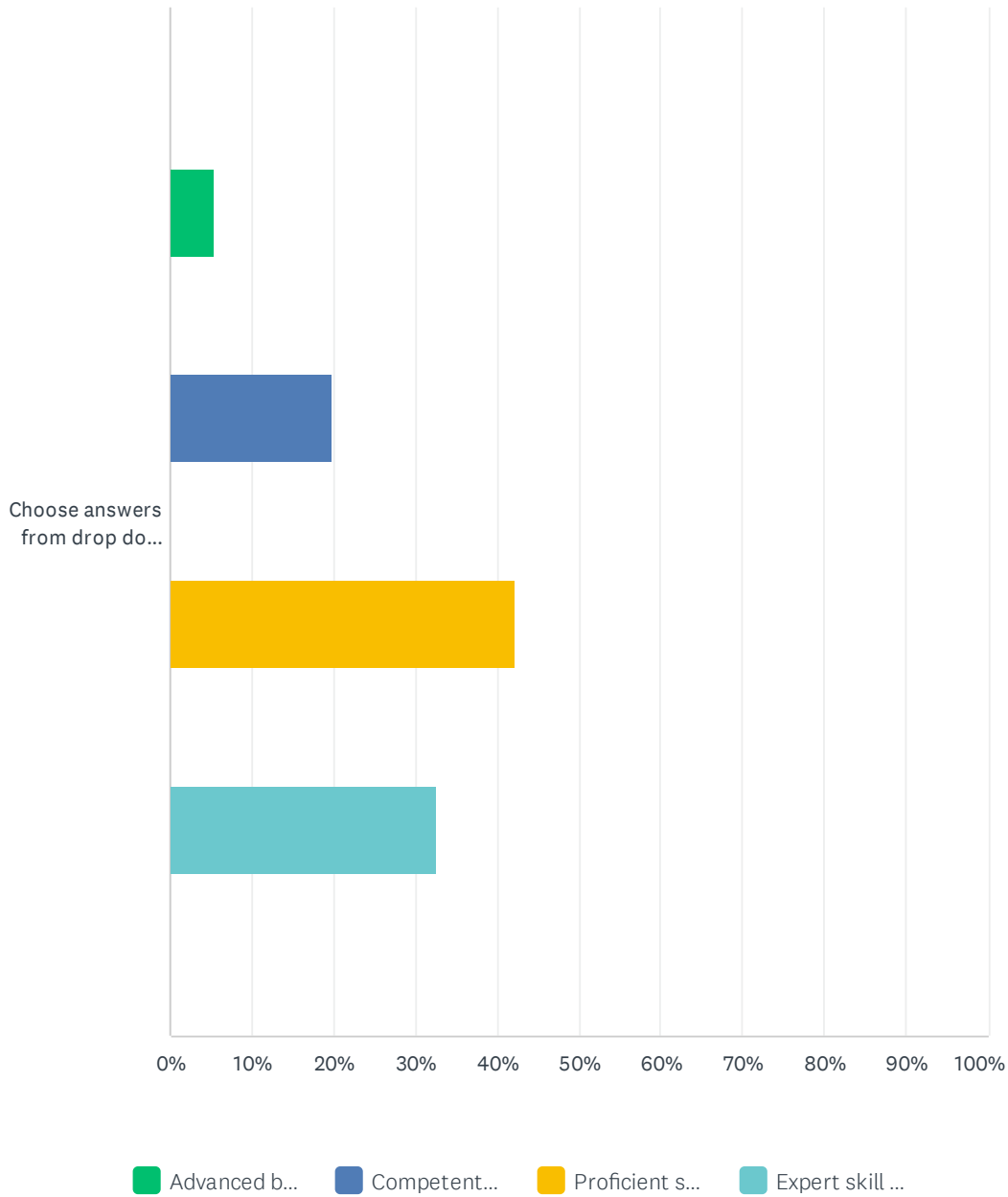
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	5.28% 21	31.16% 124	33.92% 135	20.10% 80	9.55% 38	398

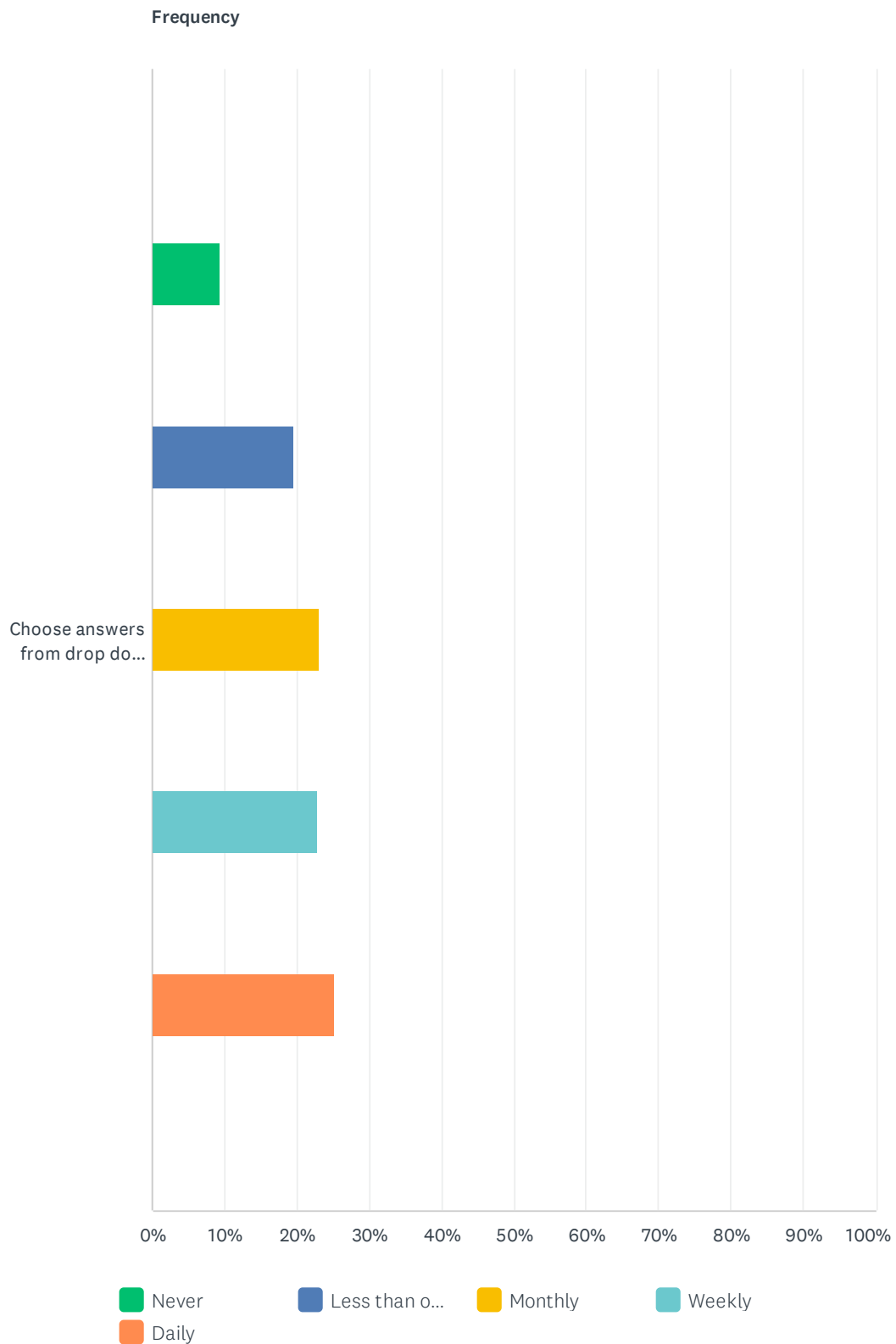
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.55% 6	10.34% 40	48.58% 188	39.53% 153	387

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.38% 20	19.89% 74	42.20% 157	32.53% 121	372

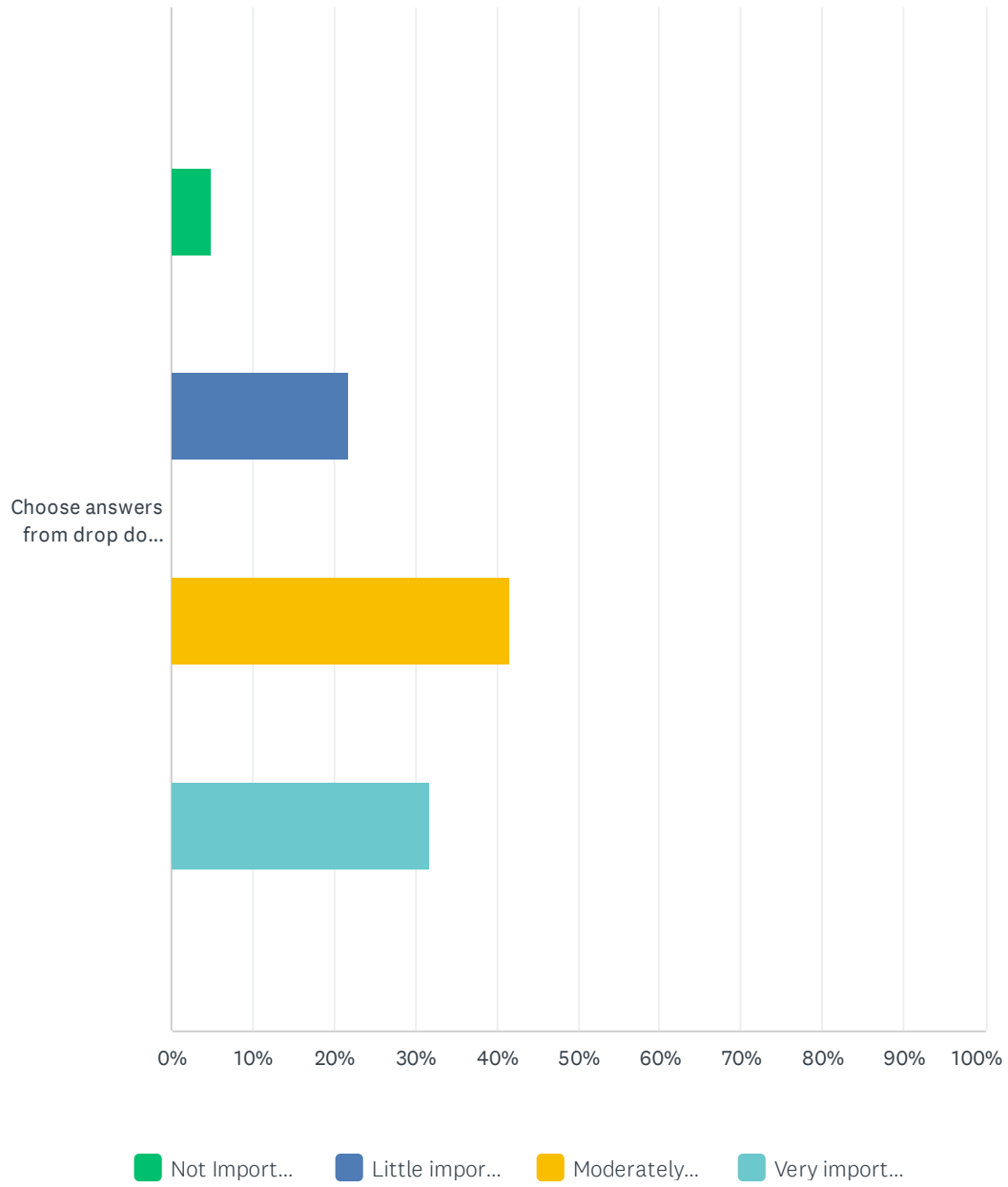
Q48 2.2.2 Planning, directing, organizing, and managing human, technical, environmental, and financial resources effectively and efficiently.

Answered: 396 Skipped: 814



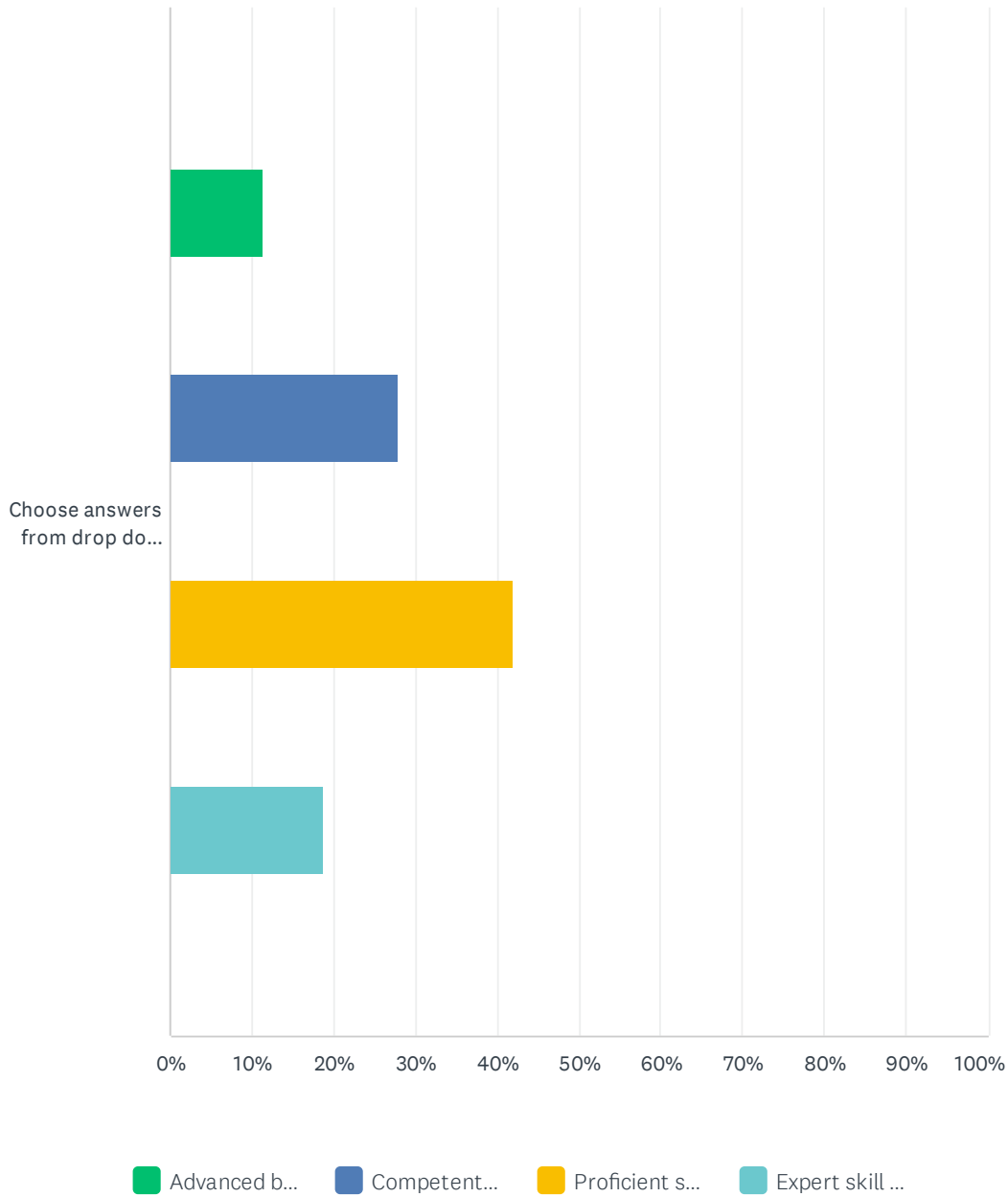
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	9.34% 37	19.70% 78	22.98% 91	22.73% 90	25.25% 100	396

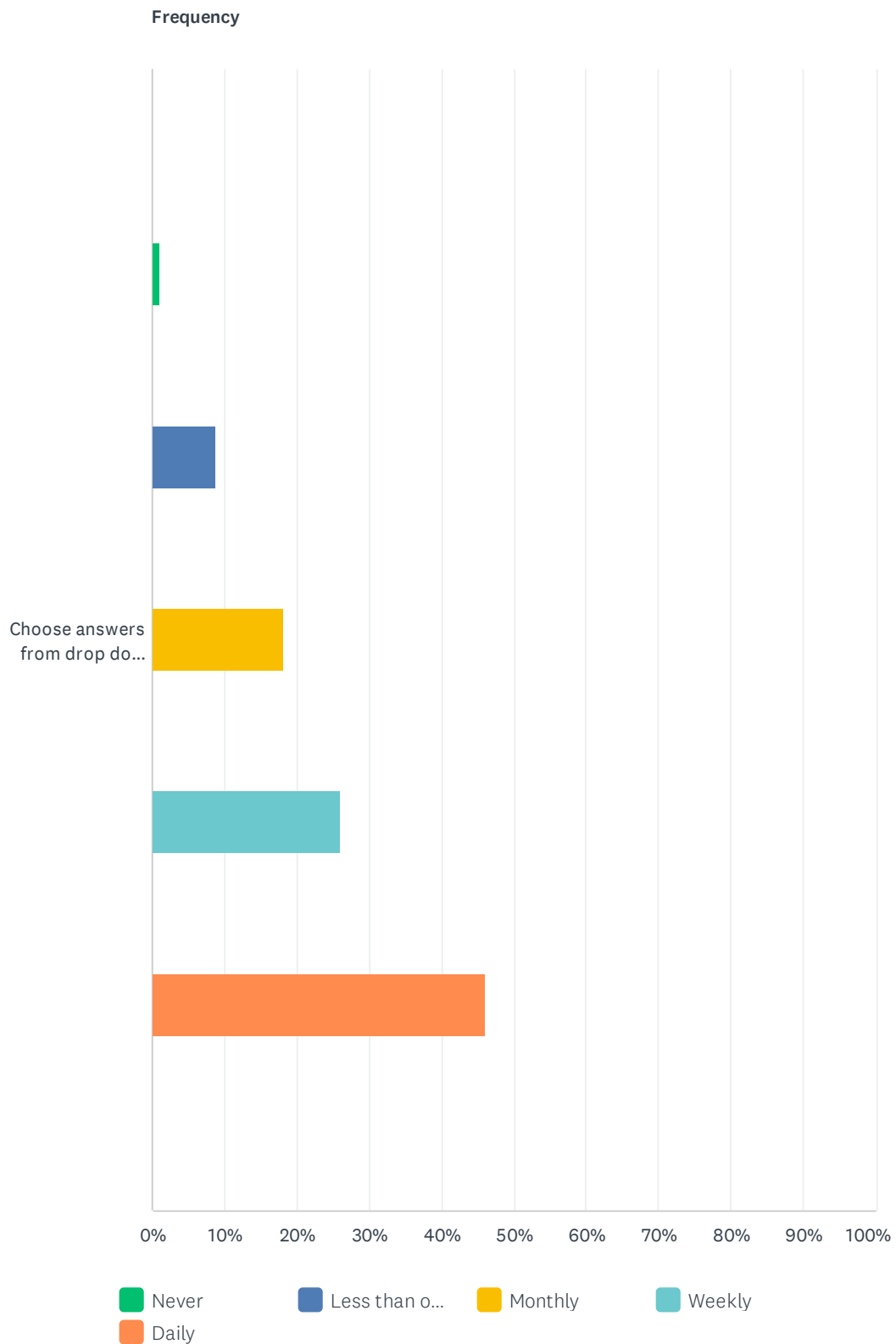
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	4.96% 19	21.67% 83	41.51% 159	31.85% 122	383

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.38% 42	27.91% 103	42.01% 155	18.70% 69	369

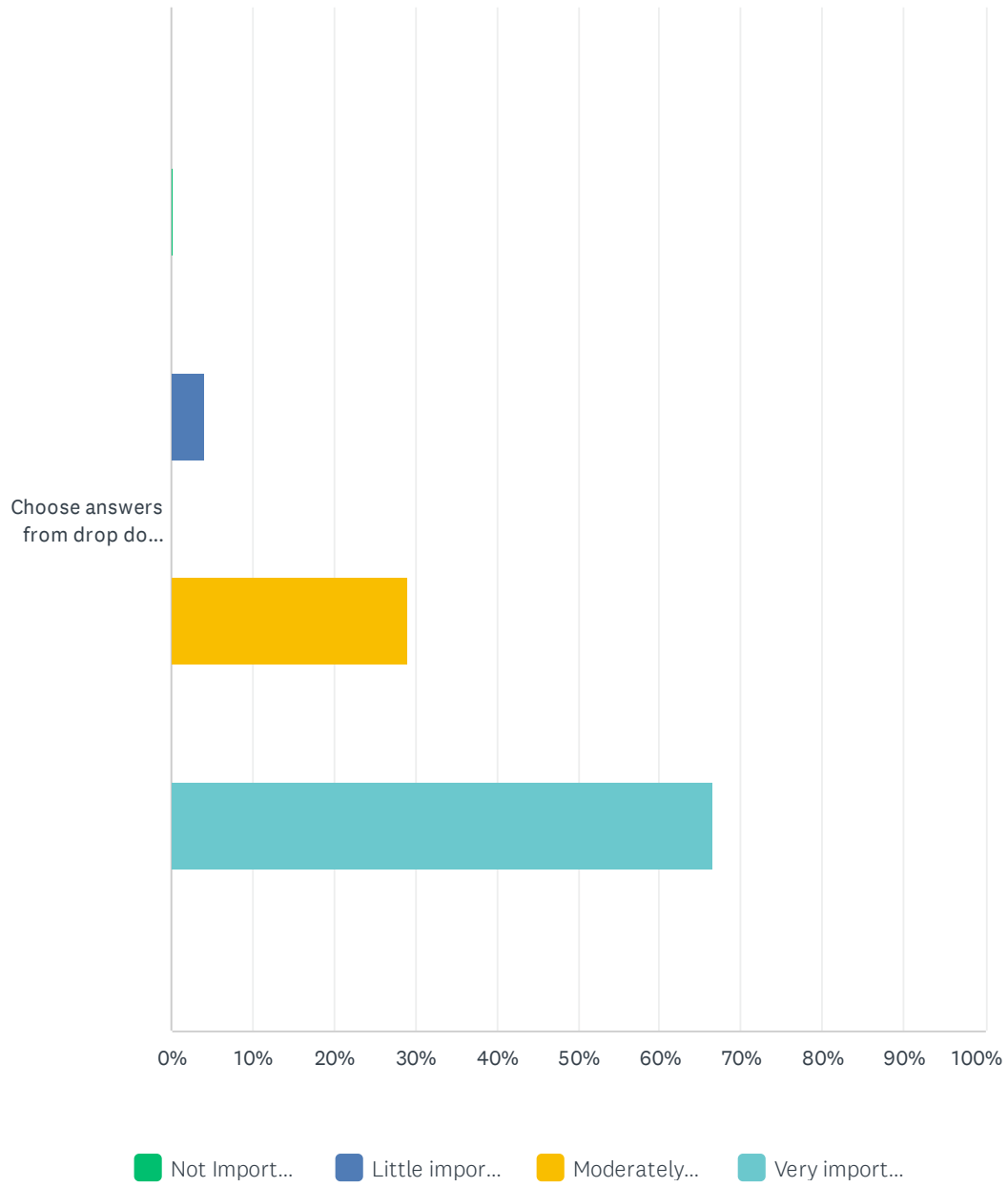
Q49 2.2.3 Modeling and facilitating the translation of evidence into clinical practice as it relates to orthopaedic spine care.

Answered: 397 Skipped: 813



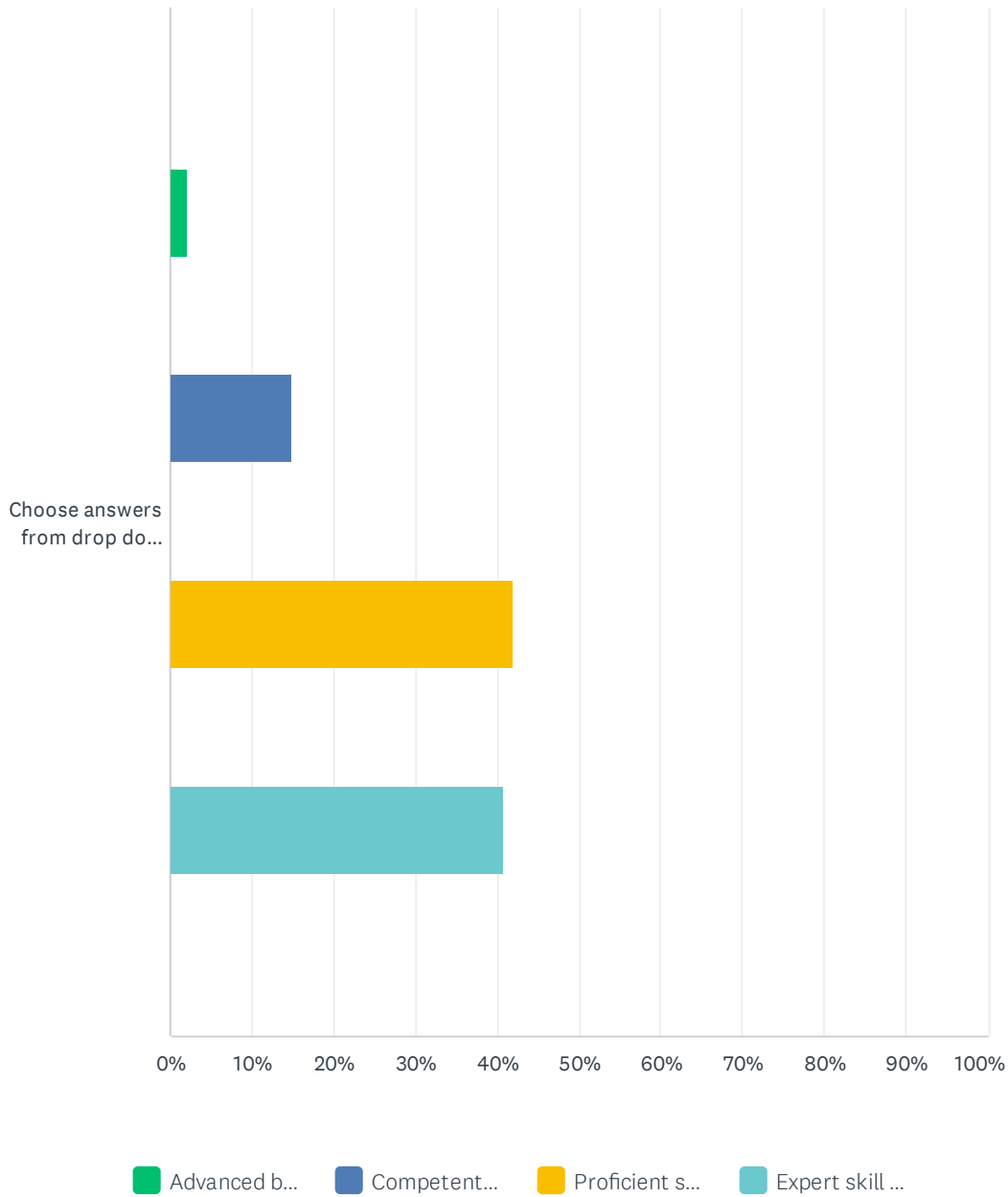
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.01% 4	8.82% 35	18.14% 72	25.94% 103	46.10% 183	397

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.26% 1	4.15% 16	29.02% 112	66.58% 257	386

Spine Validation Practice Analysis Survey 2022

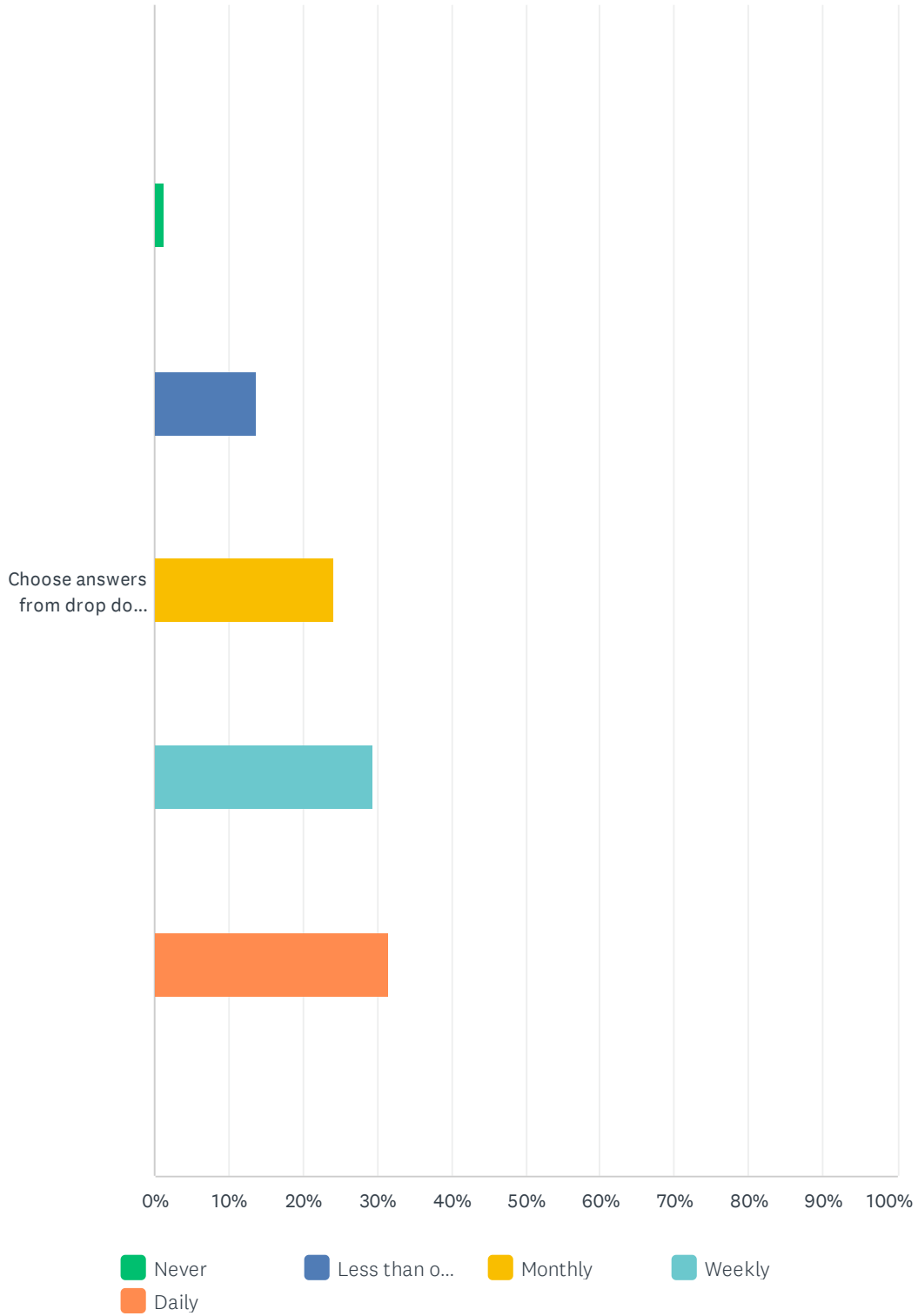
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.14% 8	15.01% 56	42.09% 157	40.75% 152	373

Q50 2.2.4 Acting as an expert resource for peers in the clinic and community for guidance on complex cases and problem solving/clinical reasoning as it relates to orthopaedic spine care.

Answered: 397 Skipped: 813

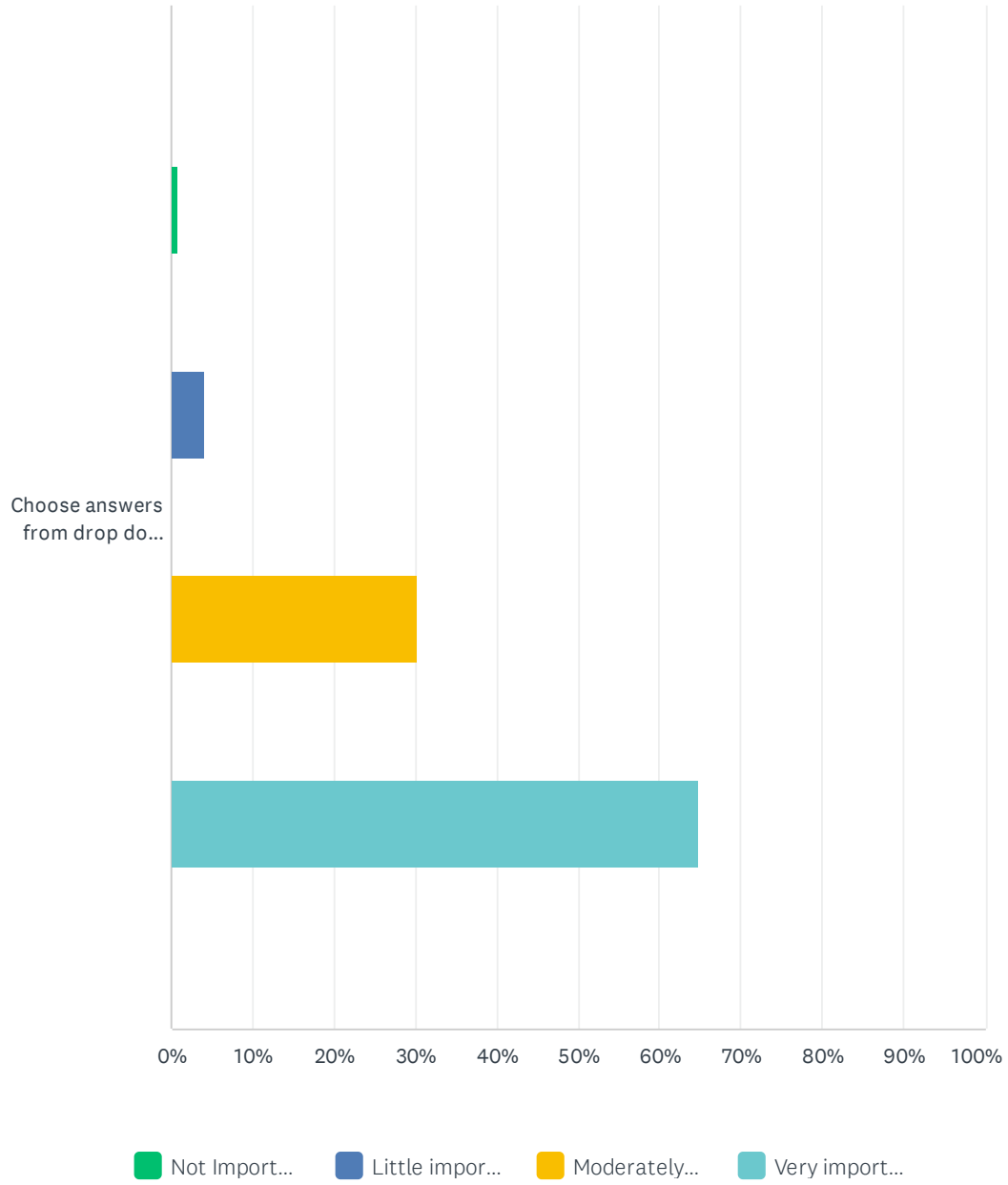
Spine Validation Practice Analysis Survey 2022

Frequency



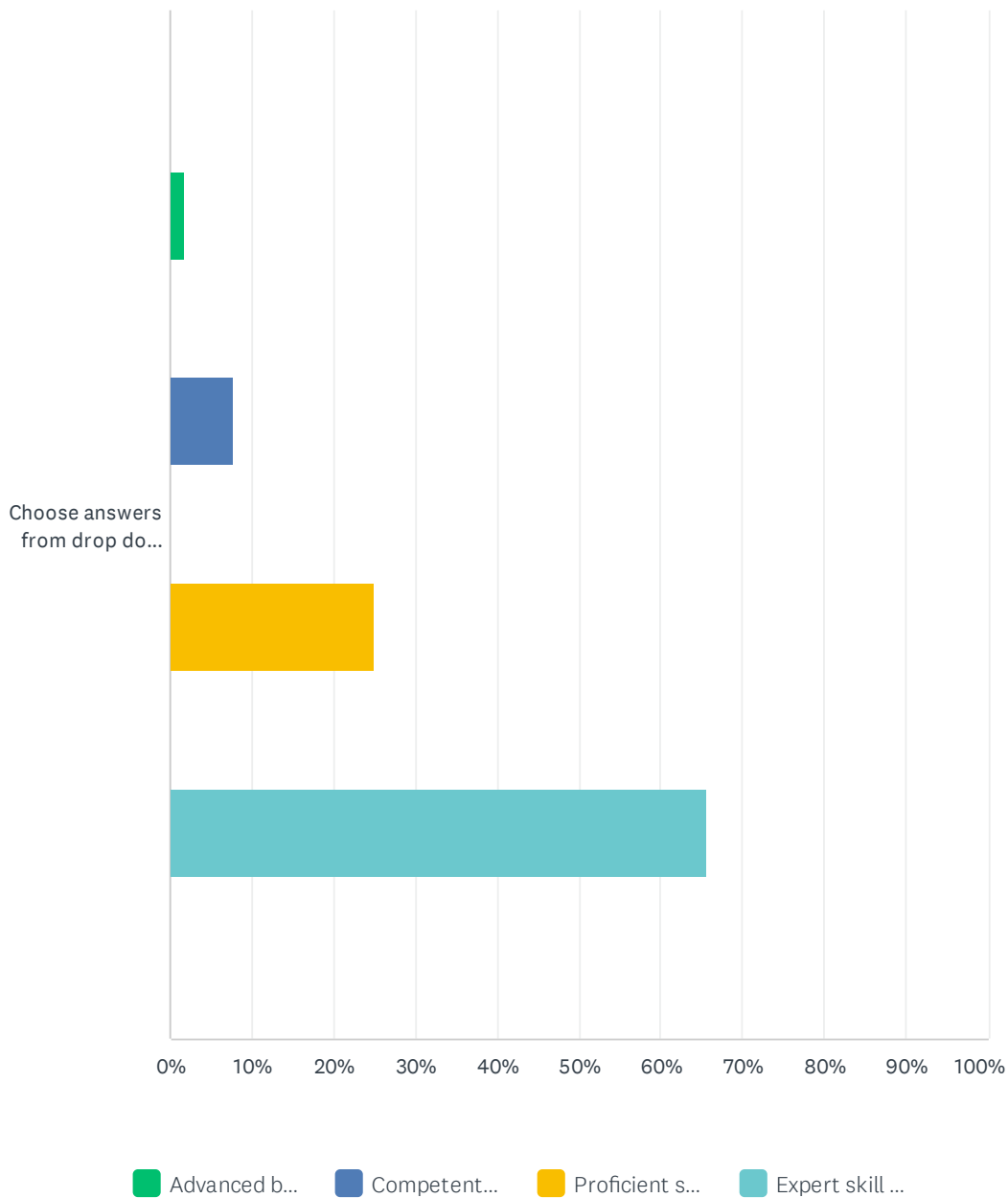
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.26% 5	13.60% 54	24.18% 96	29.47% 117	31.49% 125	397

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.78% 3	4.13% 16	30.23% 117	64.86% 251	387

Spine Validation Practice Analysis Survey 2022

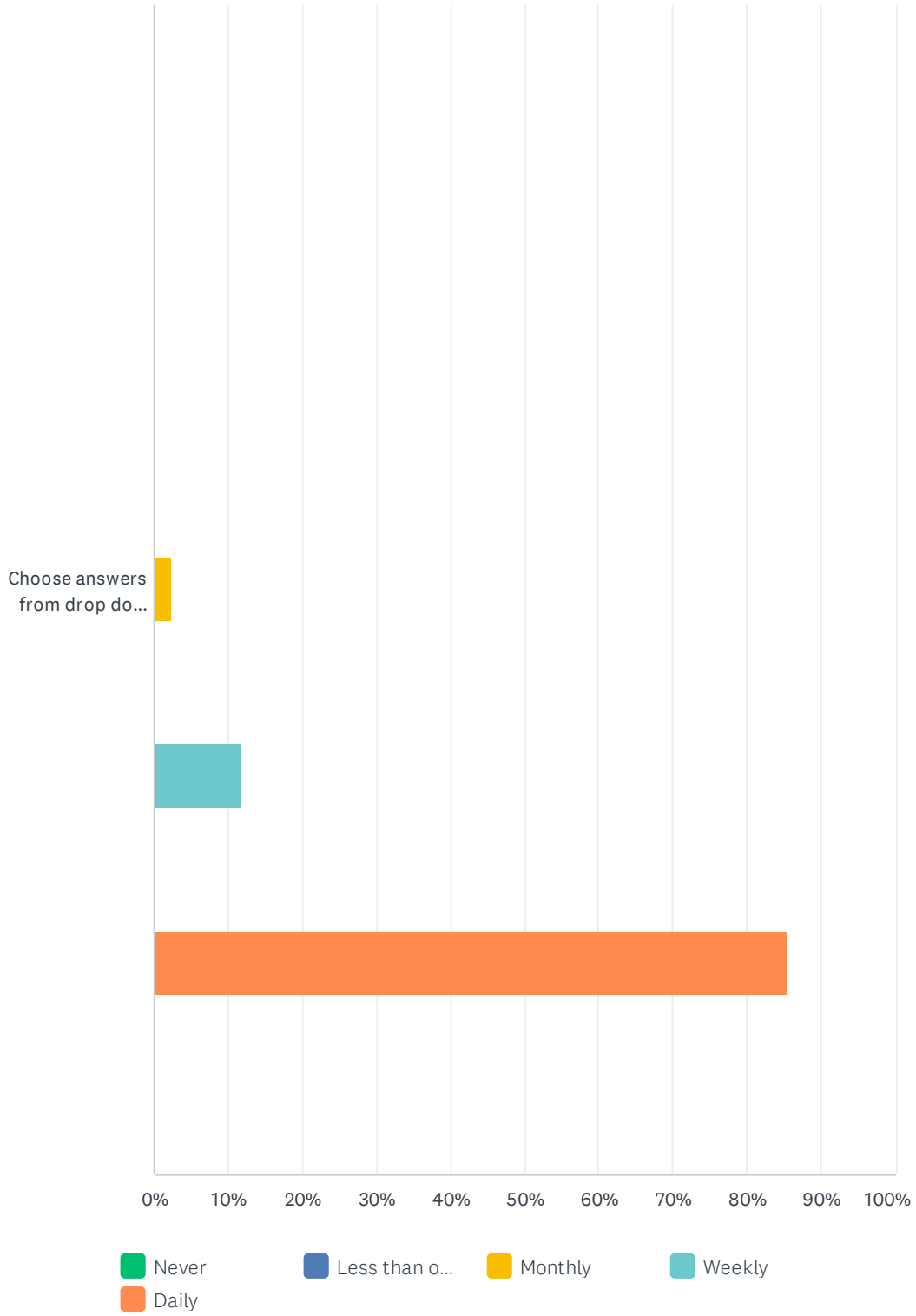
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.61% 6	7.77% 29	24.93% 93	65.68% 245	373

Q51 2.3.1 Empowering patients with orthopaedic spine conditions in the management of their own health (e.g., providing patients confidence to manage future occurrences of spine-related pain).

Answered: 381 Skipped: 829

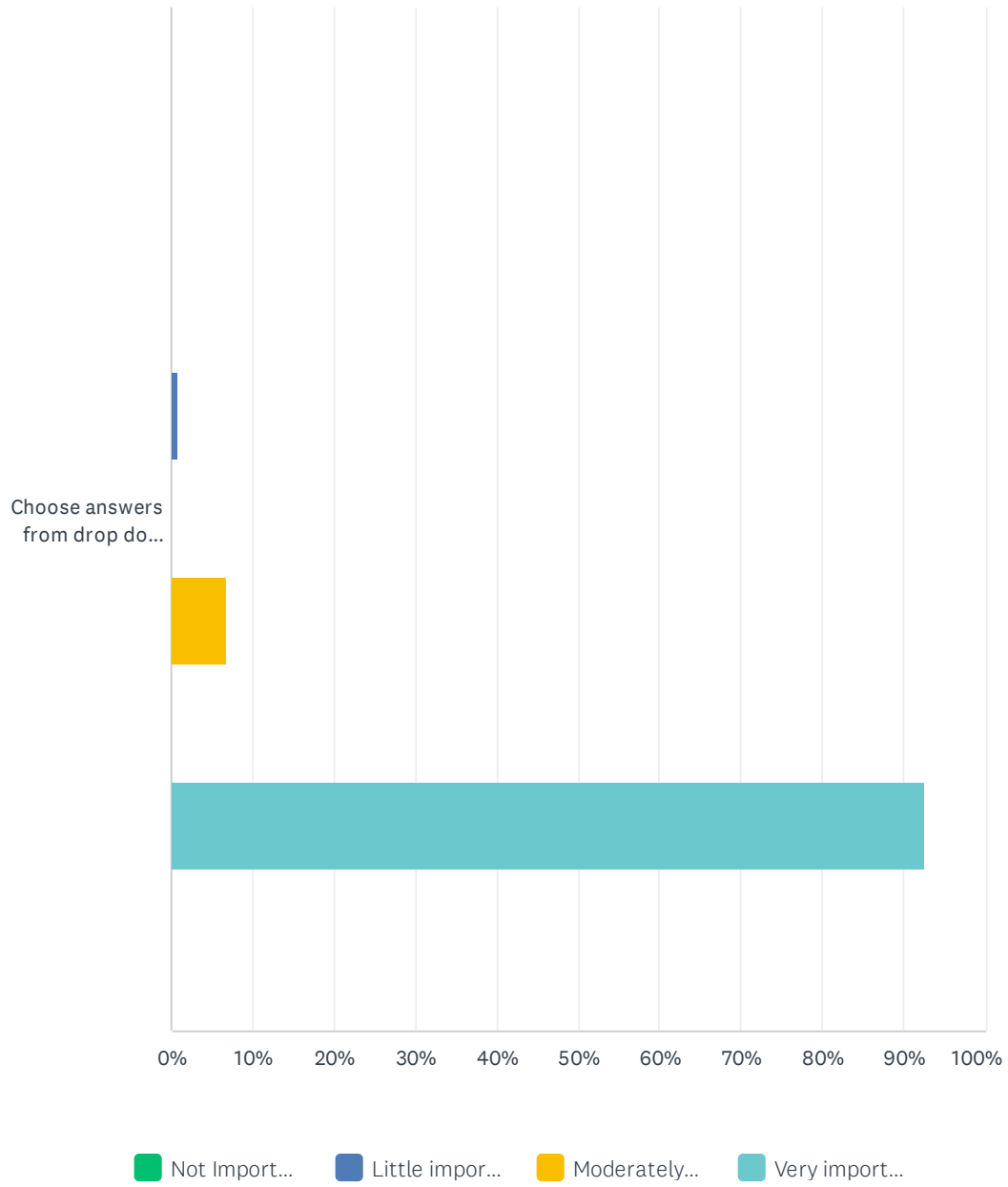
Spine Validation Practice Analysis Survey 2022

Frequency



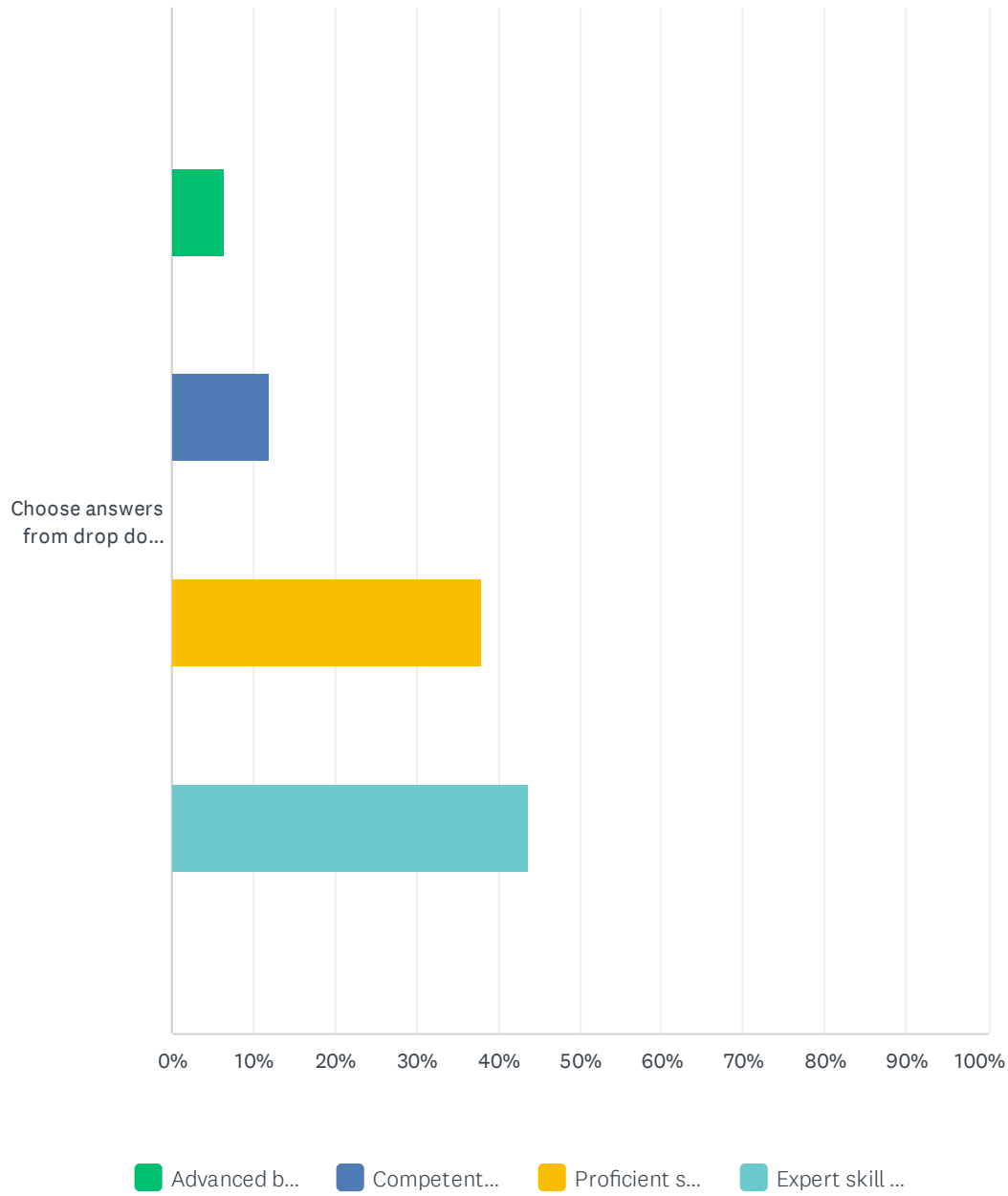
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.26% 1	2.36% 9	11.81% 45	85.56% 326	381

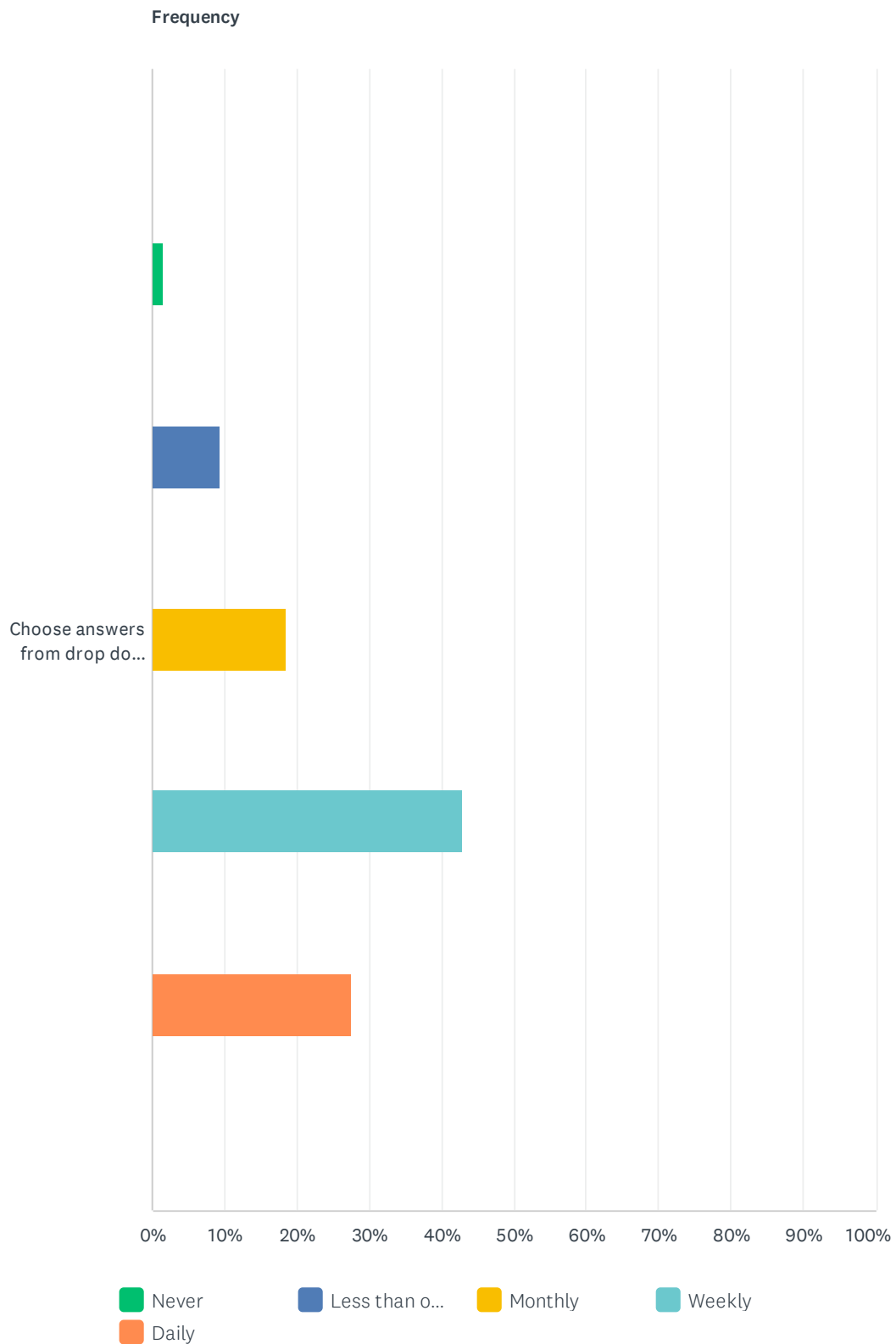
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.81% 3	6.74% 25	92.45% 343	371

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.41% 23	11.98% 43	37.88% 136	43.73% 157	359

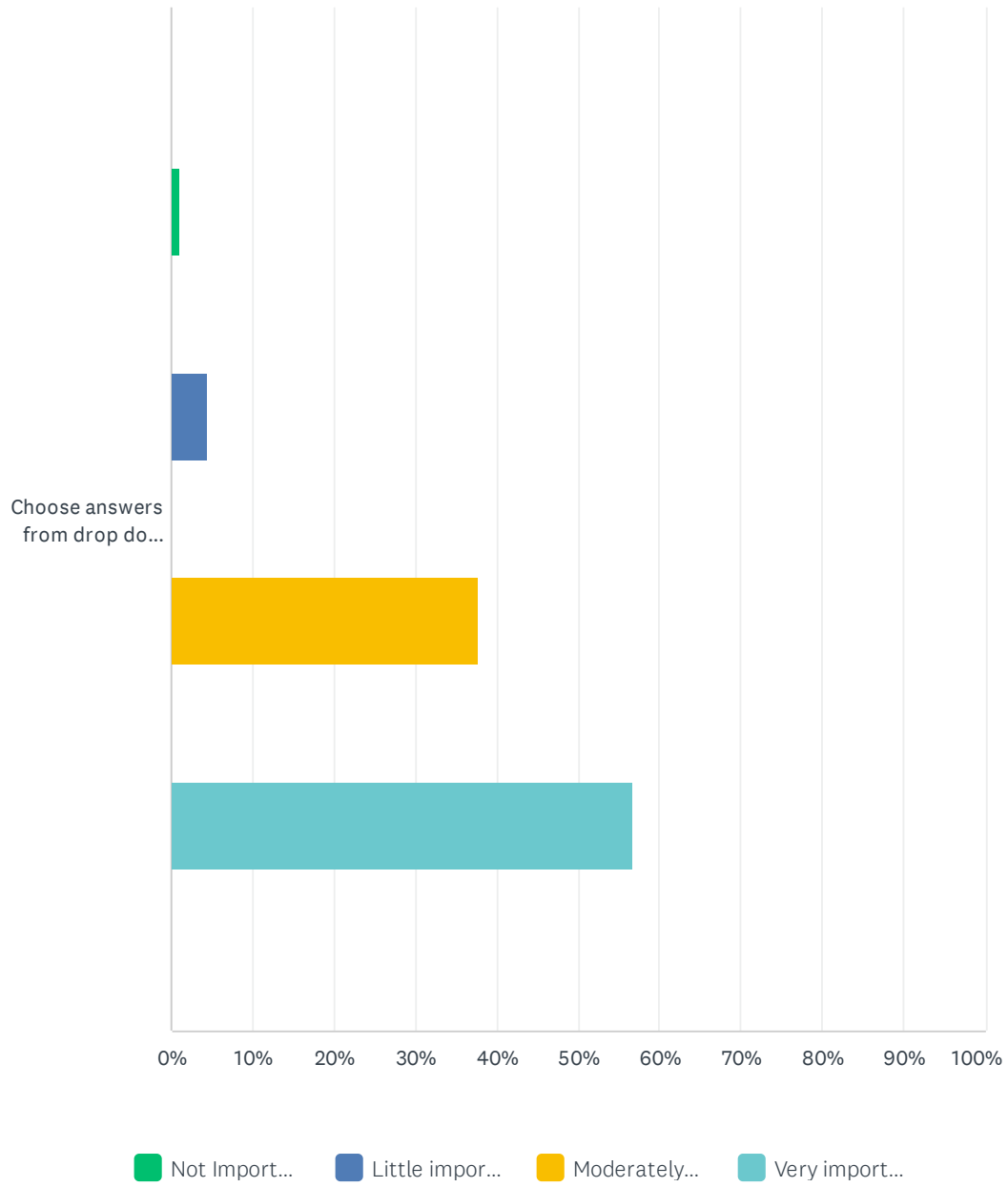
Q52 2.3.2 Facilitating collaborative and multidisciplinary team management and transition of care for individuals with orthopaedic spine conditions.

Answered: 382 Skipped: 828



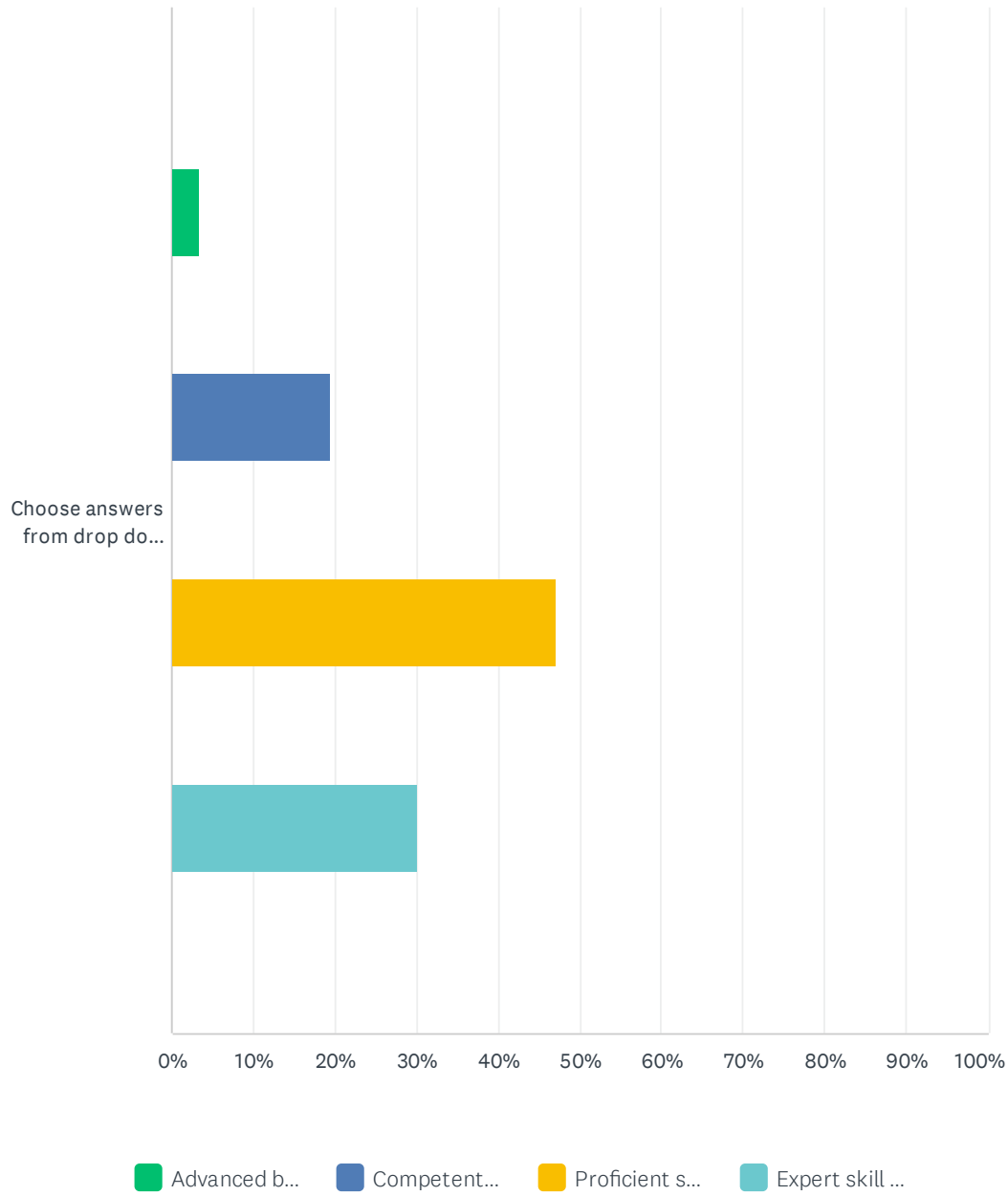
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.57% 6	9.42% 36	18.59% 71	42.93% 164	27.49% 105	382

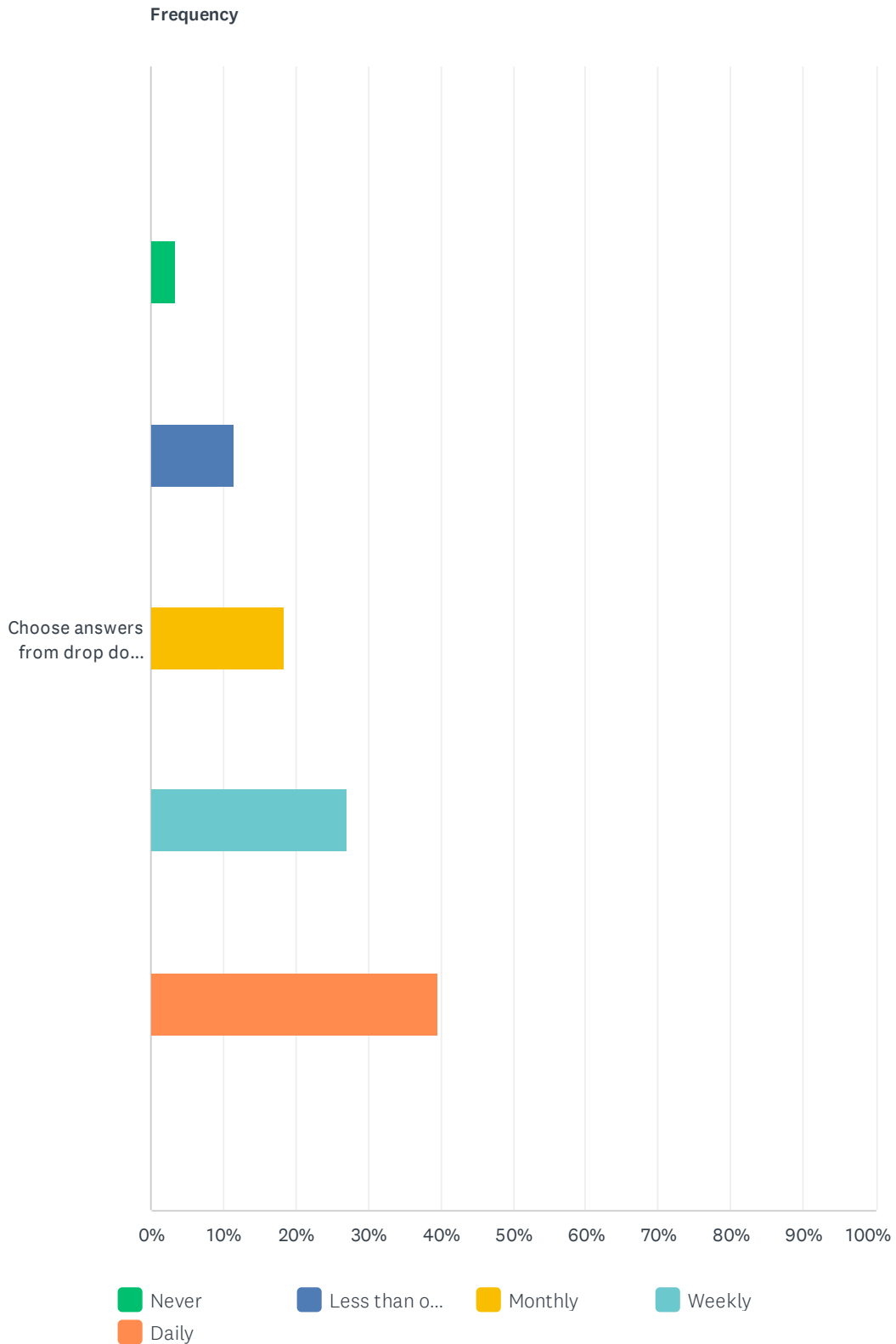
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.08% 4	4.57% 17	37.63% 140	56.72% 211	372

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.33% 12	19.44% 70	47.22% 170	30.00% 108	360

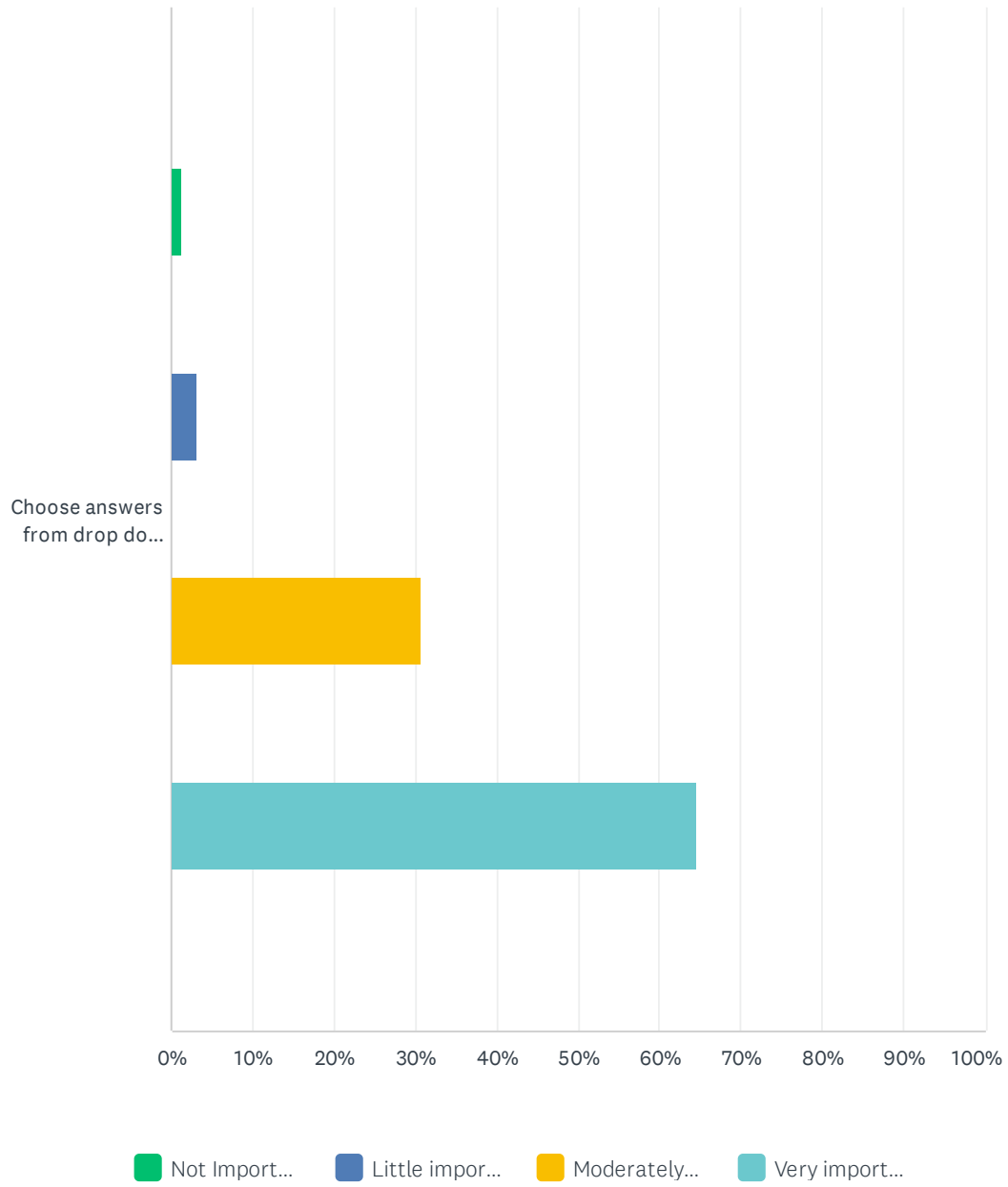
Q53 2.4.1 Promoting the orthopaedic spine physical therapist as the first contact provider in musculoskeletal spine pathology.

Answered: 381 Skipped: 829



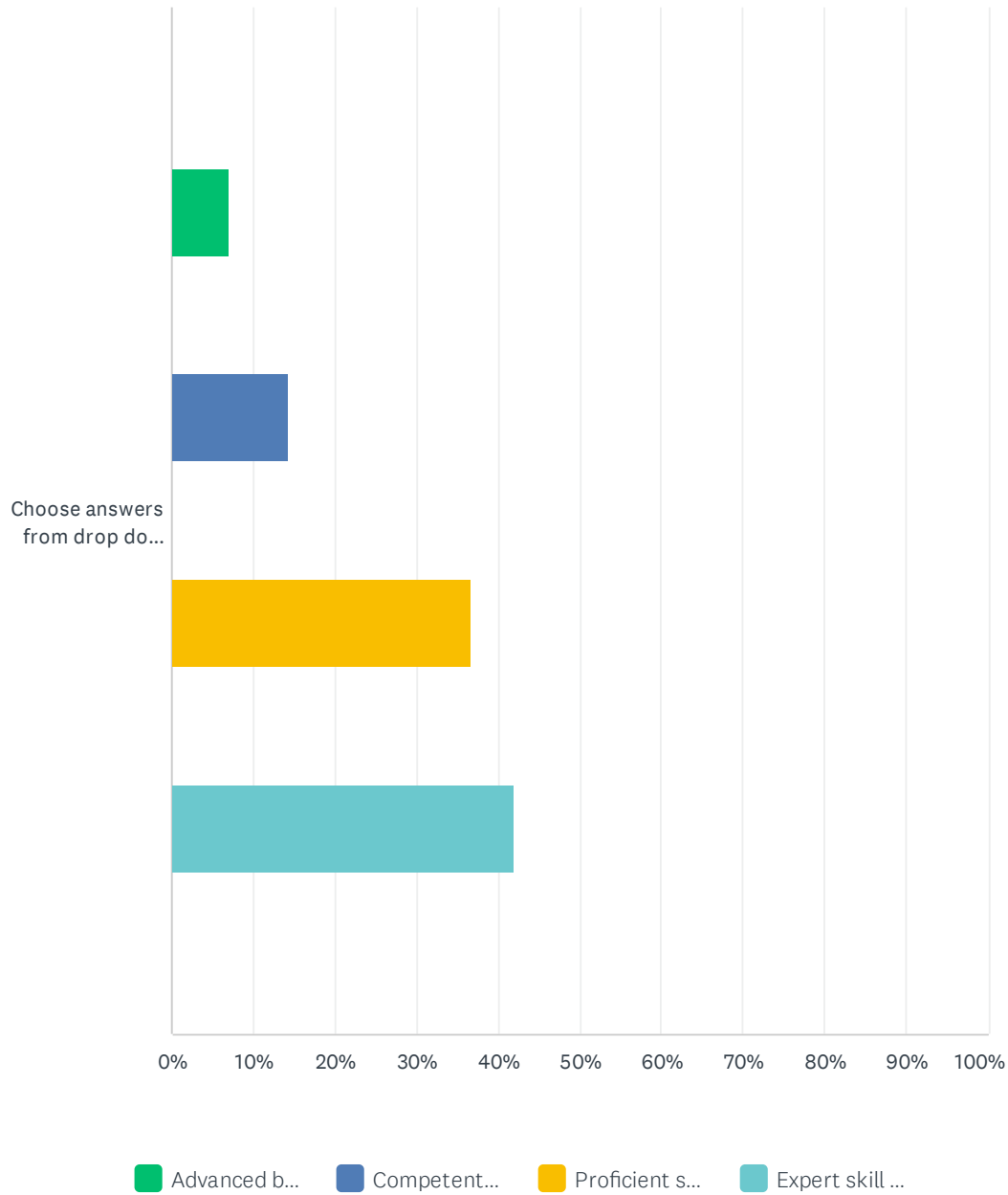
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.41% 13	11.55% 44	18.37% 70	27.03% 103	39.63% 151	381

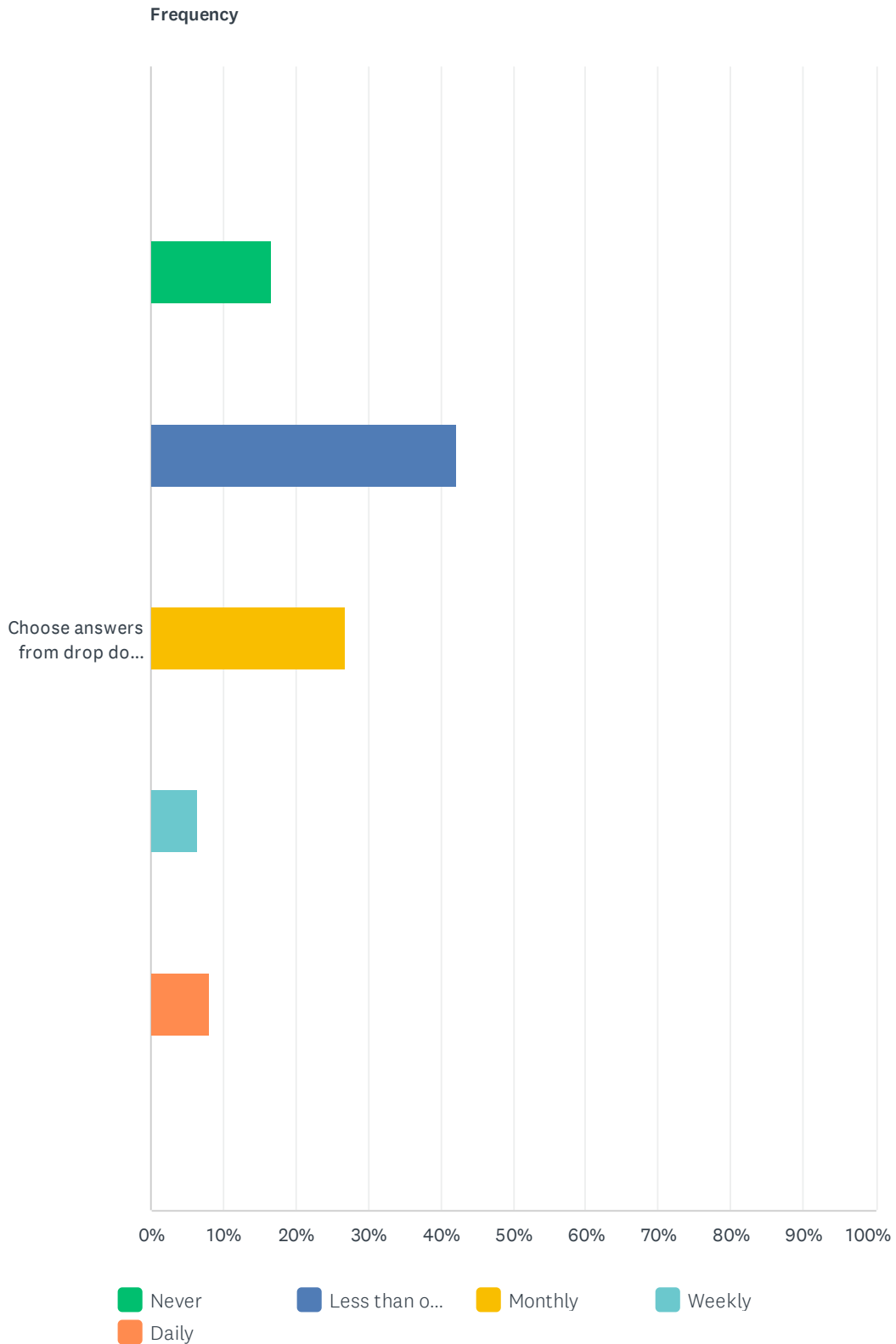
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.35% 5	3.23% 12	30.73% 114	64.69% 240	371

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.00% 25	14.29% 51	36.69% 131	42.02% 150	357

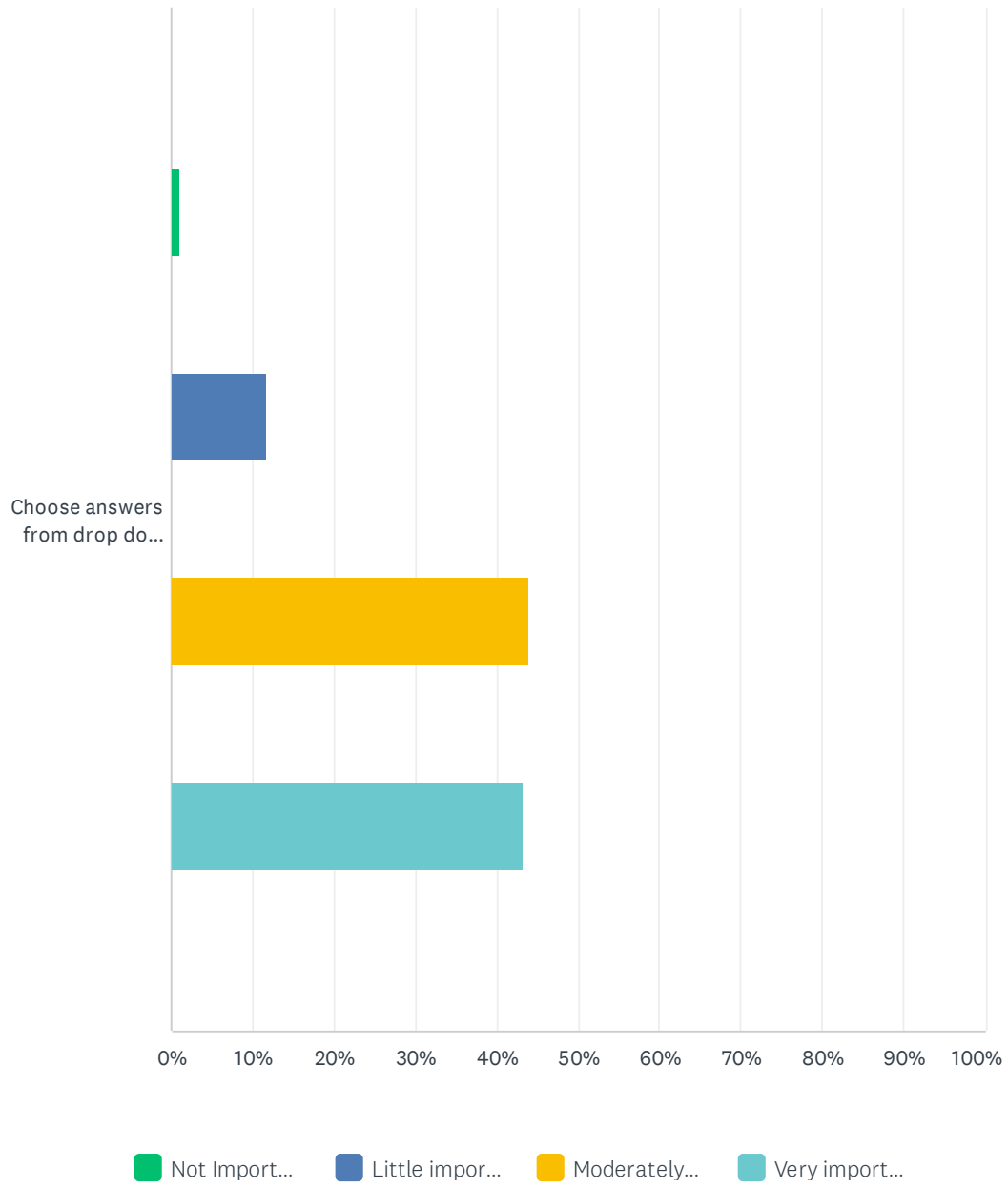
Q54 2.4.2 Advocating for orthopaedic spine physical therapy practice with national organizations, healthcare systems or law-making bodies.

Answered: 381 Skipped: 829



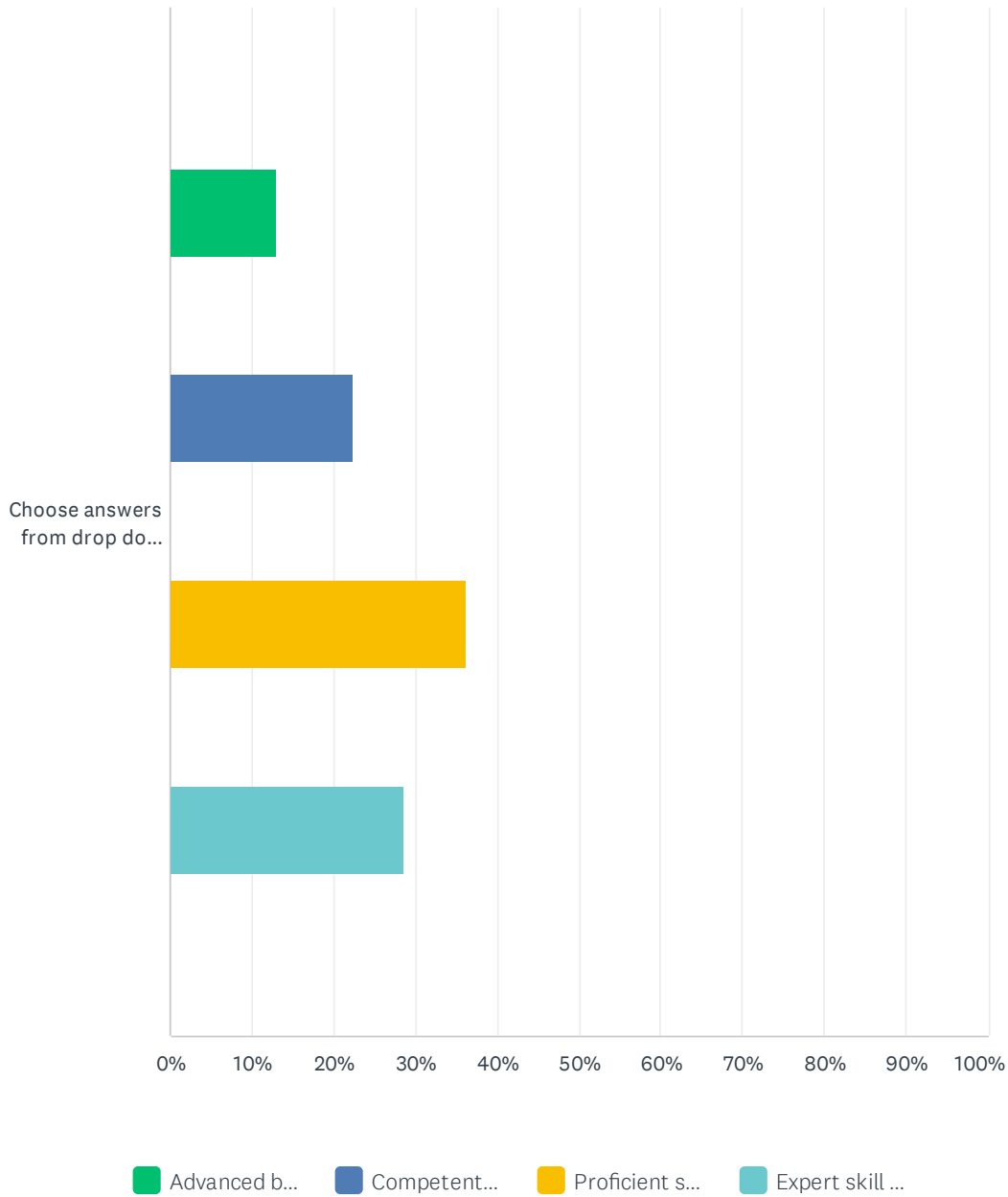
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	16.54% 63	42.26% 161	26.77% 102	6.30% 24	8.14% 31	381

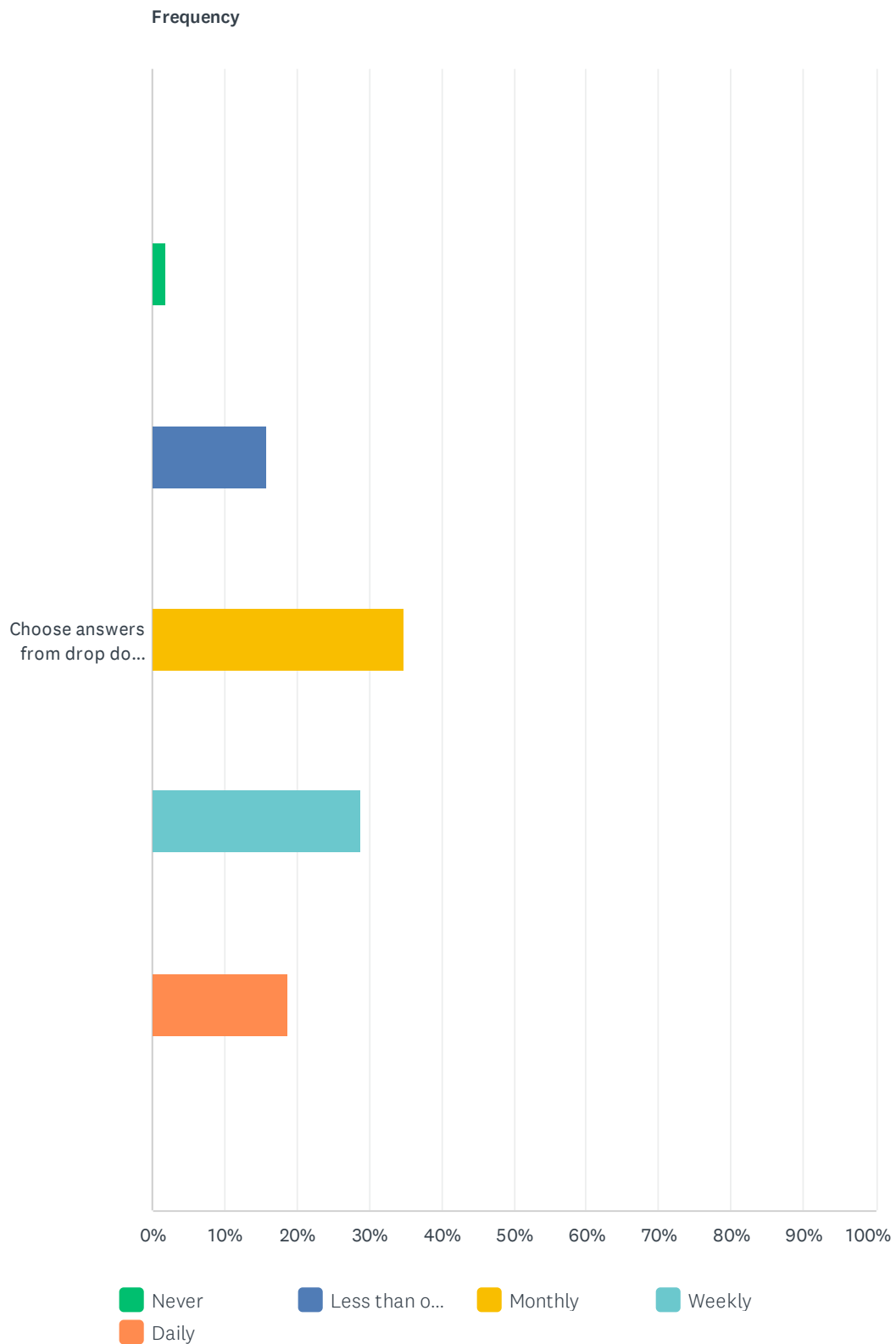
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.08% 4	11.65% 43	43.90% 162	43.36% 160	369

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.99% 46	22.32% 79	36.16% 128	28.53% 101	354

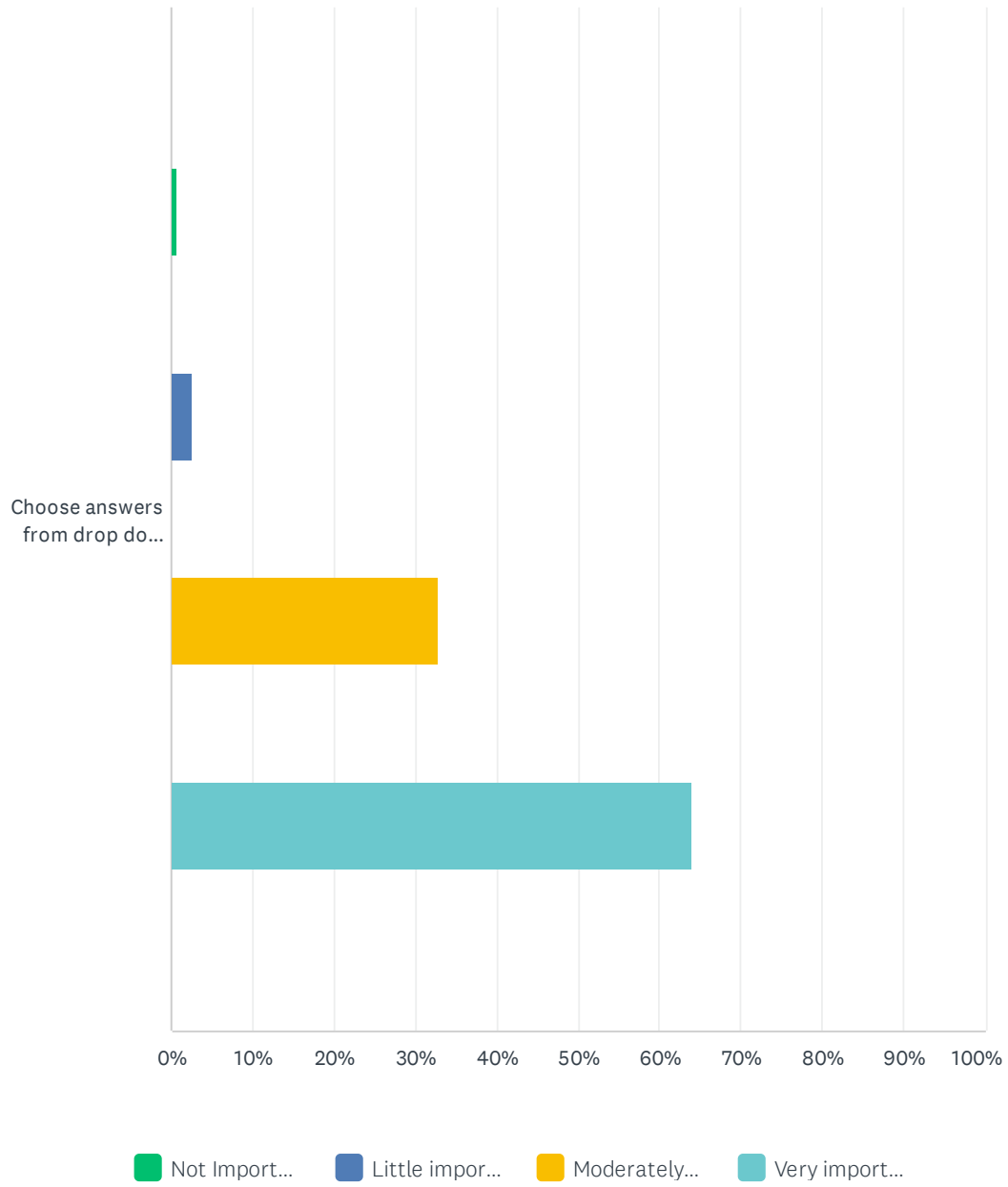
Q55 2.5.1 Contributing to the professional development of other physical therapists by teaching/mentoring.

Answered: 366 Skipped: 844



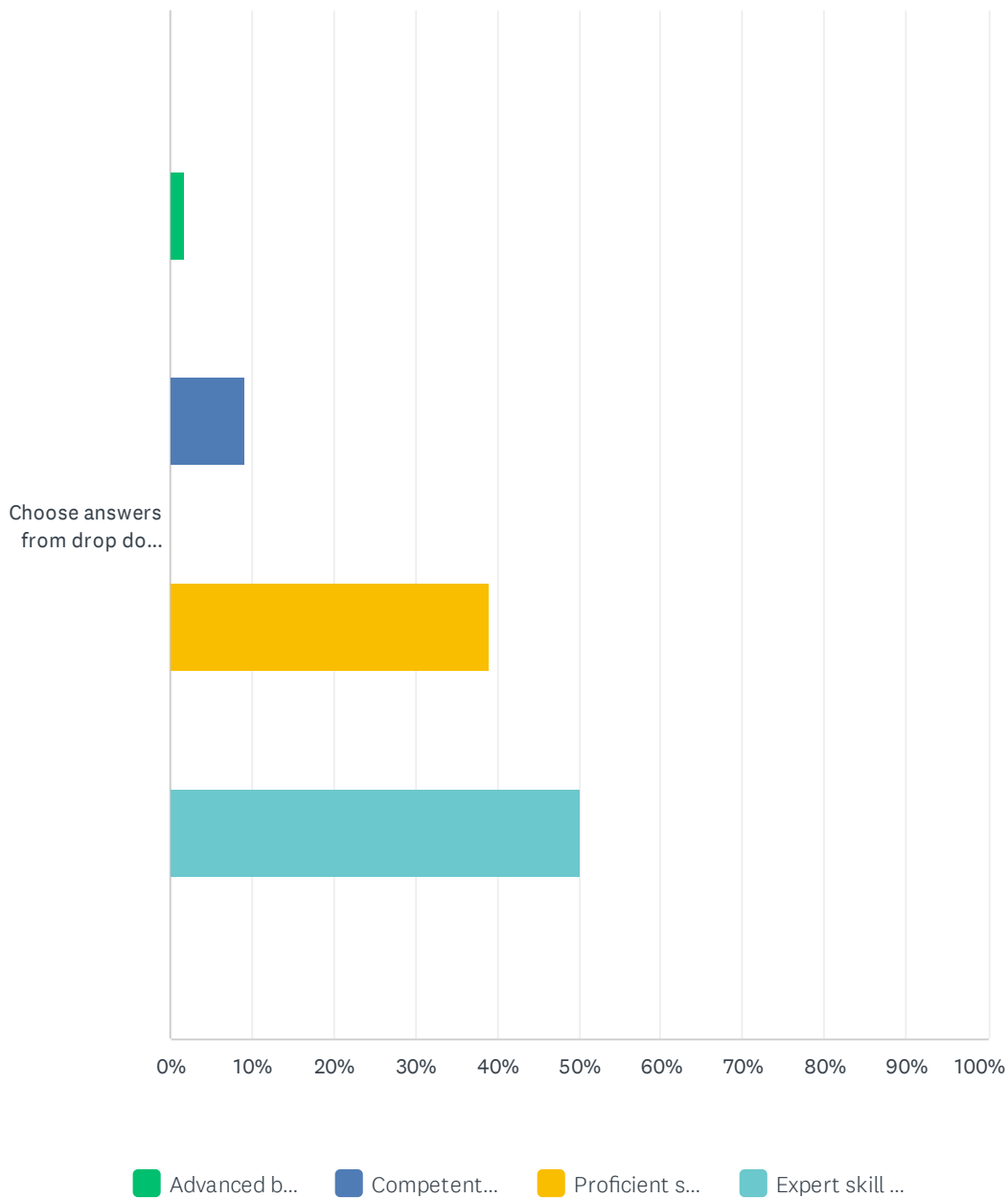
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.91% 7	15.85% 58	34.70% 127	28.69% 105	18.85% 69	366

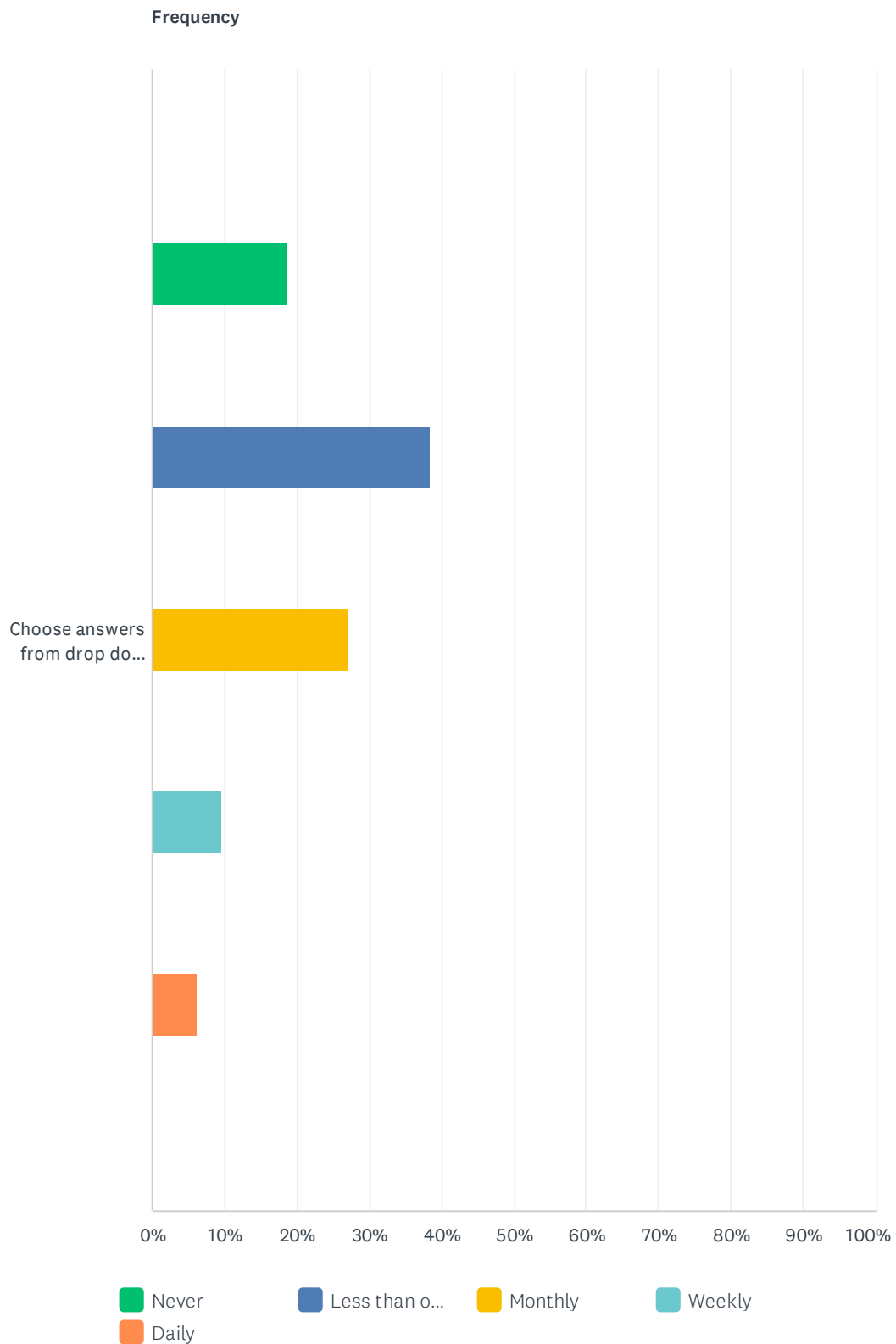
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.56% 2	2.53% 9	32.87% 117	64.04% 228	356

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.73% 6	9.25% 32	39.02% 135	50.00% 173	346

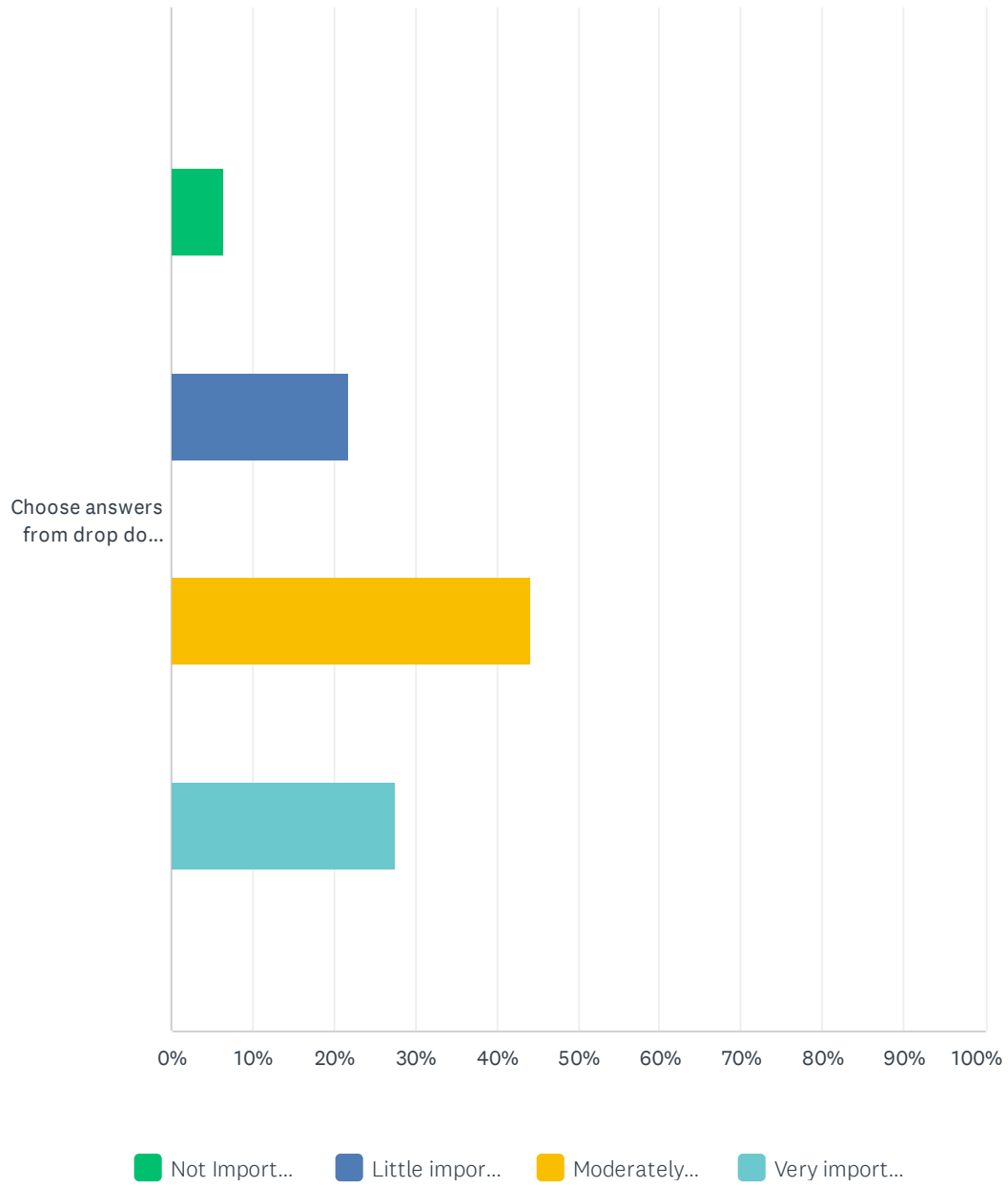
Q56 2.5.2 Promoting awareness and benefits of fellowship programs in orthopaedic spine physical therapy.

Answered: 367 Skipped: 843



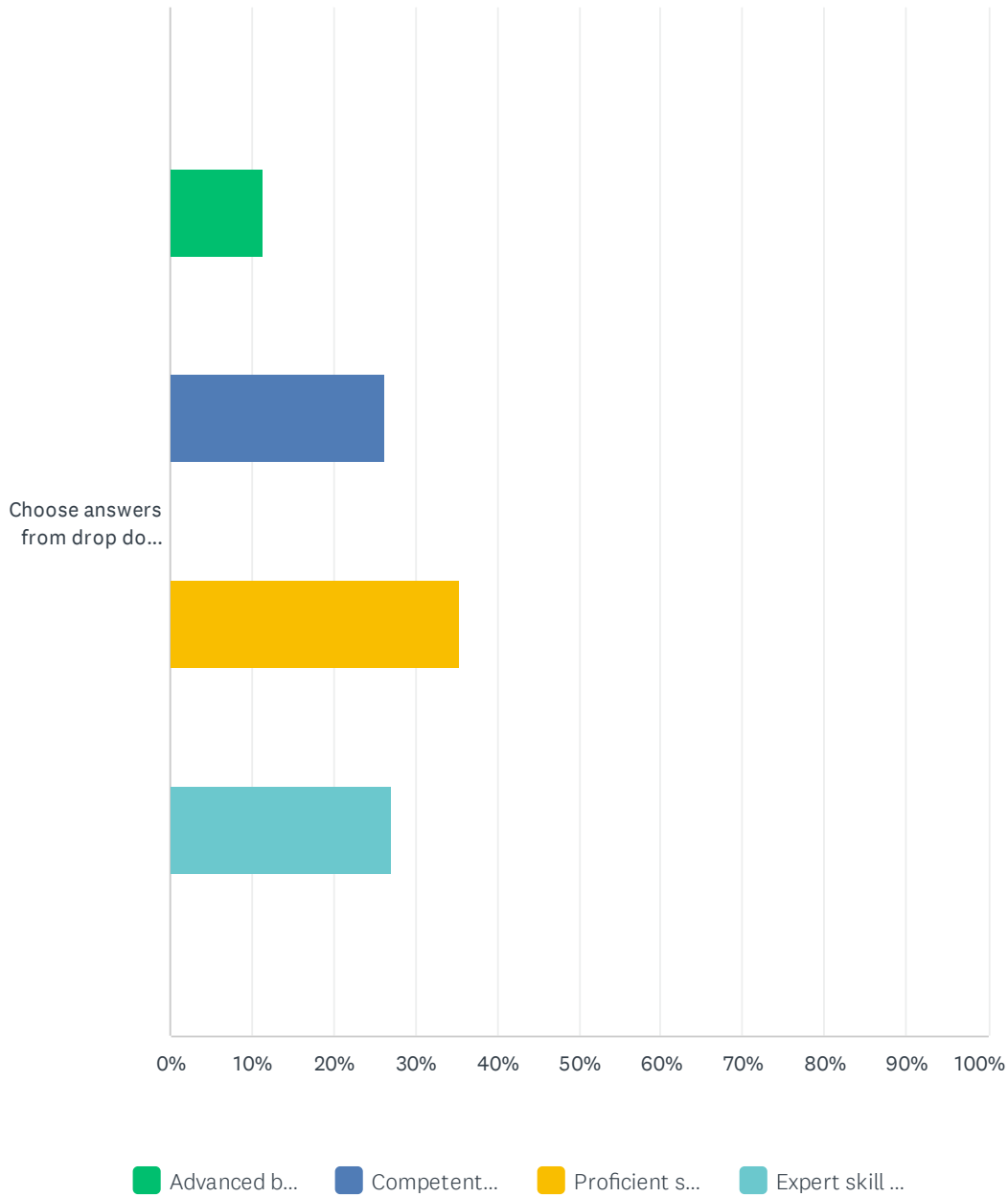
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	18.80% 69	38.42% 141	26.98% 99	9.54% 35	6.27% 23	367

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	6.48% 23	21.69% 77	44.23% 157	27.61% 98	355

Spine Validation Practice Analysis Survey 2022

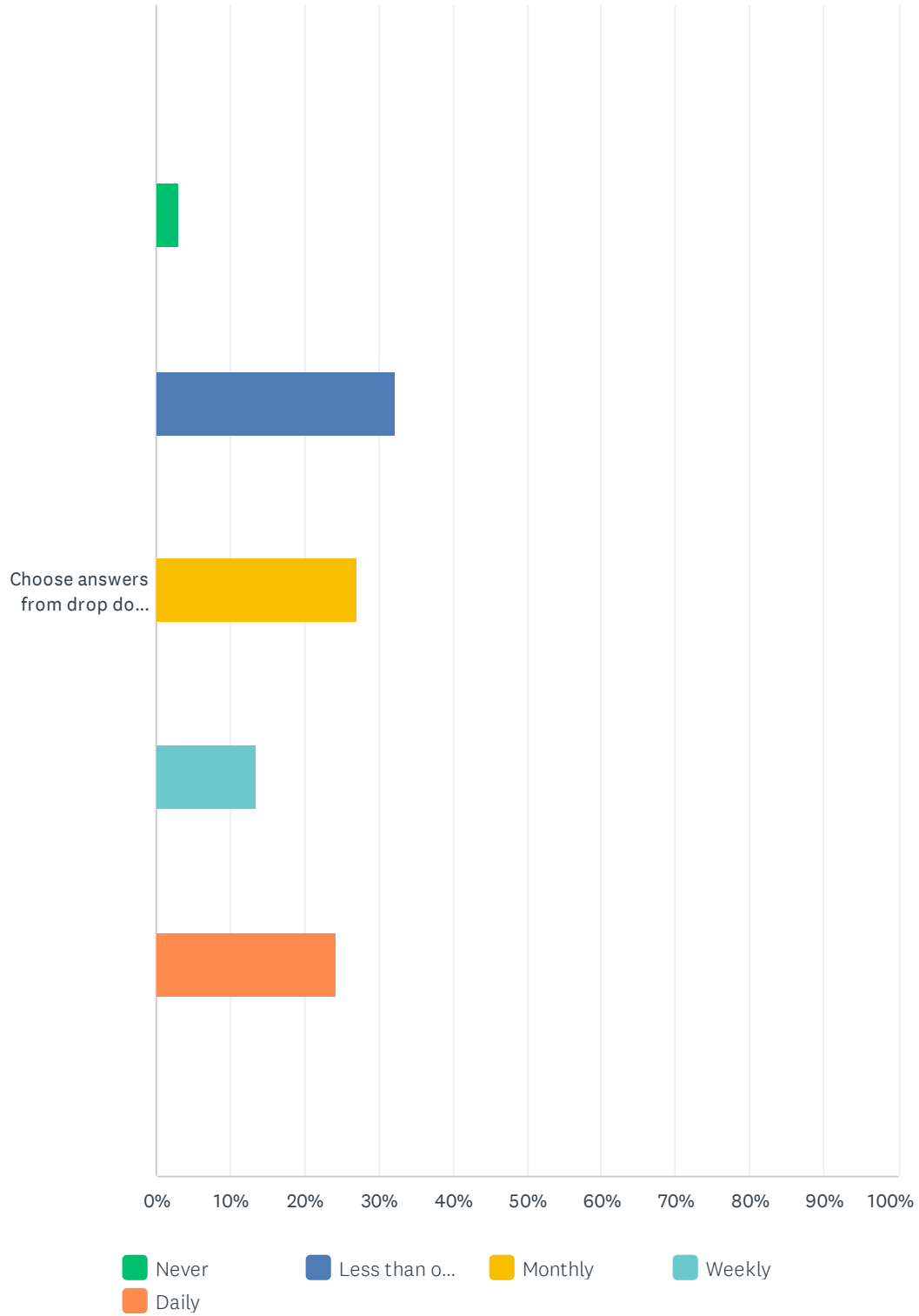
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.21% 38	26.25% 89	35.40% 120	27.14% 92	339

Q57 2.5.3 Educating the public regarding spine conditions, the role of orthopaedic spine physical therapists, and addressing common misconceptions.

Answered: 366 Skipped: 844

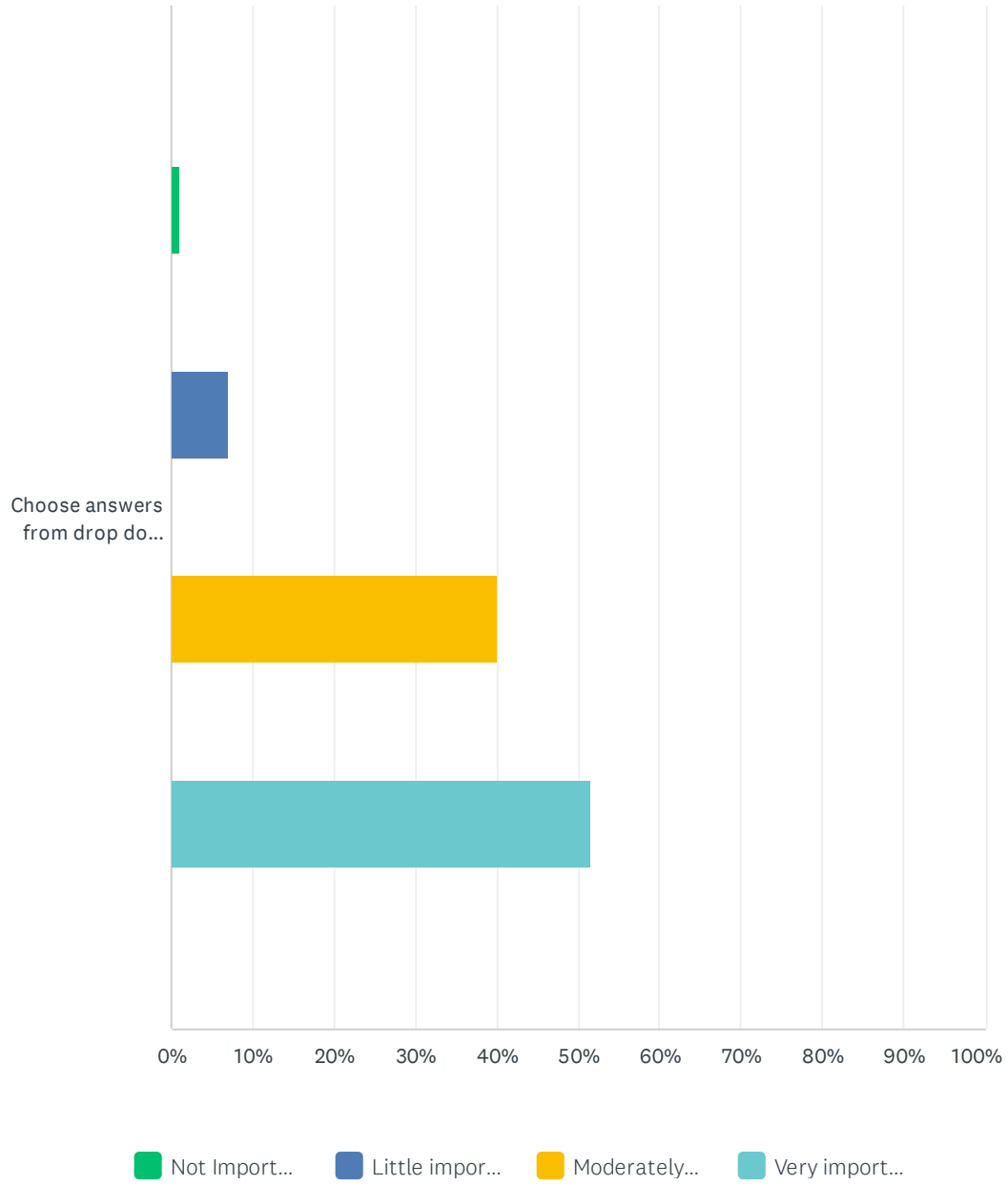
Spine Validation Practice Analysis Survey 2022

Frequency



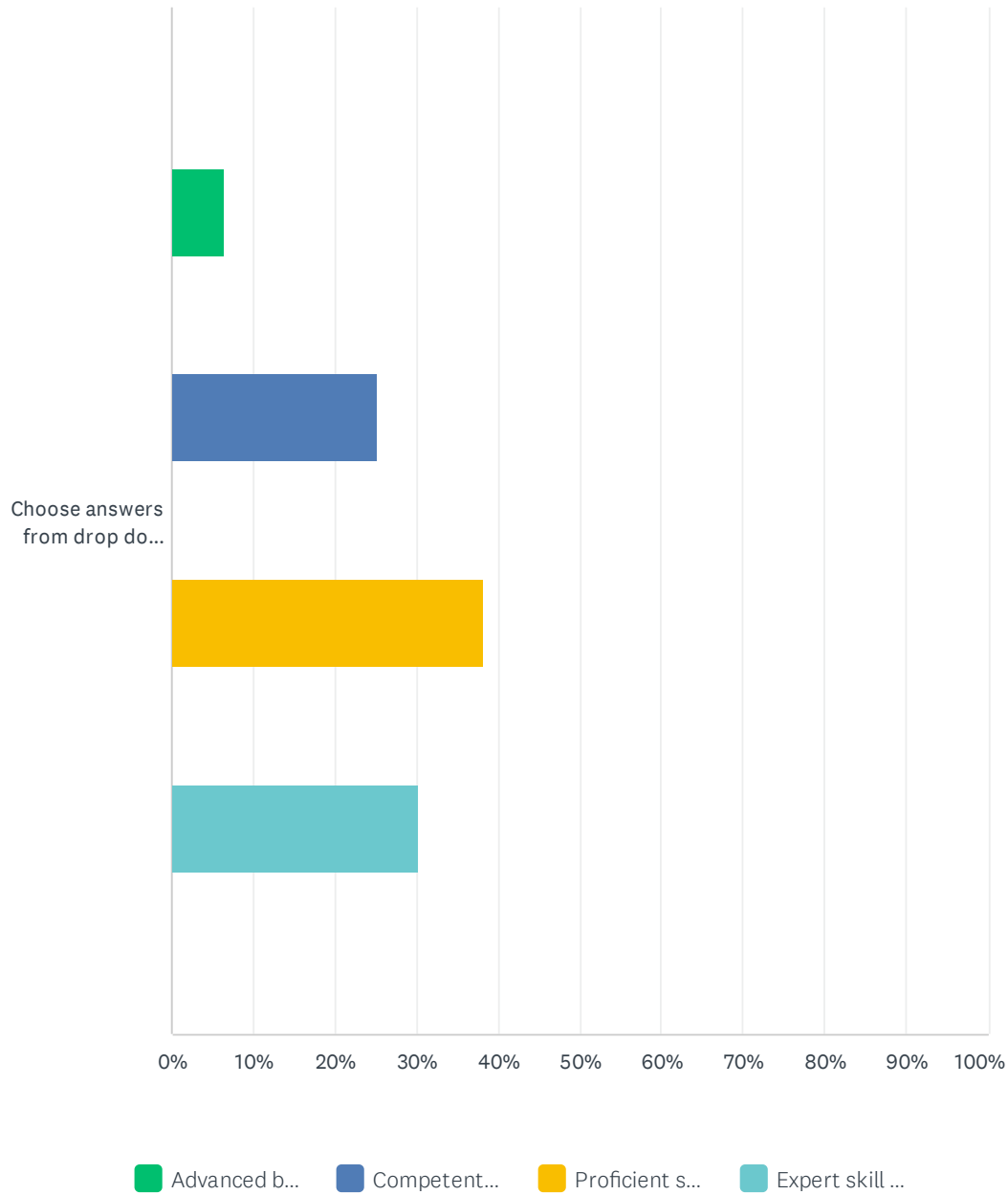
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.01% 11	32.24% 118	27.05% 99	13.39% 49	24.32% 89	366

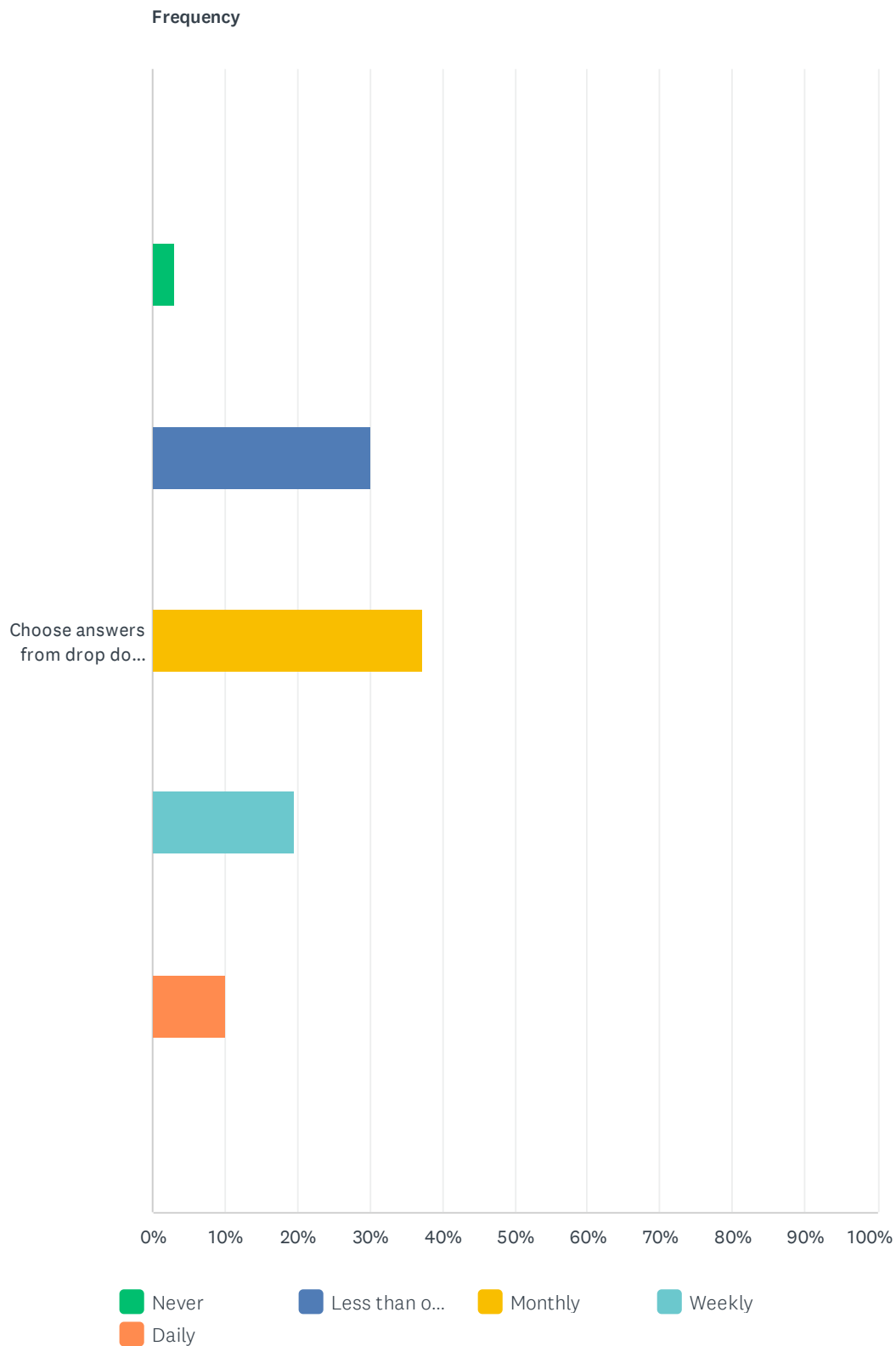
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.12% 4	7.02% 25	40.17% 143	51.69% 184	356

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.36% 22	25.14% 87	38.15% 132	30.35% 105	346

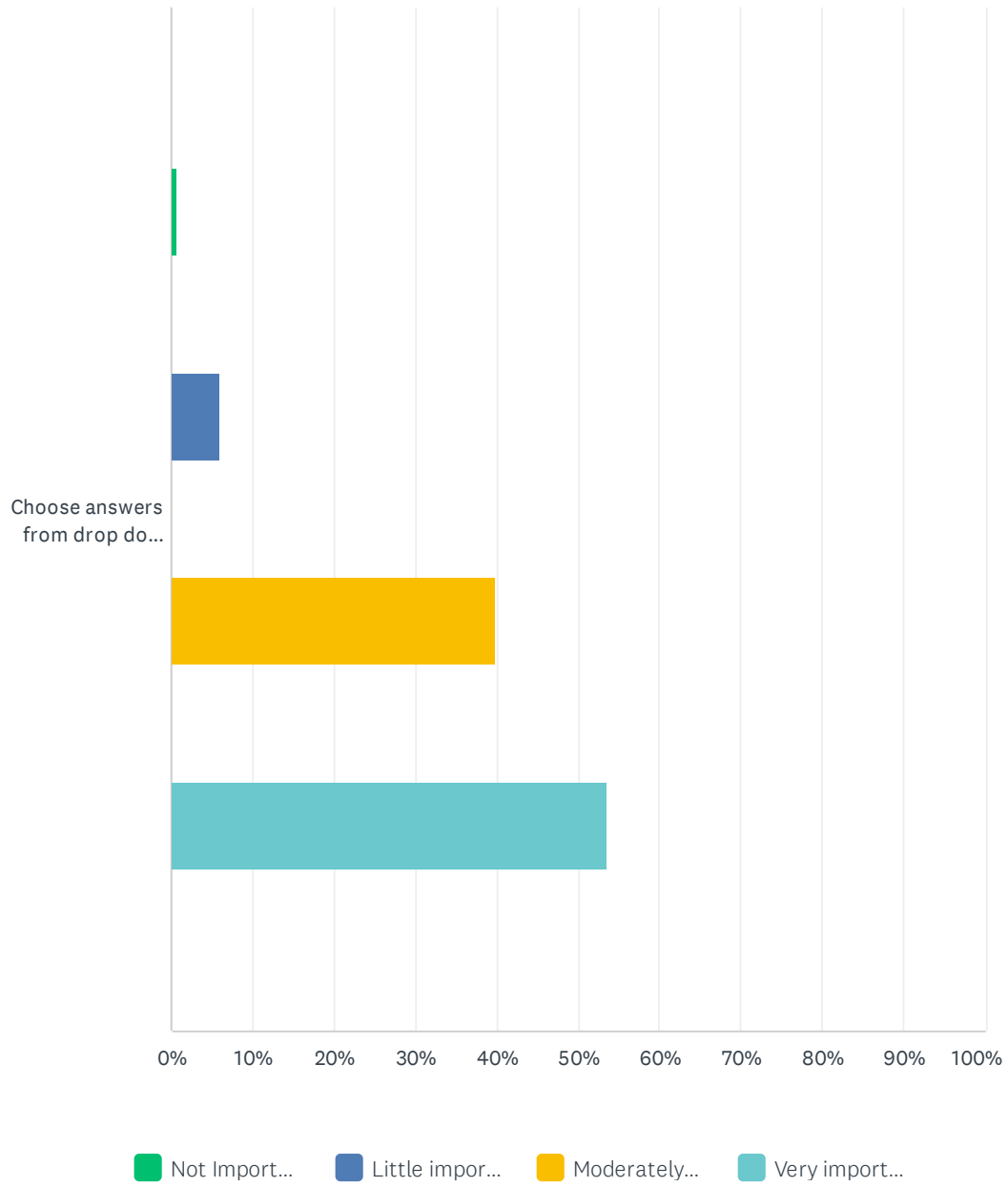
Q58 2.5.4 Educating other health care professionals and administrators as to the scope and role of orthopaedic spine physical therapists.

Answered: 362 Skipped: 848



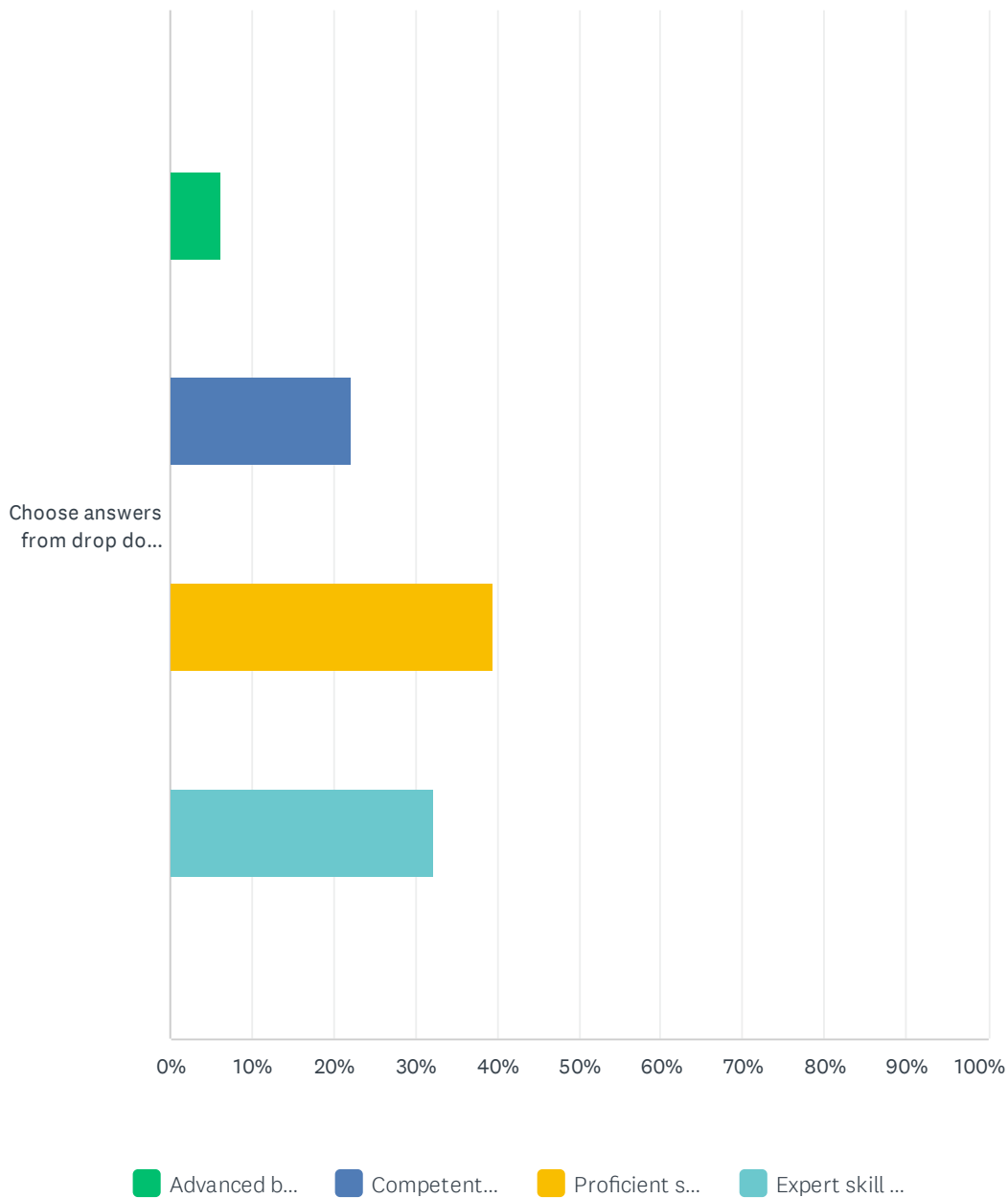
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.04% 11	30.11% 109	37.29% 135	19.61% 71	9.94% 36	362

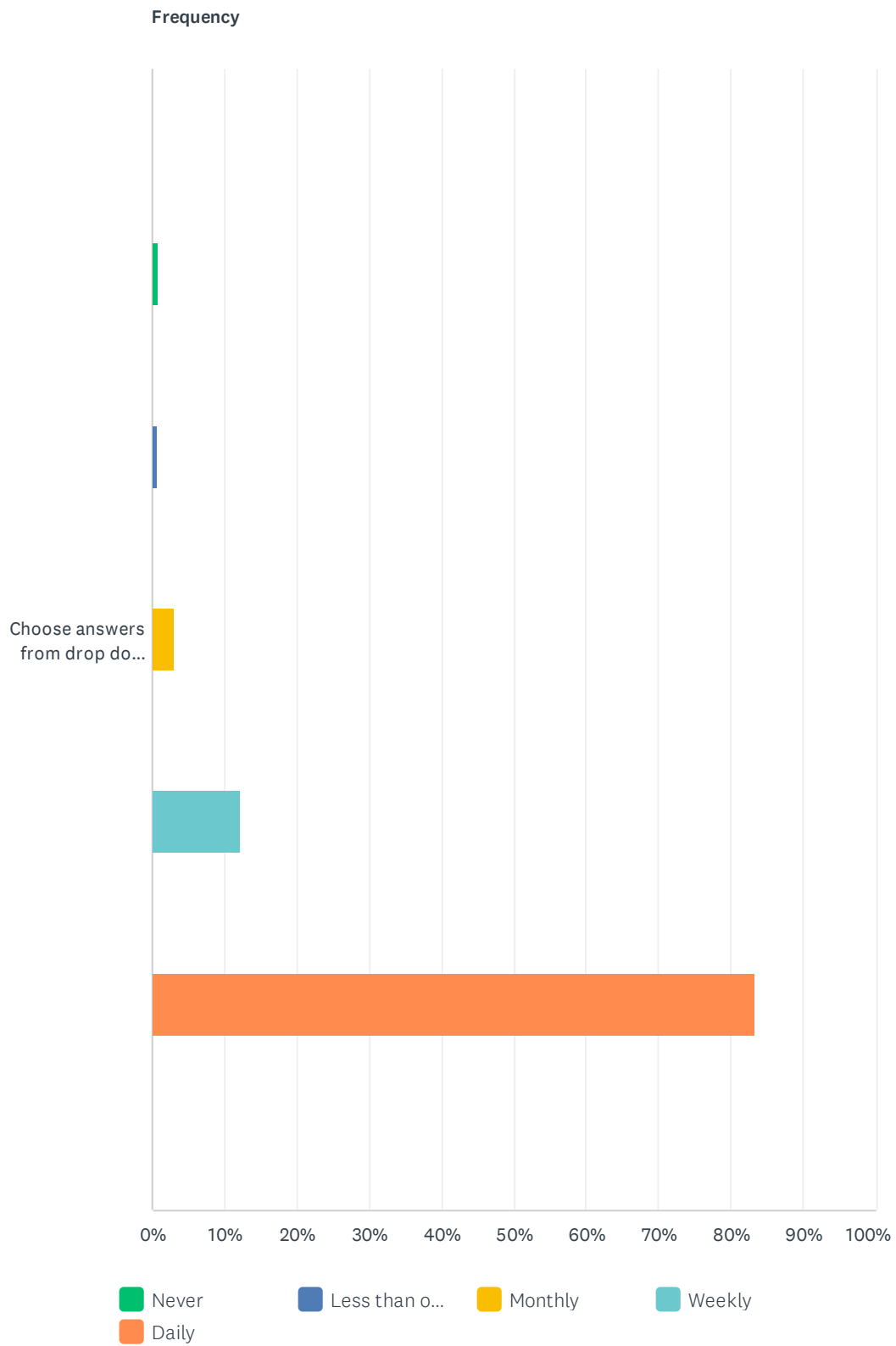
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.57% 2	5.98% 21	39.89% 140	53.56% 188	351

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.14% 21	22.22% 76	39.47% 135	32.16% 110	342

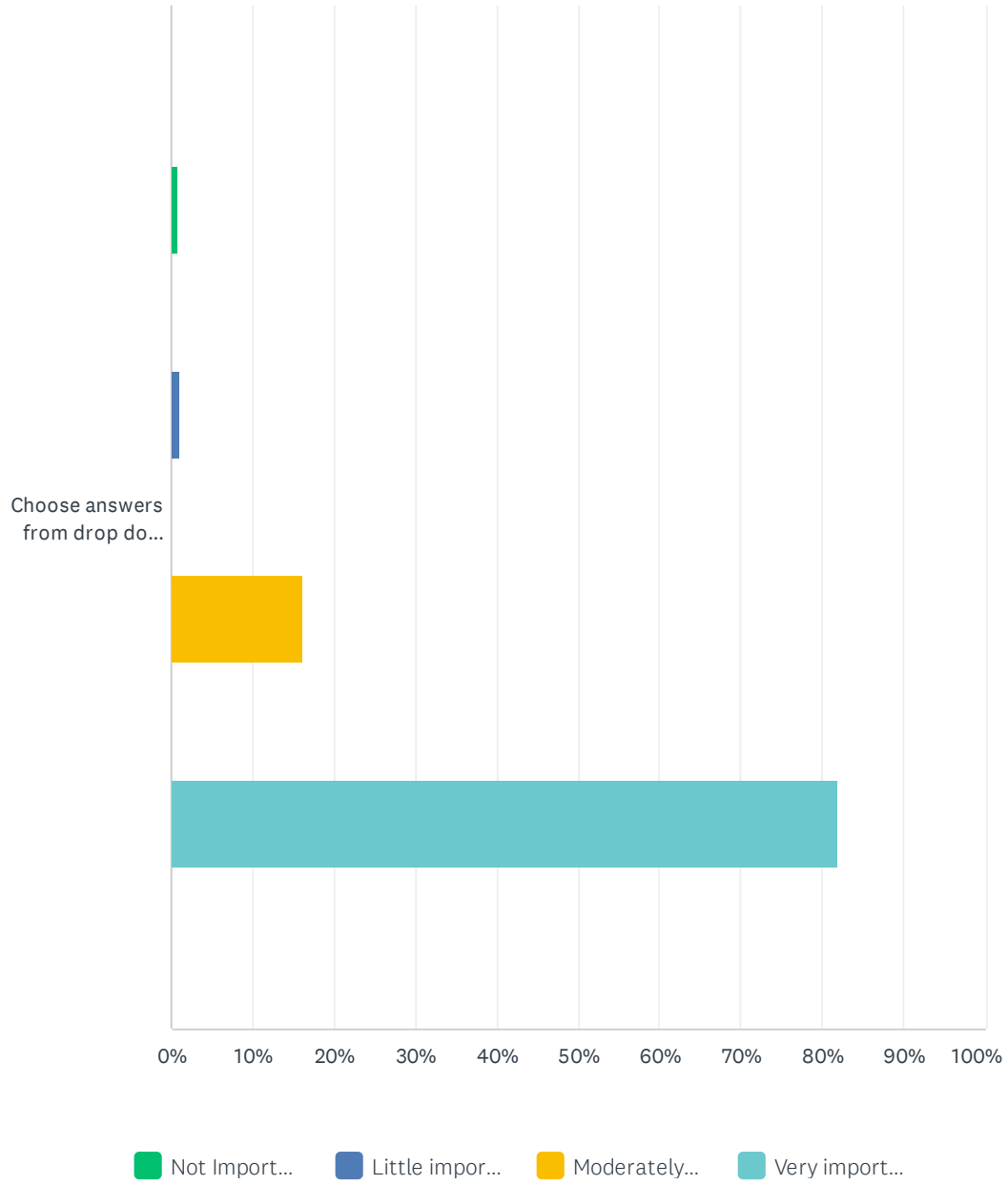
Q59 2.6.1 Applying principles of evidence-based practice in patient/client management.

Answered: 362 Skipped: 848



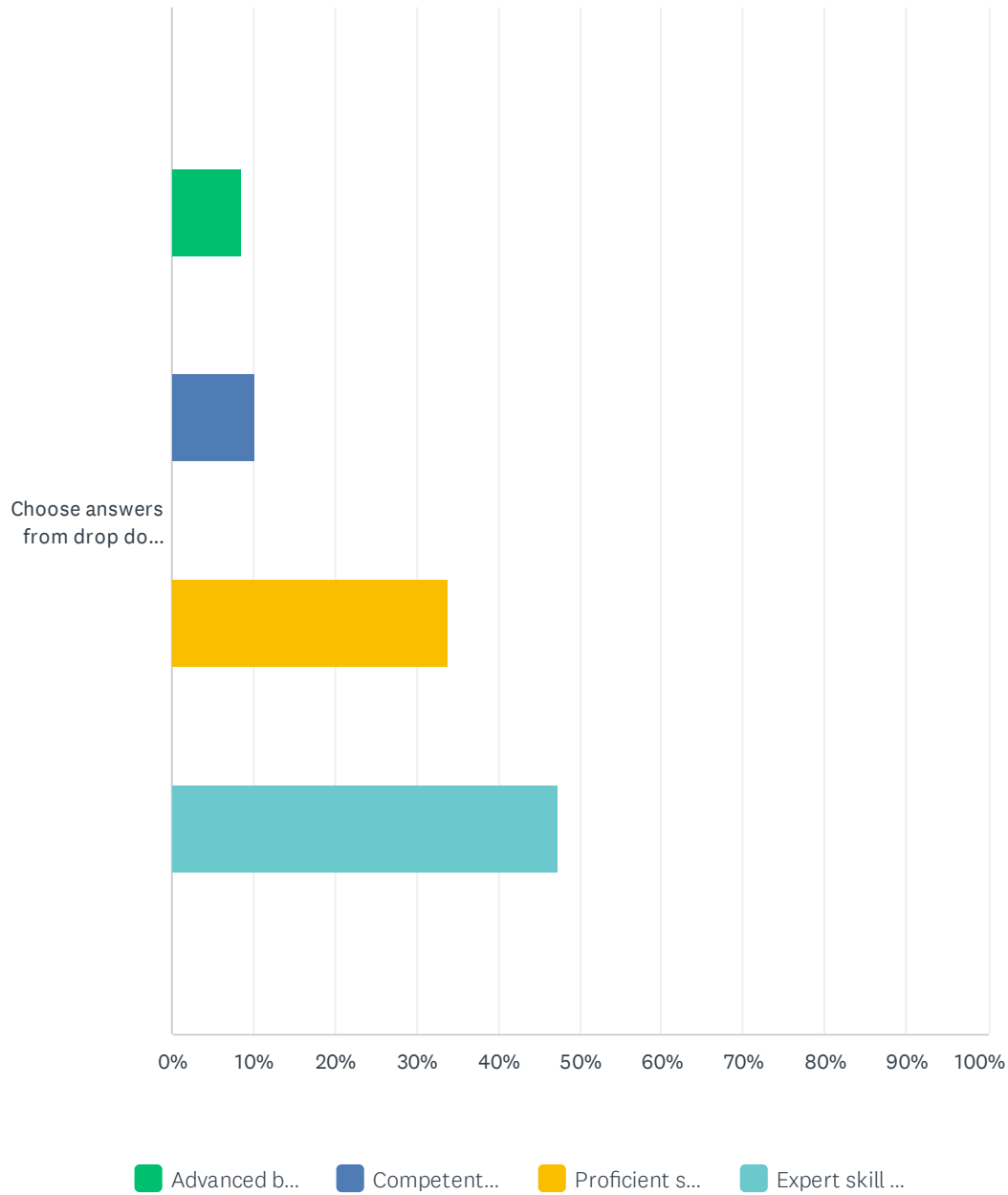
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.83% 3	0.55% 2	3.04% 11	12.15% 44	83.43% 302	362

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.85% 3	1.14% 4	16.19% 57	81.82% 288	352

Spine Validation Practice Analysis Survey 2022

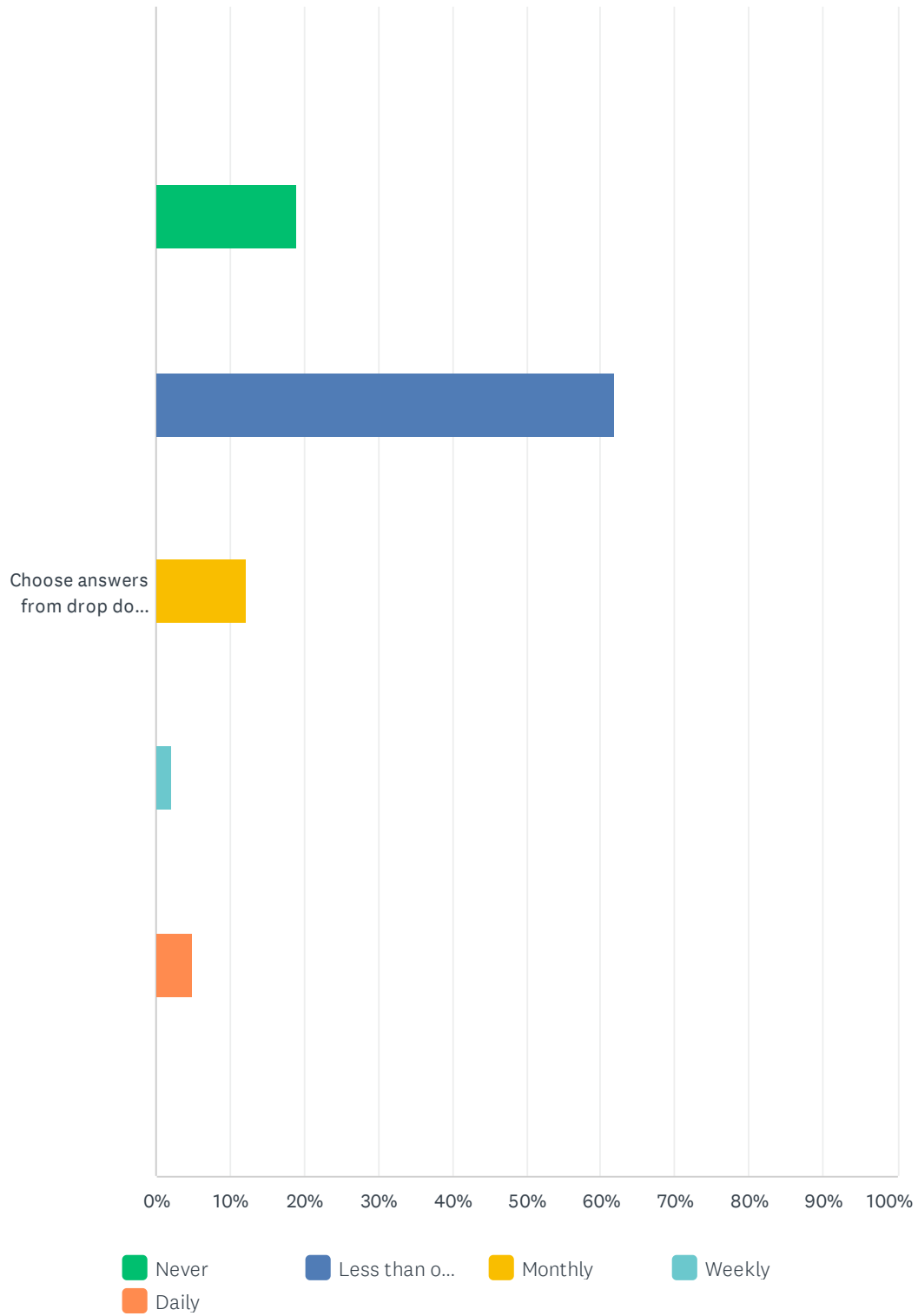
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	8.48% 29	10.23% 35	33.92% 116	47.37% 162	342

Q60 2.6.2 Contributing to the body of evidence in orthopaedic spine physical therapy (e.g., peer-reviewed and non-peer-reviewed presentations and publications).

Answered: 364 Skipped: 846

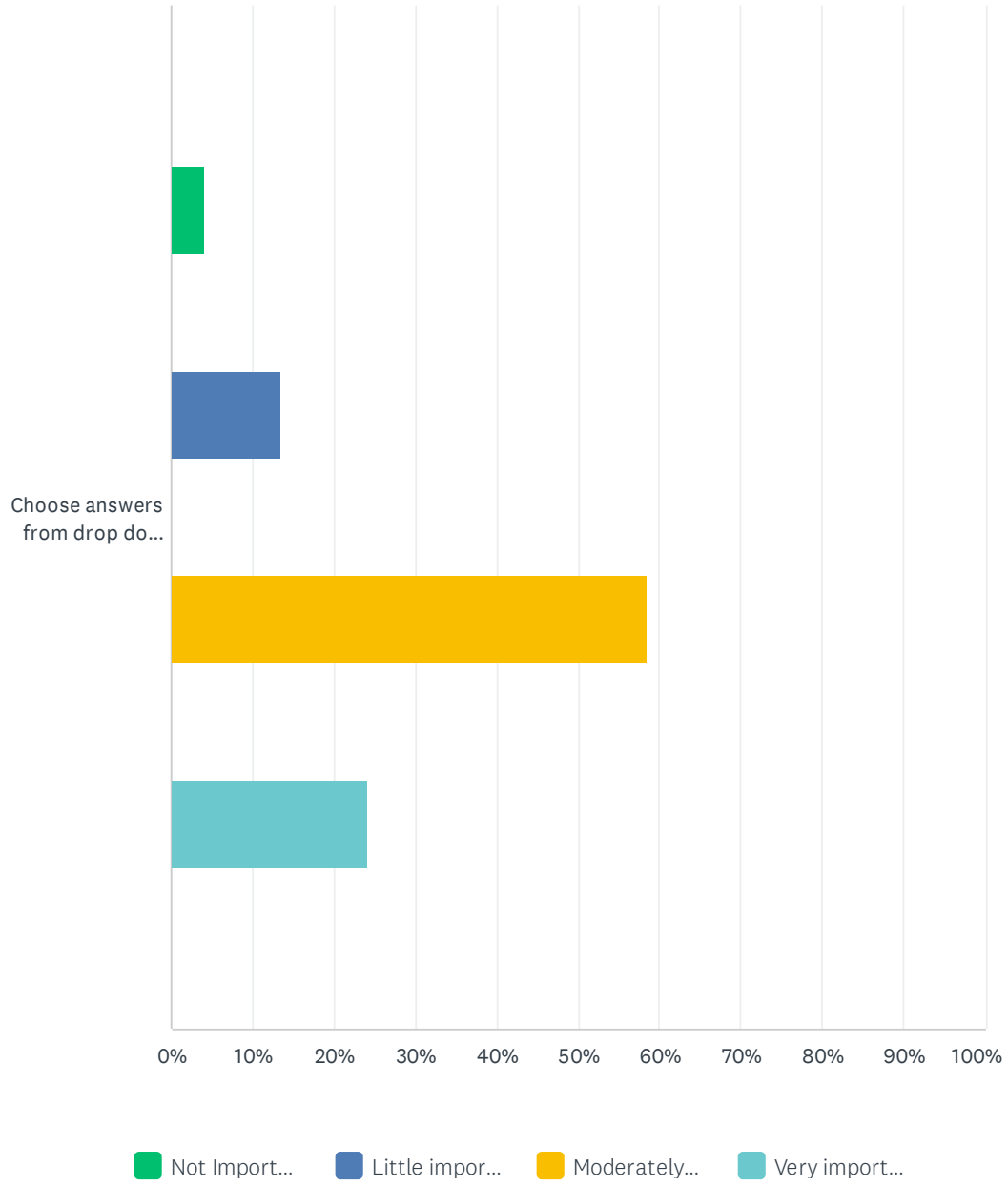
Spine Validation Practice Analysis Survey 2022

Frequency



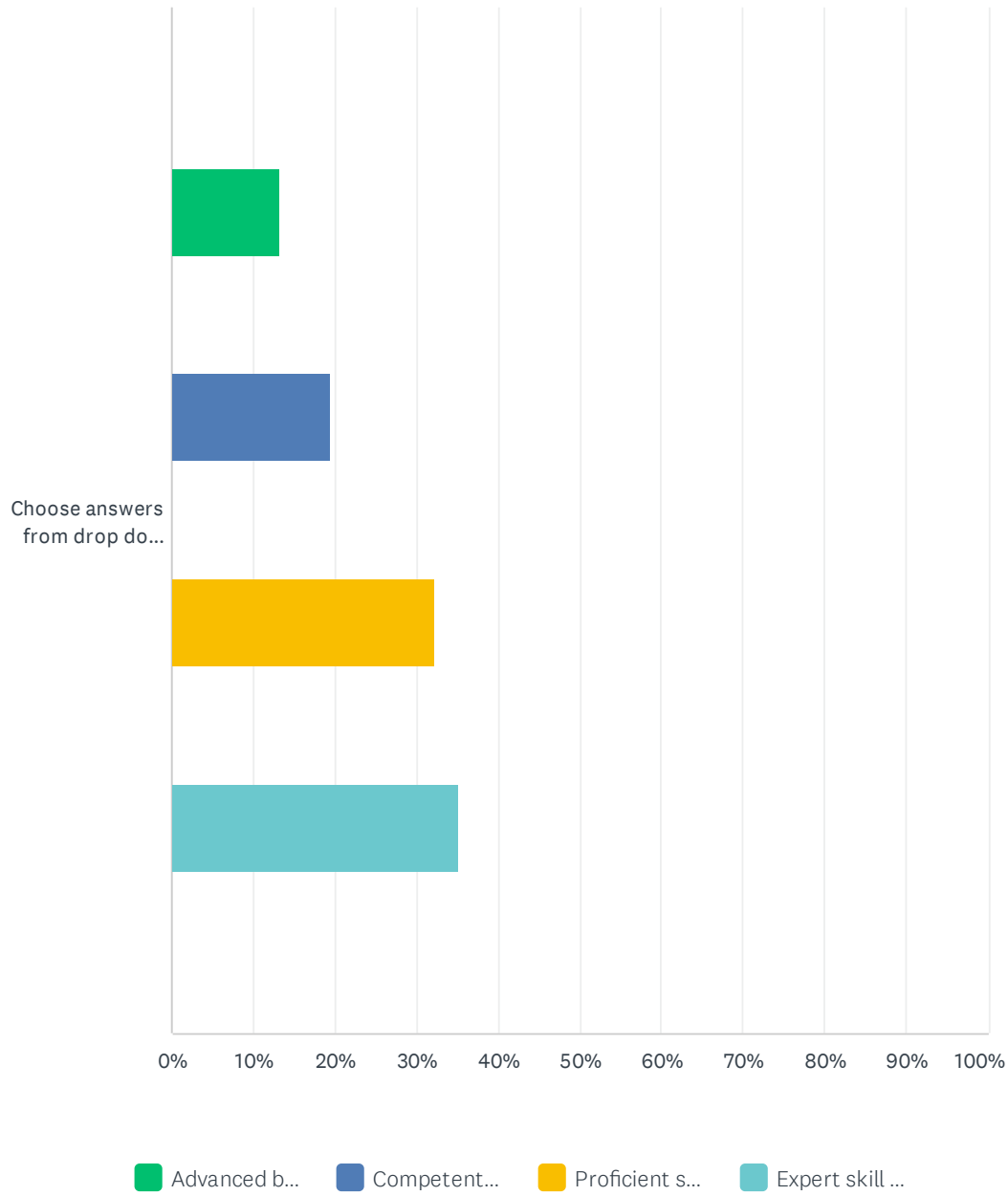
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	18.96% 69	61.81% 225	12.09% 44	2.20% 8	4.95% 18	364

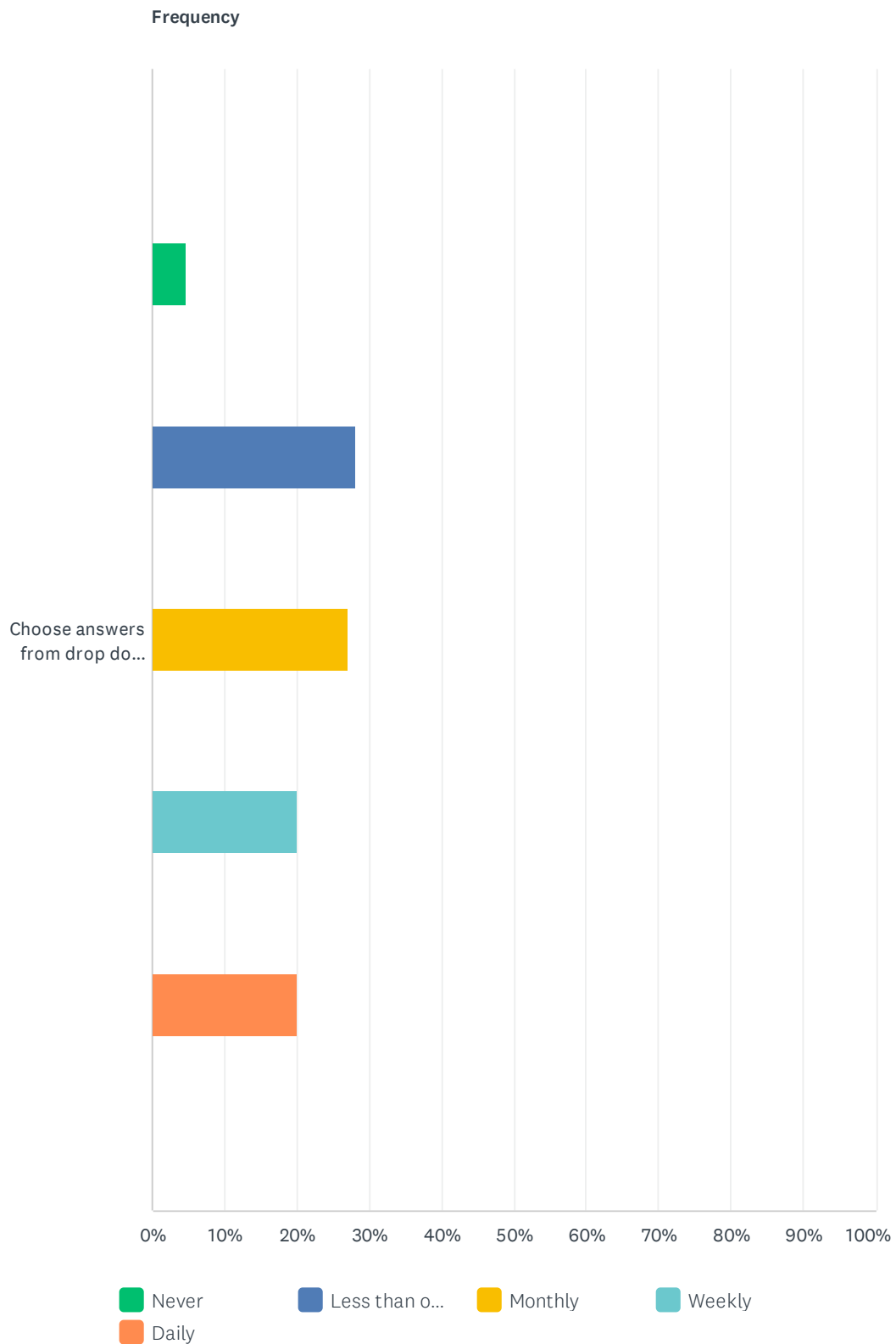
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	3.98% 14	13.35% 47	58.52% 206	24.15% 85	352

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	13.20% 45	19.35% 66	32.26% 110	35.19% 120	341

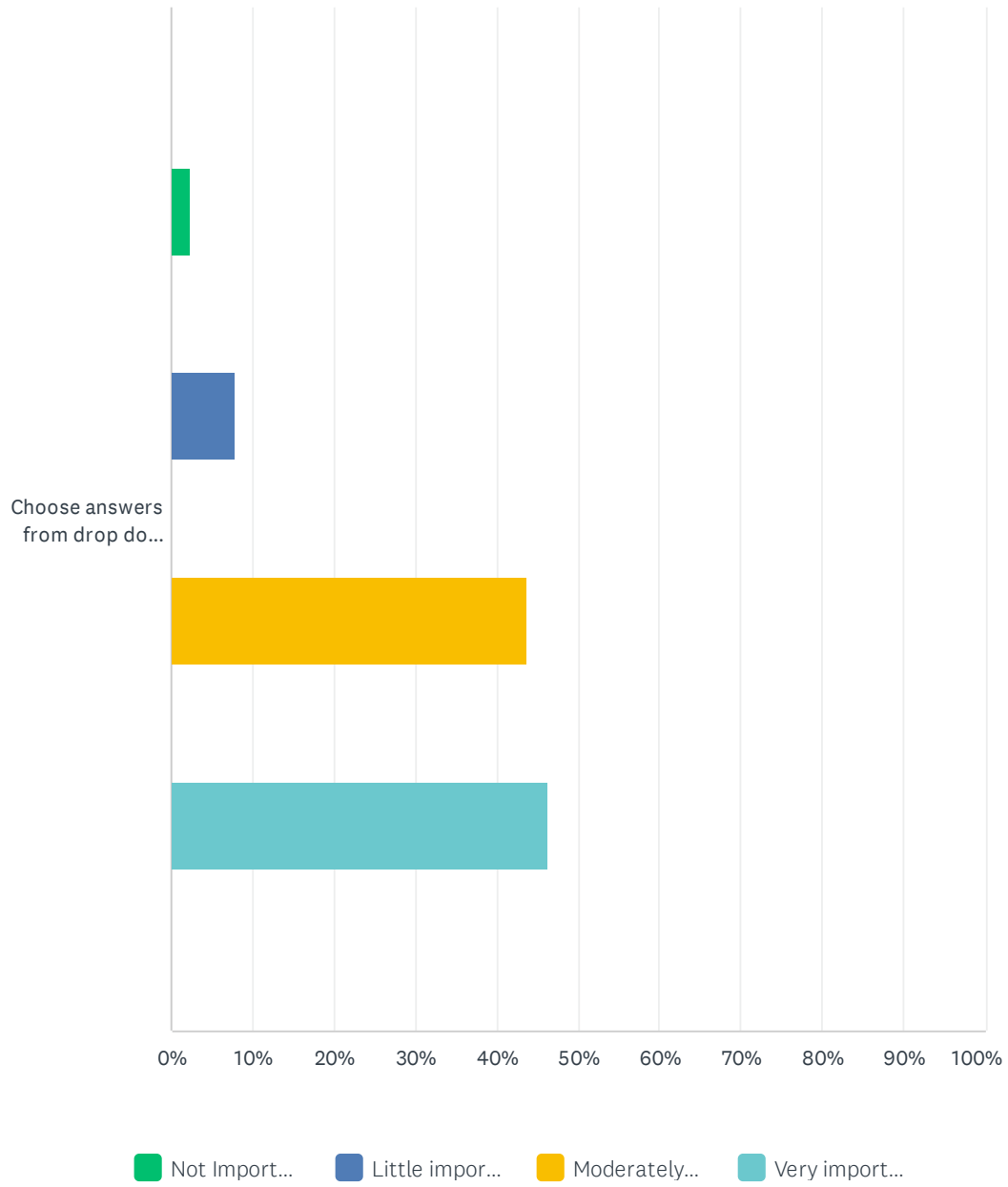
Q61 2.6.3 Evaluating the efficacy and effectiveness of examination tools, interventions, and technologies based upon available evidence.

Answered: 363 Skipped: 847



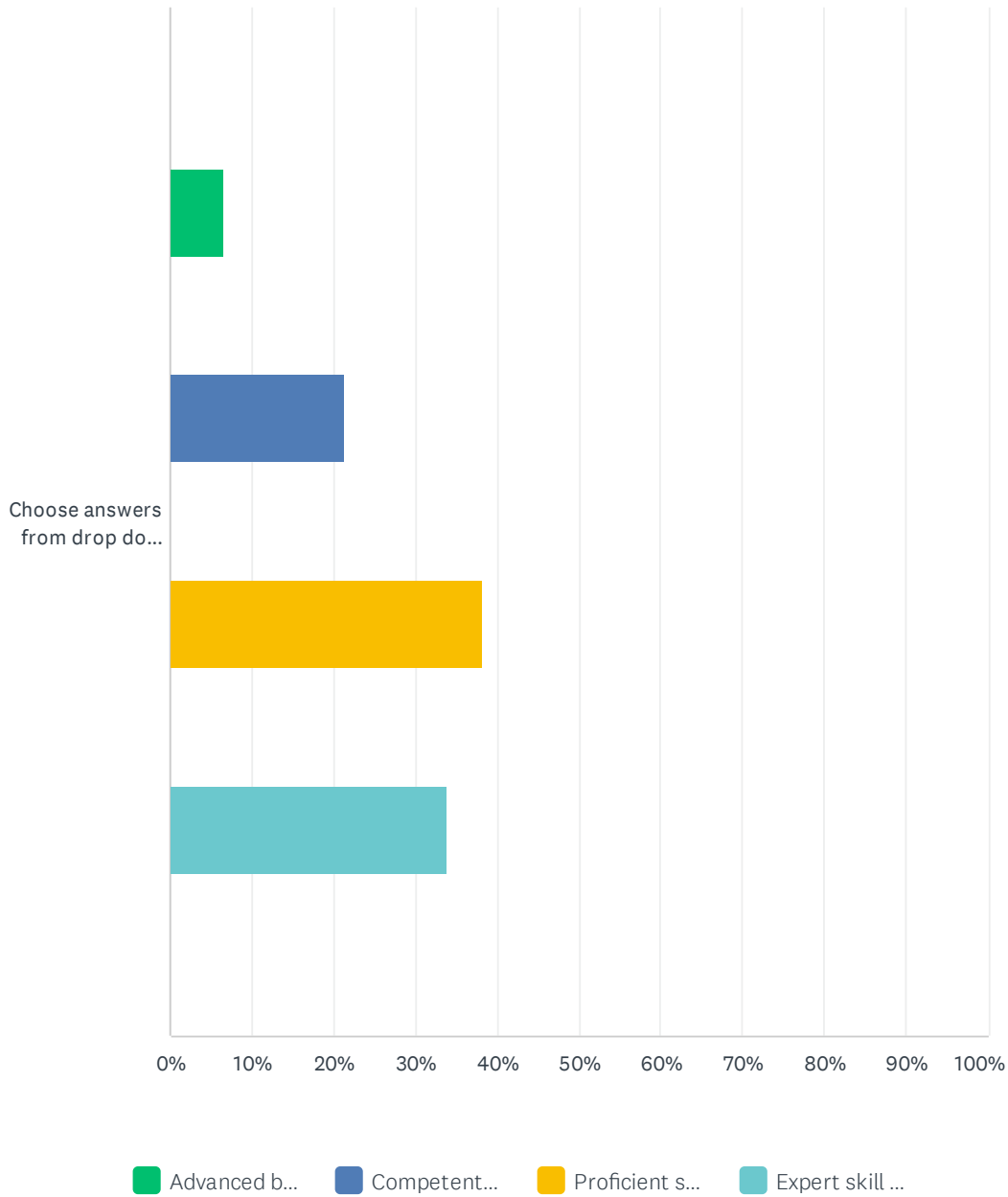
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	4.68% 17	28.10% 102	27.00% 98	20.11% 73	20.11% 73	363

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.27% 8	7.93% 28	43.63% 154	46.18% 163	353

Spine Validation Practice Analysis Survey 2022

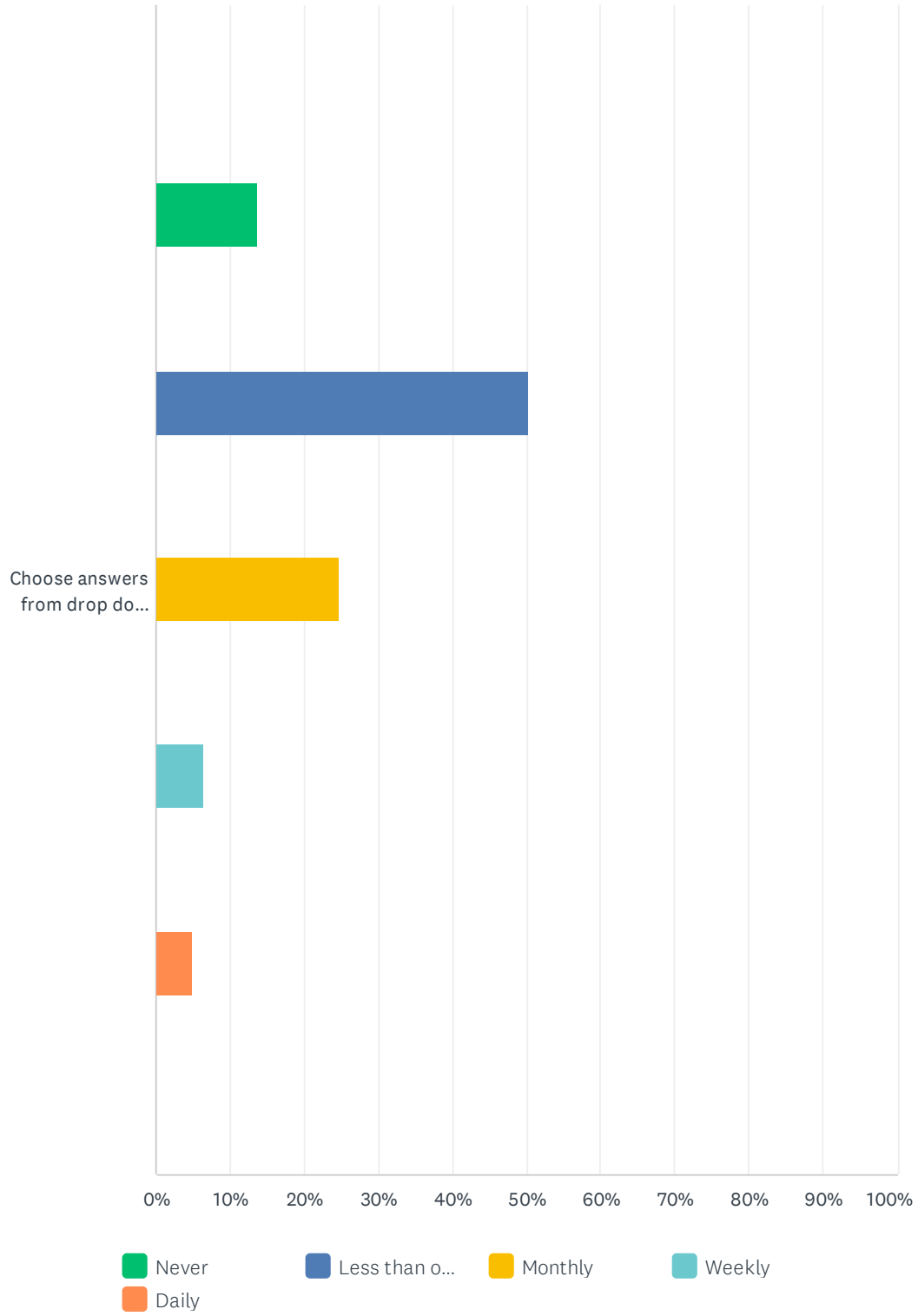
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.71% 23	21.28% 73	38.19% 131	33.82% 116	343

Q62 2.6.4 Identifying research needs within the field of orthopaedic spine physical therapy, evaluating outcomes data, and assessing new concepts and technologies.

Answered: 364 Skipped: 846

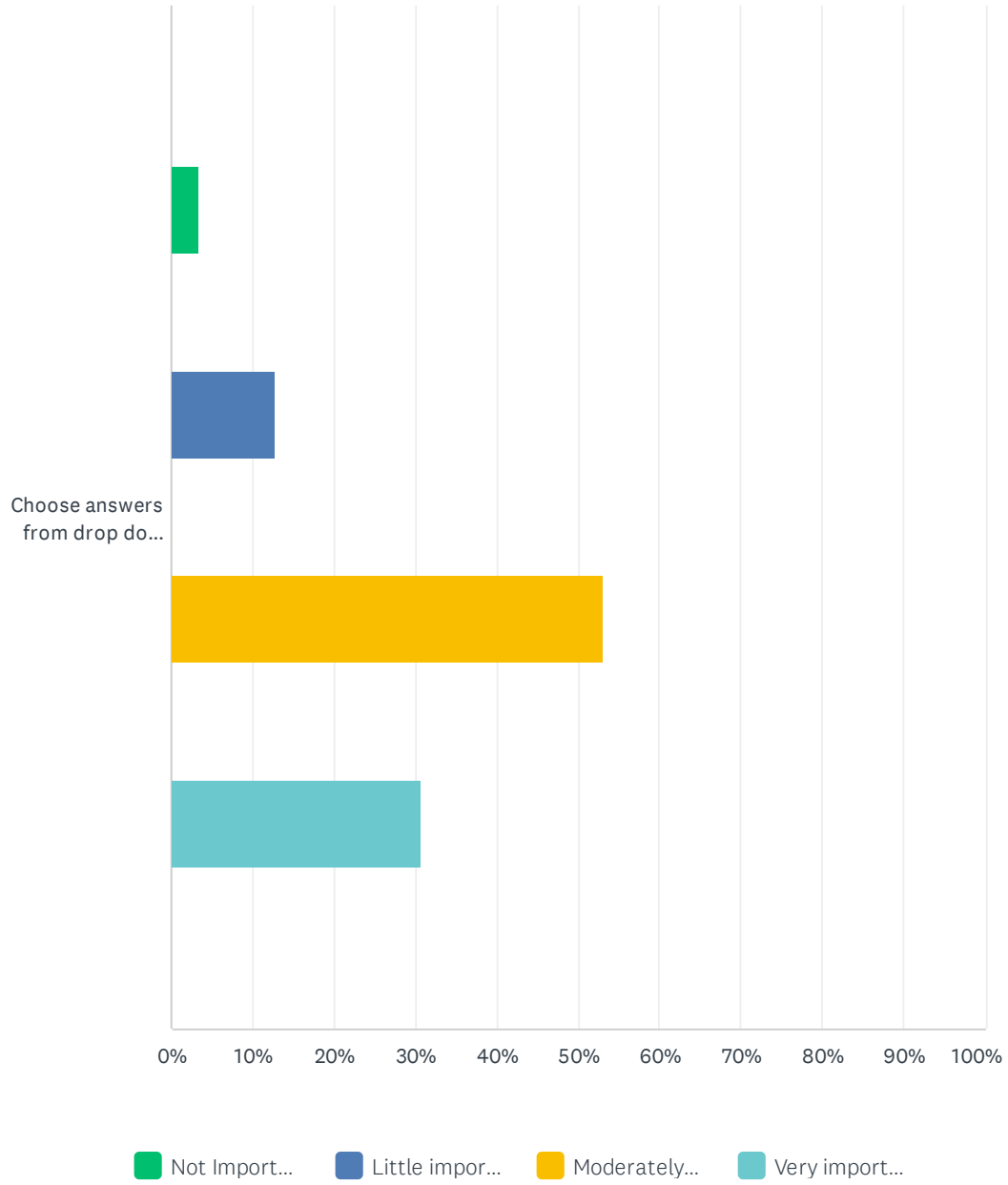
Spine Validation Practice Analysis Survey 2022

Frequency



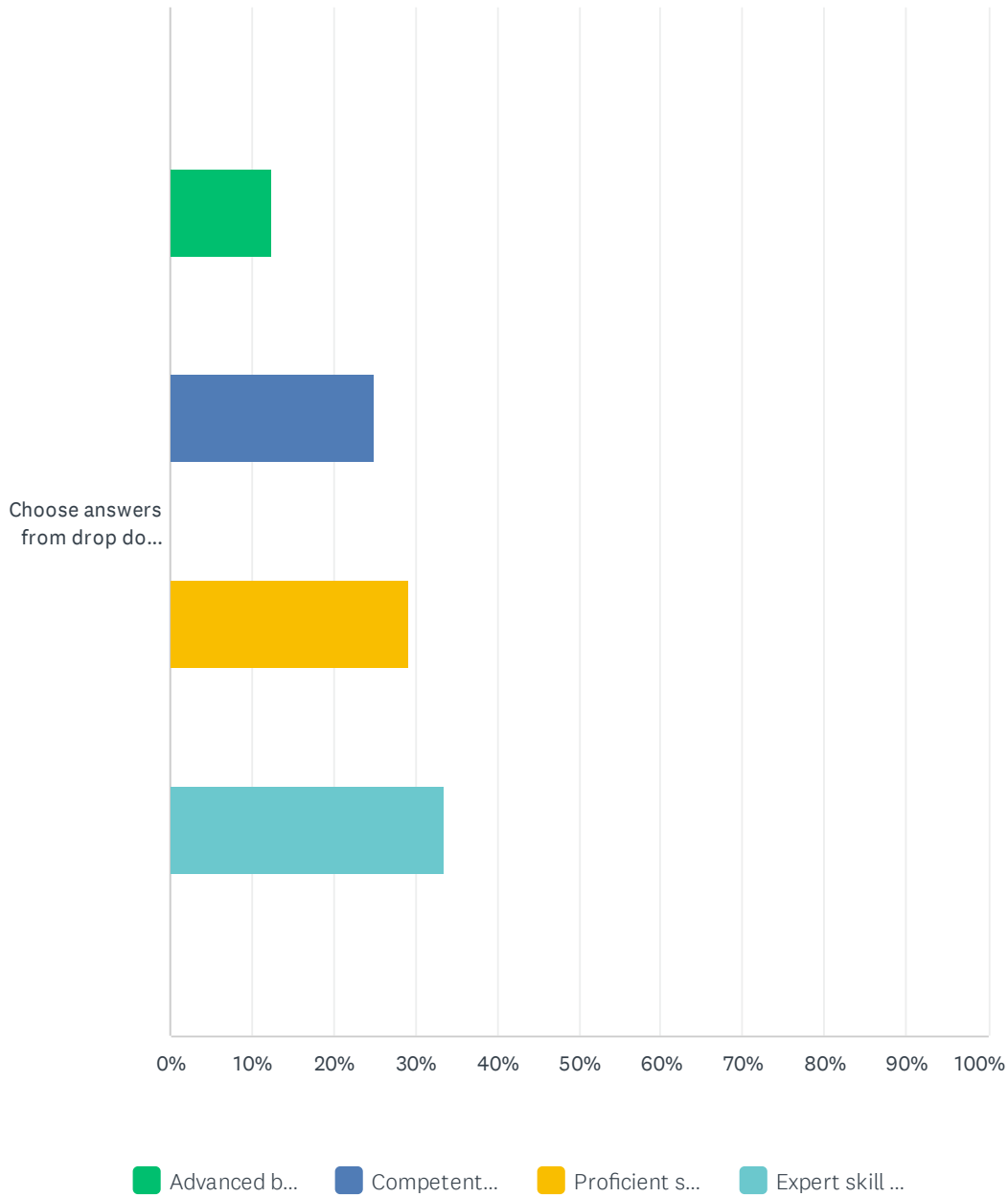
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	13.74% 50	50.27% 183	24.73% 90	6.32% 23	4.95% 18	364

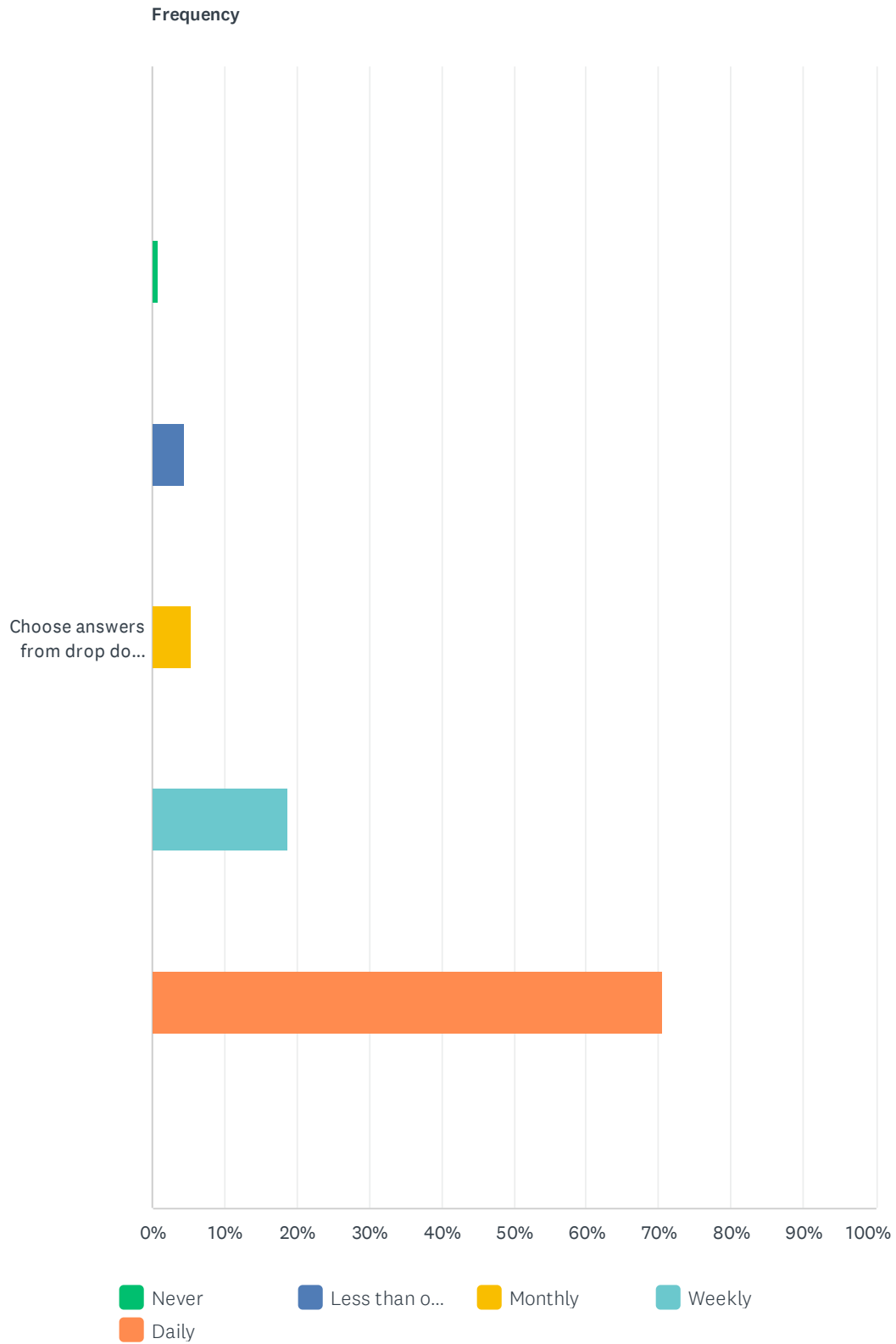
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	3.41% 12	12.78% 45	53.13% 187	30.68% 108	352

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.35% 42	25.00% 85	29.12% 99	33.53% 114	340

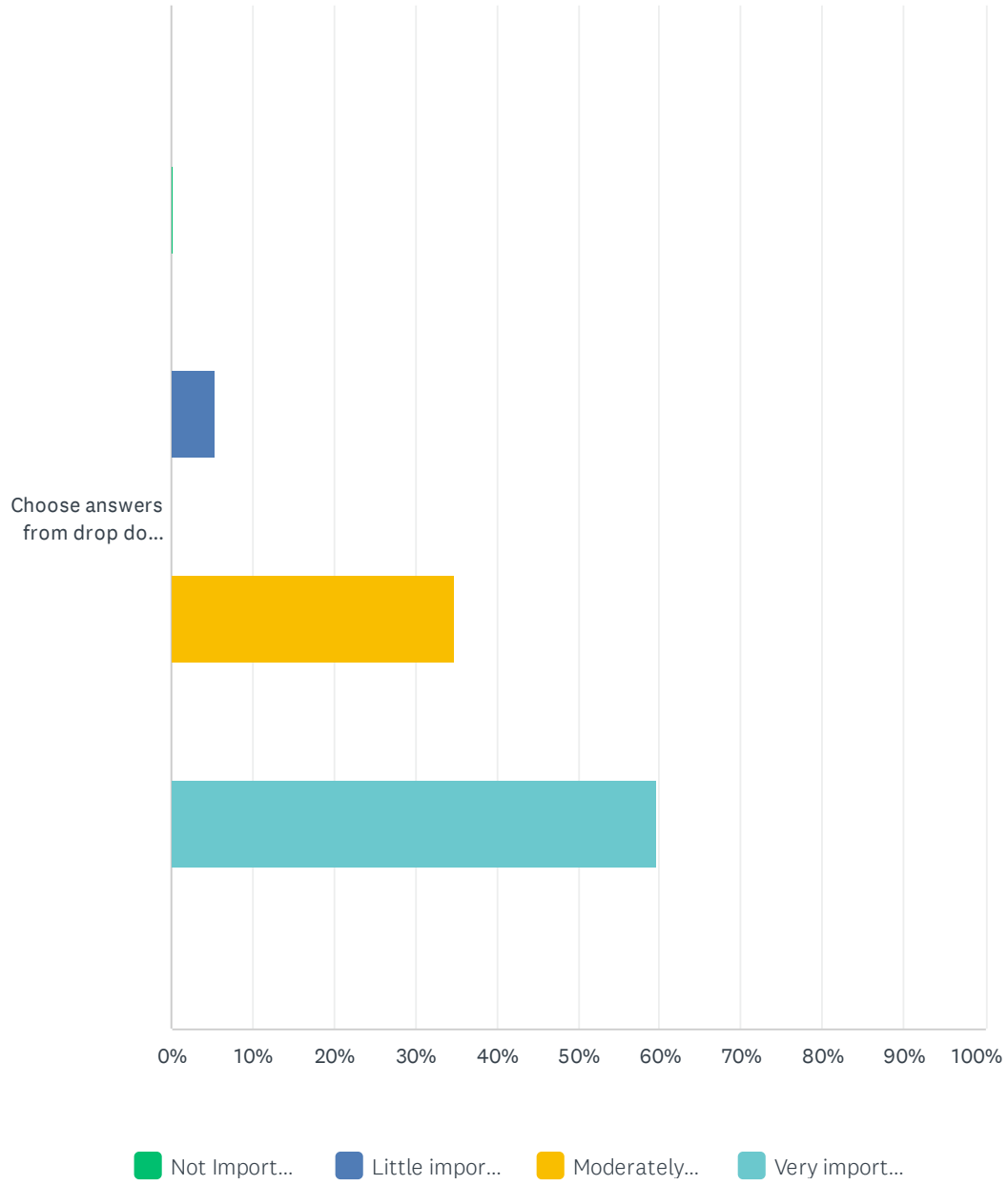
Q63 3.1.1.1.1 Current and prior work.

Answered: 332 Skipped: 878



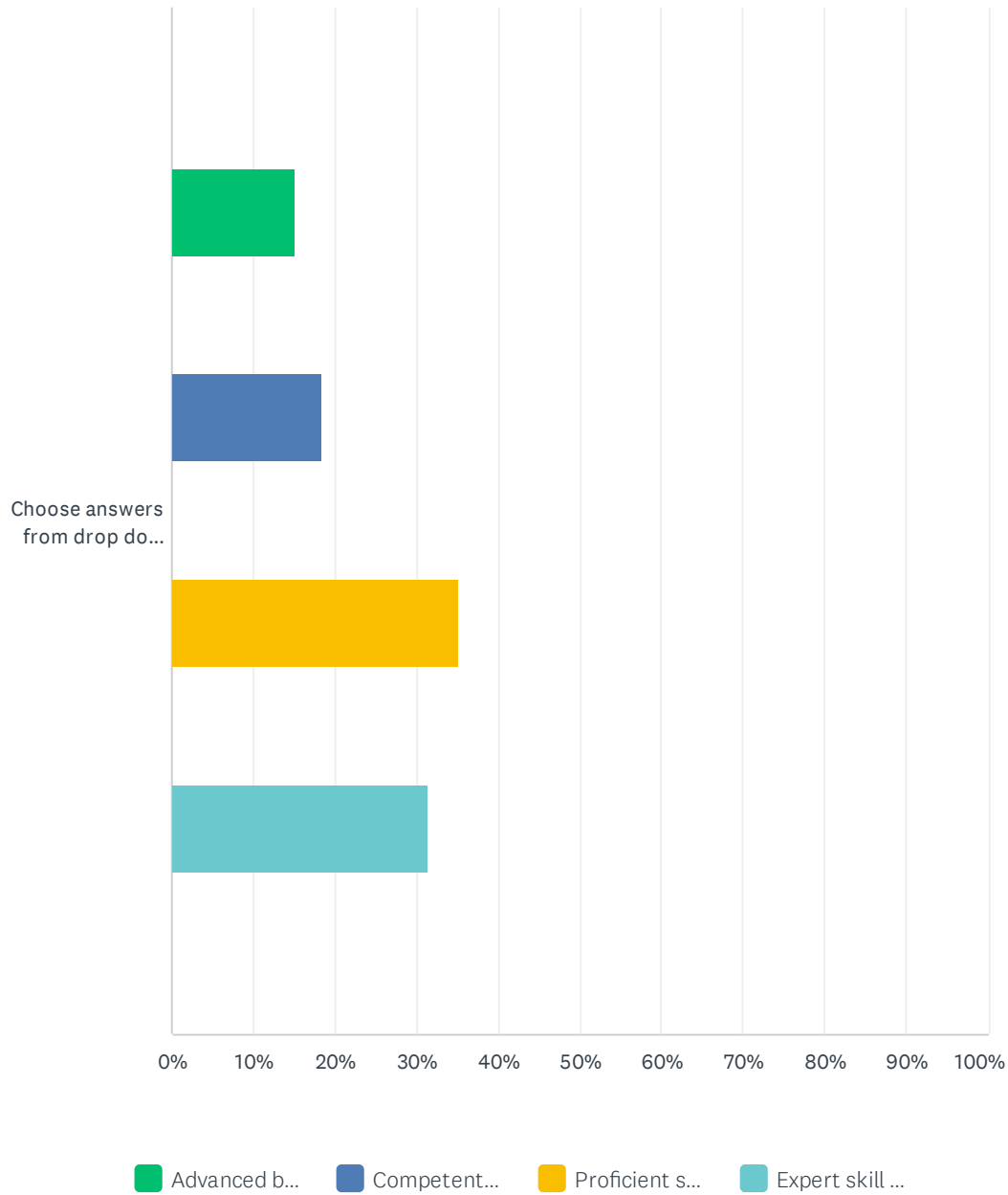
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.90% 3	4.52% 15	5.42% 18	18.67% 62	70.48% 234	332

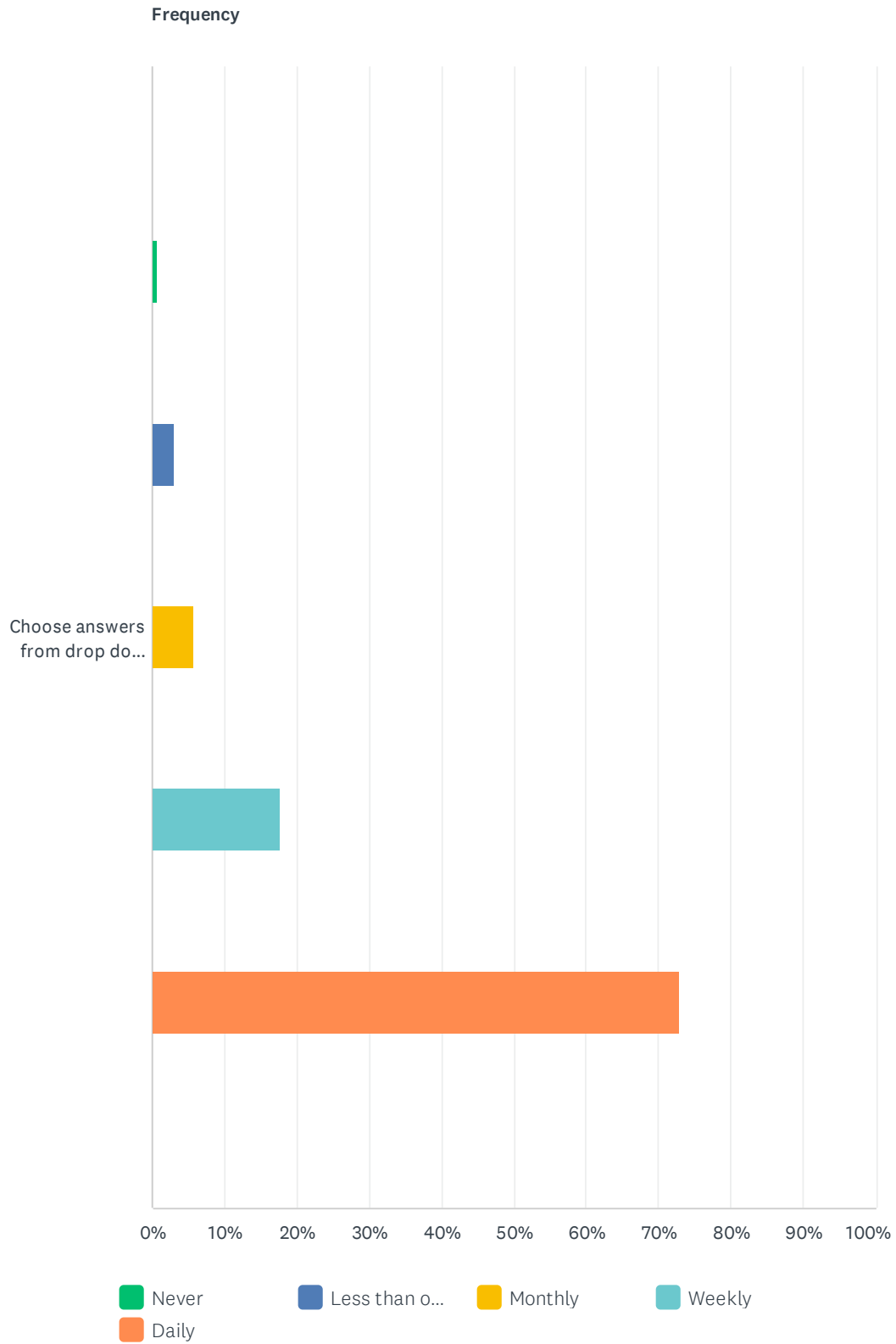
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.31% 1	5.28% 17	34.78% 112	59.63% 192	322

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	15.06% 47	18.27% 57	35.26% 110	31.41% 98	312

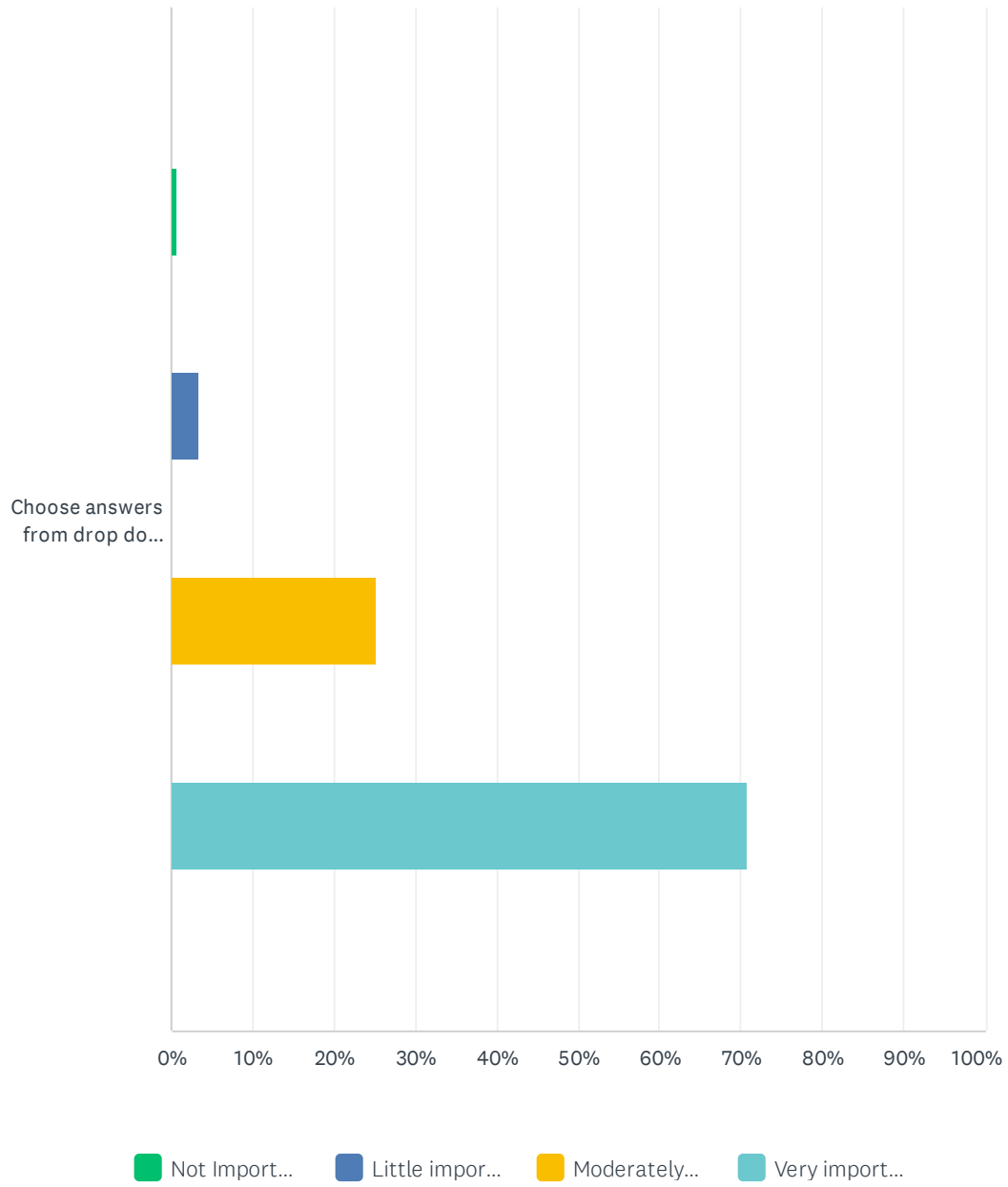
Q64 3.1.1.1.2 Activity requirements/occupational demands.

Answered: 332 Skipped: 878



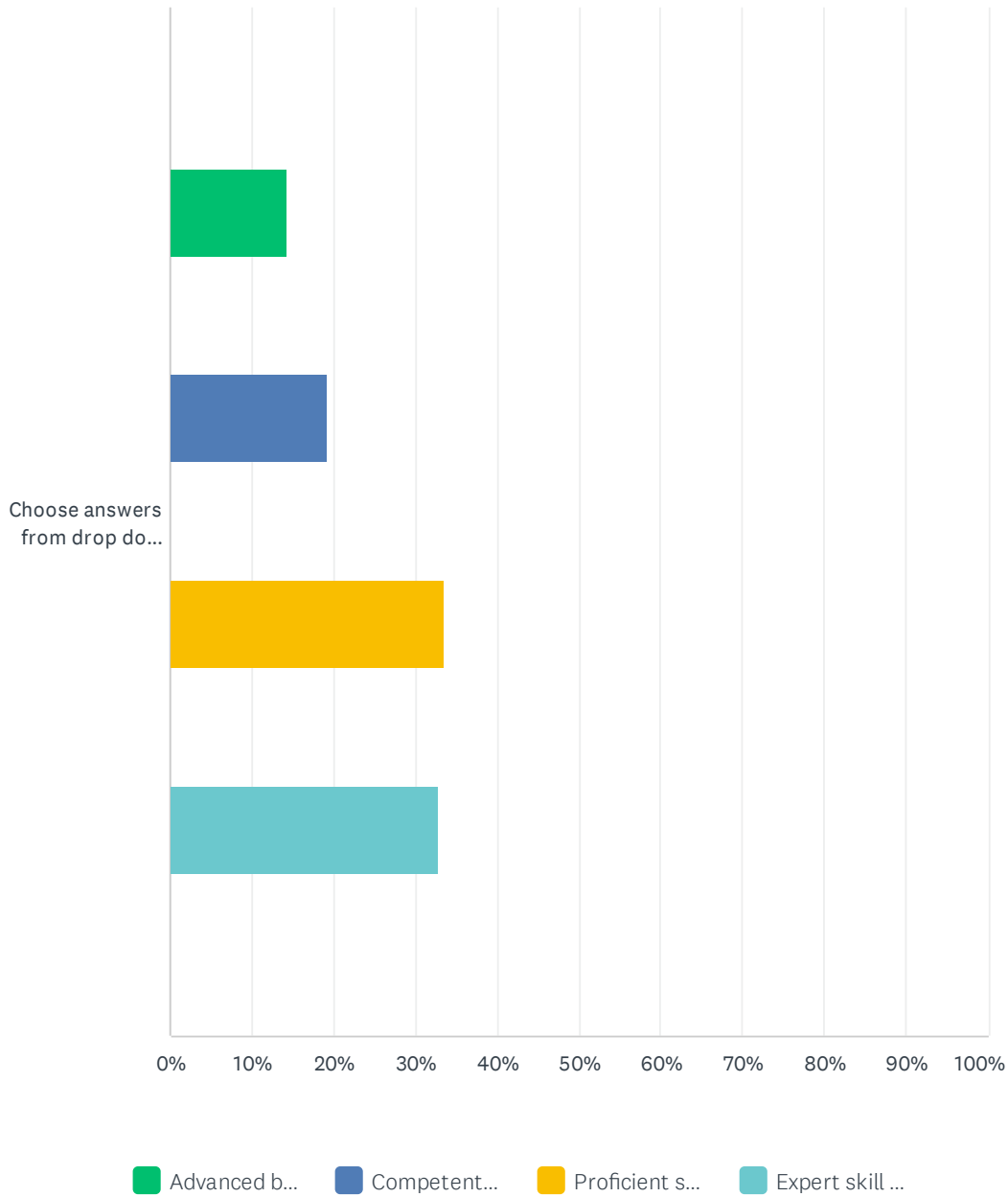
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.60% 2	3.01% 10	5.72% 19	17.77% 59	72.89% 242	332

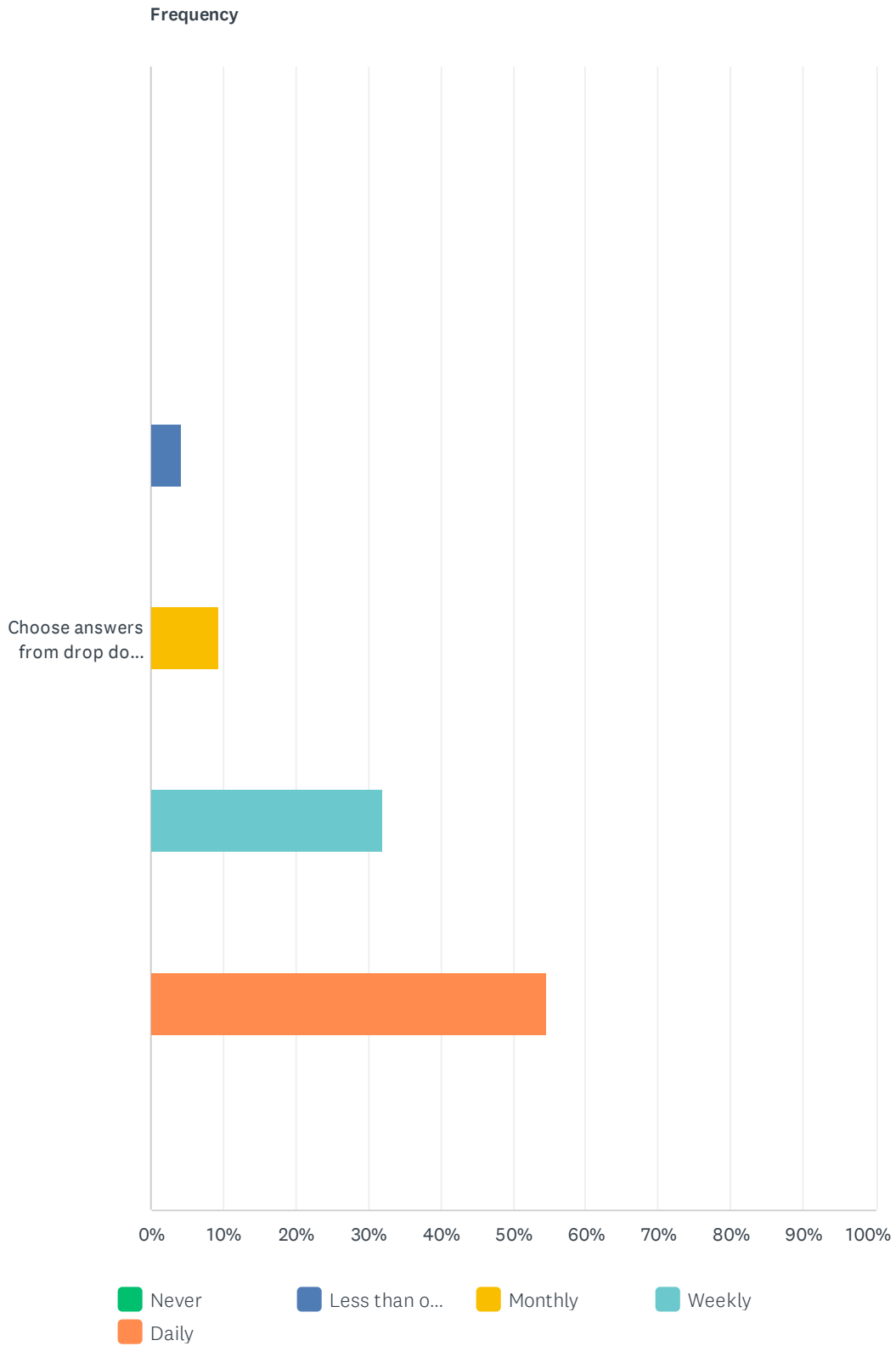
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.62% 2	3.42% 11	25.16% 81	70.81% 228	322

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	14.38% 45	19.17% 60	33.55% 105	32.91% 103	313

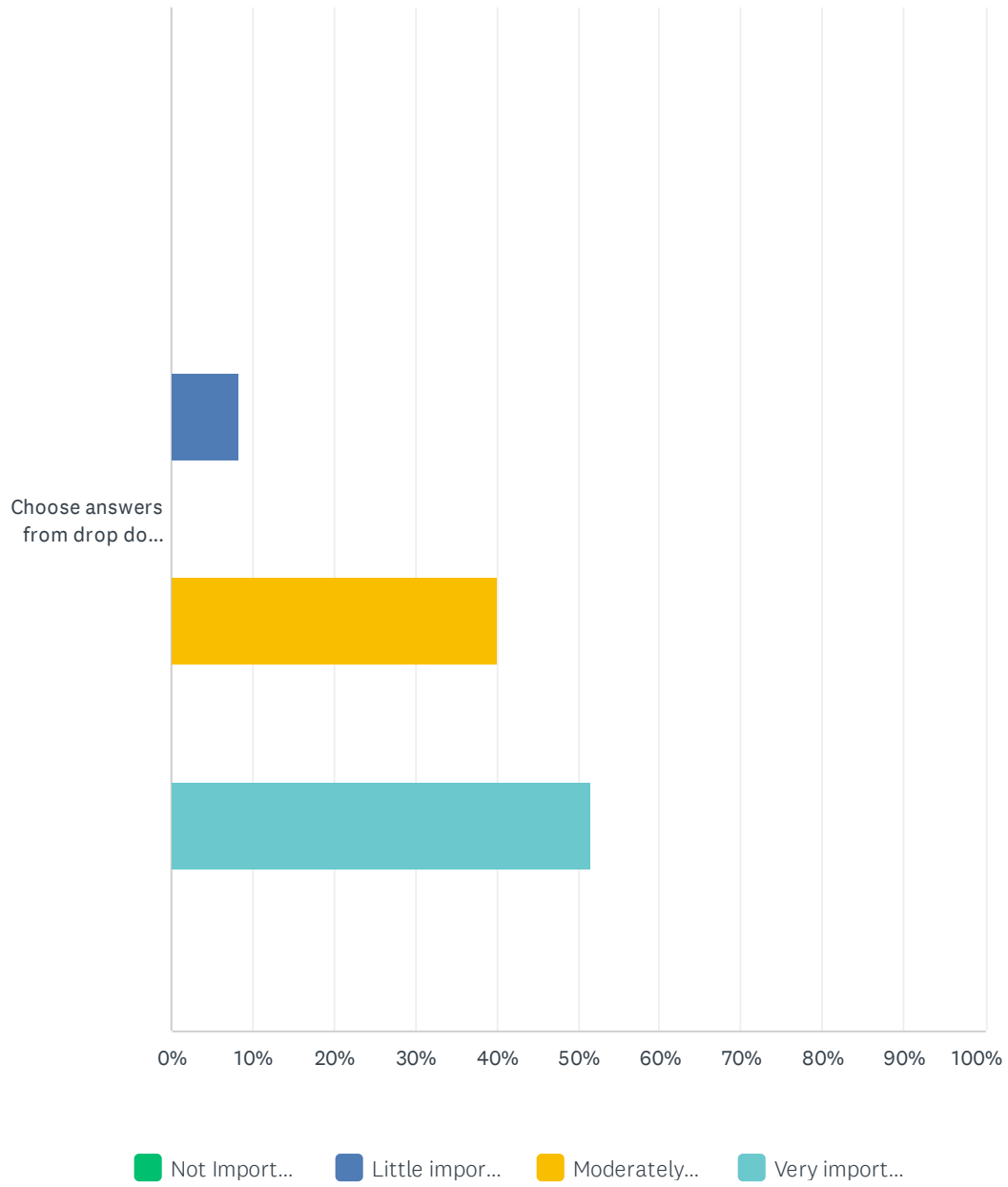
Q65 3.1.1.1.3 Ergonomic considerations.

Answered: 332 Skipped: 878



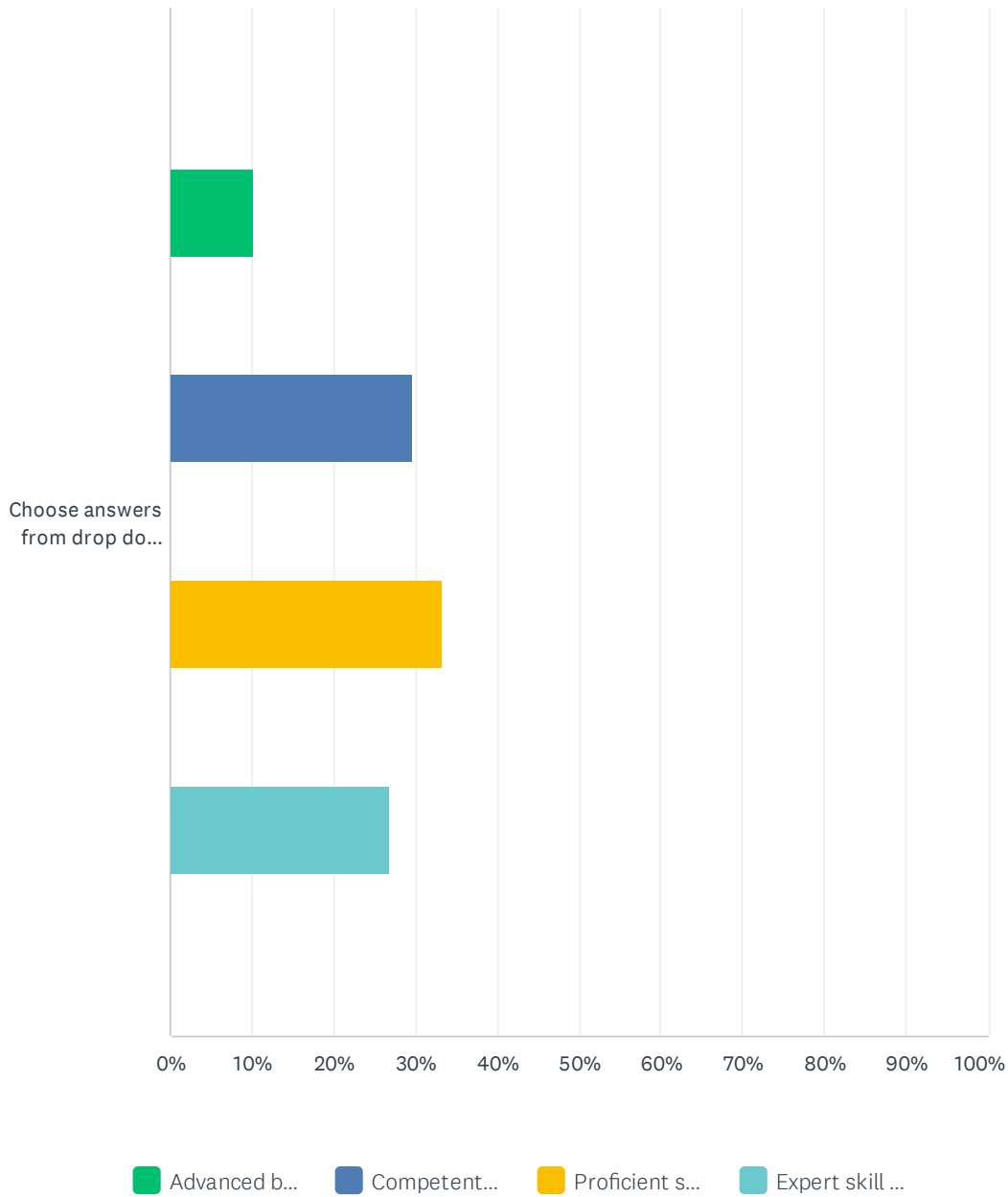
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	4.22% 14	9.34% 31	31.93% 106	54.52% 181	332

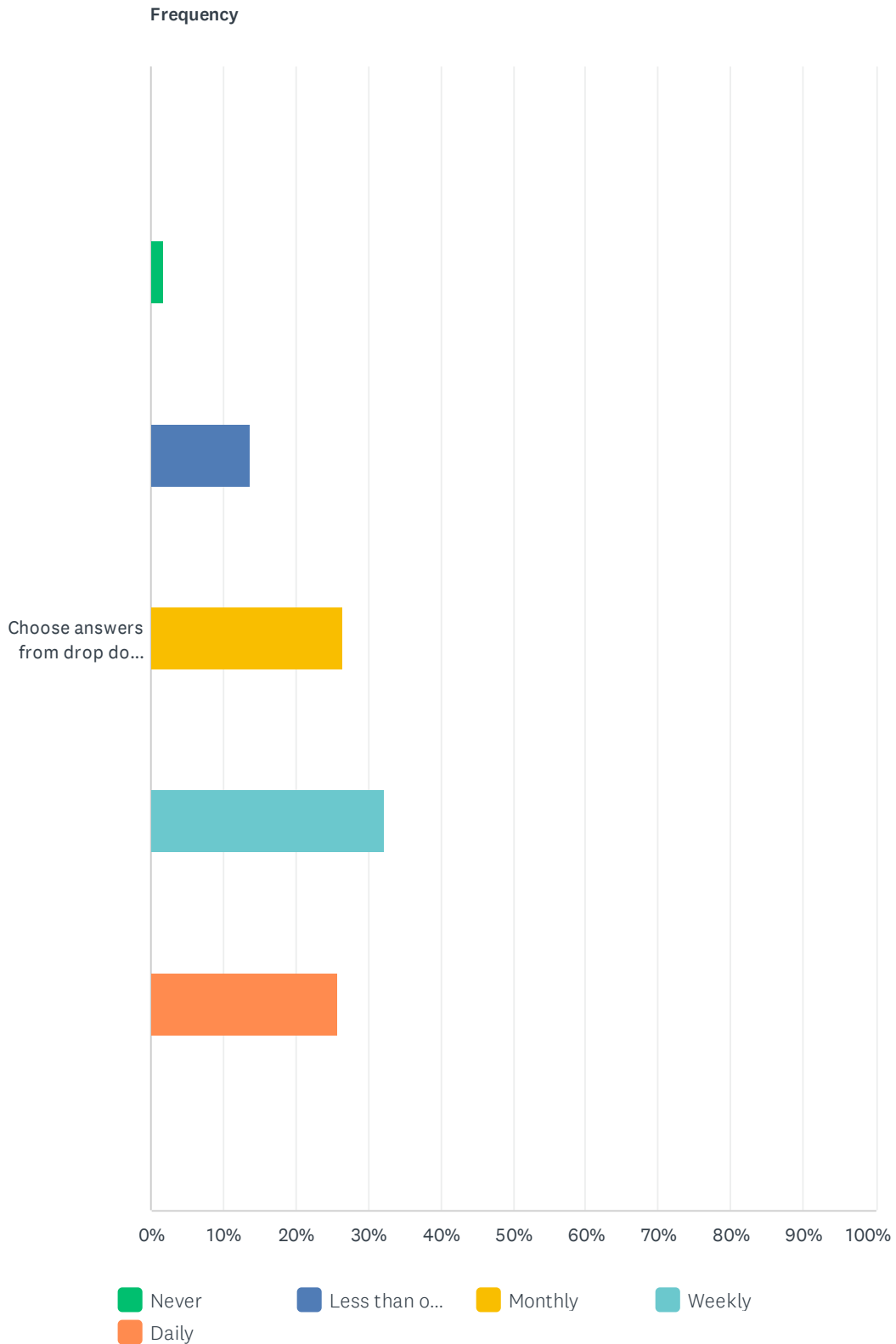
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	8.39% 27	40.06% 129	51.55% 166	322

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.22% 32	29.71% 93	33.23% 104	26.84% 84	313

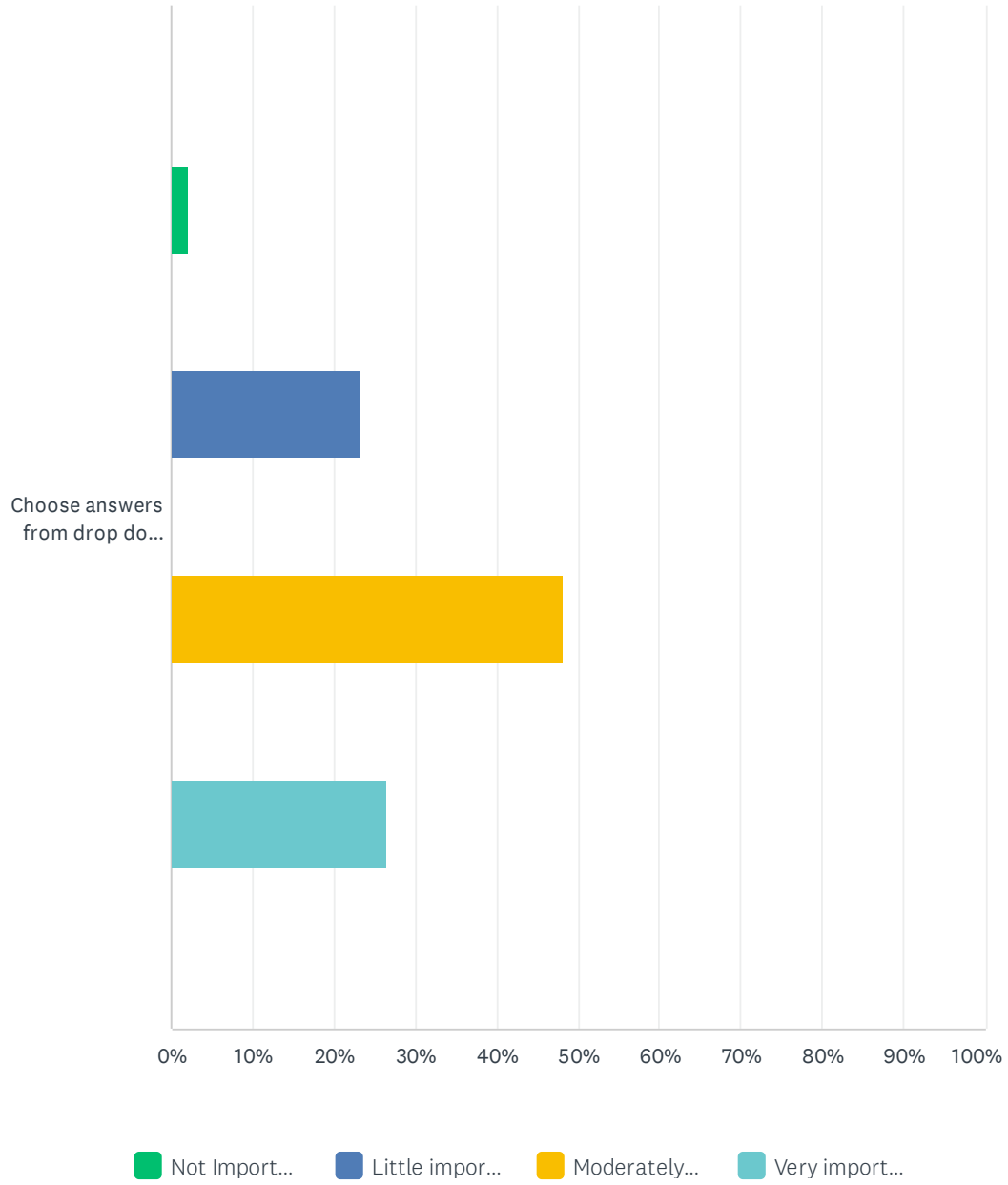
Q66 3.1.1.1.4 Utilization of adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).

Answered: 332 Skipped: 878



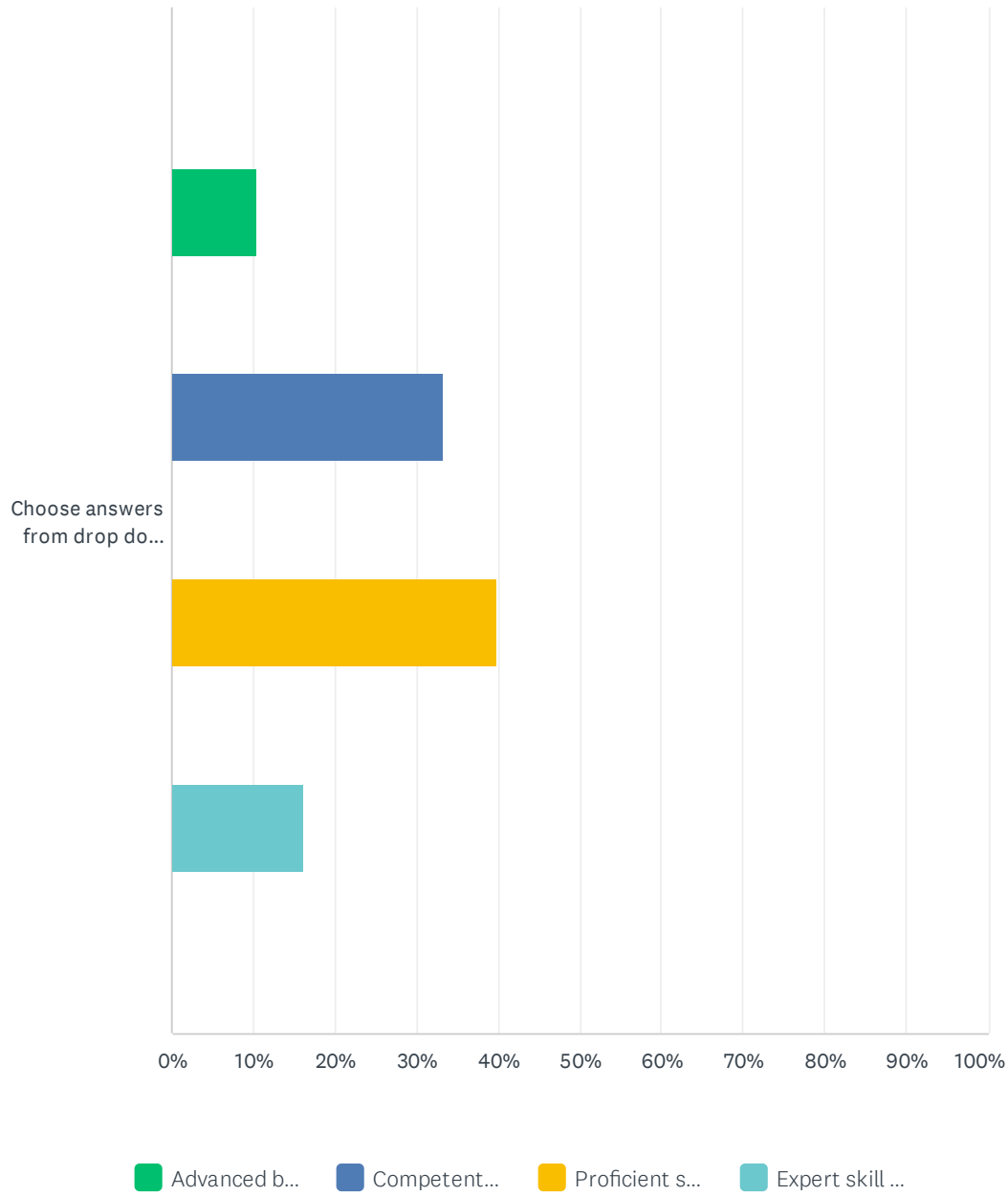
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.81% 6	13.55% 45	26.51% 88	32.23% 107	25.90% 86	332

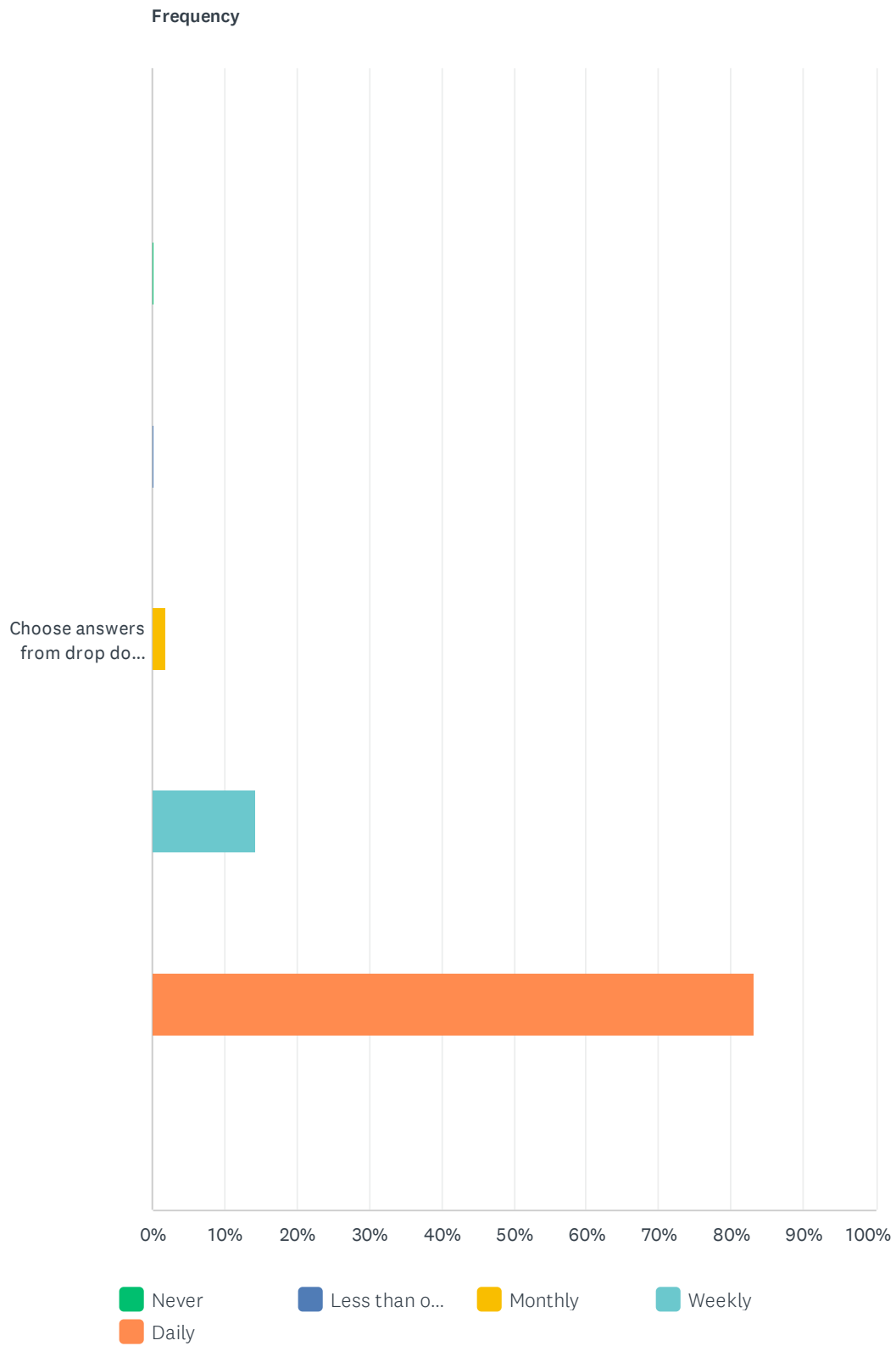
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.17% 7	23.29% 75	48.14% 155	26.40% 85	322

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.54% 33	33.23% 104	39.94% 125	16.29% 51	313

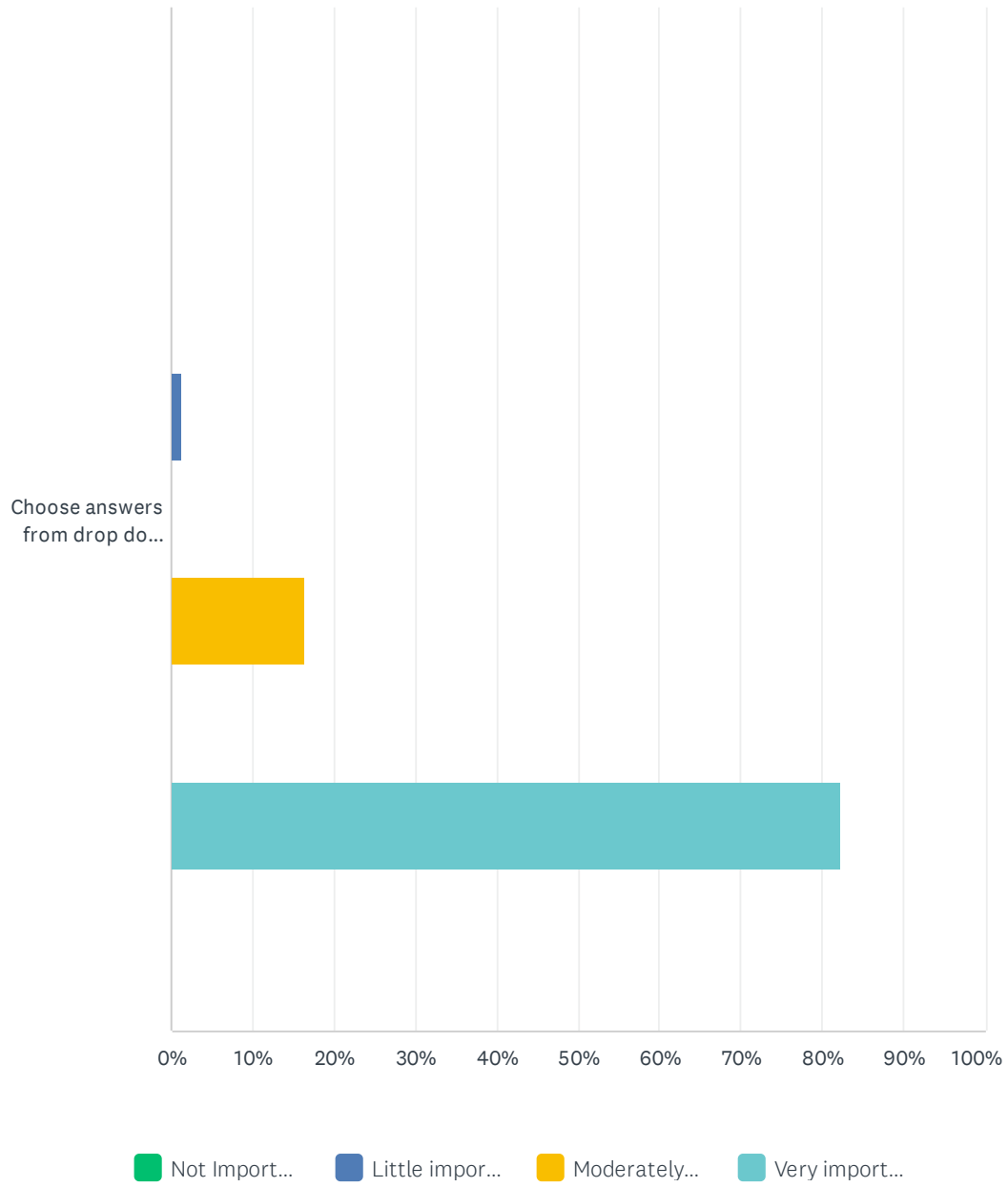
Q67 3.1.1.2.1 Recognition of contributions from multiple body regions.

Answered: 327 Skipped: 883



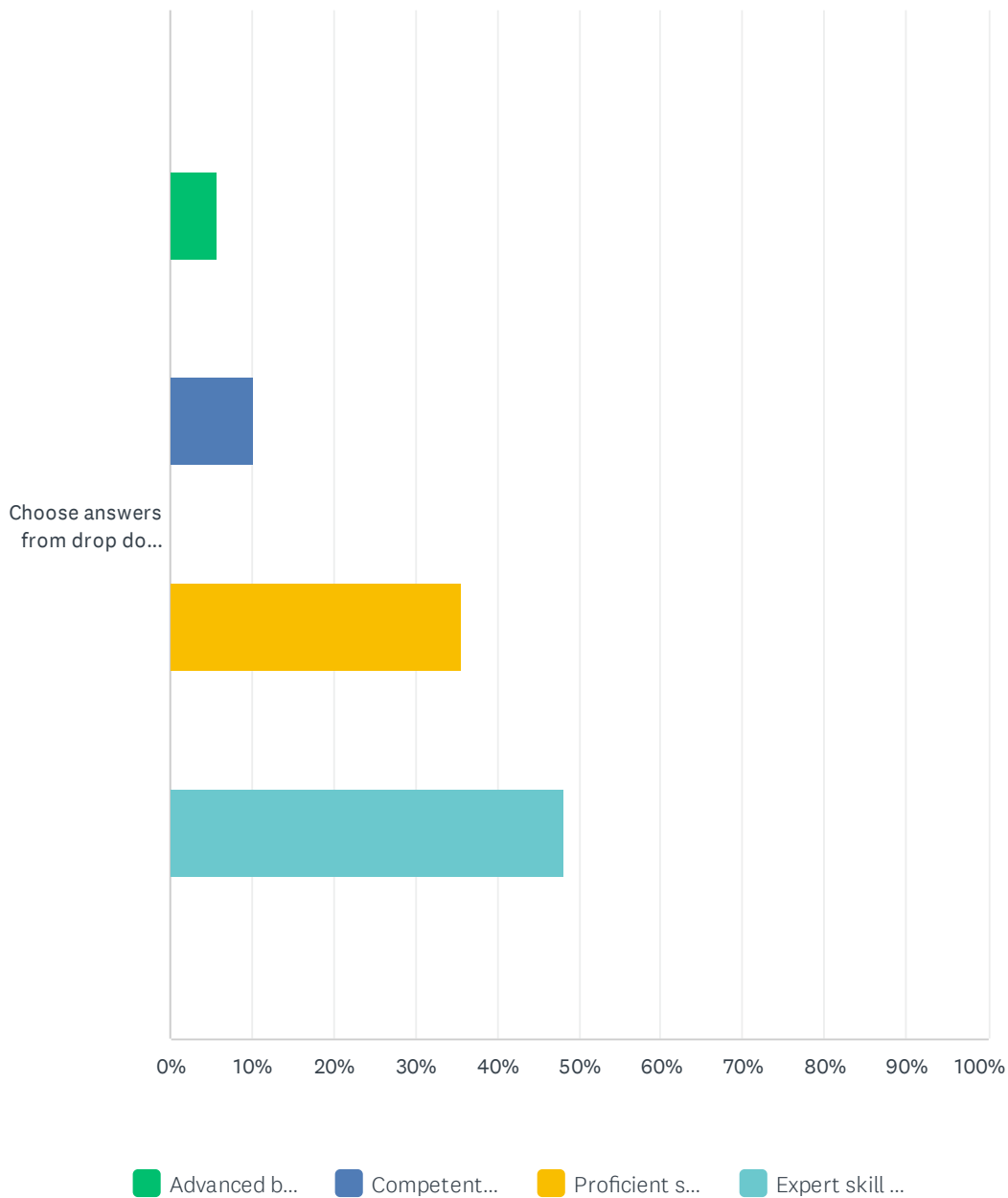
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.31% 1	0.31% 1	1.83% 6	14.37% 47	83.18% 272	327

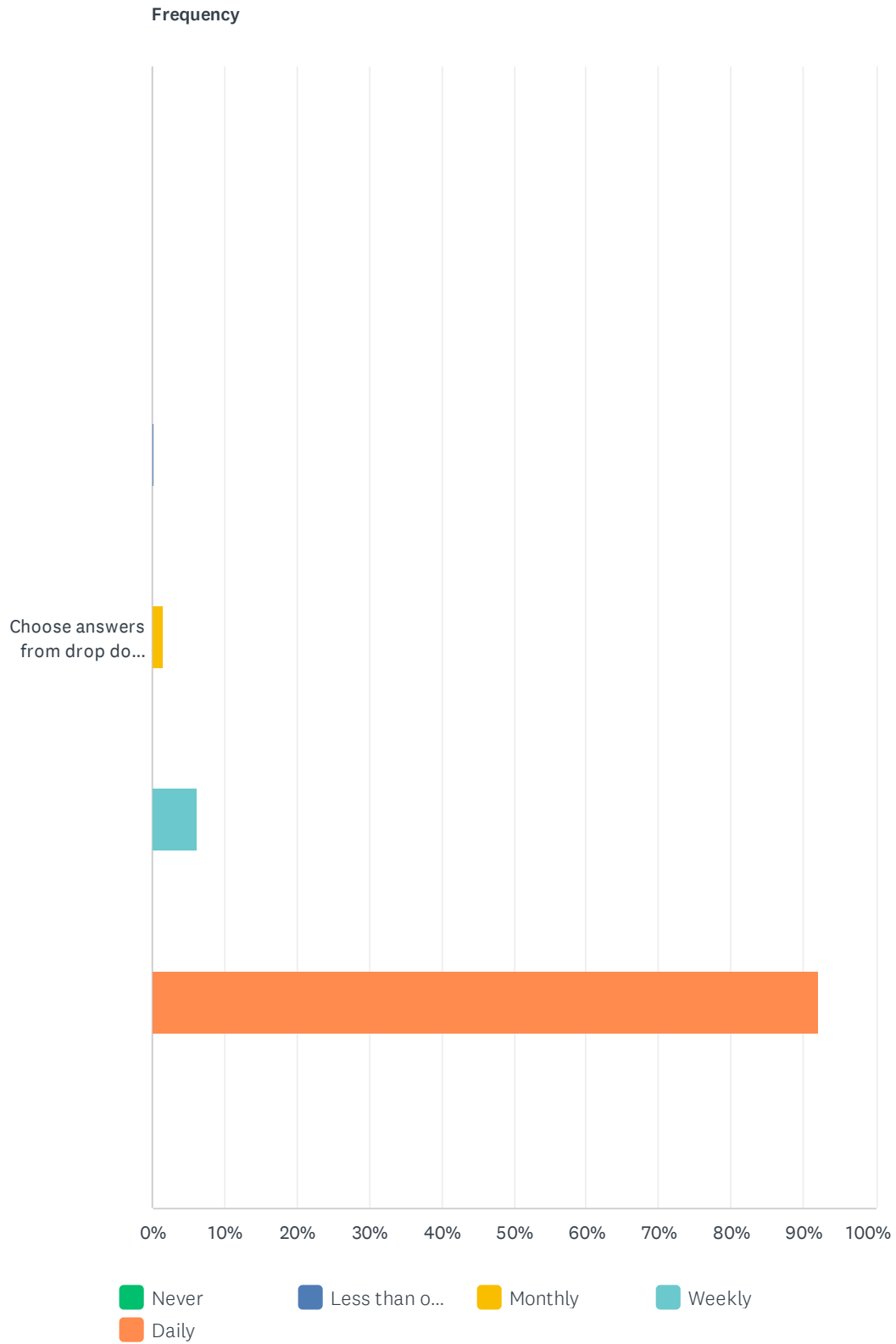
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.26% 4	16.35% 52	82.39% 262	318

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.79% 18	10.29% 32	35.69% 111	48.23% 150	311

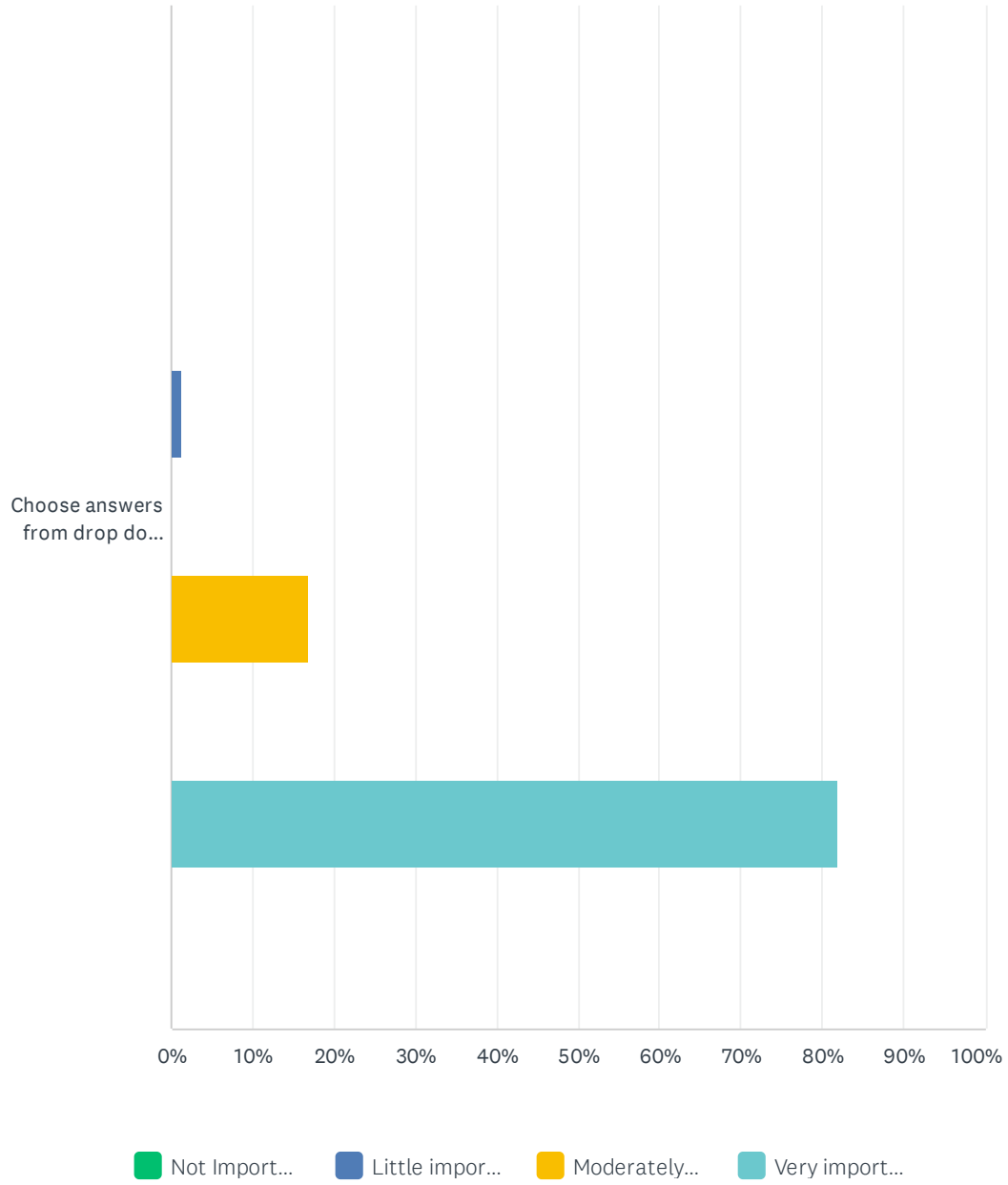
Q68 3.1.1.2.2 Quality and behavior of symptoms.

Answered: 327 Skipped: 883



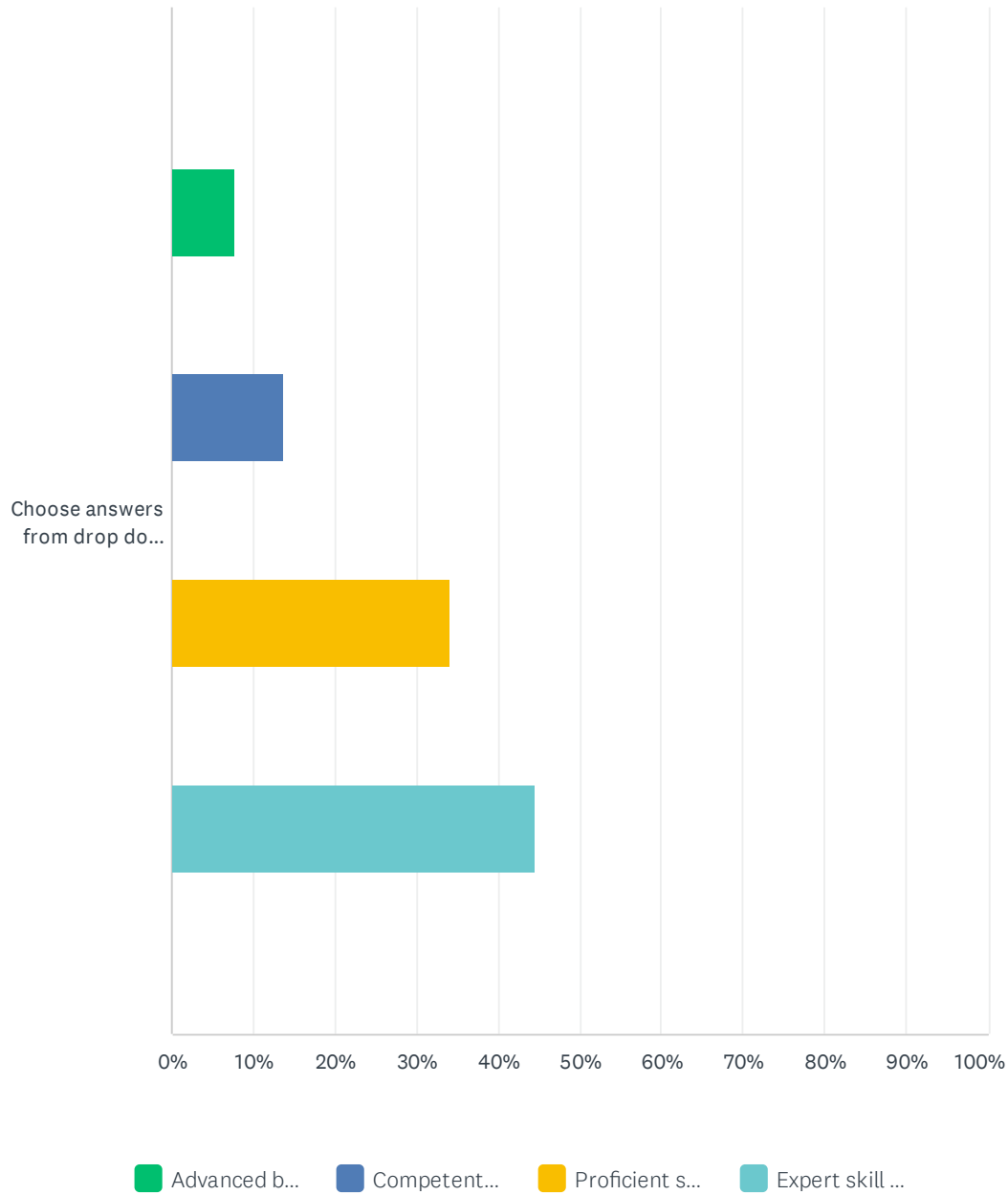
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.31% 1	1.53% 5	6.13% 20	92.02% 300	326

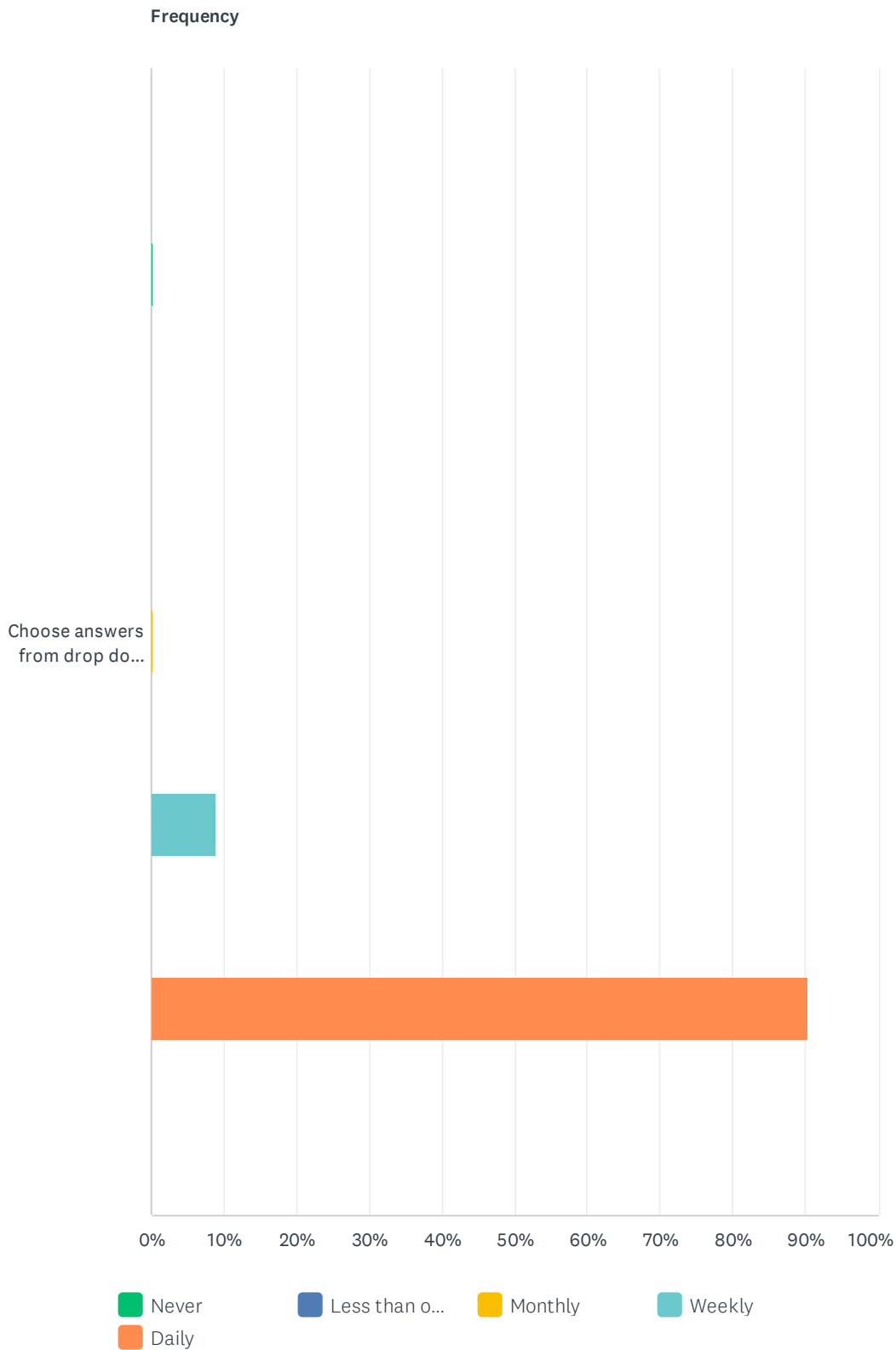
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.27% 4	16.77% 53	81.96% 259	316

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.74% 24	13.55% 42	34.19% 106	44.52% 138	310

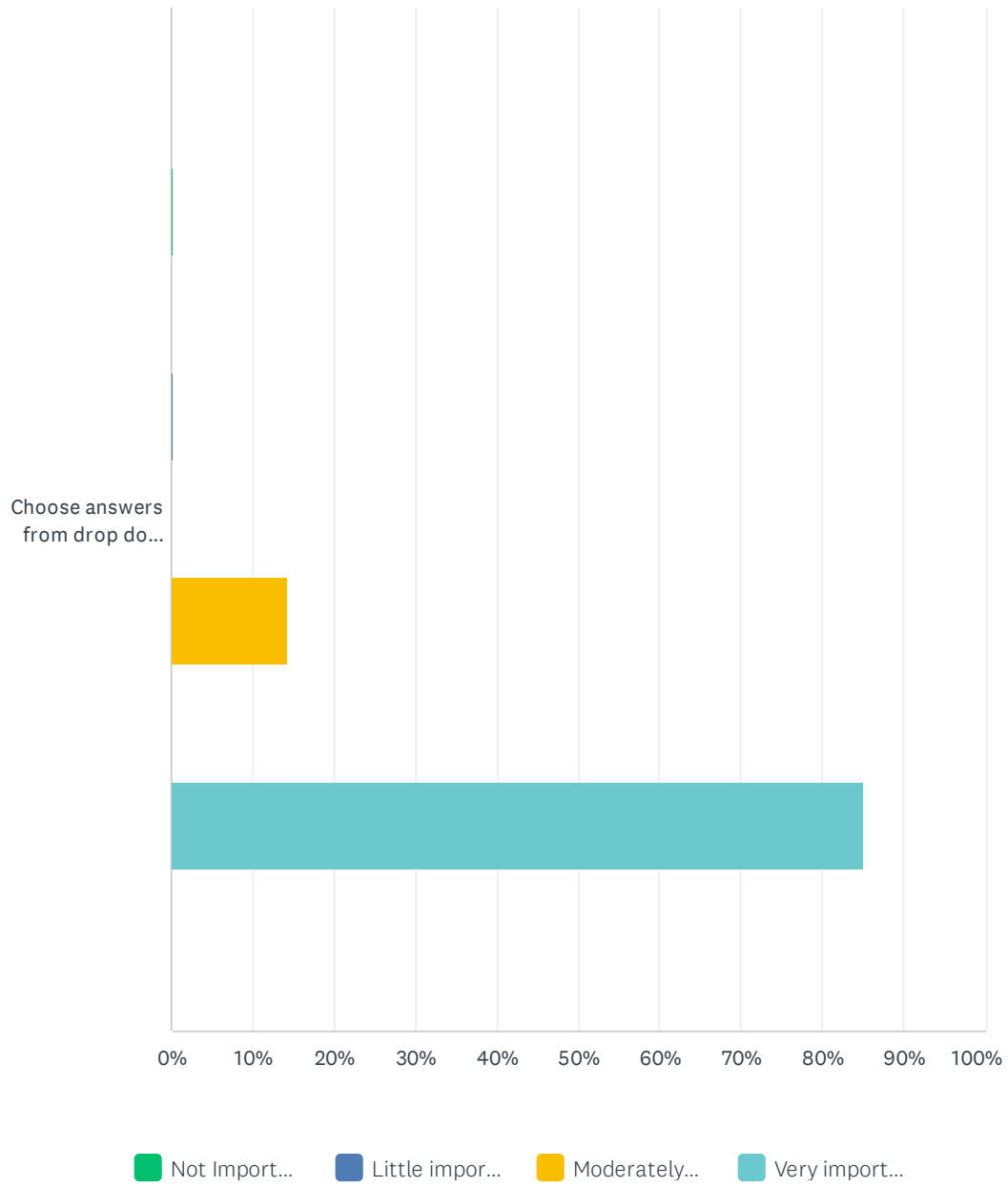
Q69 3.1.1.2.3 Symptom irritability (onset, offset, and overall baseline).

Answered: 326 Skipped: 884



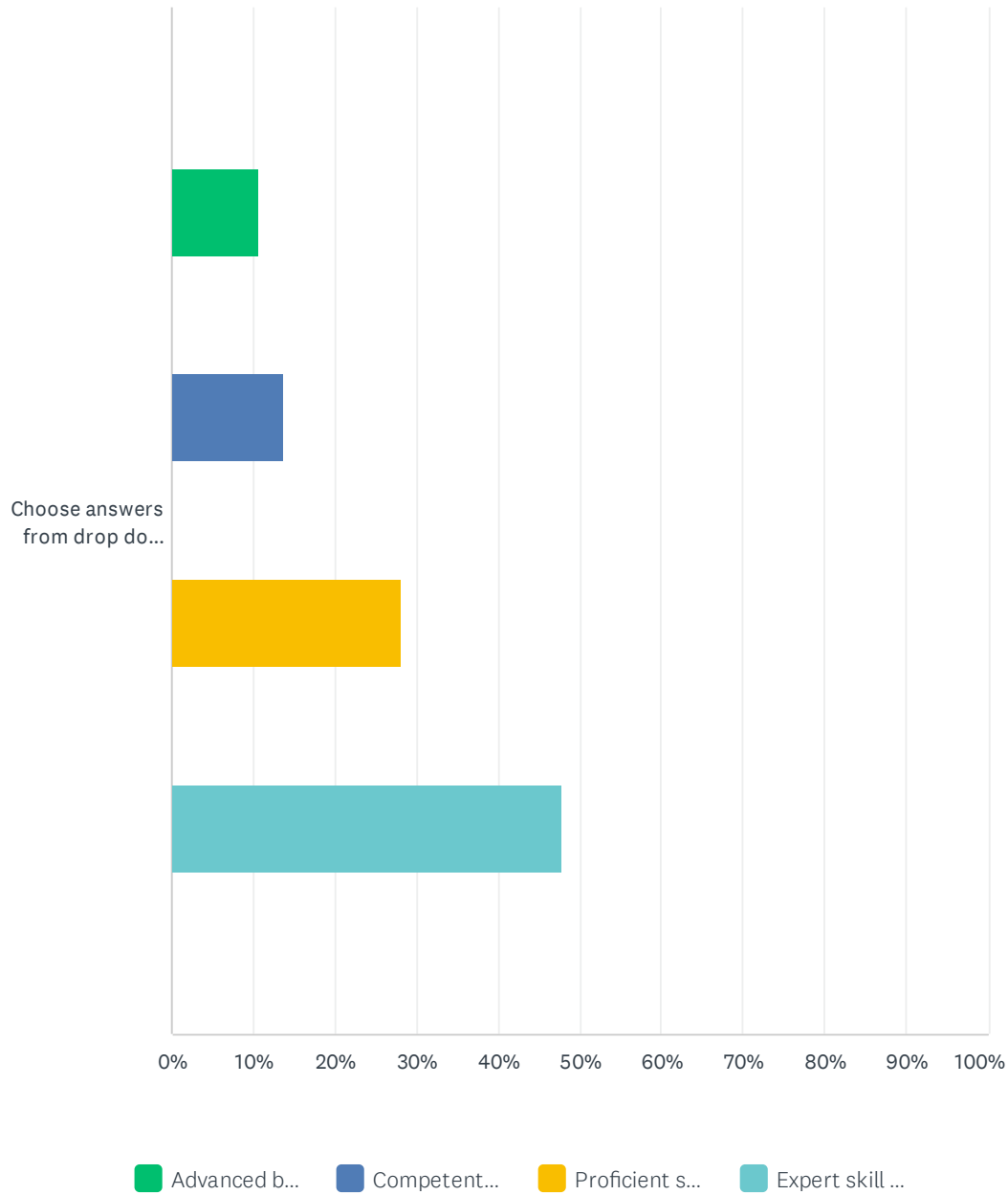
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.31% 1	0.00% 0	0.31% 1	8.90% 29	90.49% 295	326

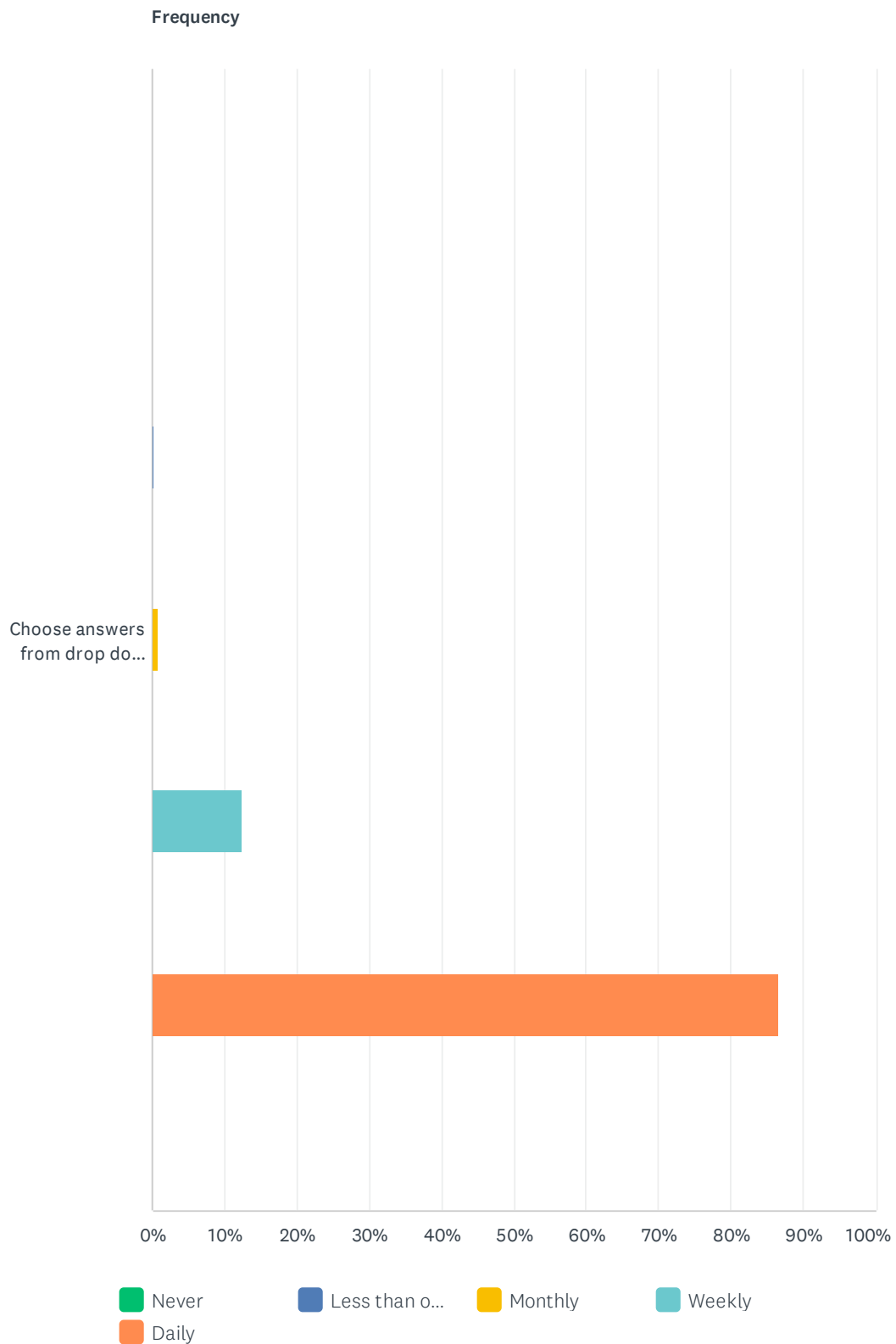
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.32% 1	0.32% 1	14.24% 45	85.13% 269	316

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.65% 33	13.55% 42	28.06% 87	47.74% 148	310

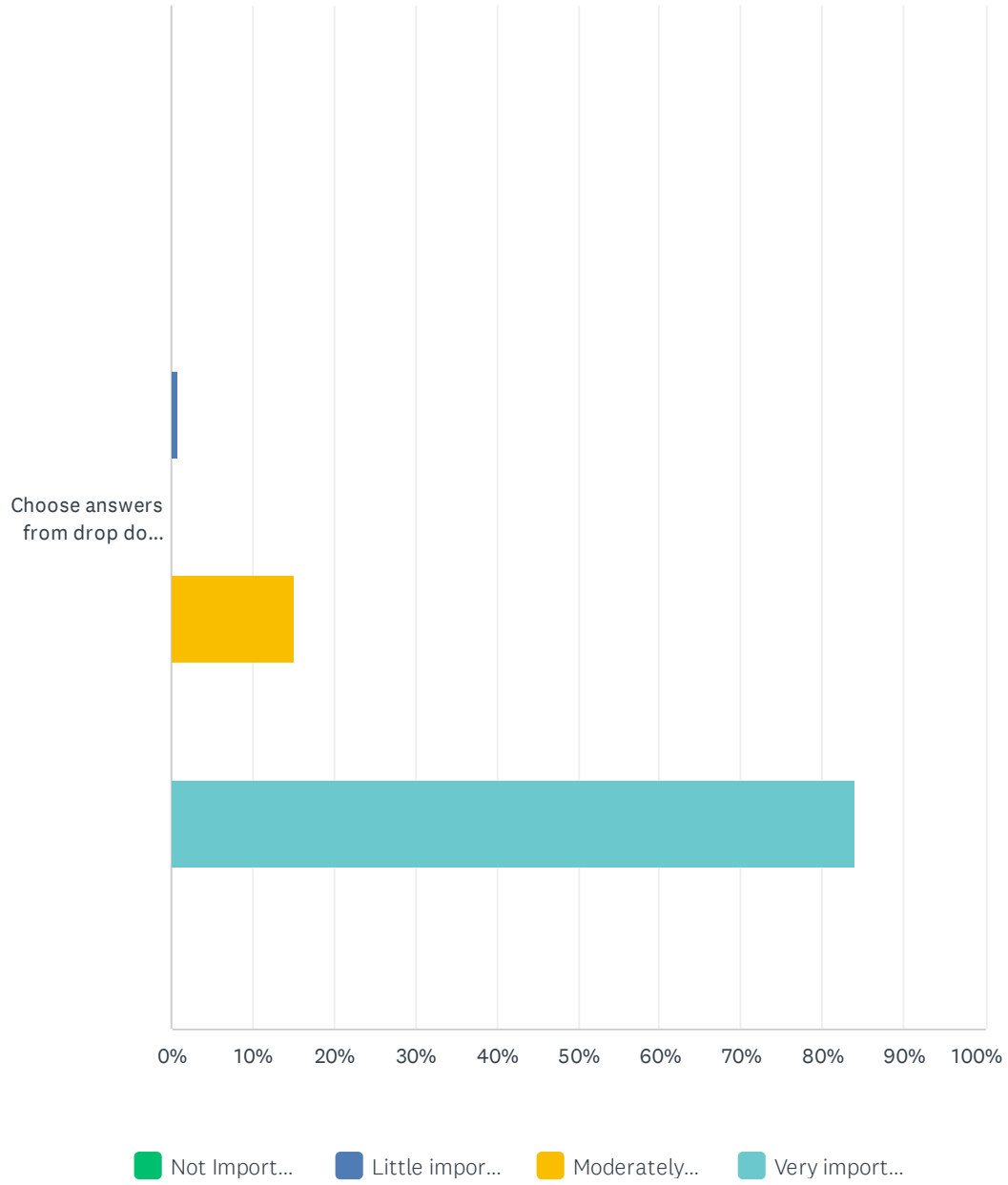
Q70 3.1.1.2.4 Onset of condition (e.g., mechanism of injury, insidious onset, potential contributing factors).

Answered: 326 Skipped: 884



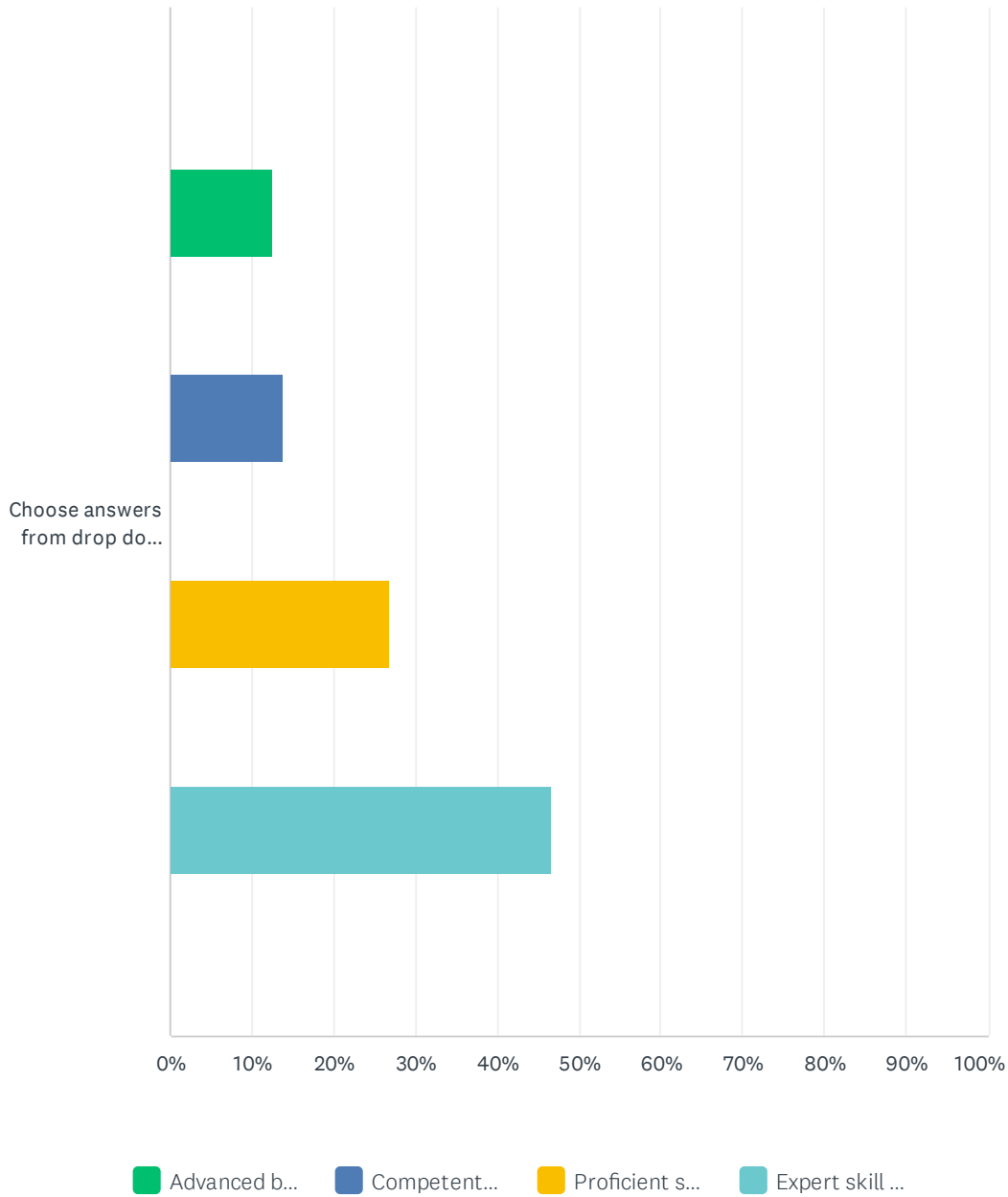
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.31% 1	0.92% 3	12.31% 40	86.46% 281	325

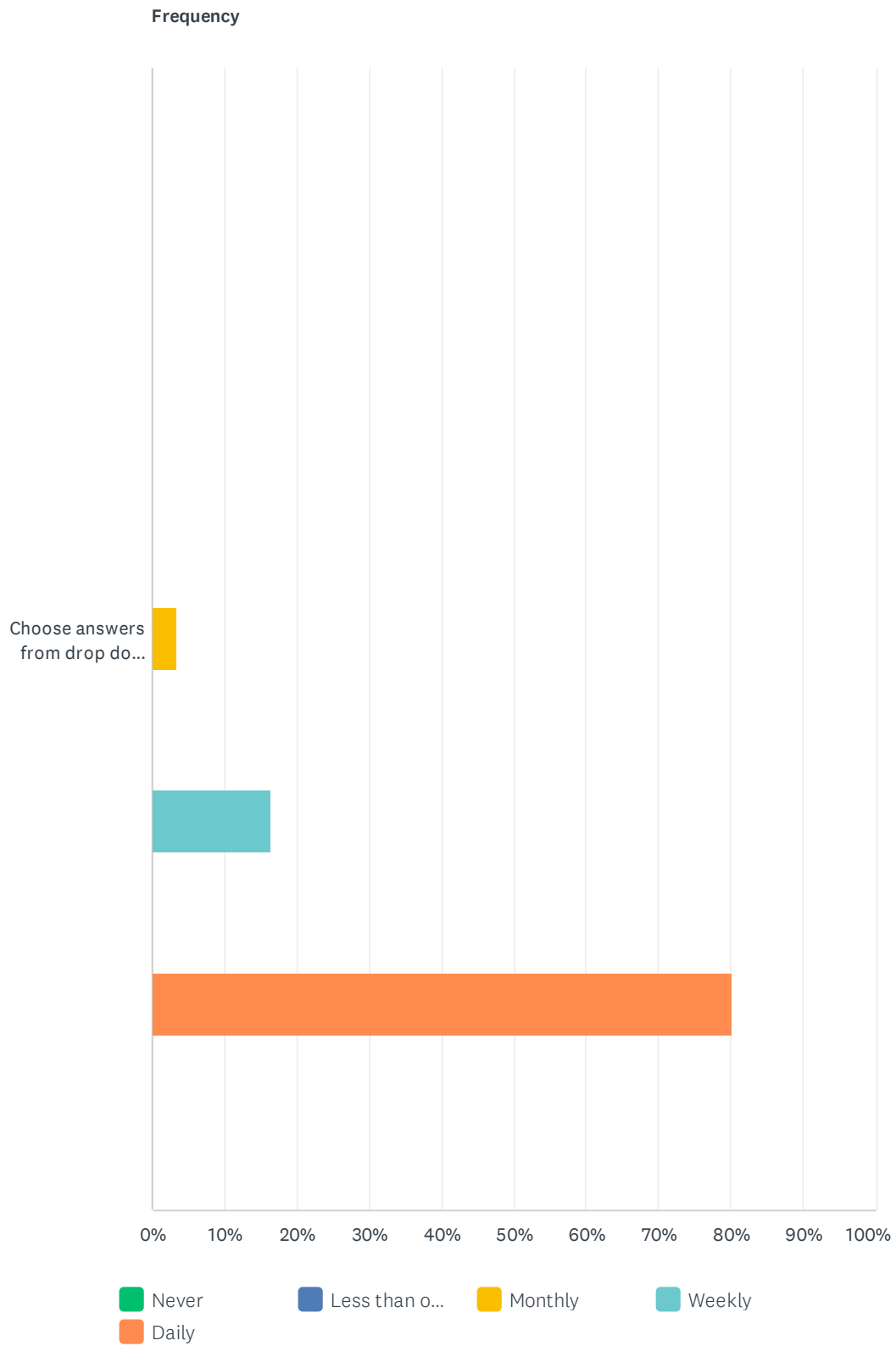
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.95% 3	15.14% 48	83.91% 266	317

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.62% 39	13.92% 43	26.86% 83	46.60% 144	309

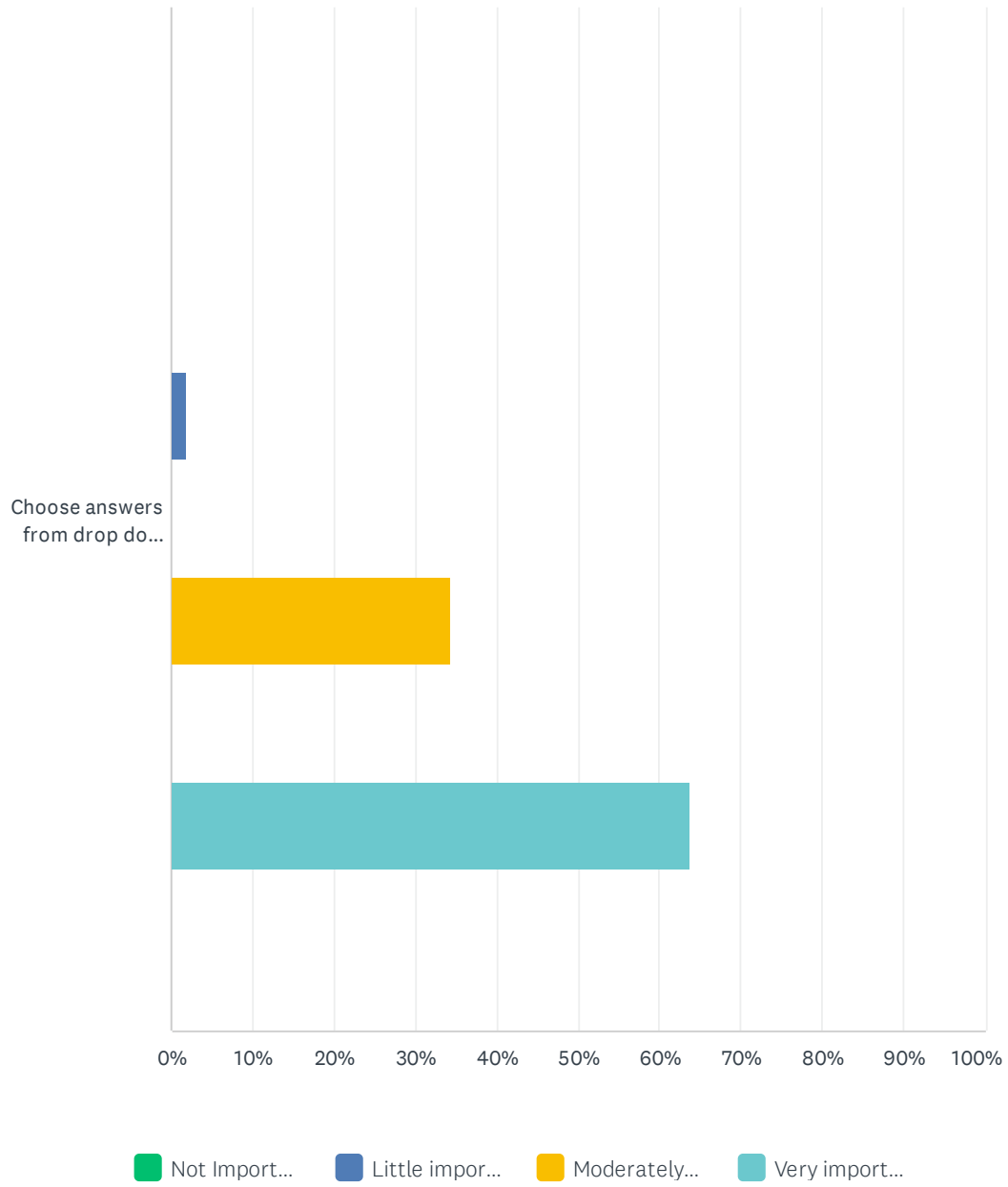
Q71 3.1.1.2.5 Current and previous therapeutic interventions.

Answered: 327 Skipped: 883



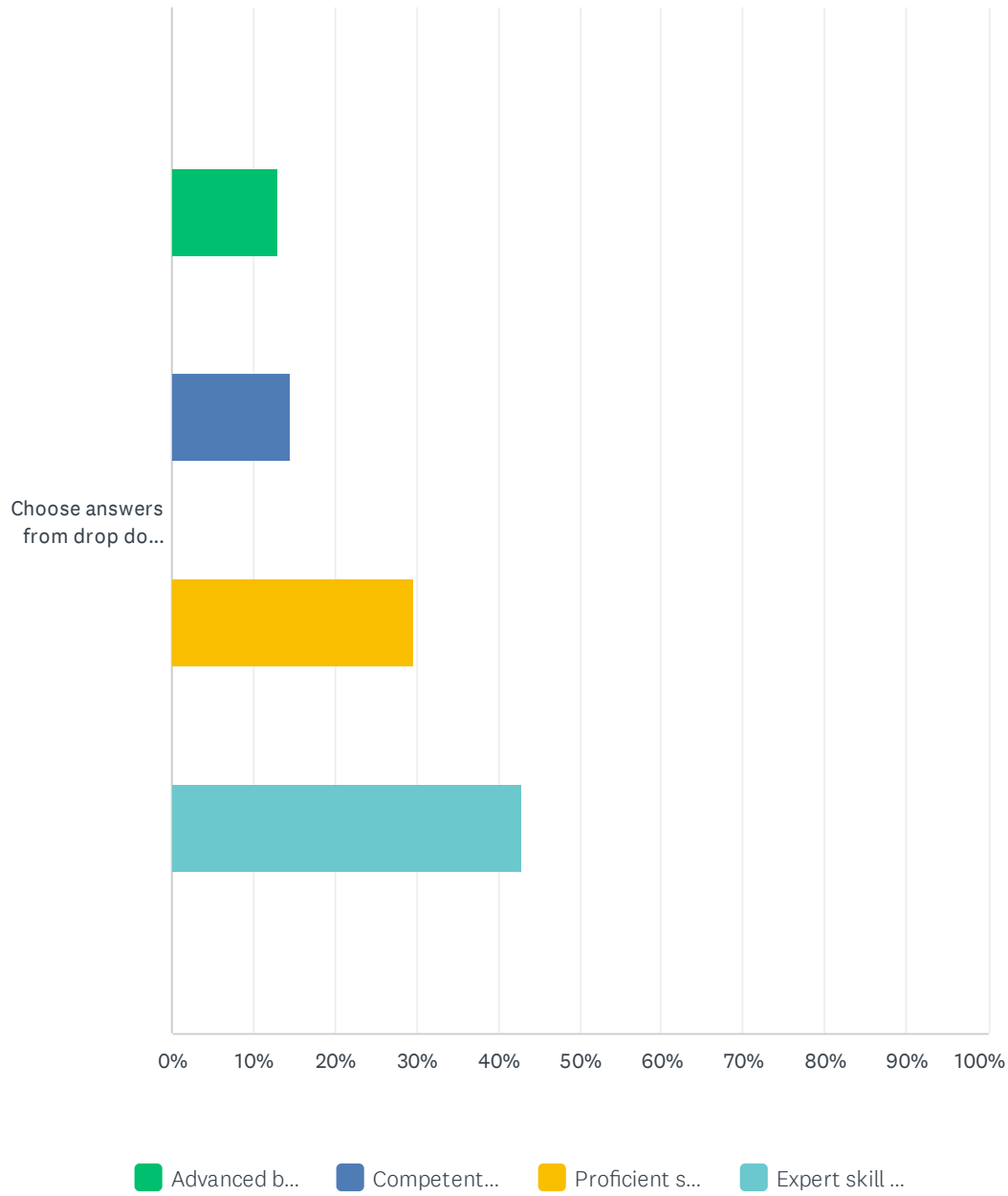
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	3.36% 11	16.51% 54	80.12% 262	327

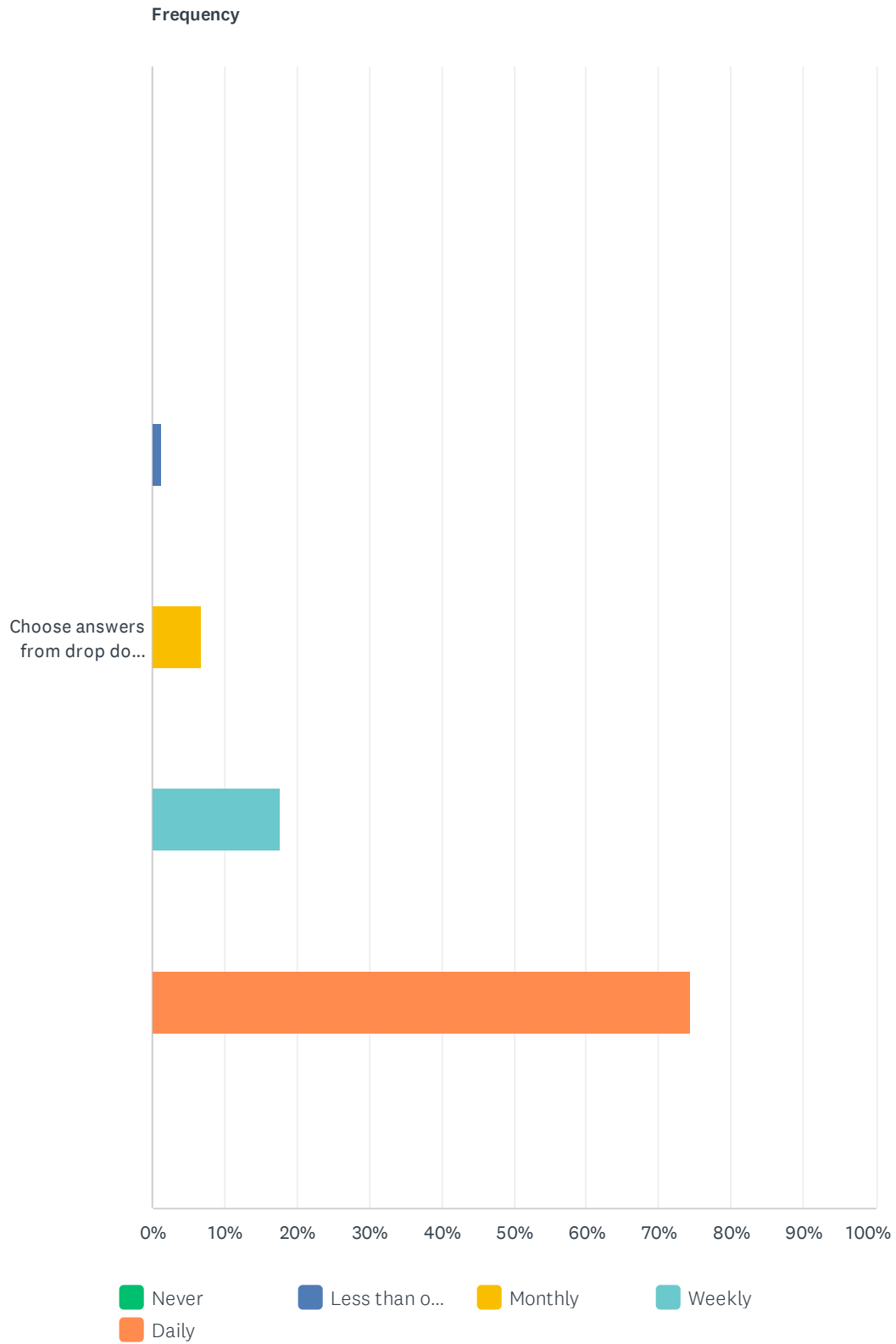
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.89% 6	34.38% 109	63.72% 202	317

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.90% 40	14.52% 45	29.68% 92	42.90% 133	310

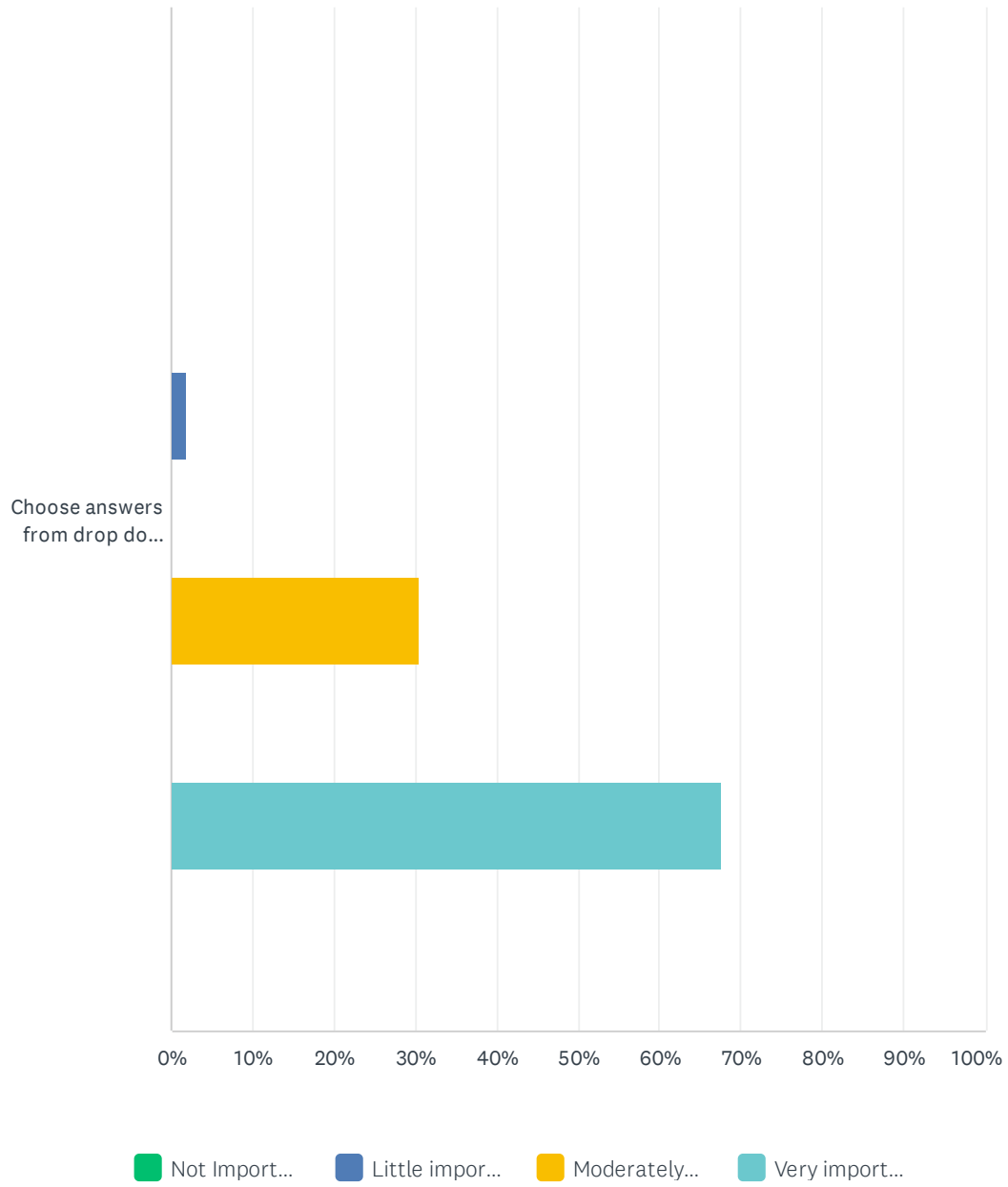
Q72 3.1.1.2.6 Readiness for change.

Answered: 327 Skipped: 883



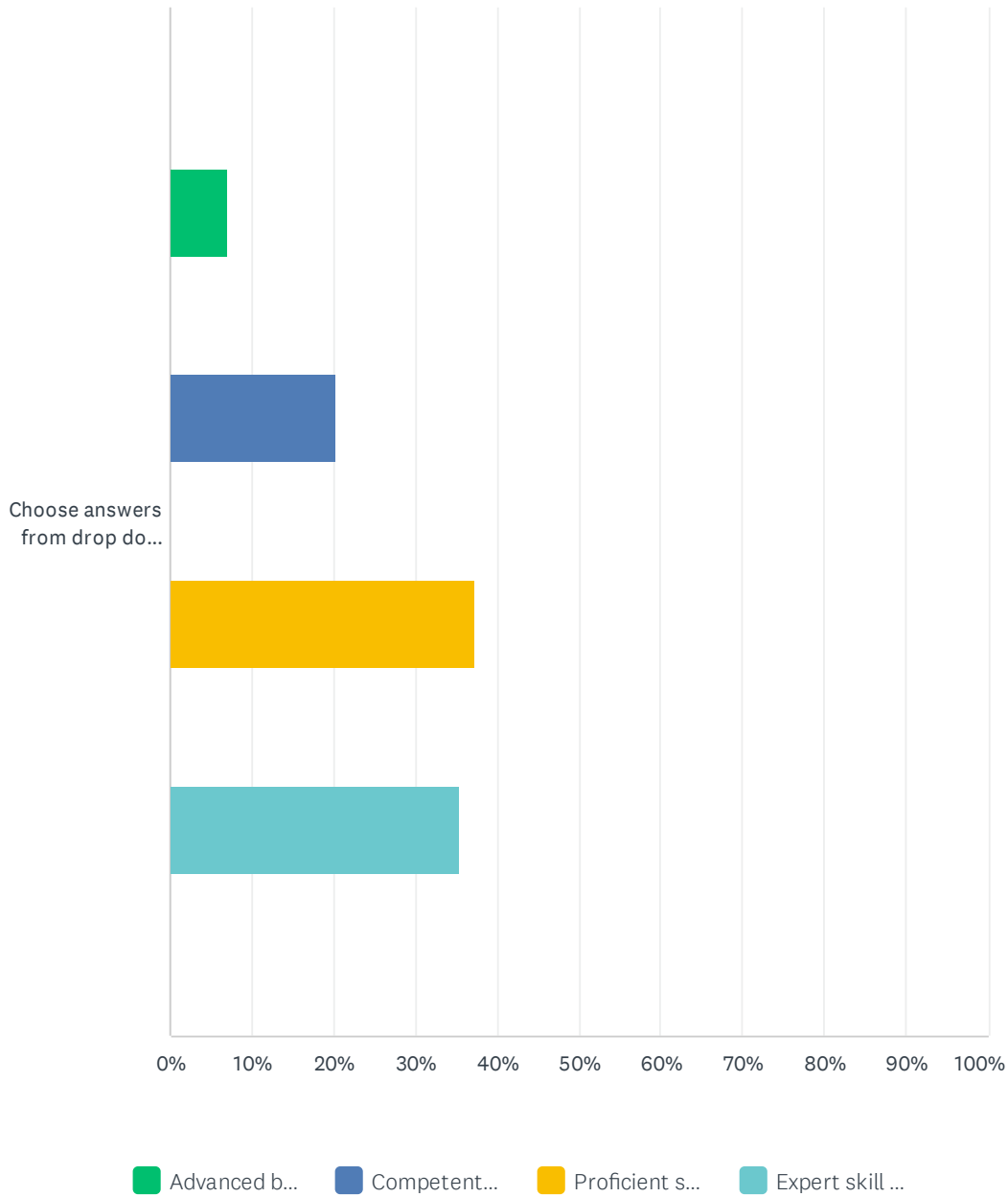
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.22% 4	6.73% 22	17.74% 58	74.31% 243	327

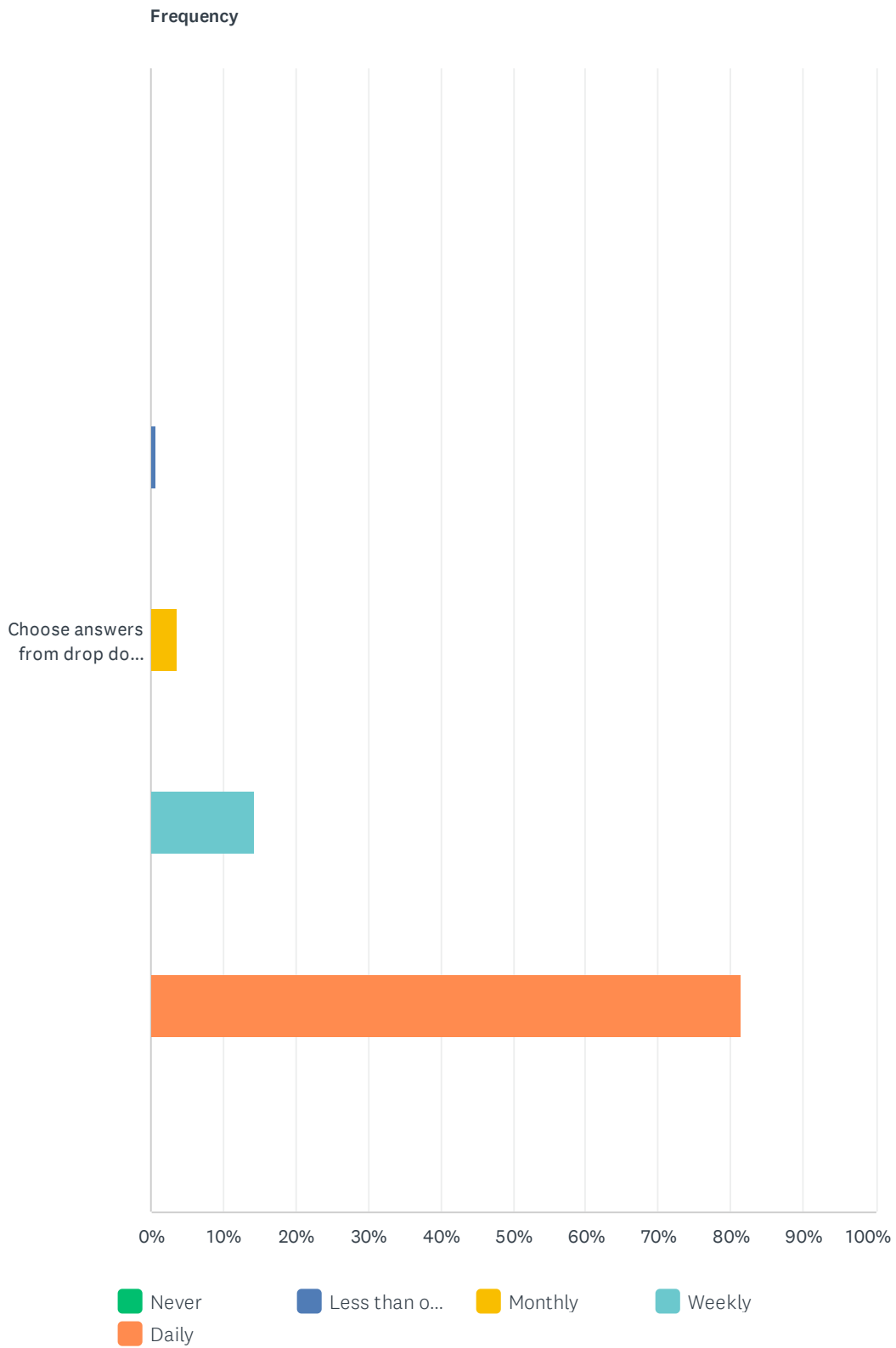
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.89% 6	30.50% 97	67.61% 215	318

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.07% 22	20.26% 63	37.30% 116	35.37% 110	311

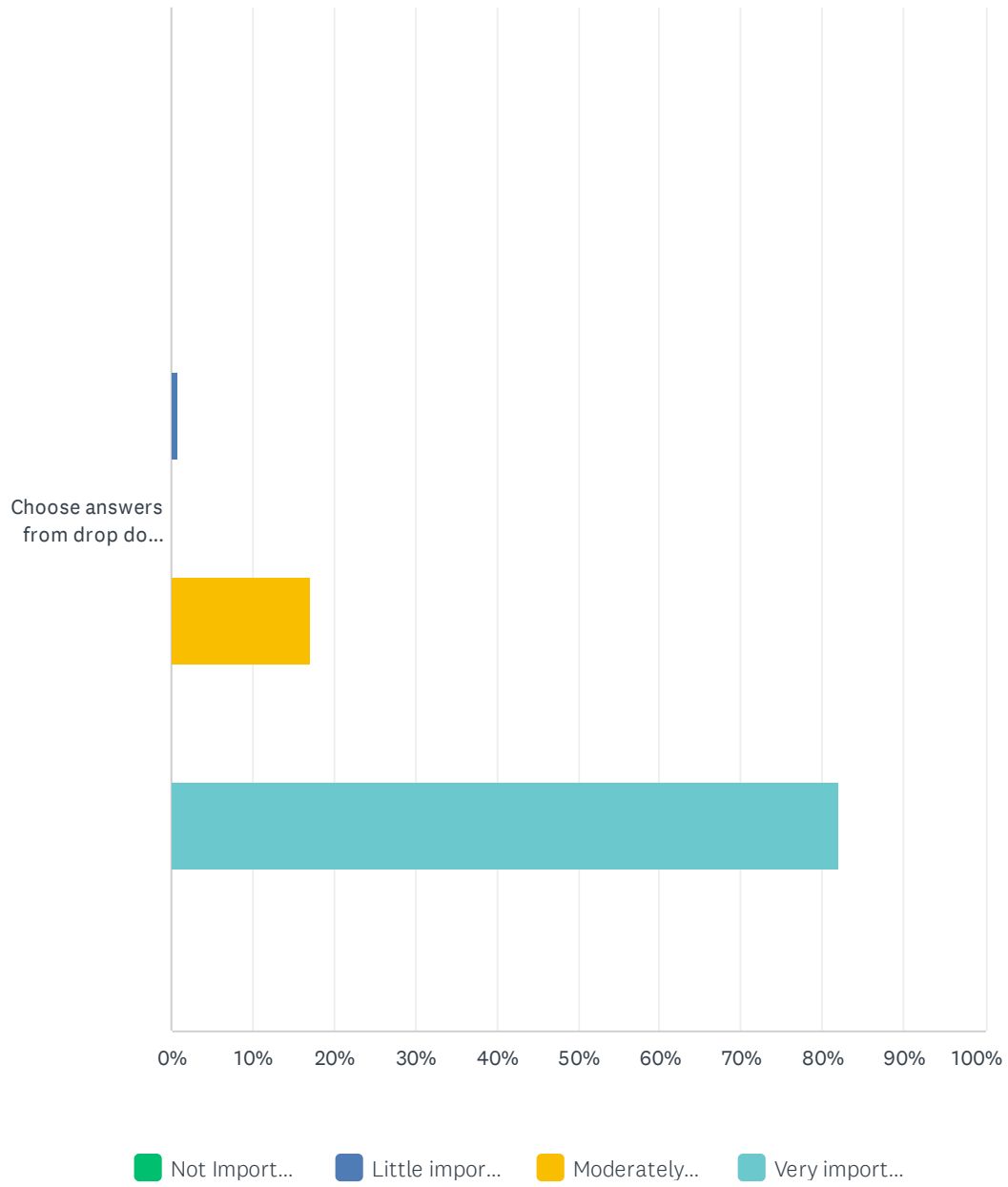
Q73 3.1.1.2.7 Goals of the patient, family, and caregiver.

Answered: 328 Skipped: 882



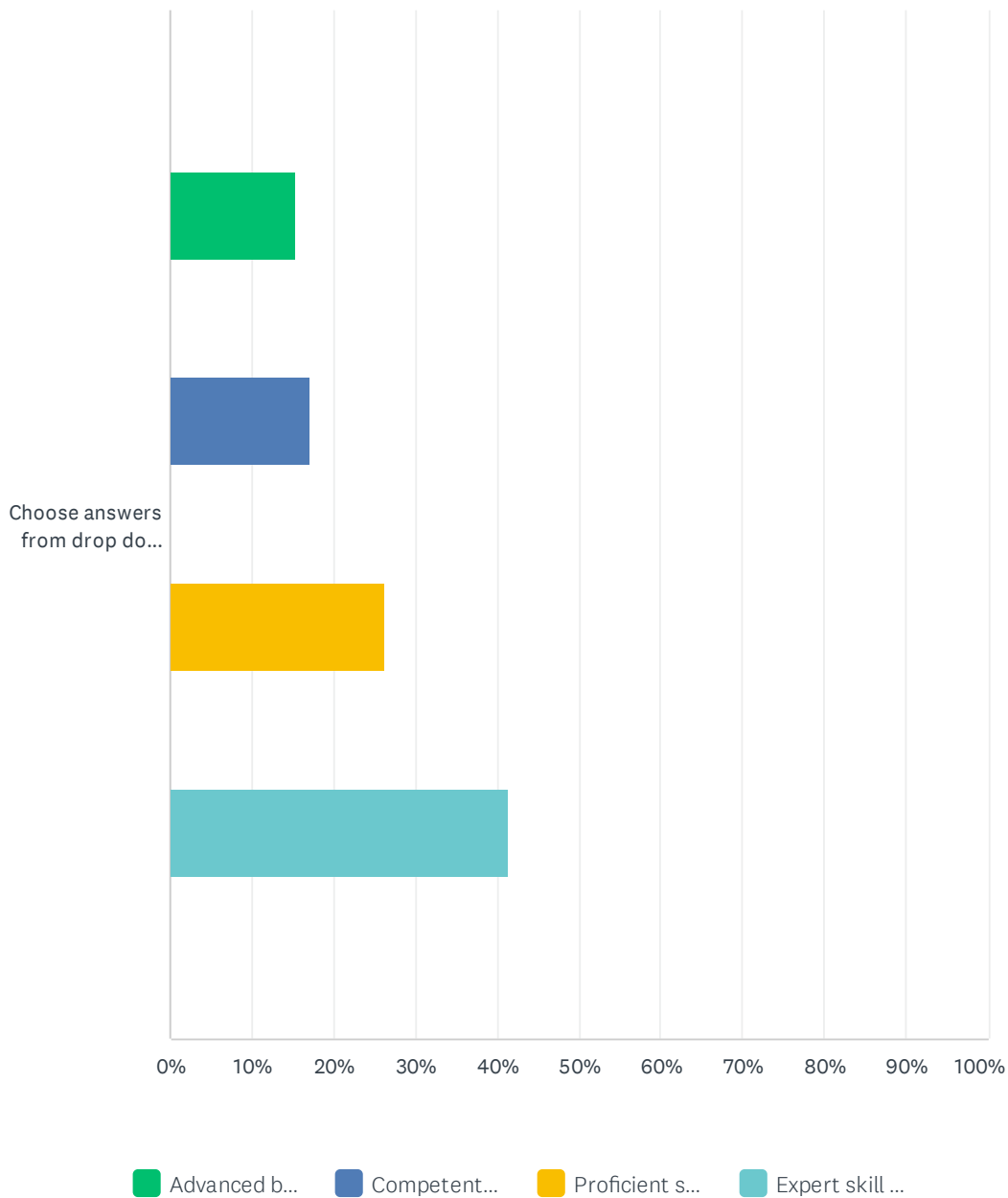
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.61% 2	3.67% 12	14.37% 47	81.35% 266	327

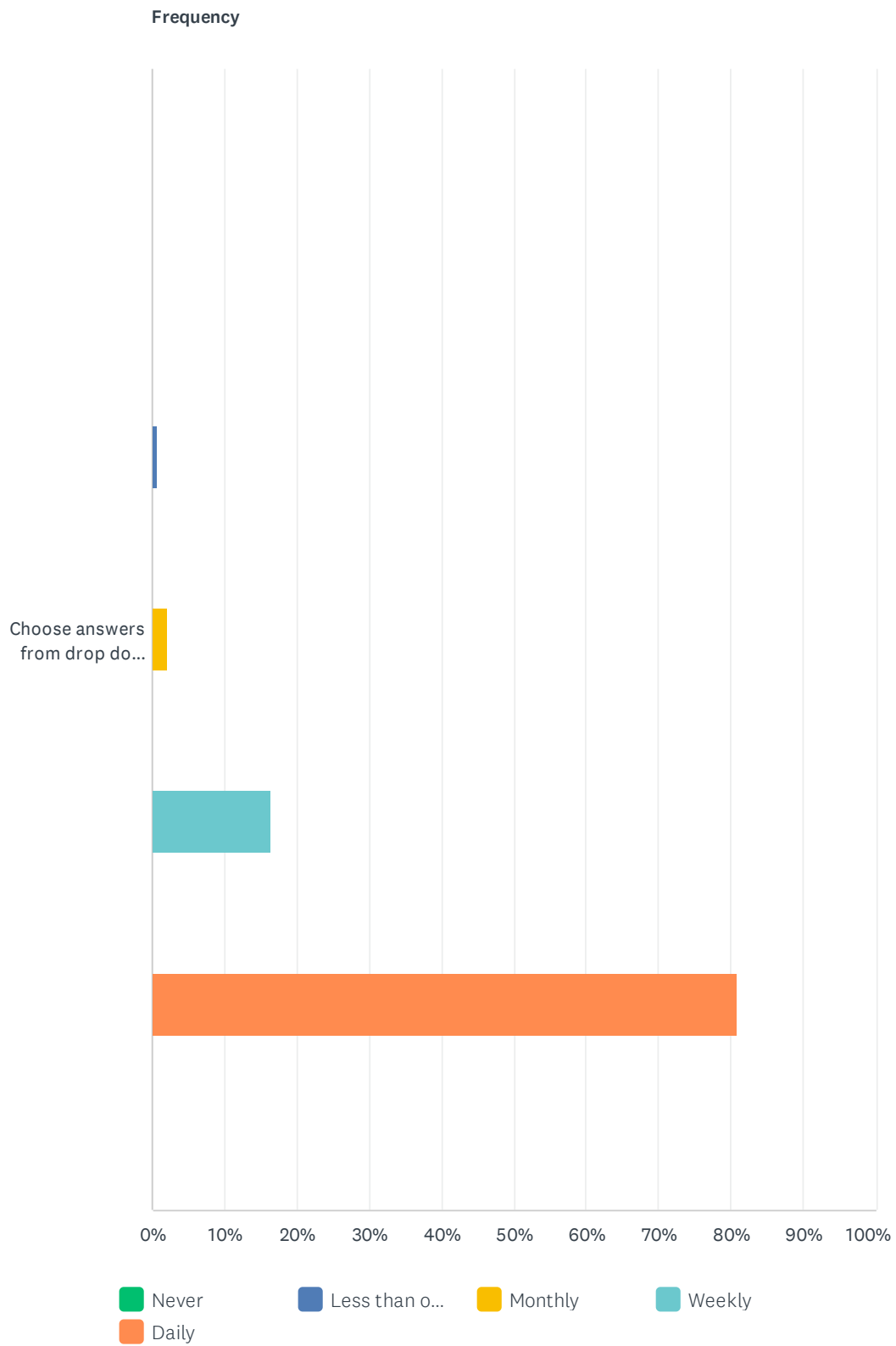
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.94% 3	16.98% 54	82.08% 261	318

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	15.38% 48	16.99% 53	26.28% 82	41.35% 129	312

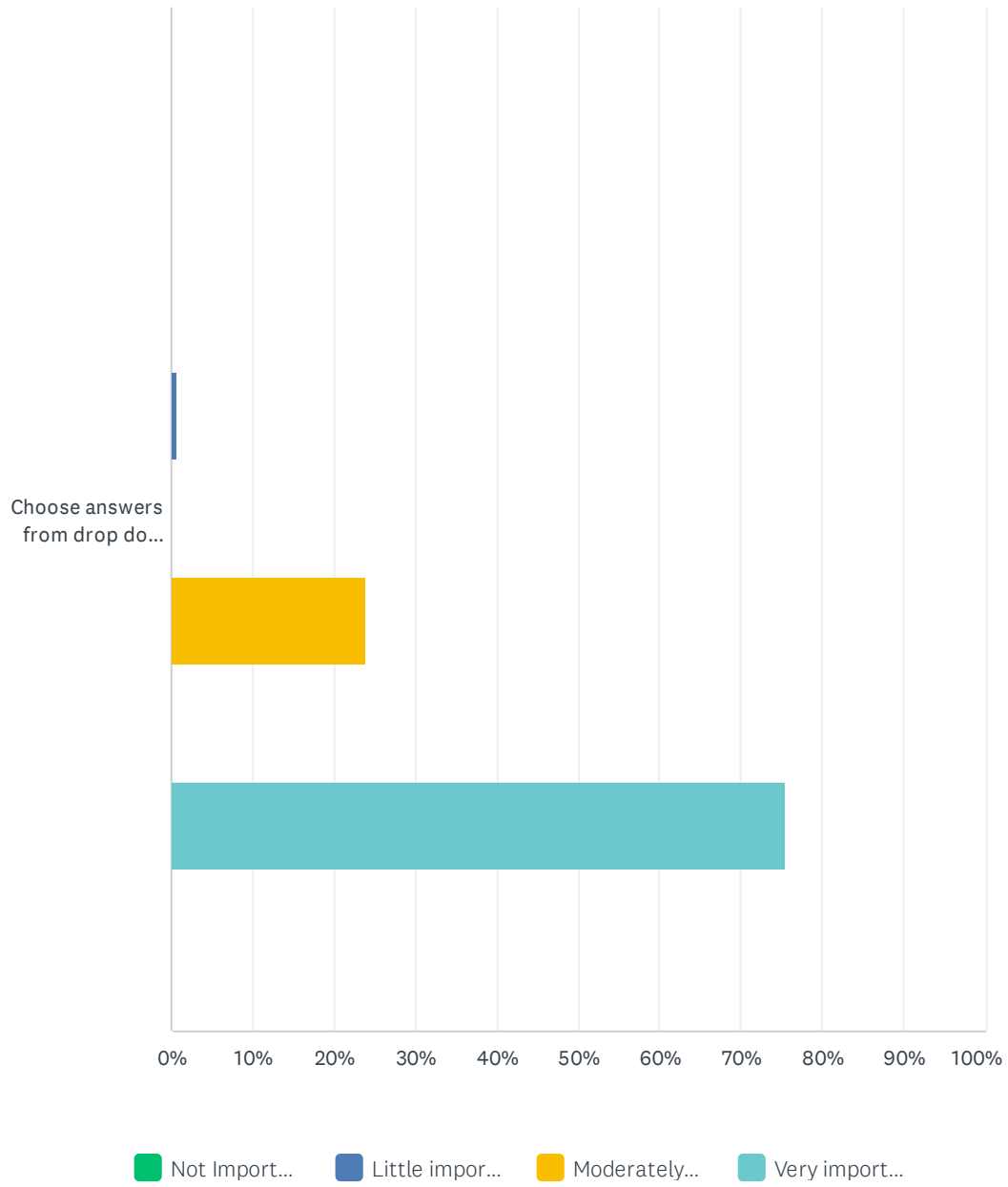
Q74 3.1.1.3 Obtaining data regarding functional status and activity level of daily living.

Answered: 318 Skipped: 892



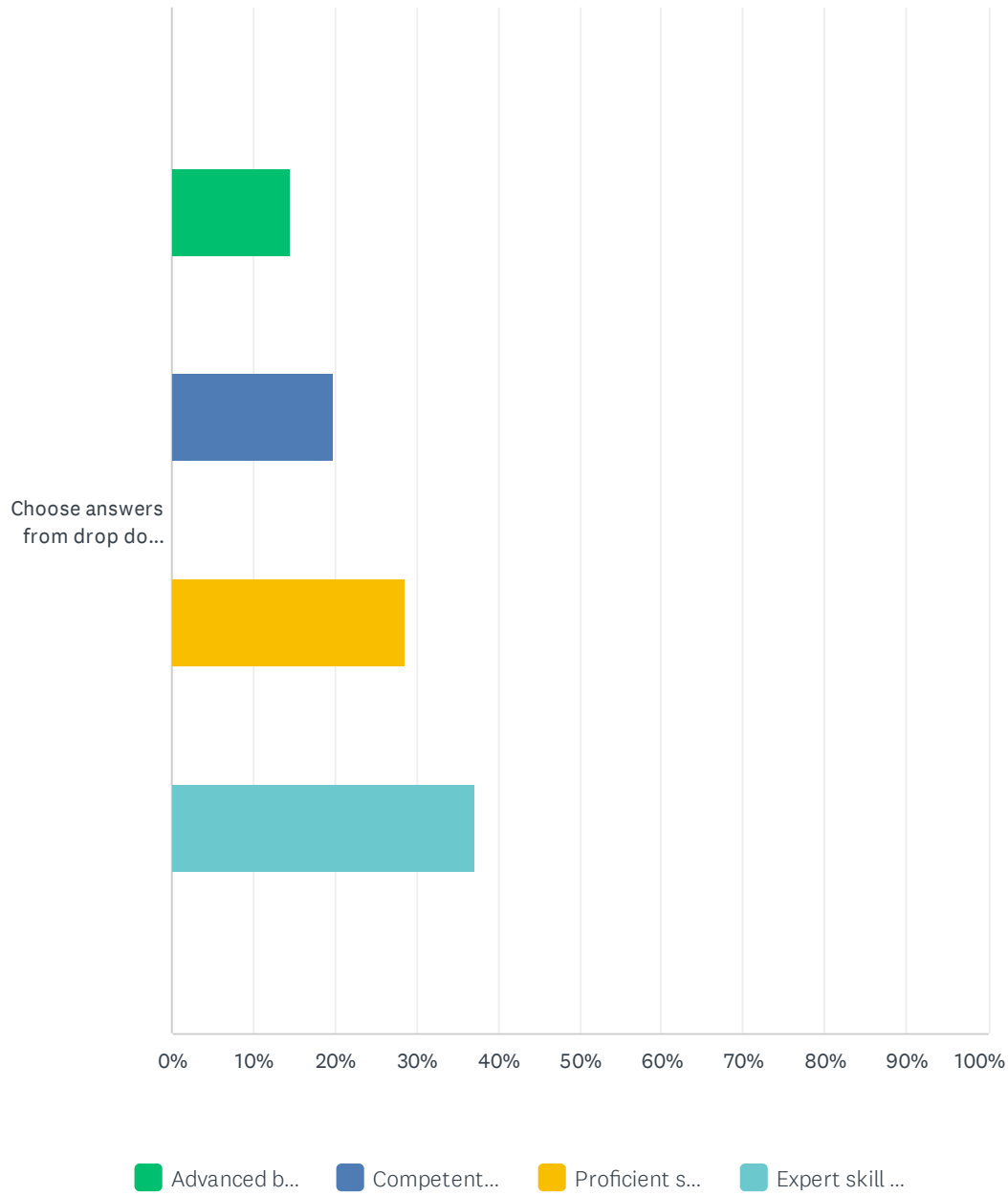
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.63% 2	2.20% 7	16.35% 52	80.82% 257	318

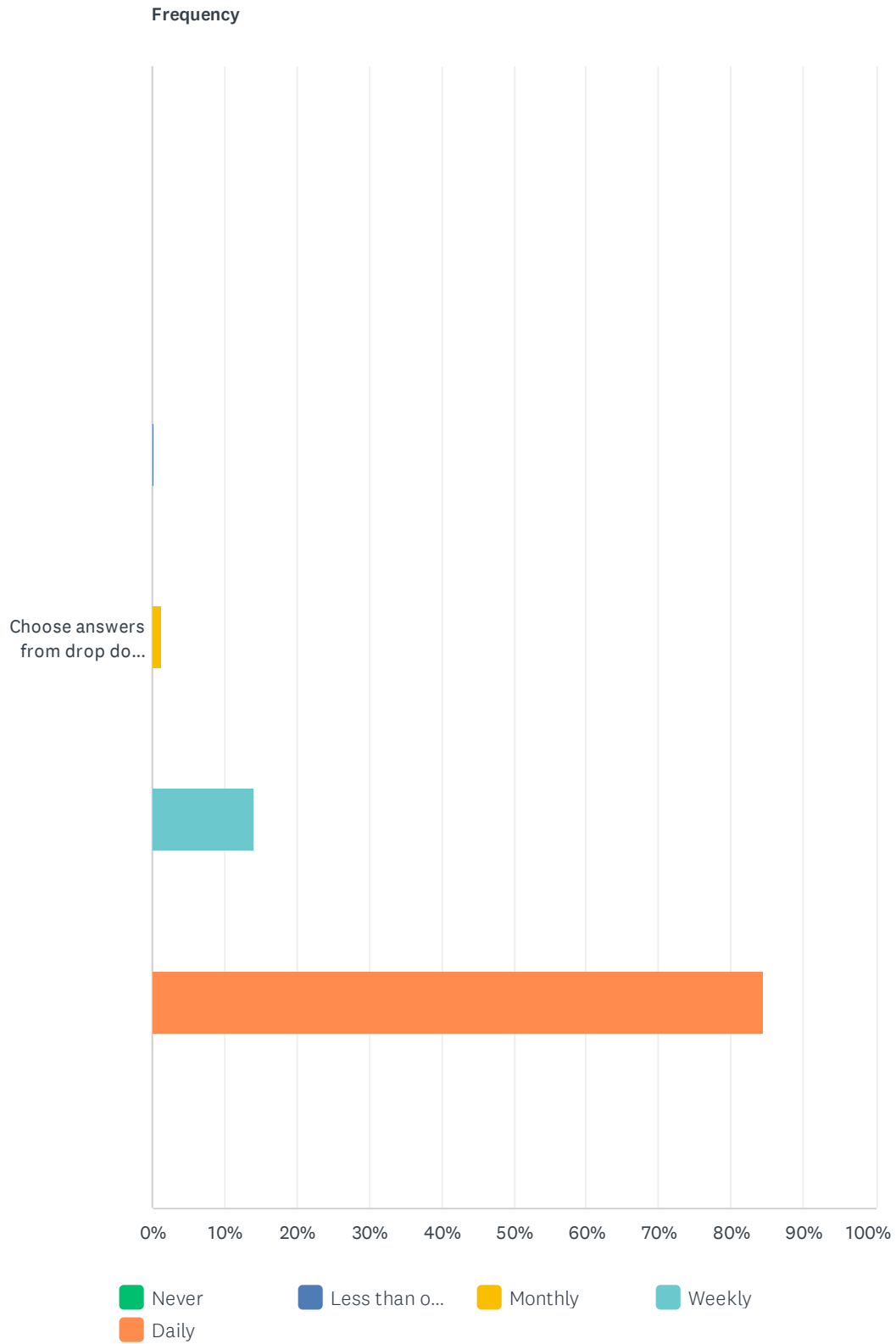
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.65% 2	23.95% 74	75.40% 233	309

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	14.57% 44	19.87% 60	28.48% 86	37.09% 112	302

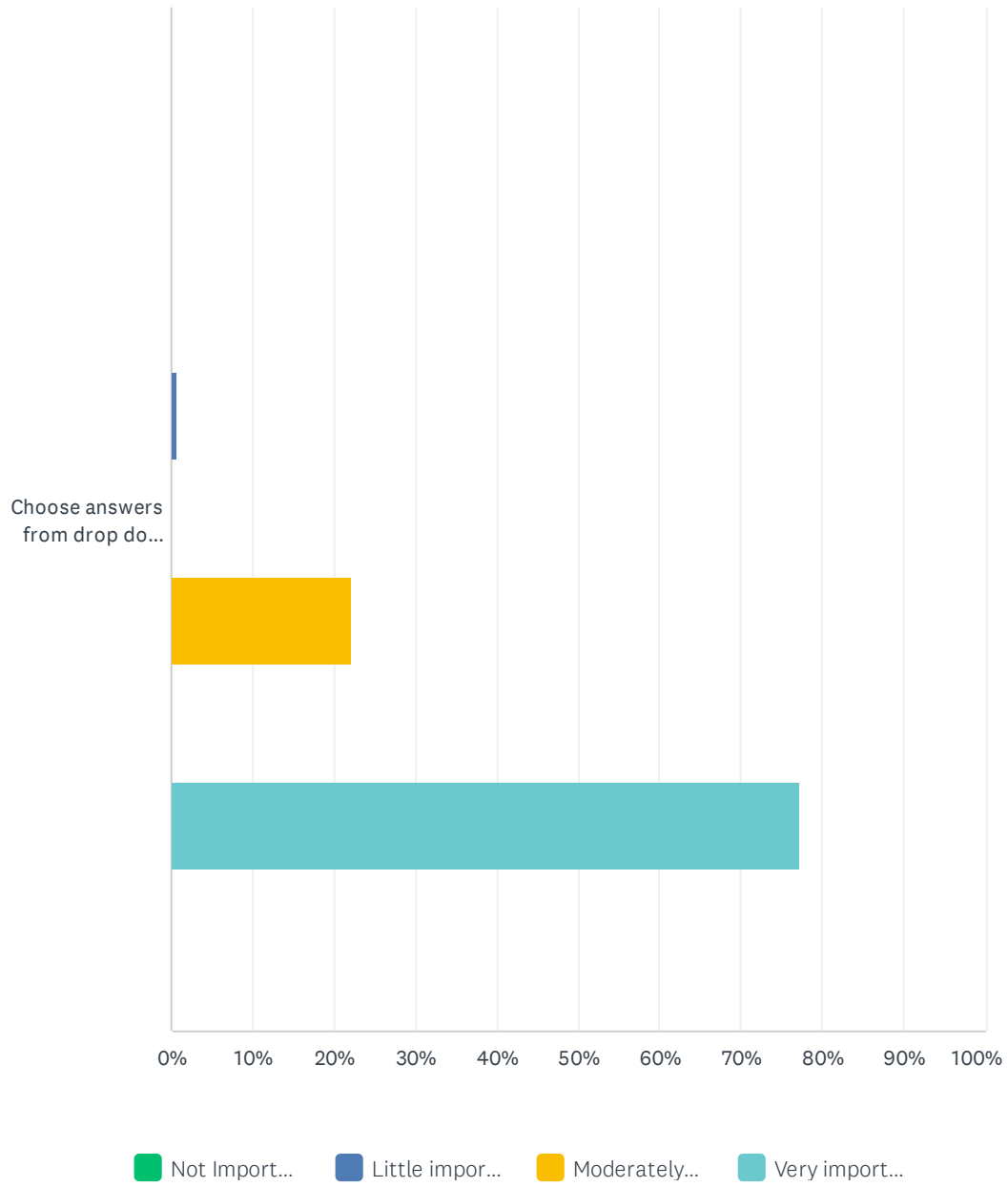
Q75 3.1.1.4.1 Physical function.

Answered: 320 Skipped: 890



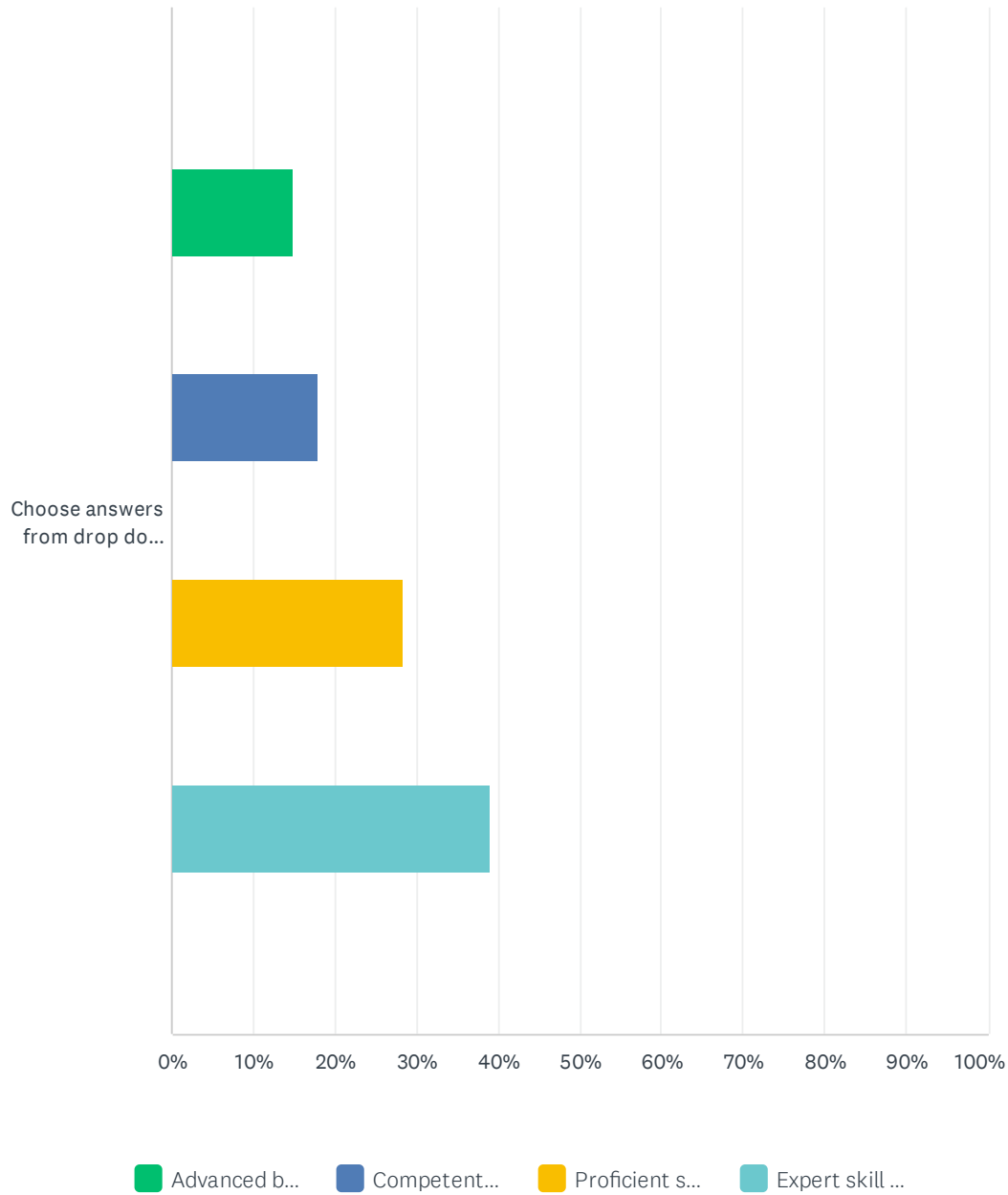
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.31% 1	1.25% 4	14.06% 45	84.38% 270	320

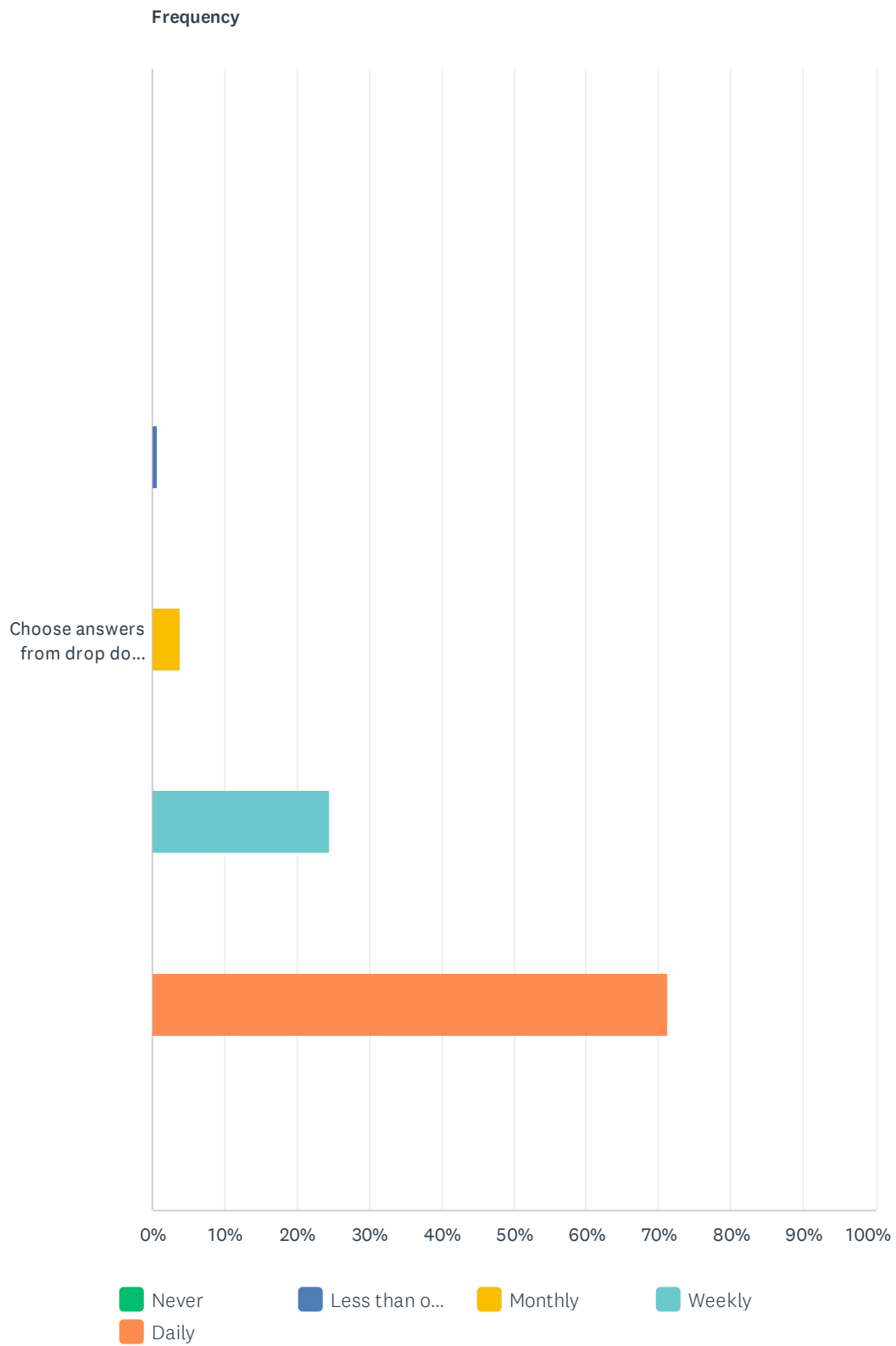
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.65% 2	22.26% 69	77.10% 239	310

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	14.85% 45	17.82% 54	28.38% 86	38.94% 118	303

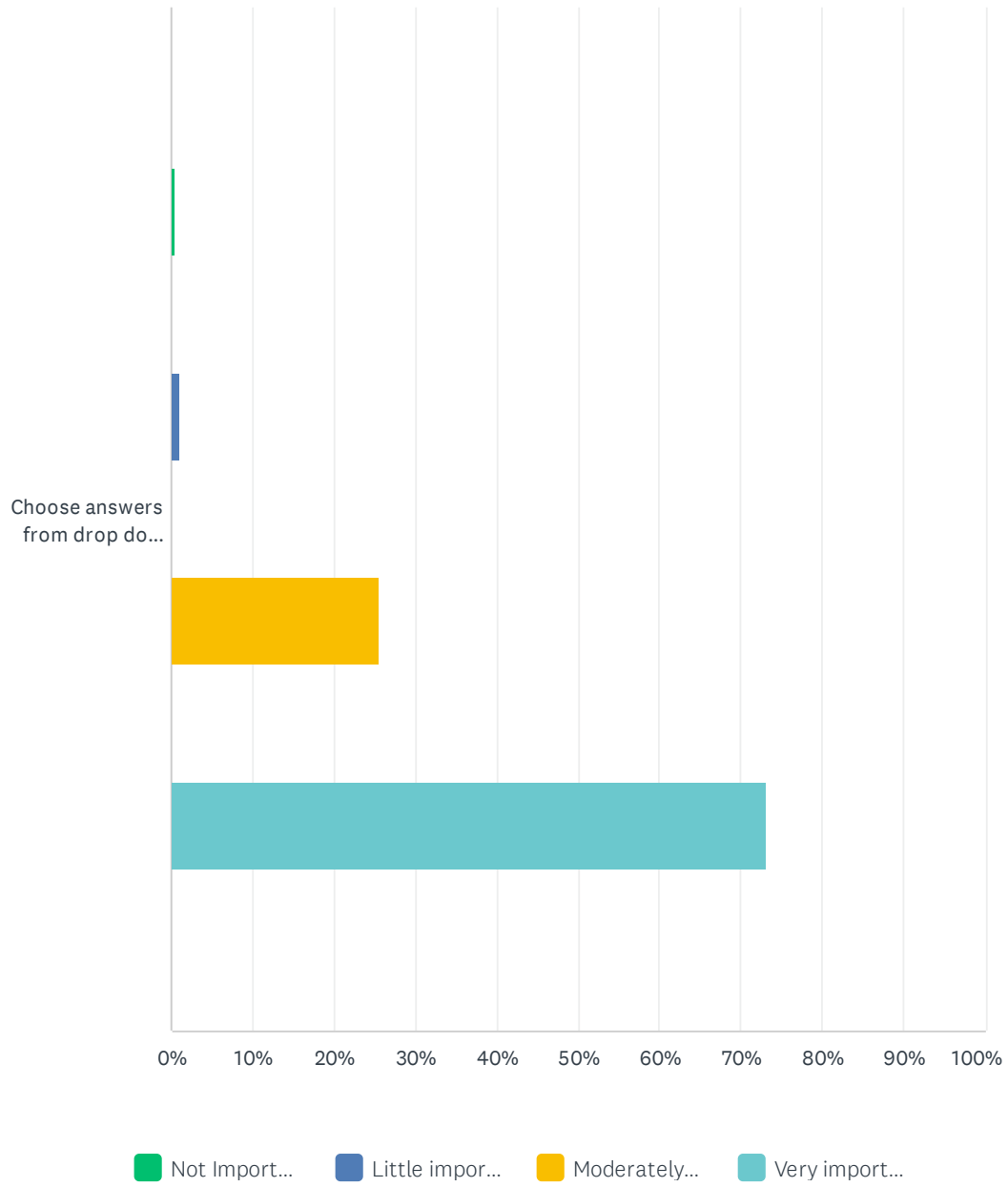
Q76 3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression, catastrophizing).

Answered: 319 Skipped: 891



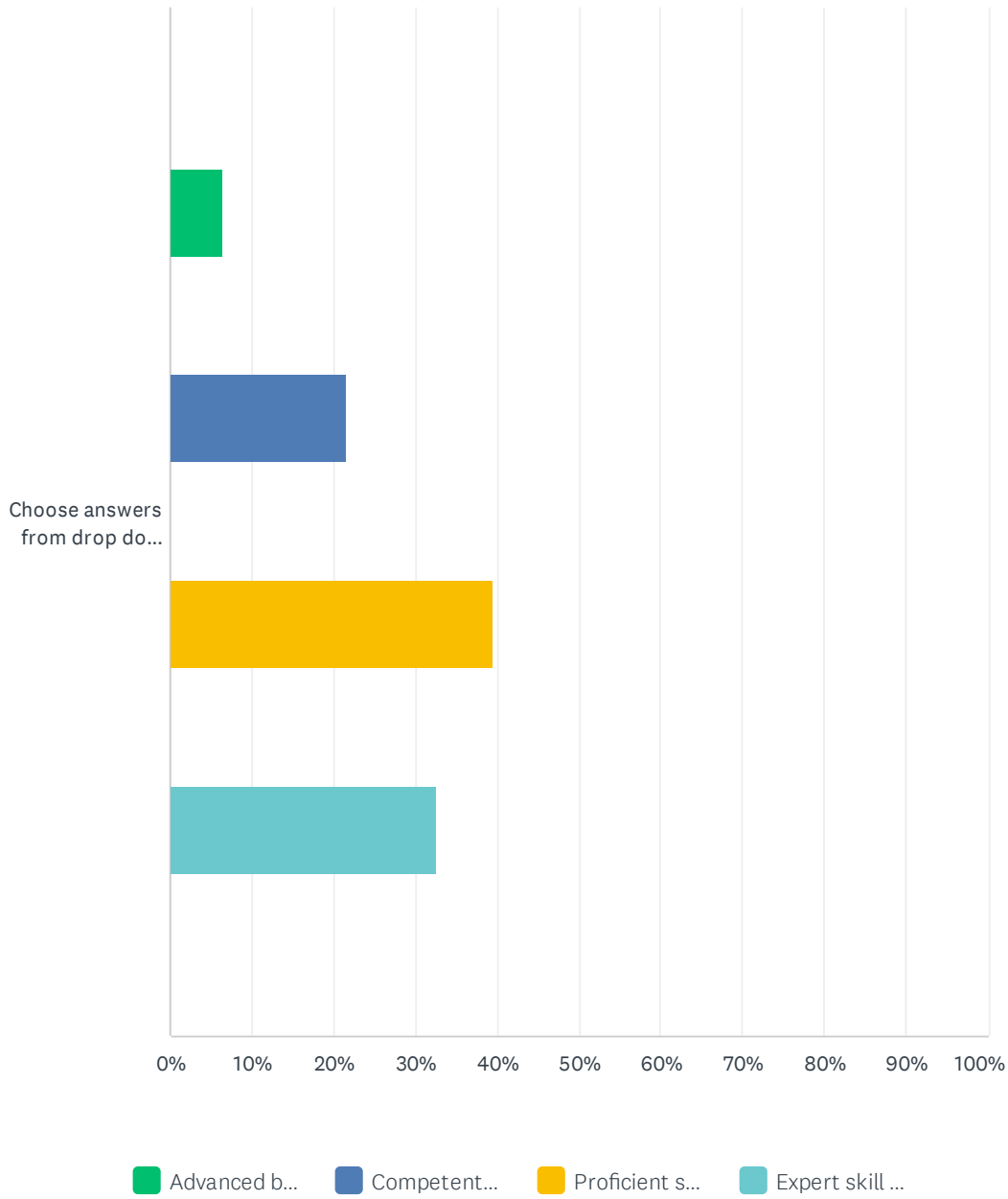
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.63% 2	3.76% 12	24.45% 78	71.16% 227	319

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.32% 1	0.97% 3	25.57% 79	73.14% 226	309

Spine Validation Practice Analysis Survey 2022

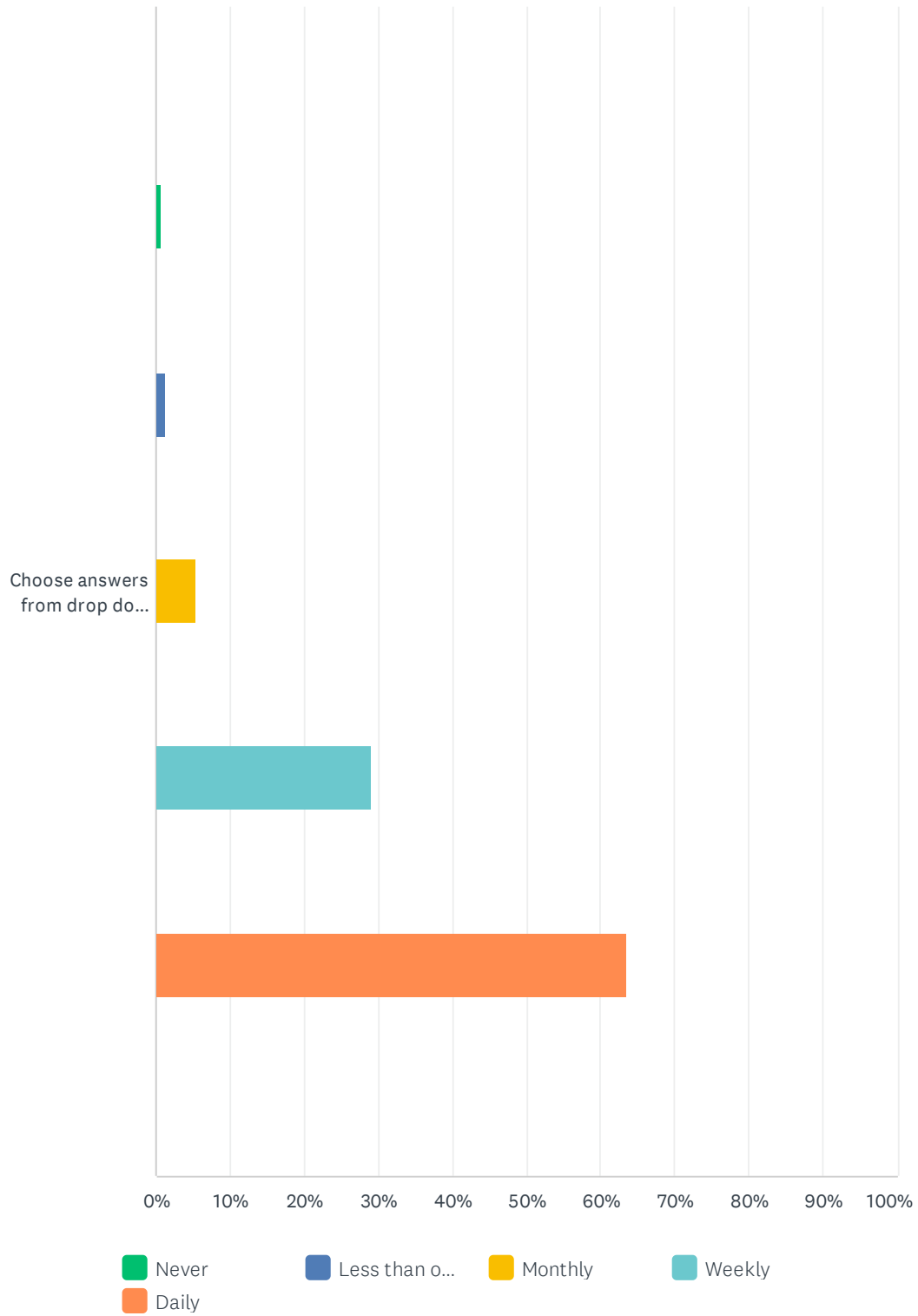
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.31% 19	21.59% 65	39.53% 119	32.56% 98	301

Q77 3.1.1.5 Obtaining data regarding social/health habits (past and current), including behavioral health risks (e.g., nutrition, smoking, substance use, sleep) and fitness level.

Answered: 299 Skipped: 911

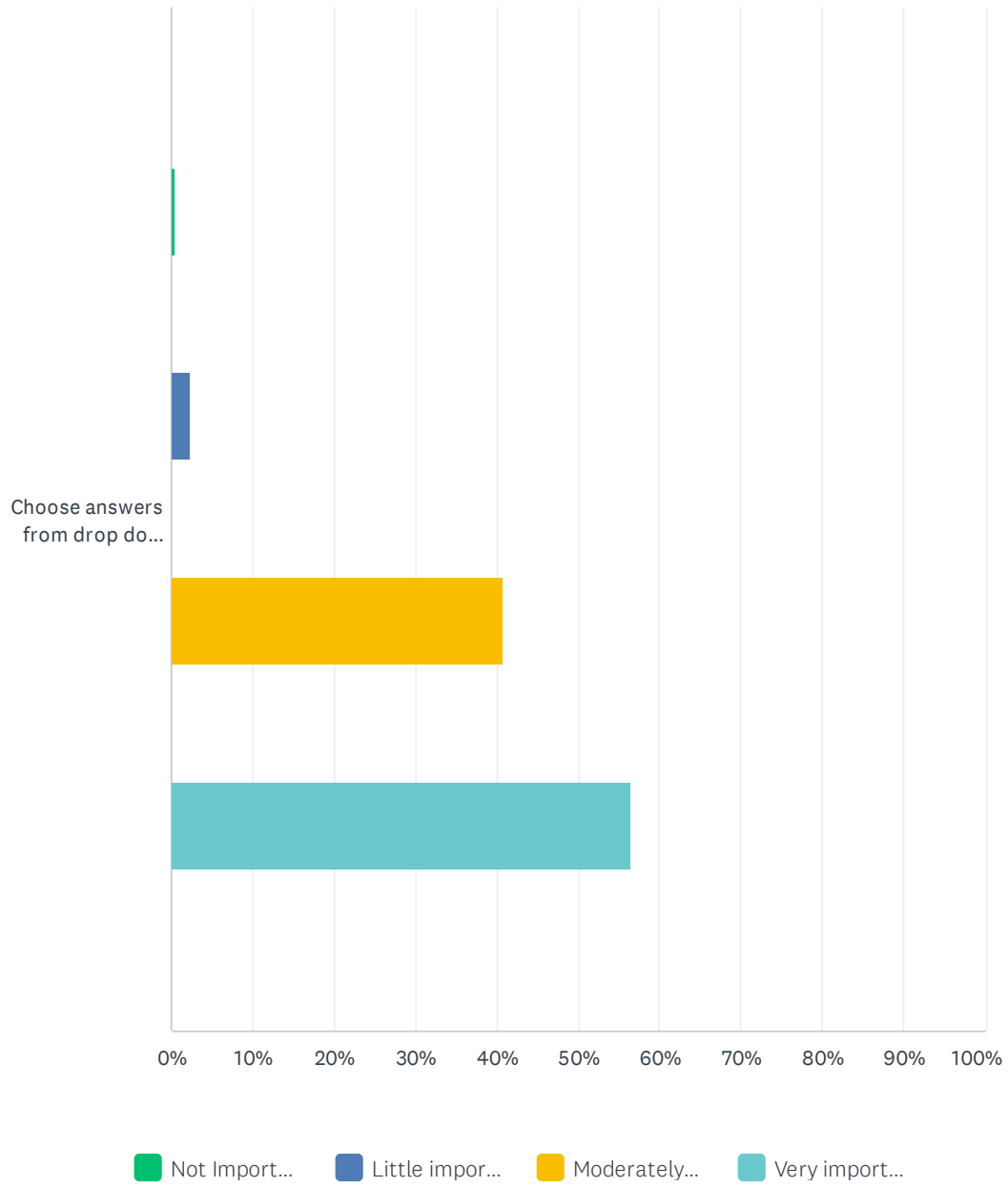
Spine Validation Practice Analysis Survey 2022

Frequency



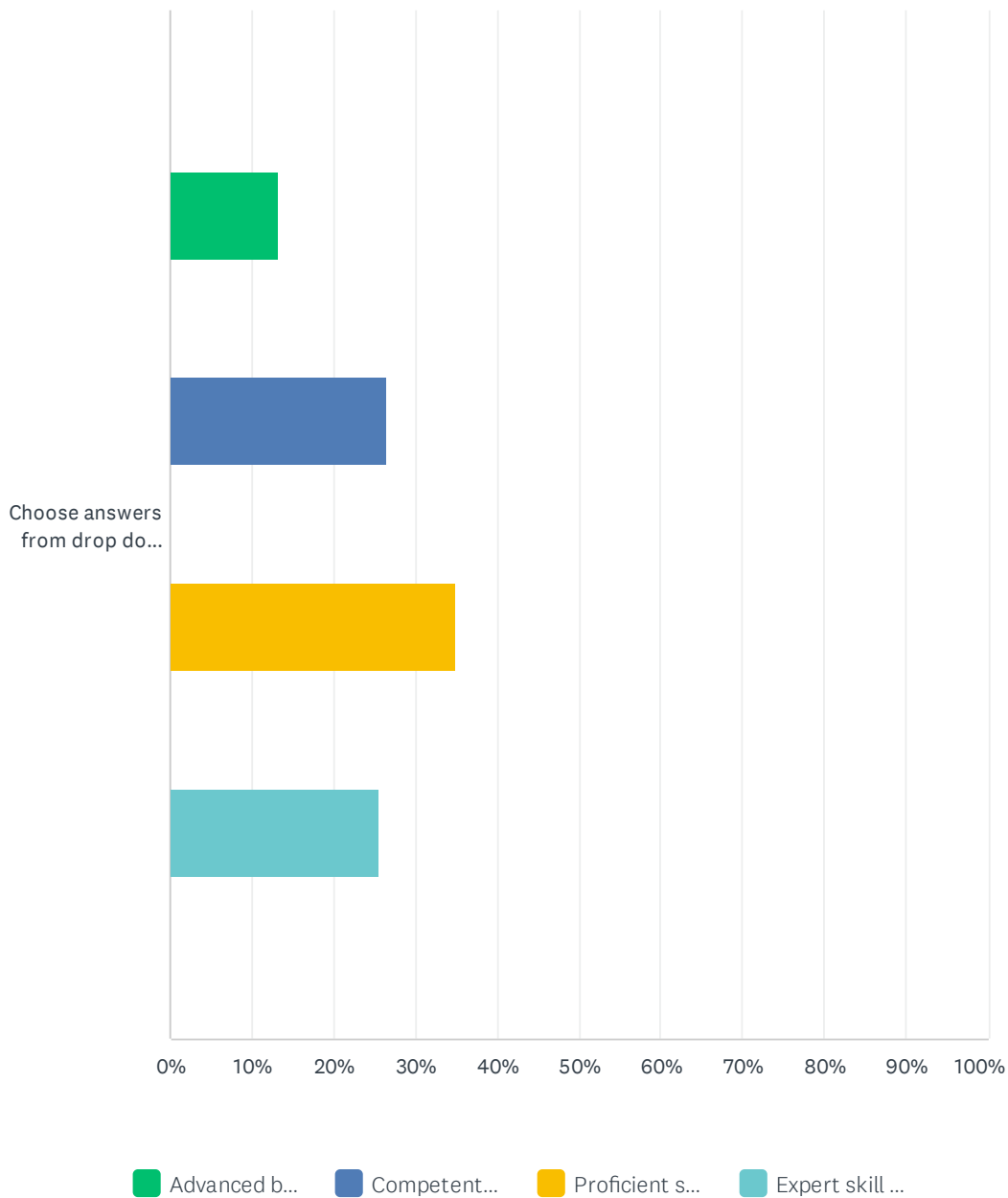
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.67% 2	1.34% 4	5.35% 16	29.10% 87	63.55% 190	299

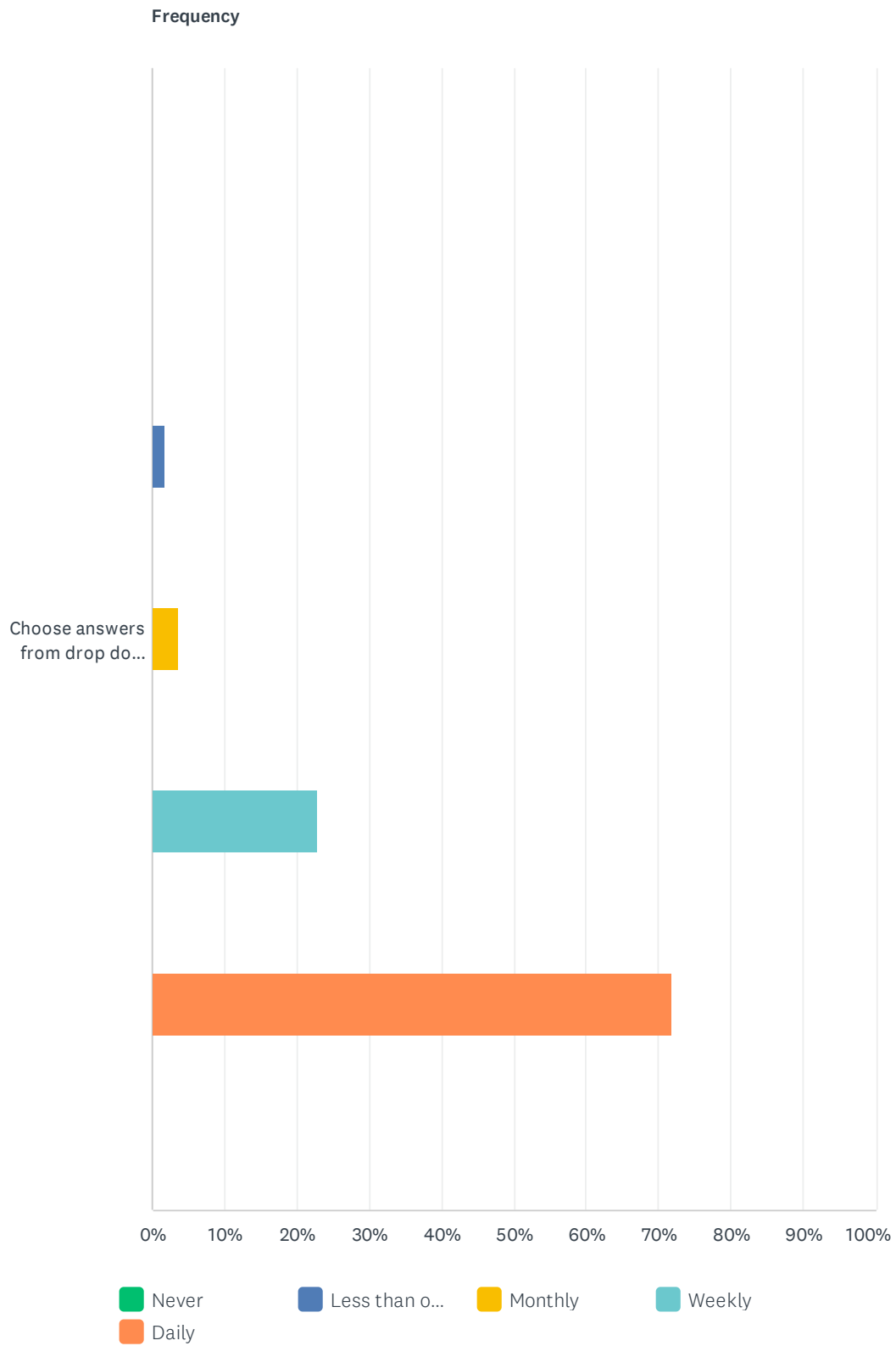
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.35% 1	2.42% 7	40.83% 118	56.40% 163	289

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	13.17% 37	26.33% 74	34.88% 98	25.62% 72	281

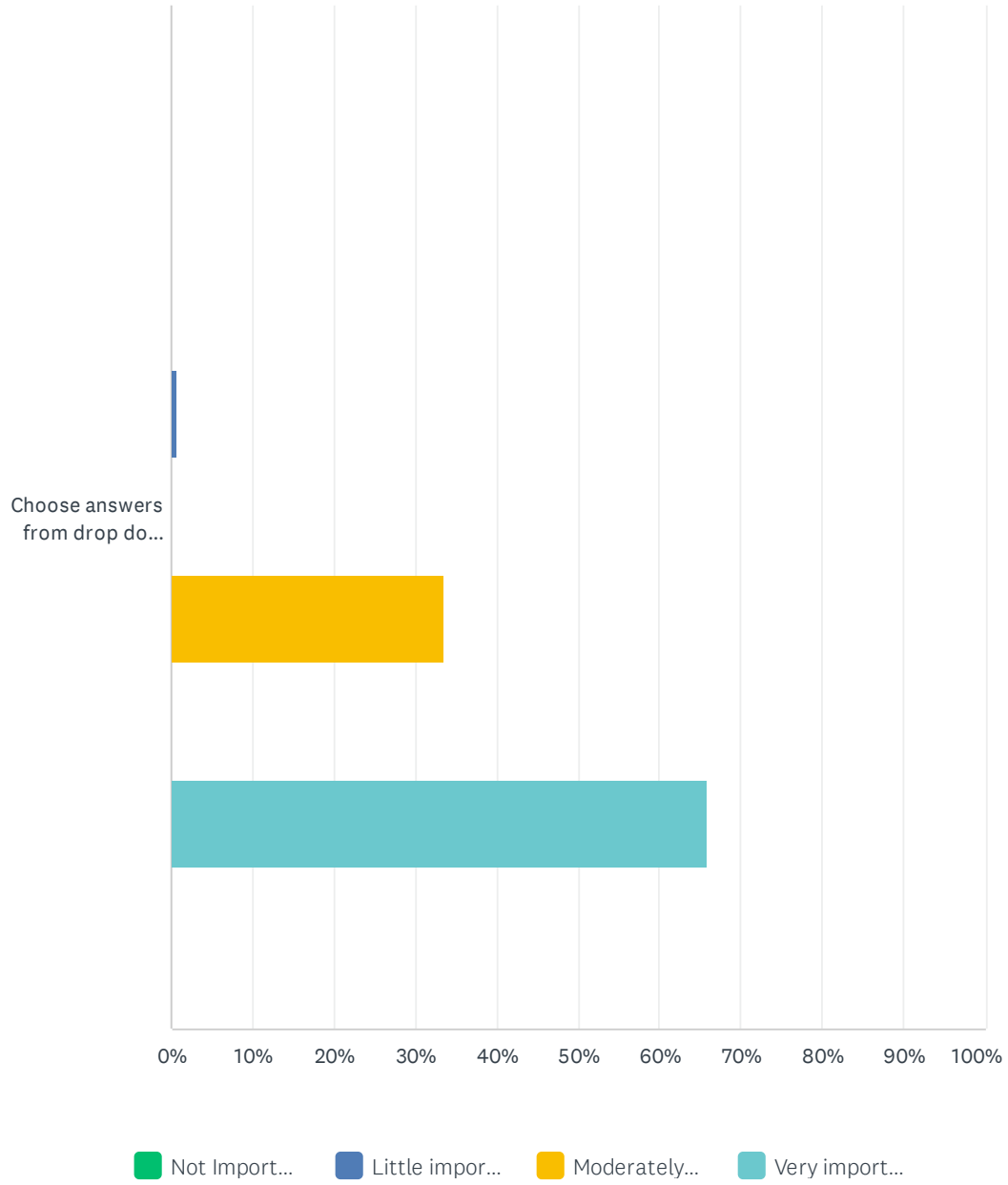
Q78 3.1.1.6 Obtaining medical/surgical history data.

Answered: 299 Skipped: 911



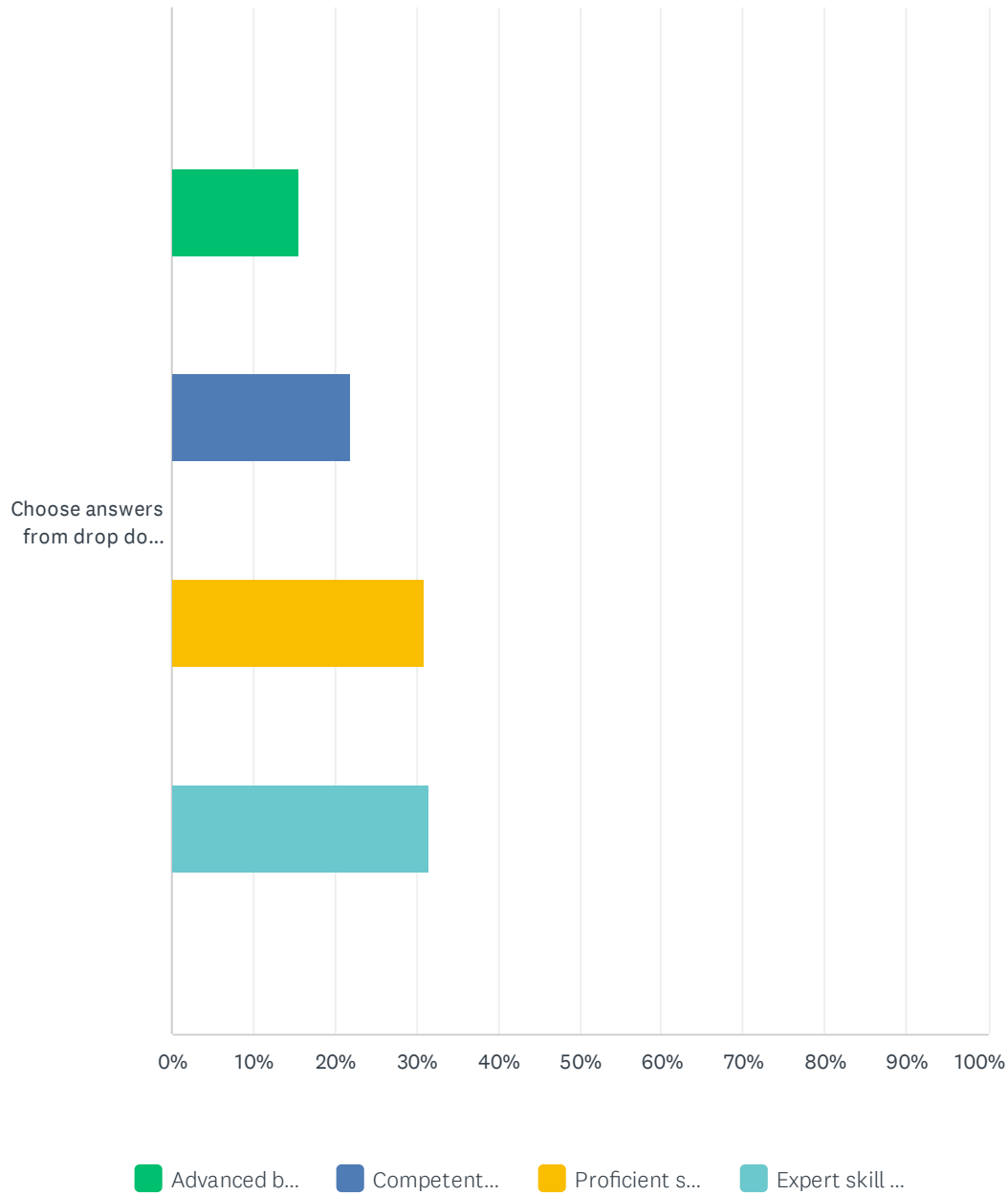
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.67% 5	3.68% 11	22.74% 68	71.91% 215	299

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.70% 2	33.45% 96	65.85% 189	287

Spine Validation Practice Analysis Survey 2022

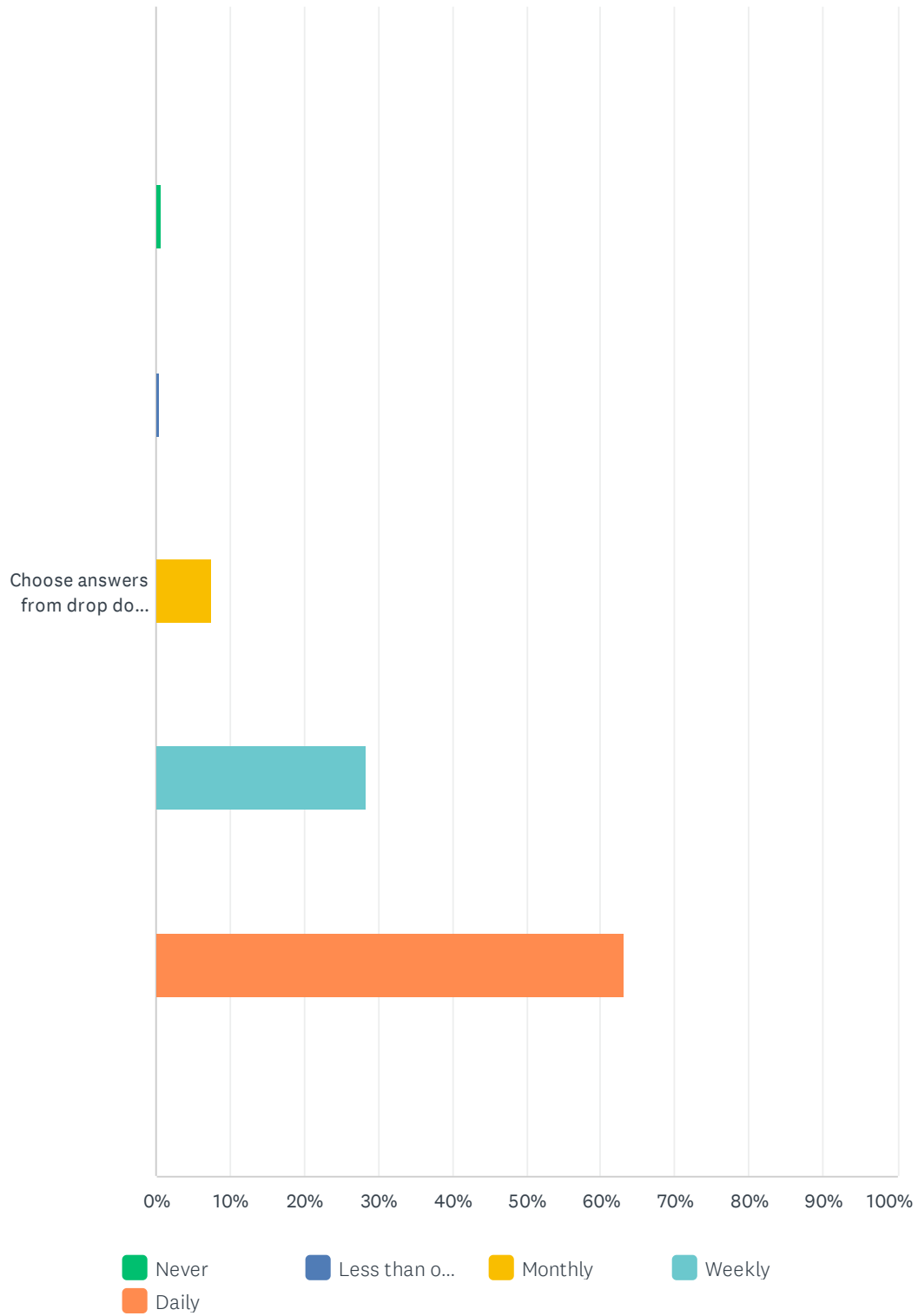
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	15.60% 44	21.99% 62	30.85% 87	31.56% 89	282

Q79 3.1.1.7 Obtaining data regarding medication usage patterns and effects of medications currently and previously taken (for chief complaint and for other conditions).

Answered: 299 Skipped: 911

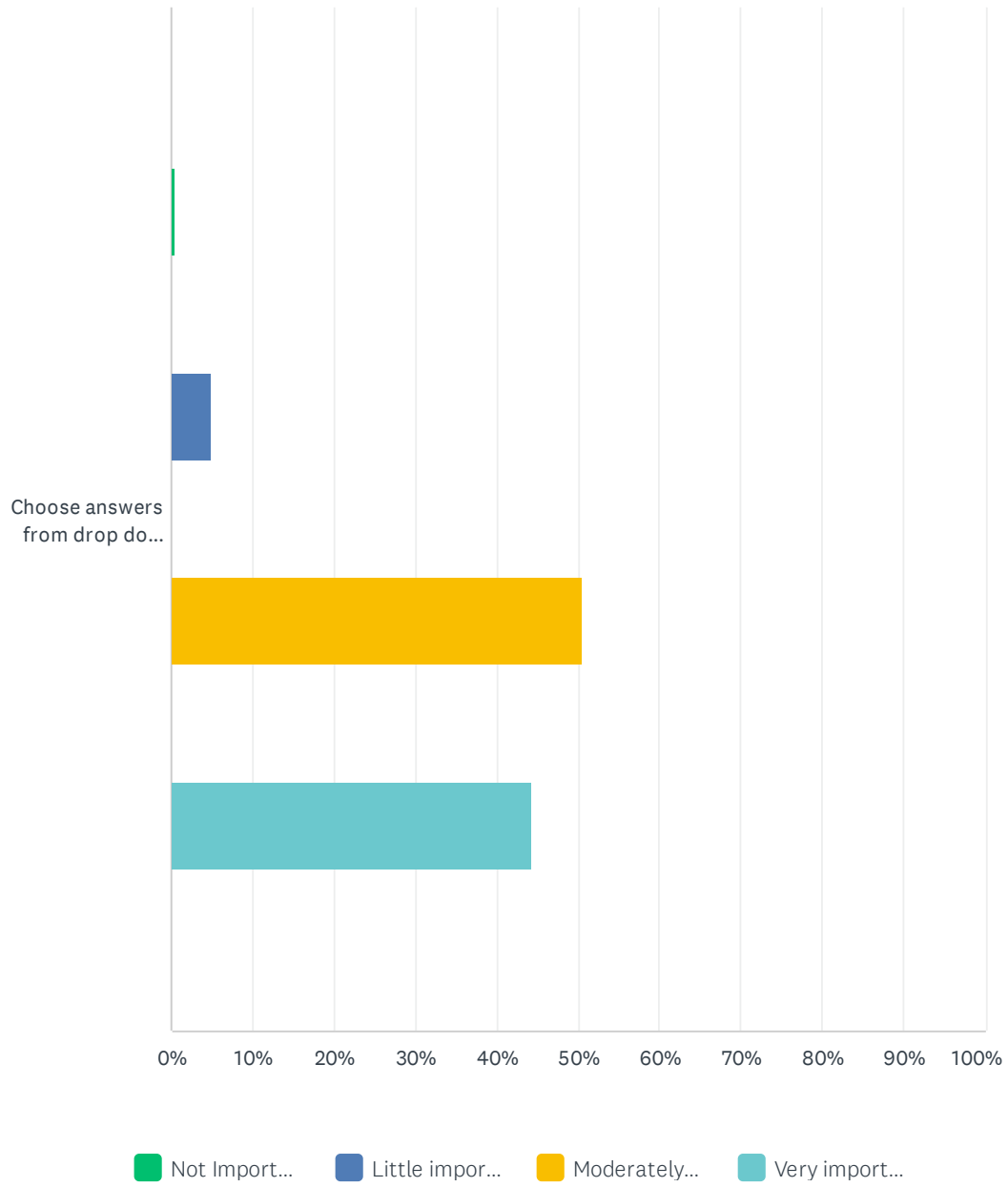
Spine Validation Practice Analysis Survey 2022

Frequency



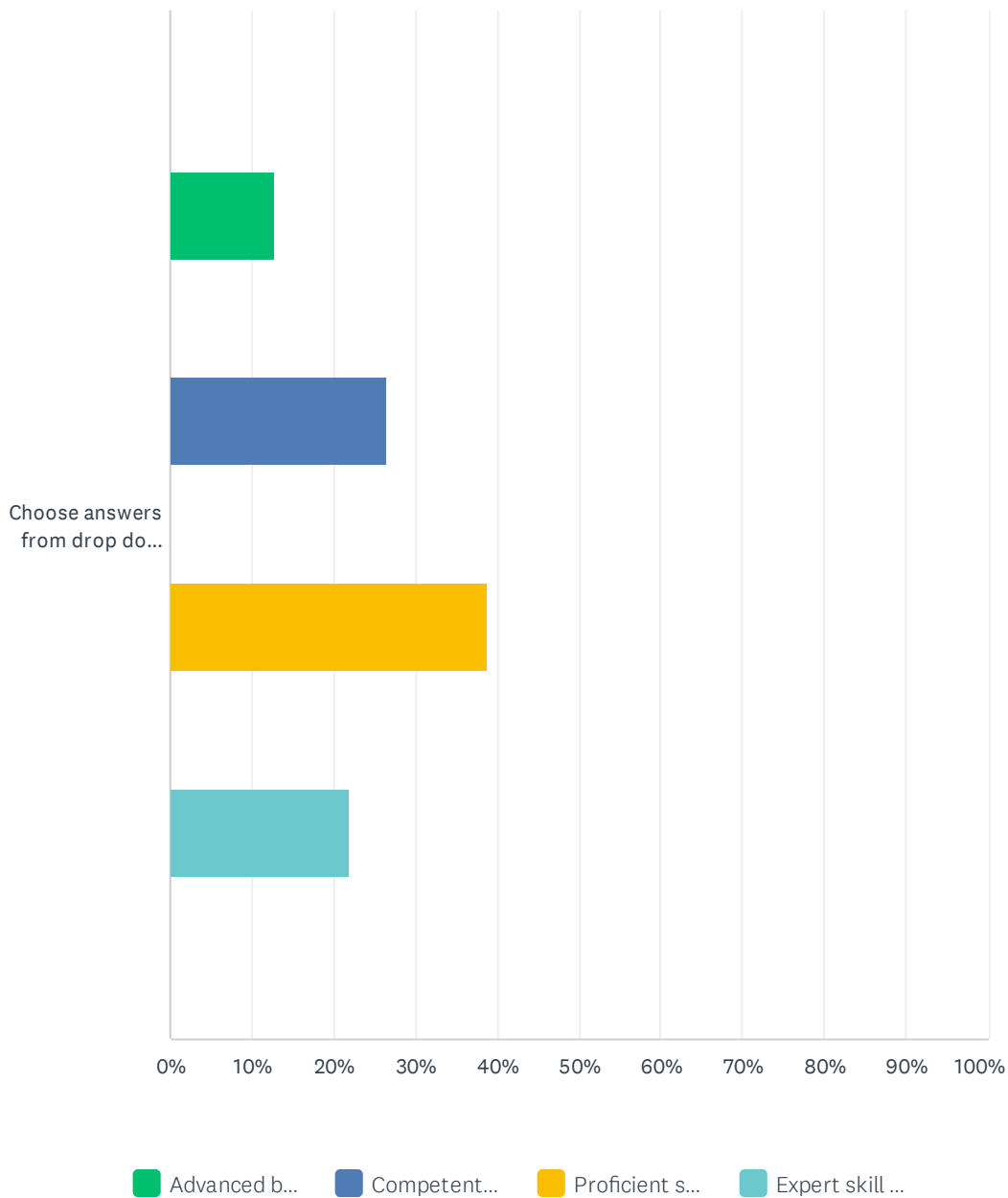
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.67% 2	0.33% 1	7.36% 22	28.43% 85	63.21% 189	299

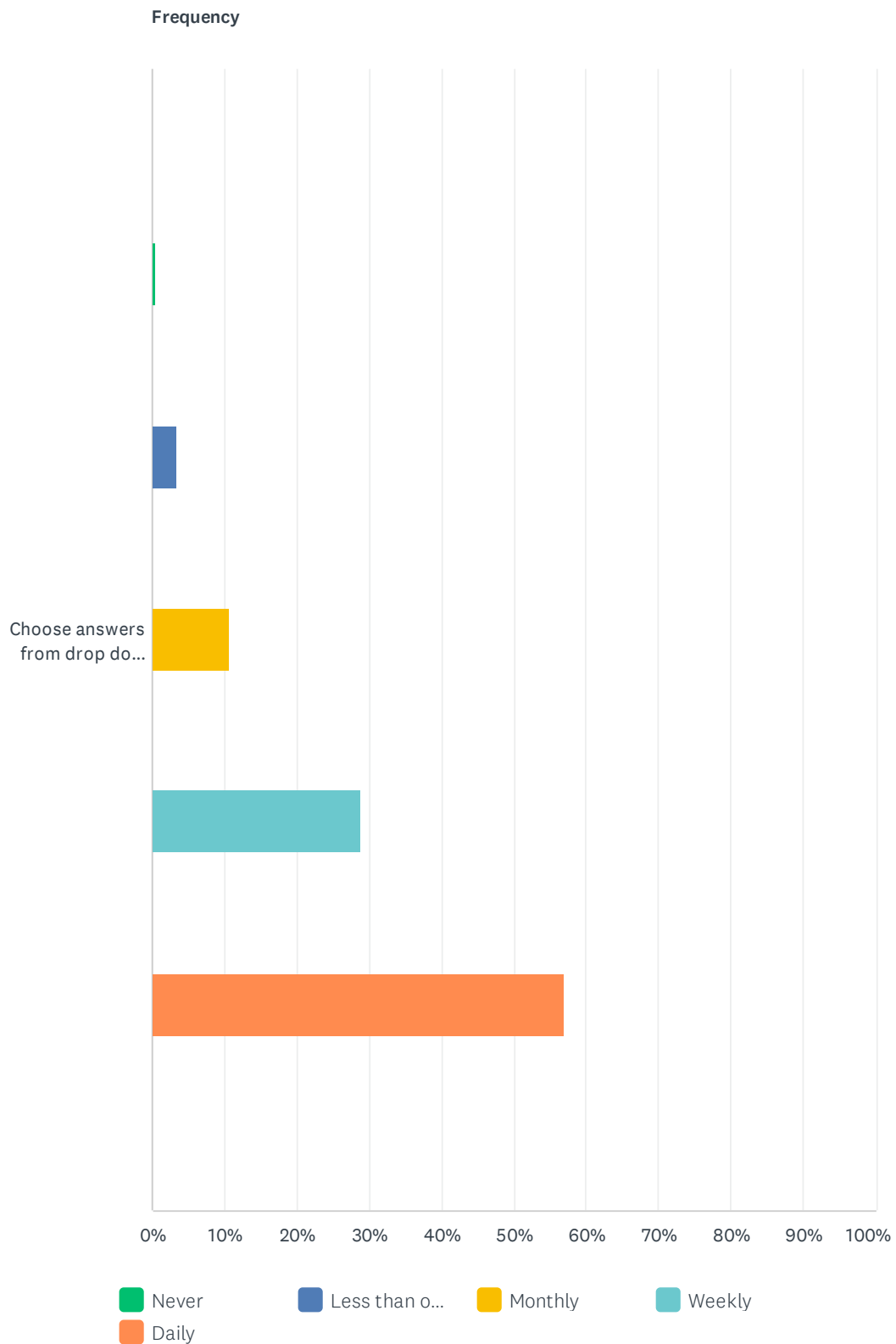
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.35% 1	4.84% 14	50.52% 146	44.29% 128	289

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.72% 36	26.50% 75	38.87% 110	21.91% 62	283

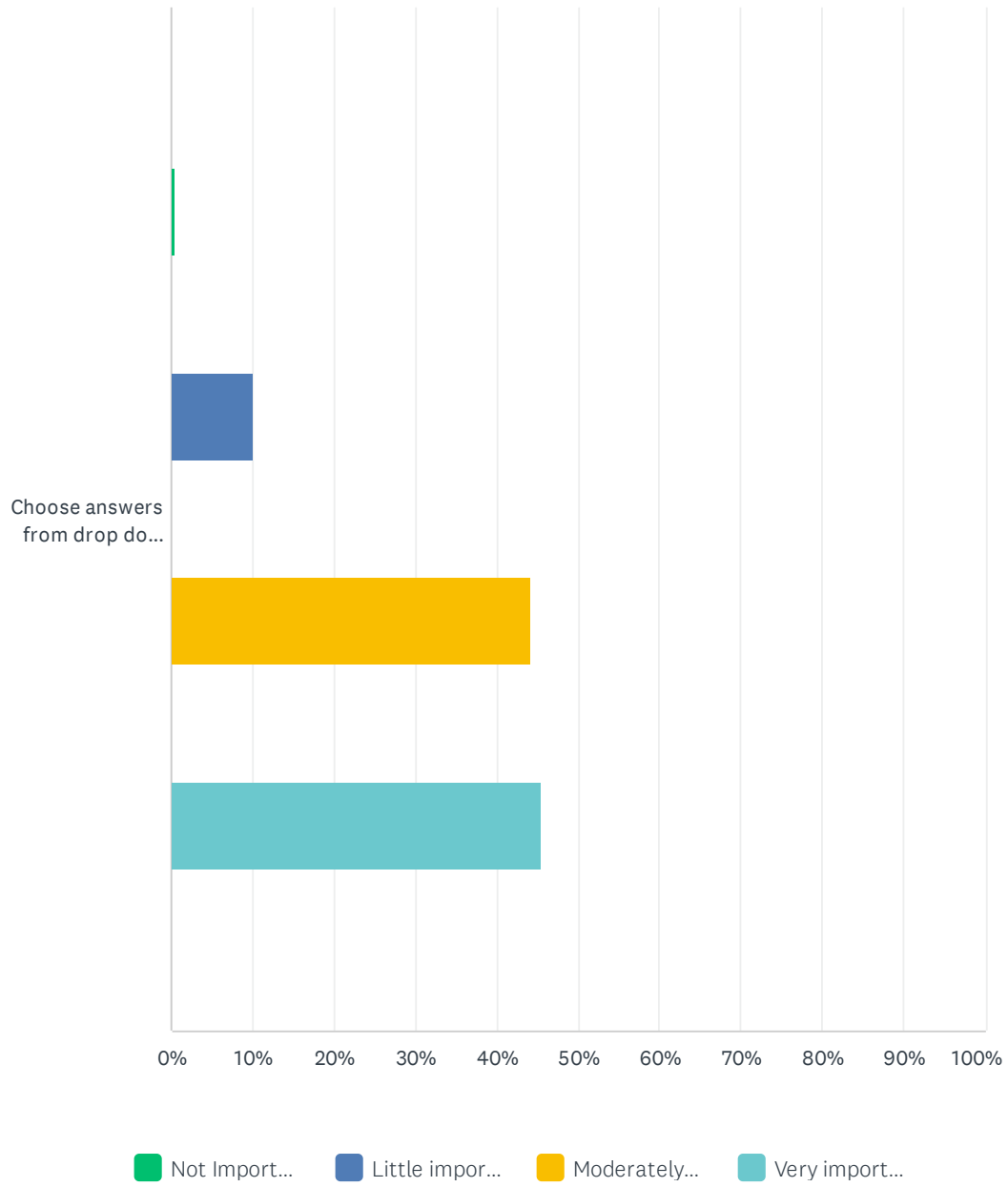
Q80 3.1.1.8 Obtaining data regarding social history (e.g., cultural beliefs and support systems).

Answered: 299 Skipped: 911



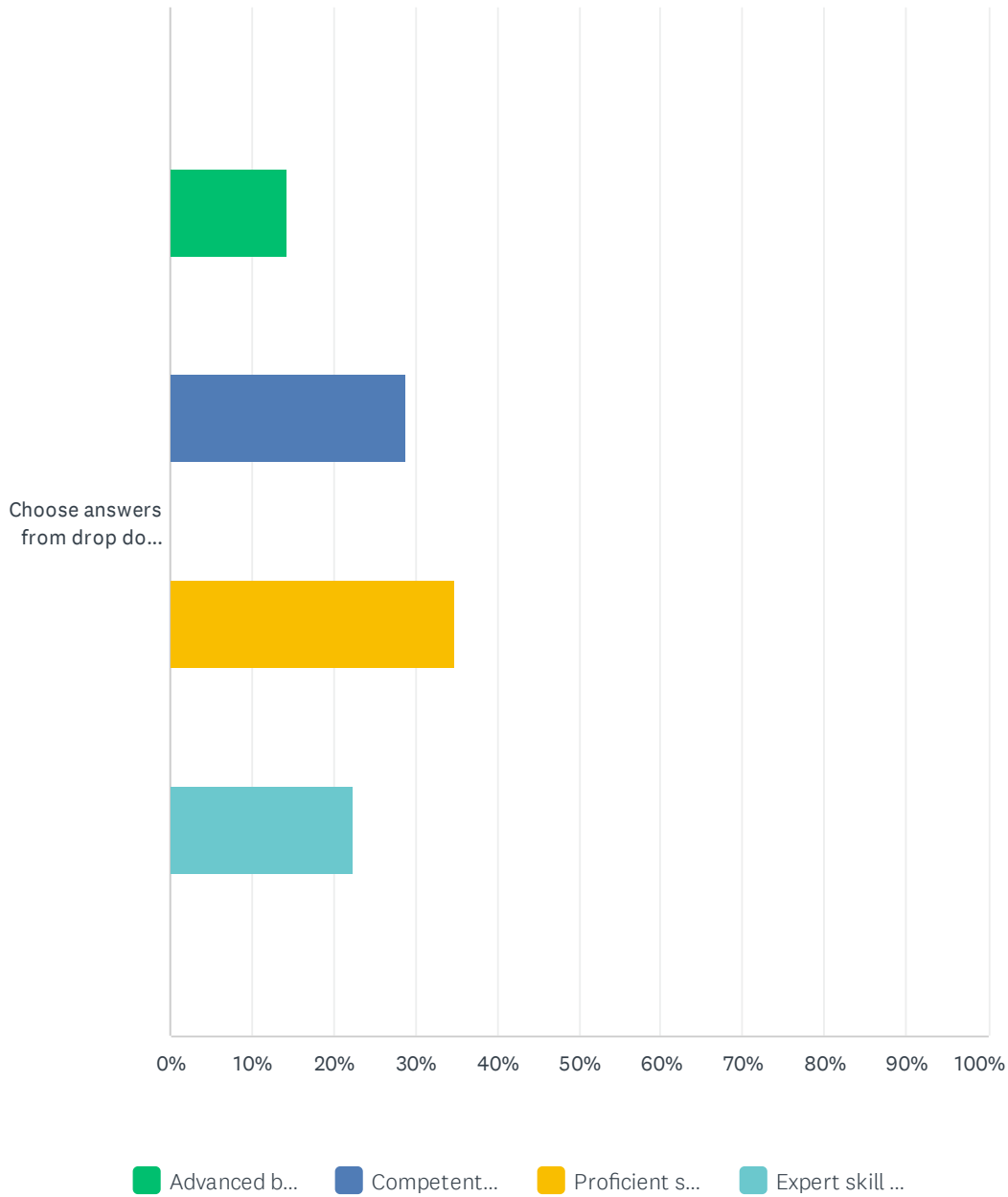
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.33% 1	3.34% 10	10.70% 32	28.76% 86	56.86% 170	299

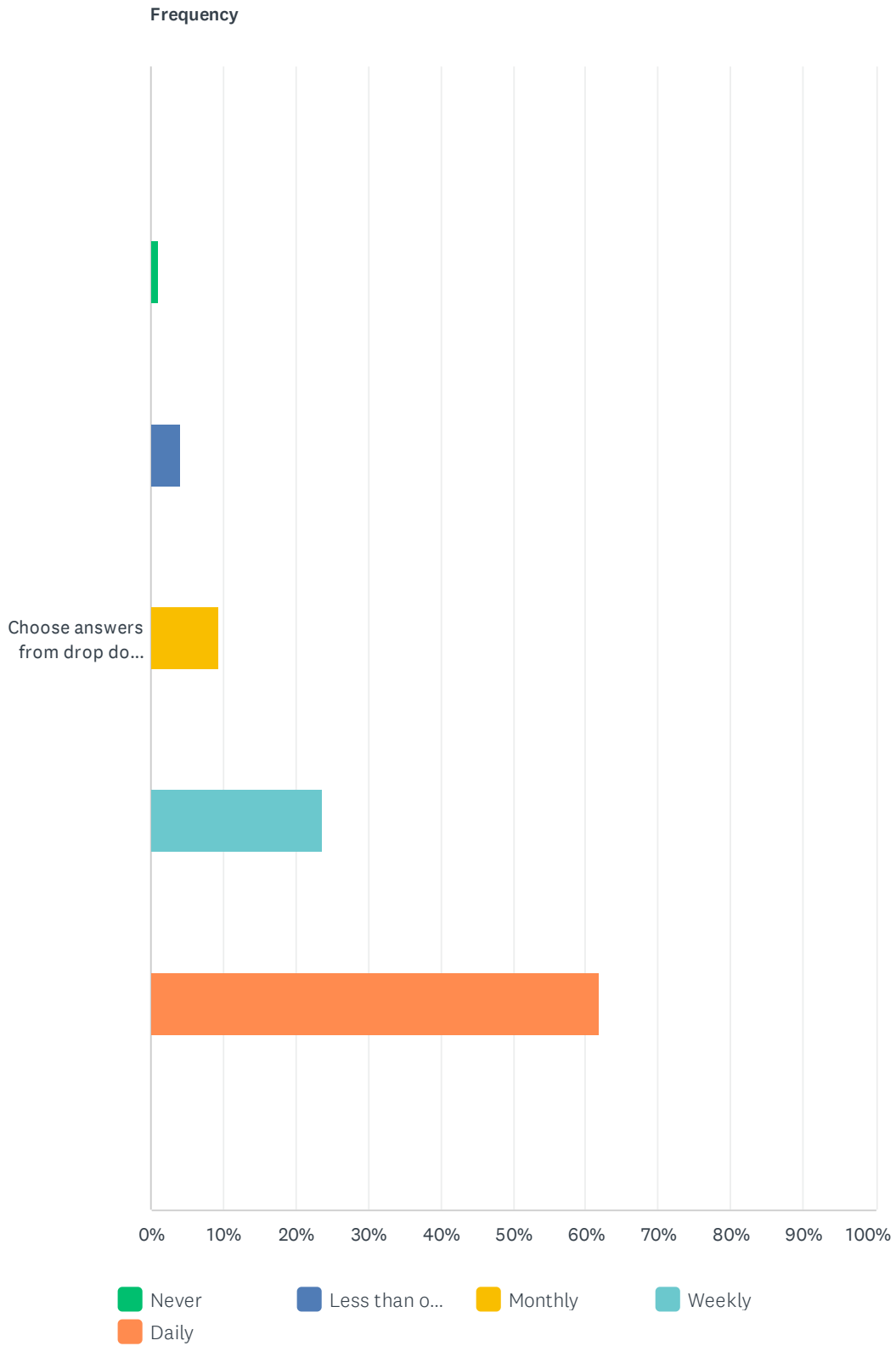
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.34% 1	10.00% 29	44.14% 128	45.52% 132	290

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	14.18% 40	28.72% 81	34.75% 98	22.34% 63	282

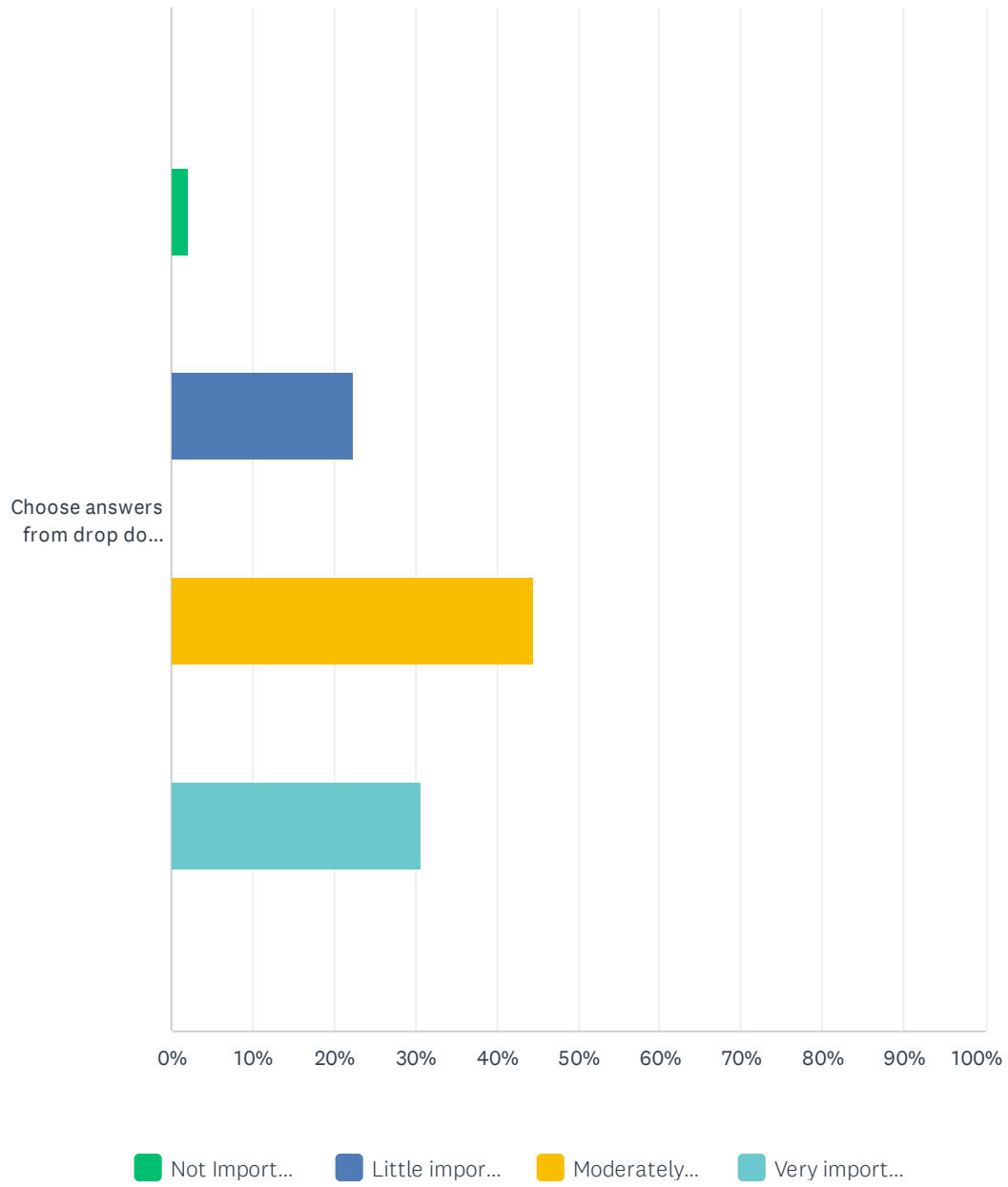
Q81 3.1.1.9 Obtaining general demographic information.

Answered: 299 Skipped: 911



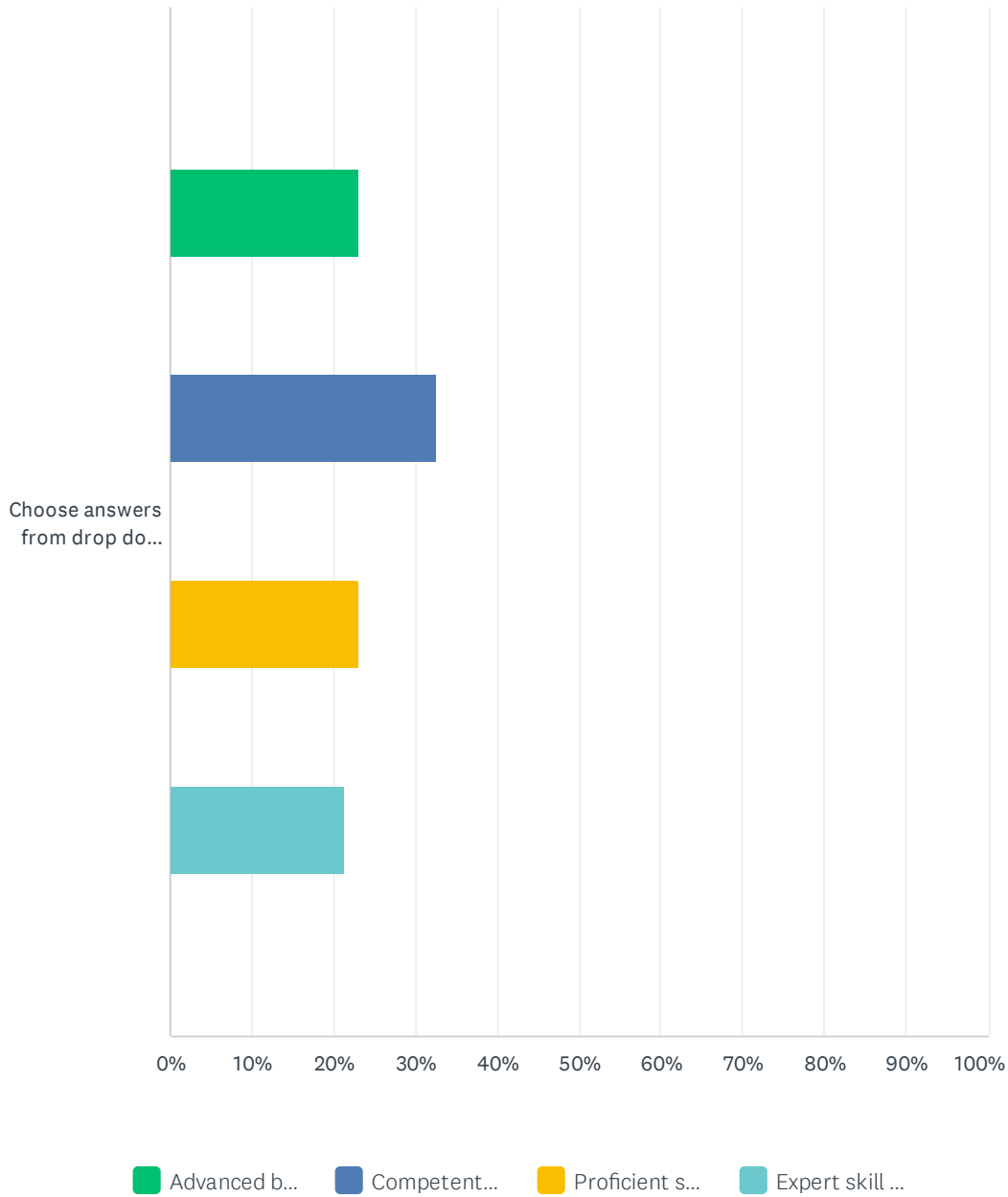
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.00% 3	4.01% 12	9.36% 28	23.75% 71	61.87% 185	299

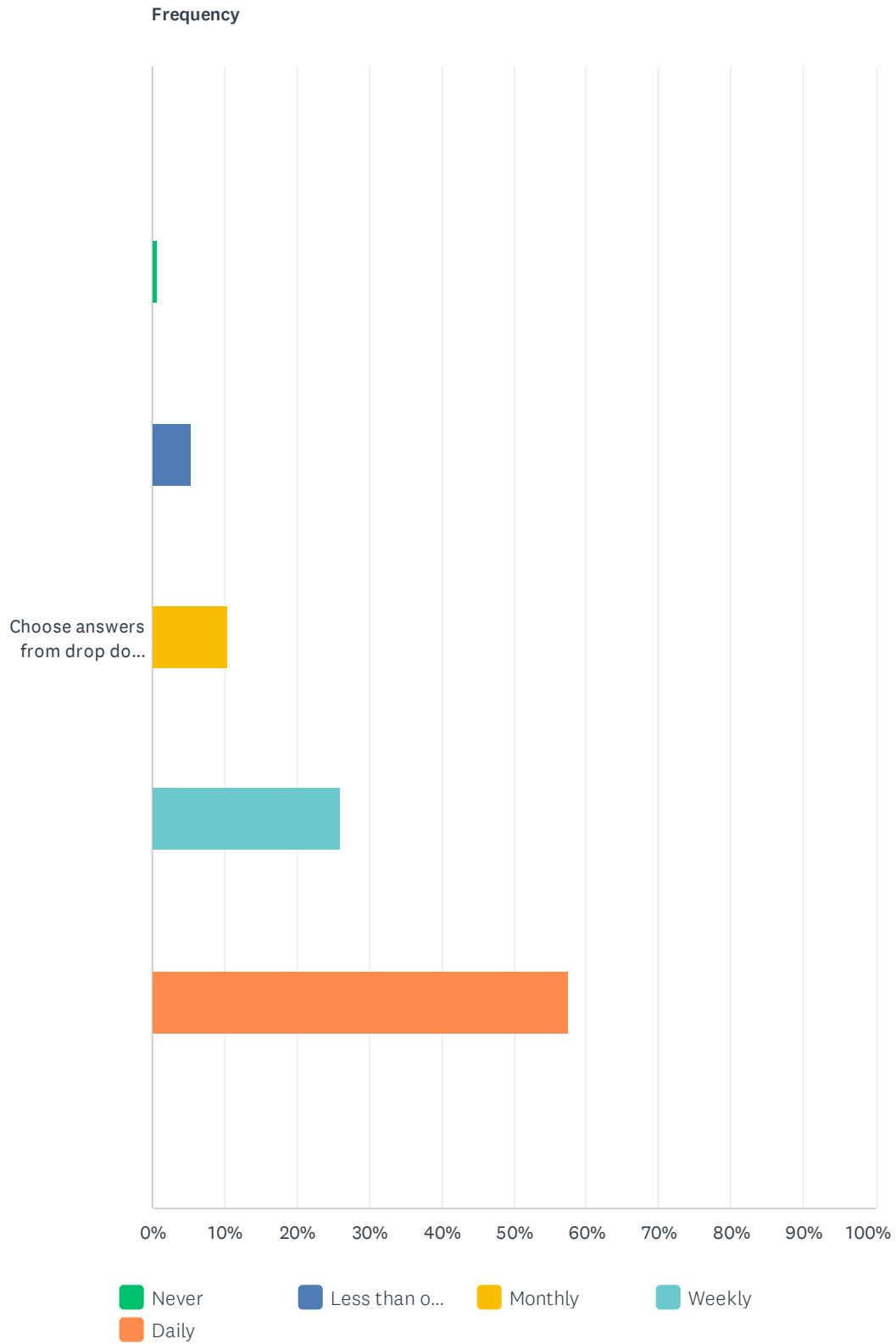
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.08% 6	22.49% 65	44.64% 129	30.80% 89	289

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	23.05% 65	32.62% 92	23.05% 65	21.28% 60	282

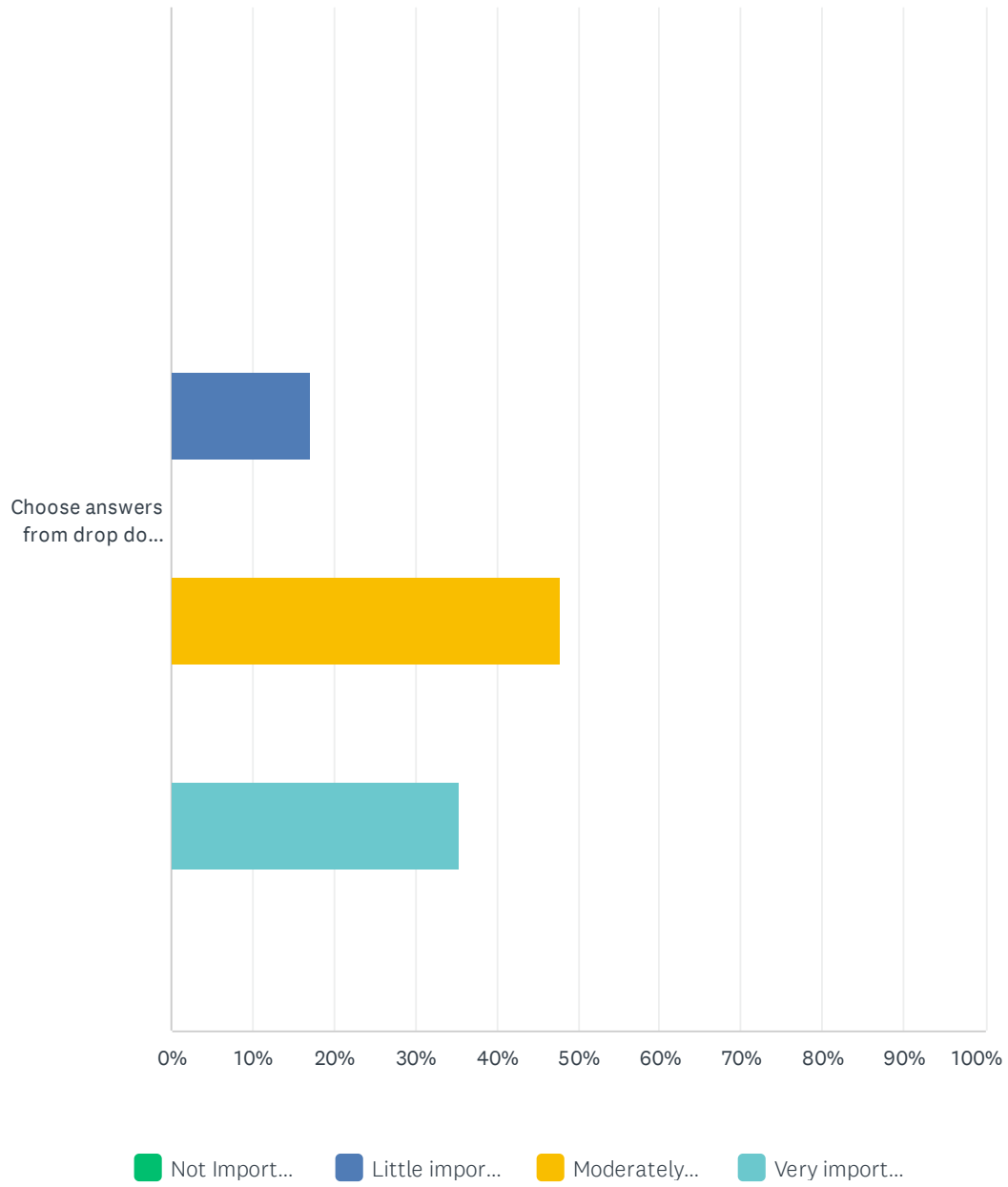
Q82 3.1.1.10 Obtaining data on living environment and community characteristics.

Answered: 299 Skipped: 911



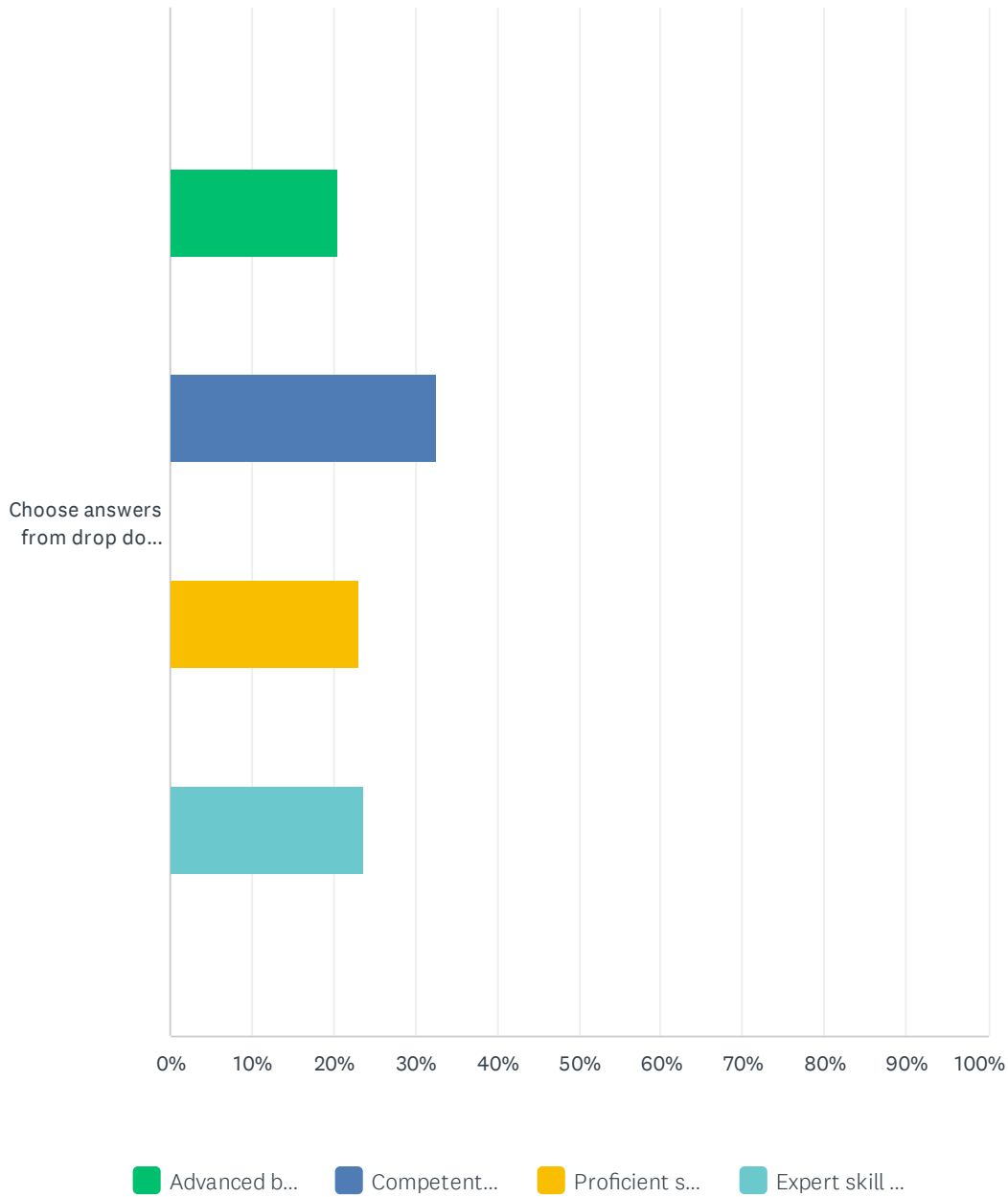
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.67% 2	5.35% 16	10.37% 31	26.09% 78	57.53% 172	299

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	16.96% 49	47.75% 138	35.29% 102	289

Spine Validation Practice Analysis Survey 2022

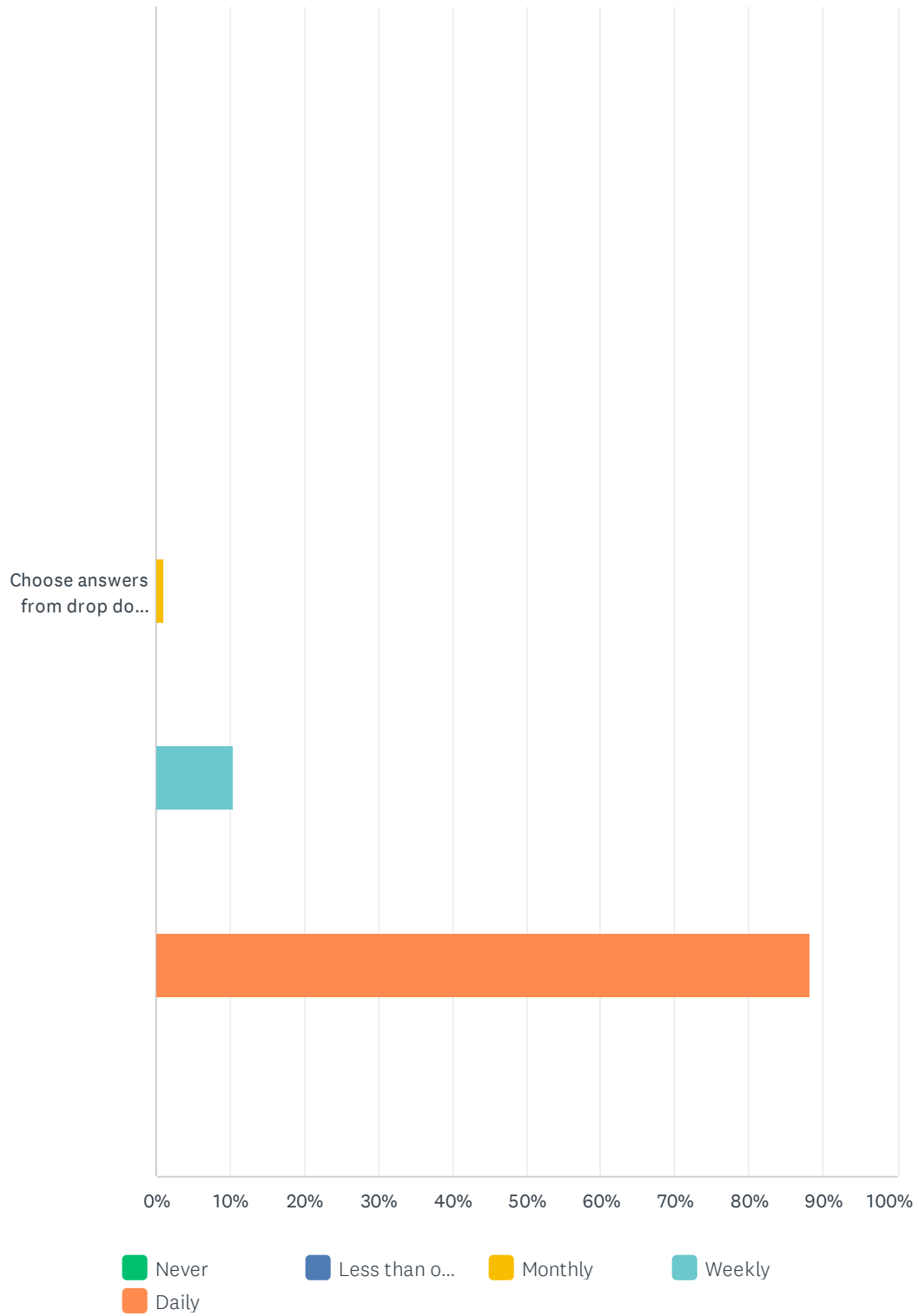
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	20.57% 58	32.62% 92	23.05% 65	23.76% 67	282

Q83 3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis that includes, nature and severity of problem(s), probable cause(s) of problem(s), anatomical structures involved, stage of condition, possible contraindications to physical therapy examination.

Answered: 276 Skipped: 934

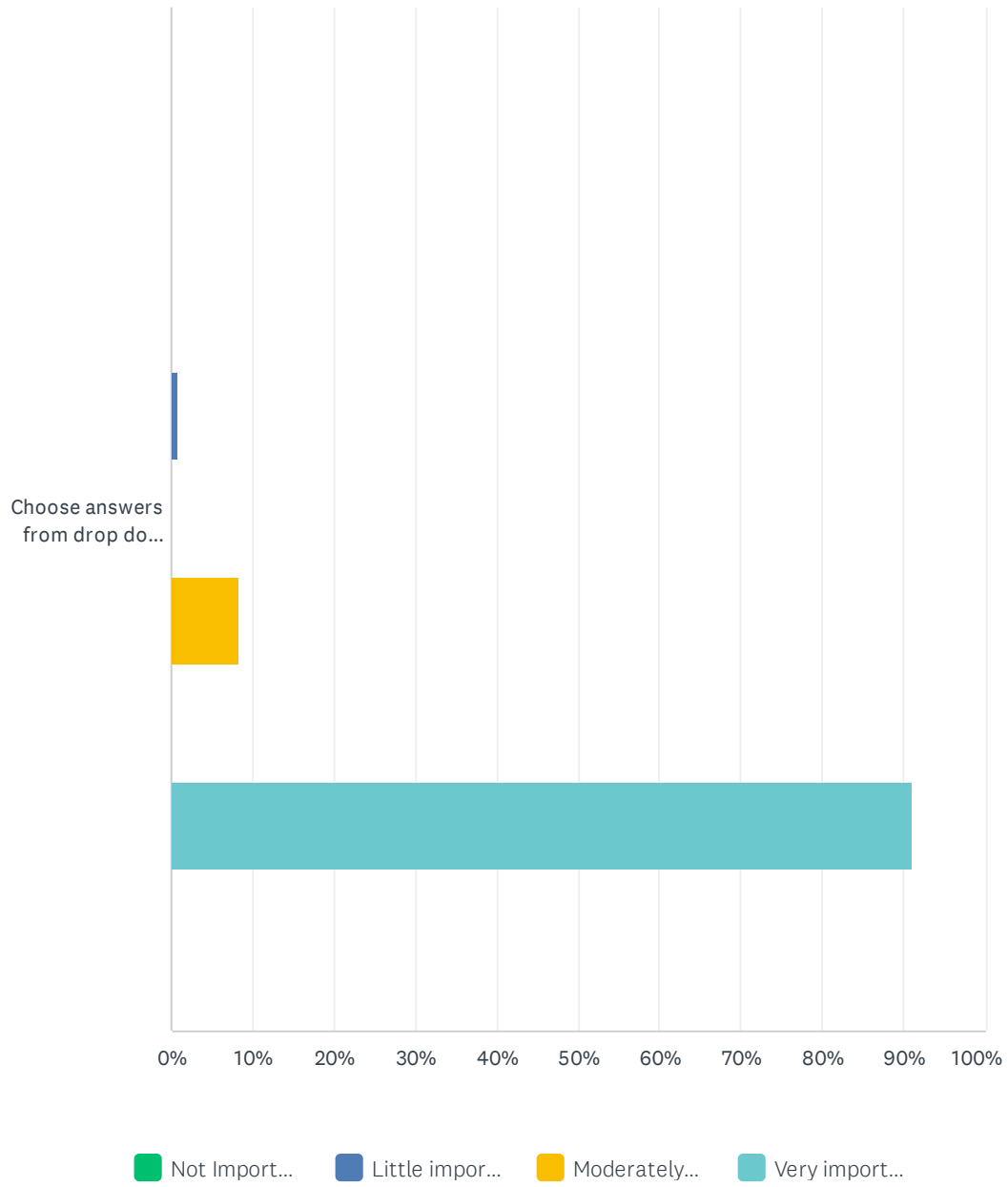
Spine Validation Practice Analysis Survey 2022

Frequency



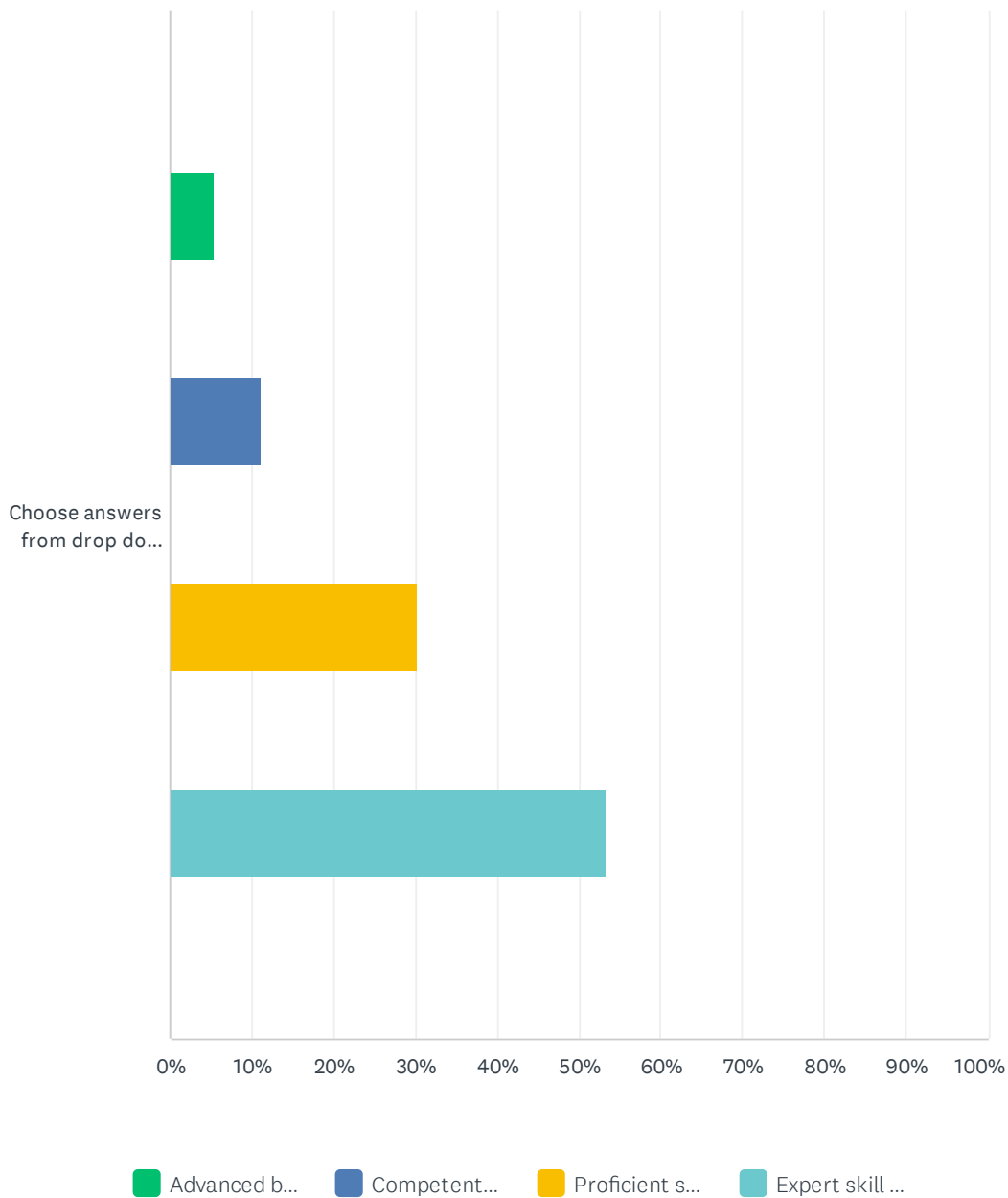
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	1.09% 3	10.55% 29	88.36% 243	275

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.75% 2	8.24% 22	91.01% 243	267

Spine Validation Practice Analysis Survey 2022

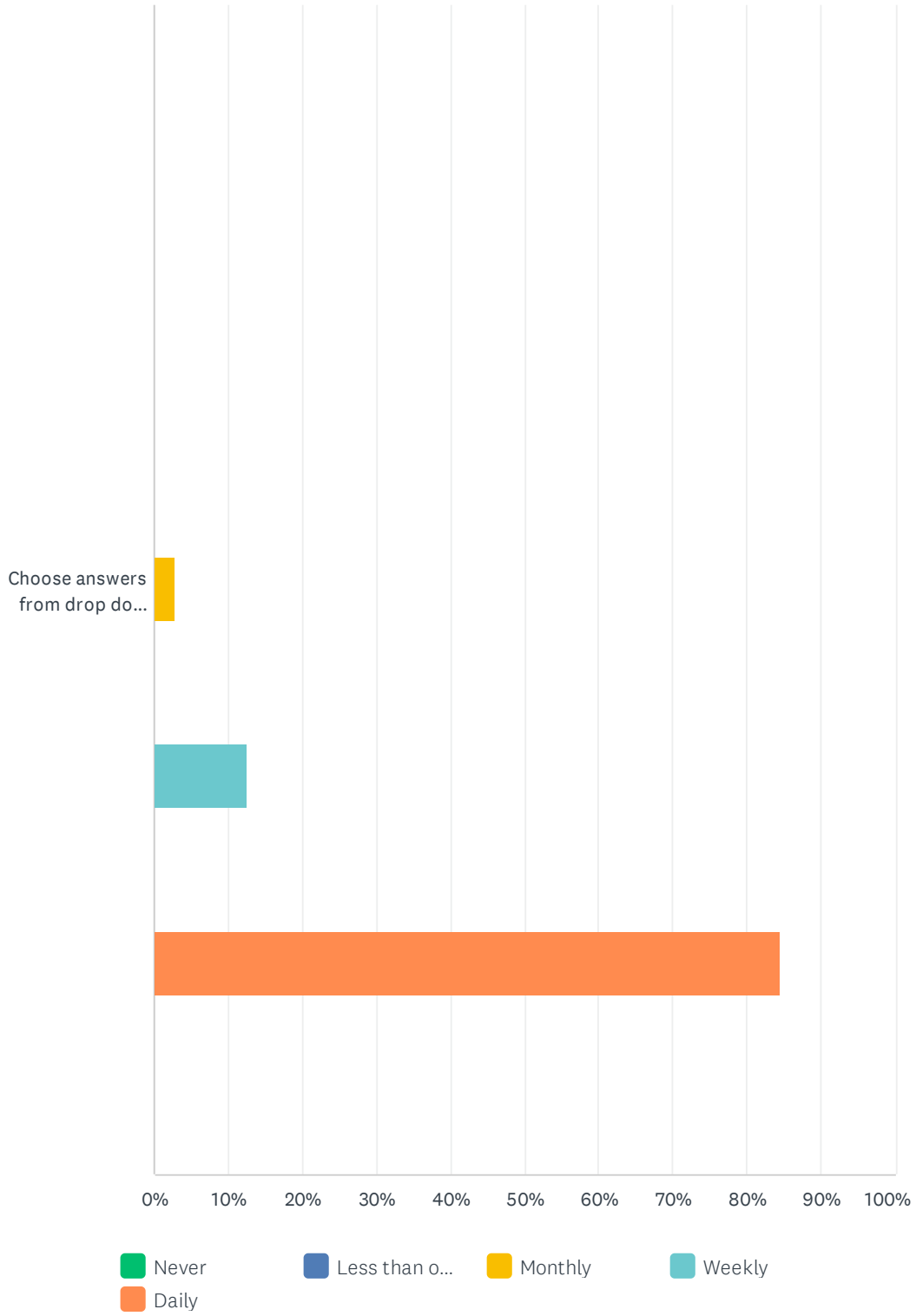
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.36% 14	11.11% 29	30.27% 79	53.26% 139	261

Q84 3.1.2.2 Assessing "red flags" and determining need based upon whether patient demonstrates neuromusculoskeletal problems responsive to physical therapy intervention or condition(s) requiring referral to another health care provider.

Answered: 278 Skipped: 932

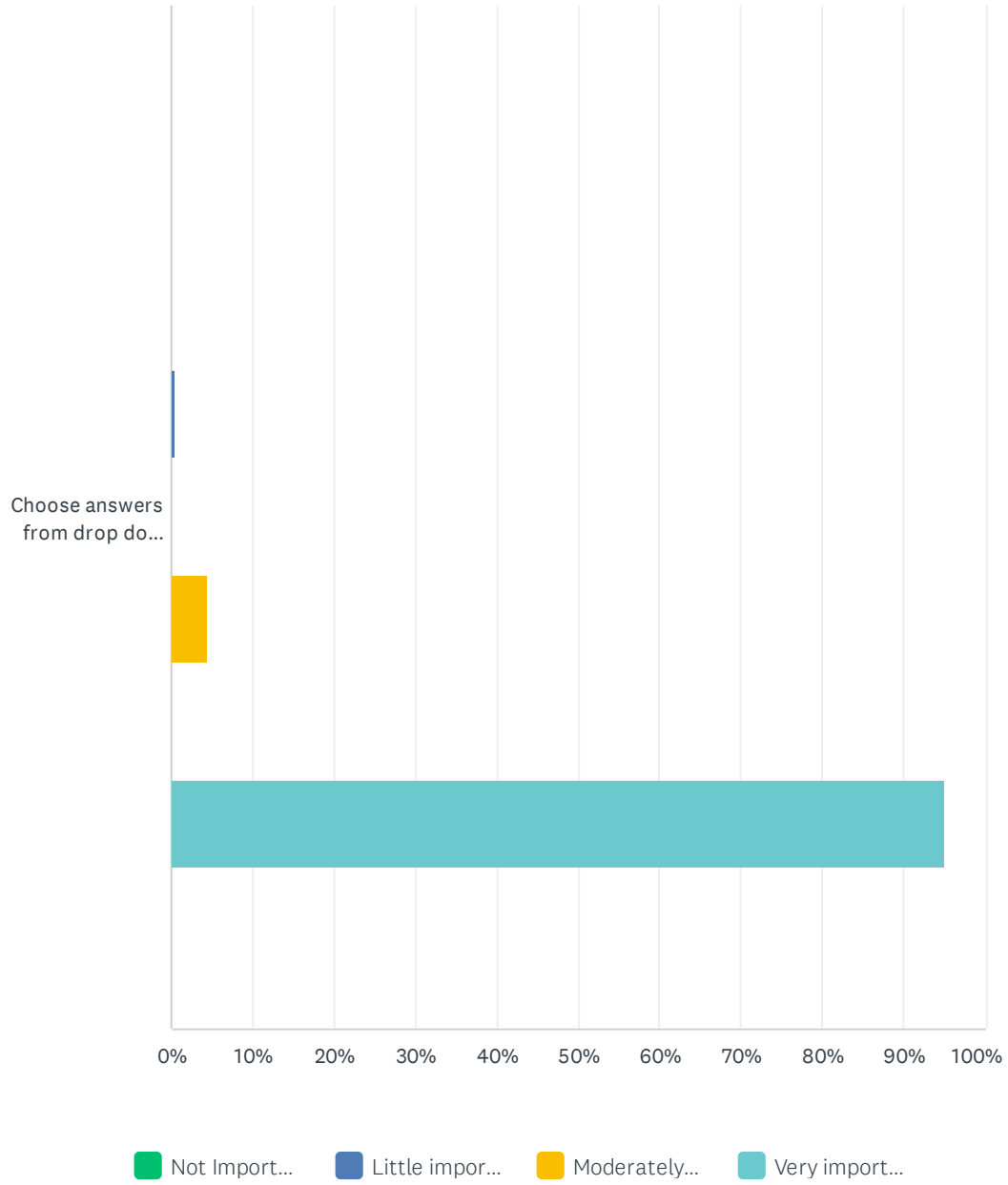
Spine Validation Practice Analysis Survey 2022

Frequency



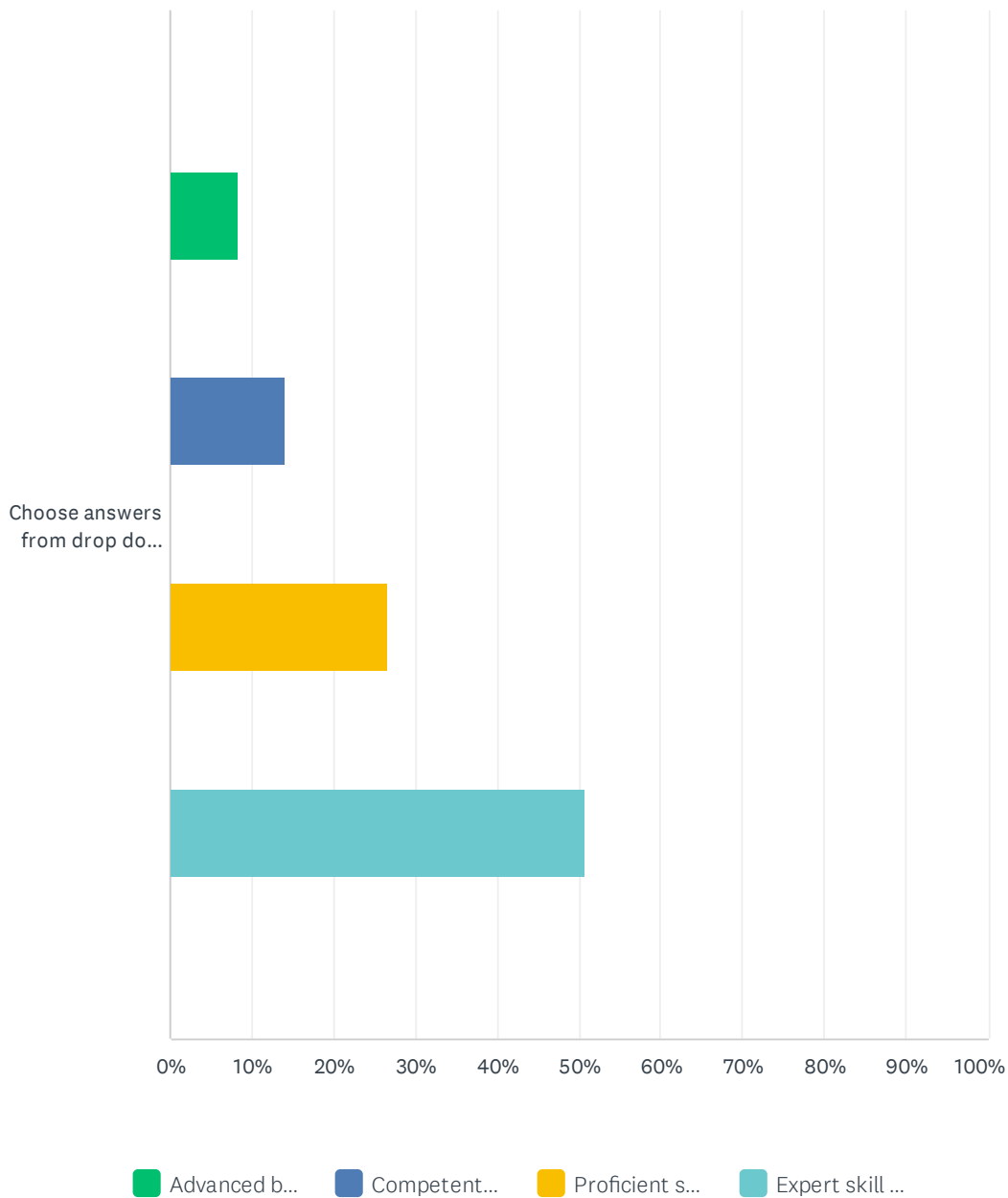
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	2.88% 8	12.59% 35	84.53% 235	278

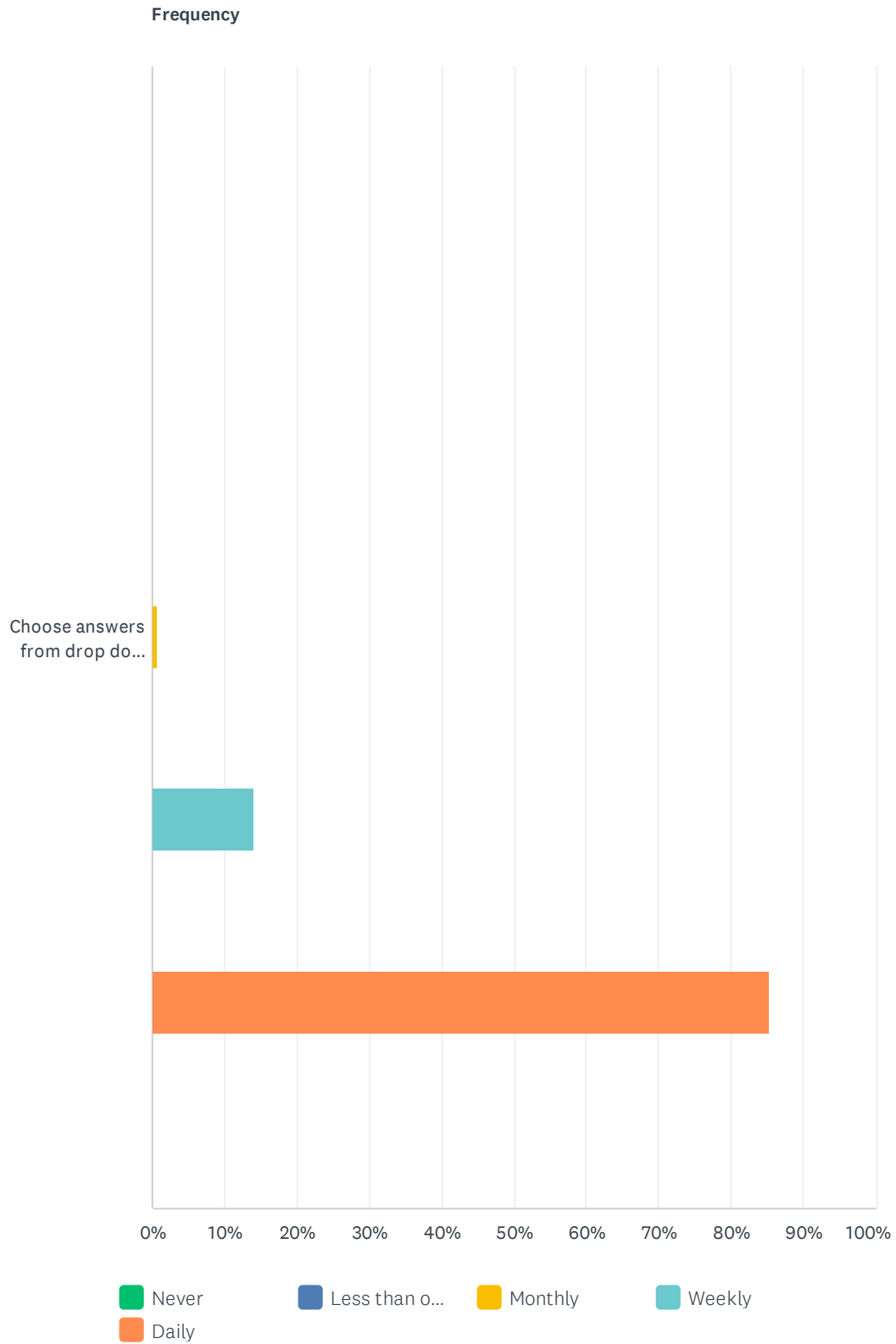
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.37% 1	4.46% 12	95.17% 256	269

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	8.40% 22	14.12% 37	26.72% 70	50.76% 133	262

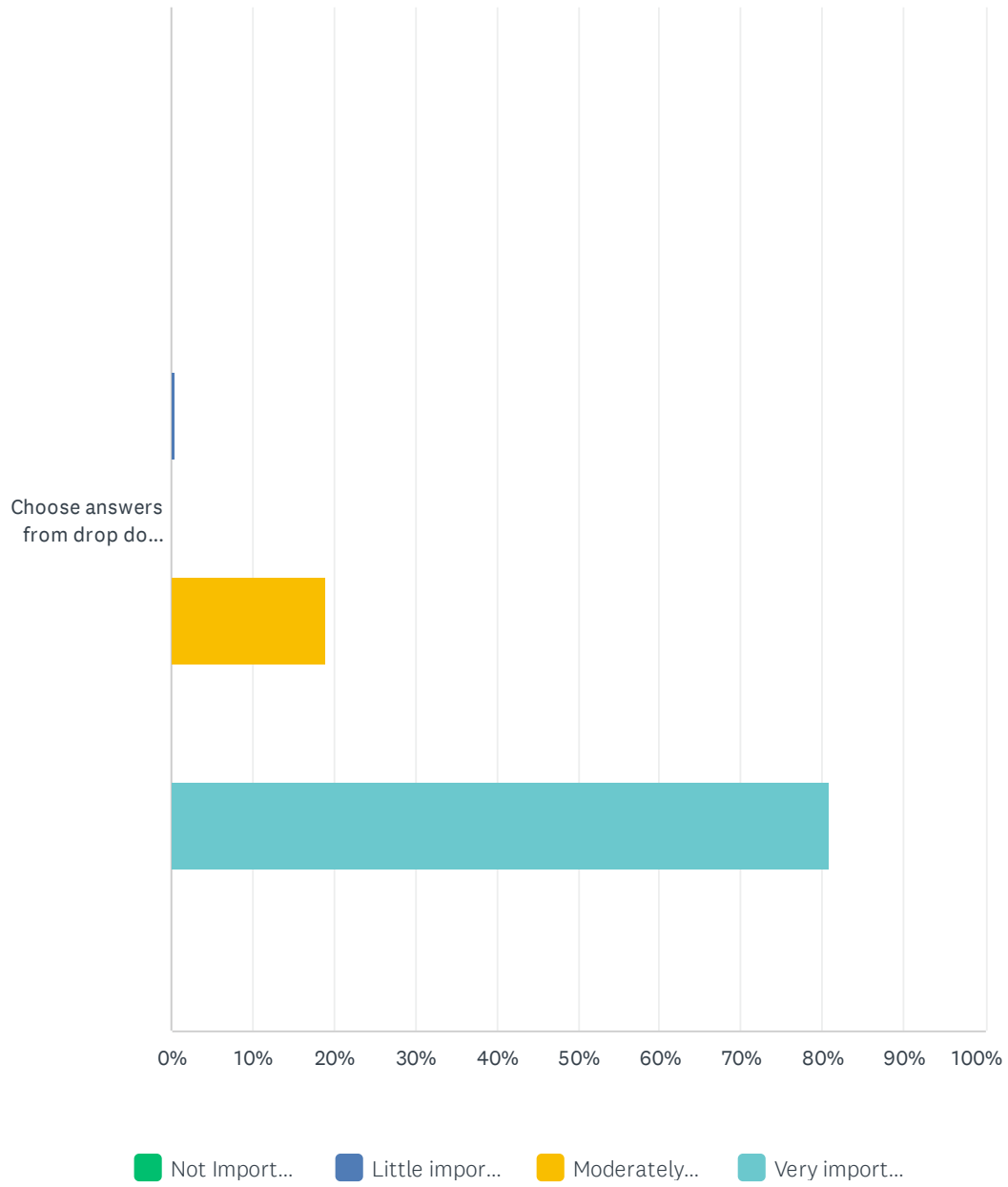
Q85 3.1.2.3 Identifying chief and secondary problems.

Answered: 278 Skipped: 932



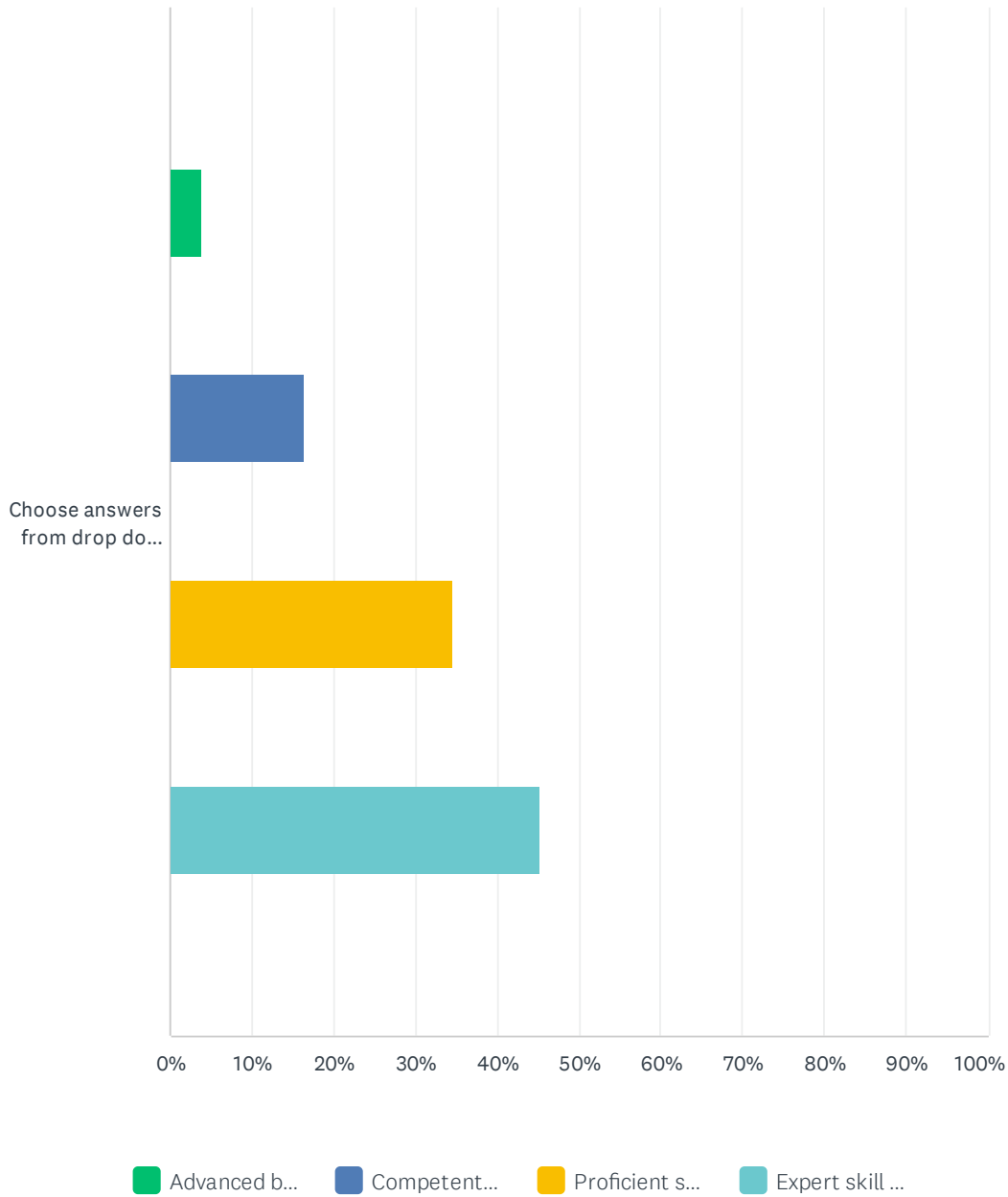
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.72% 2	14.03% 39	85.25% 237	278

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.37% 1	18.89% 51	80.74% 218	270

Spine Validation Practice Analysis Survey 2022

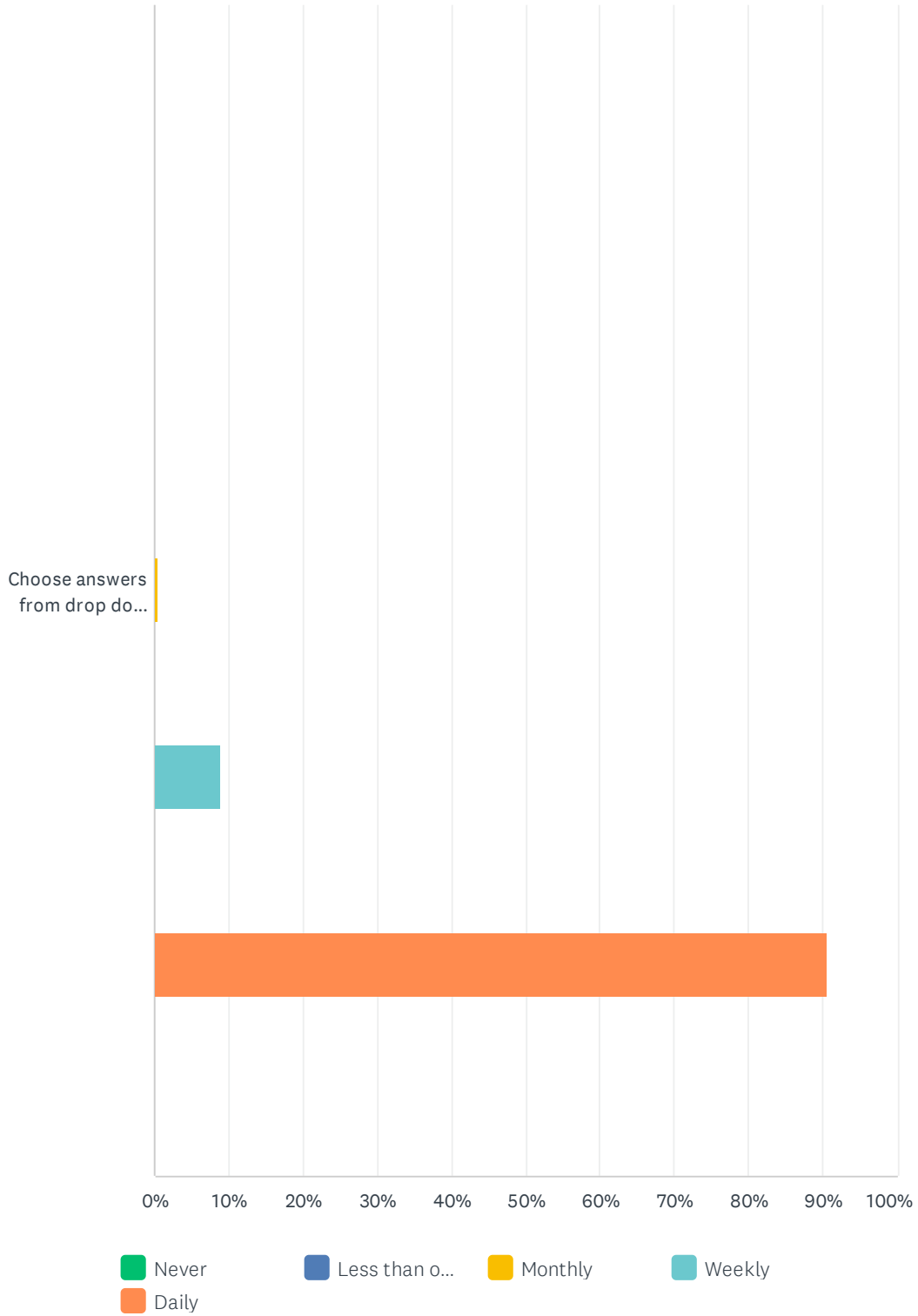
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.80% 10	16.35% 43	34.60% 91	45.25% 119	263

Q86 3.1.3.1 Includes examination techniques with a high probability of changing (reproducing or relieving) the chief concern and contributing to the development and refinement of the working hypothesis(es).

Answered: 277 Skipped: 933

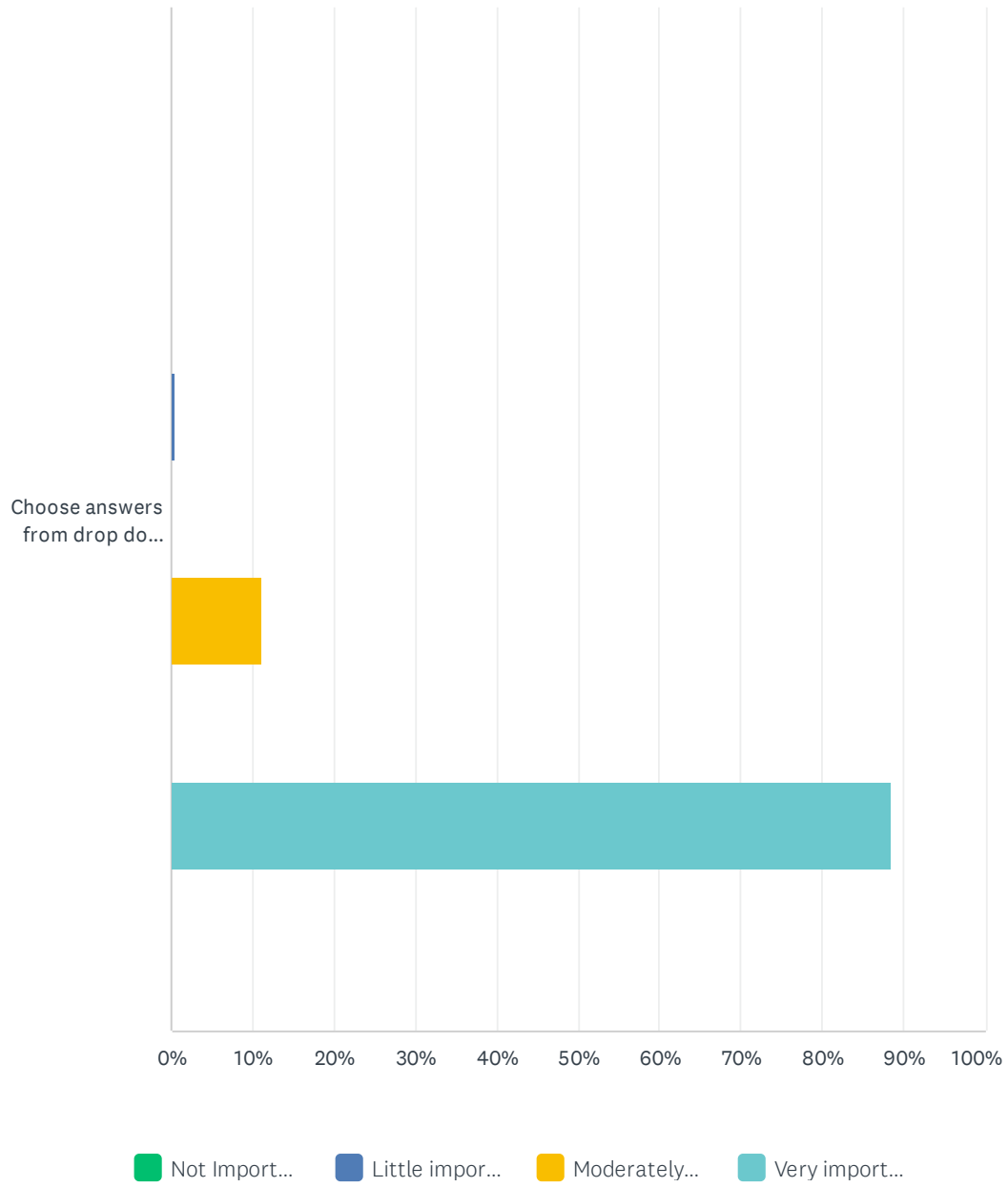
Spine Validation Practice Analysis Survey 2022

Frequency



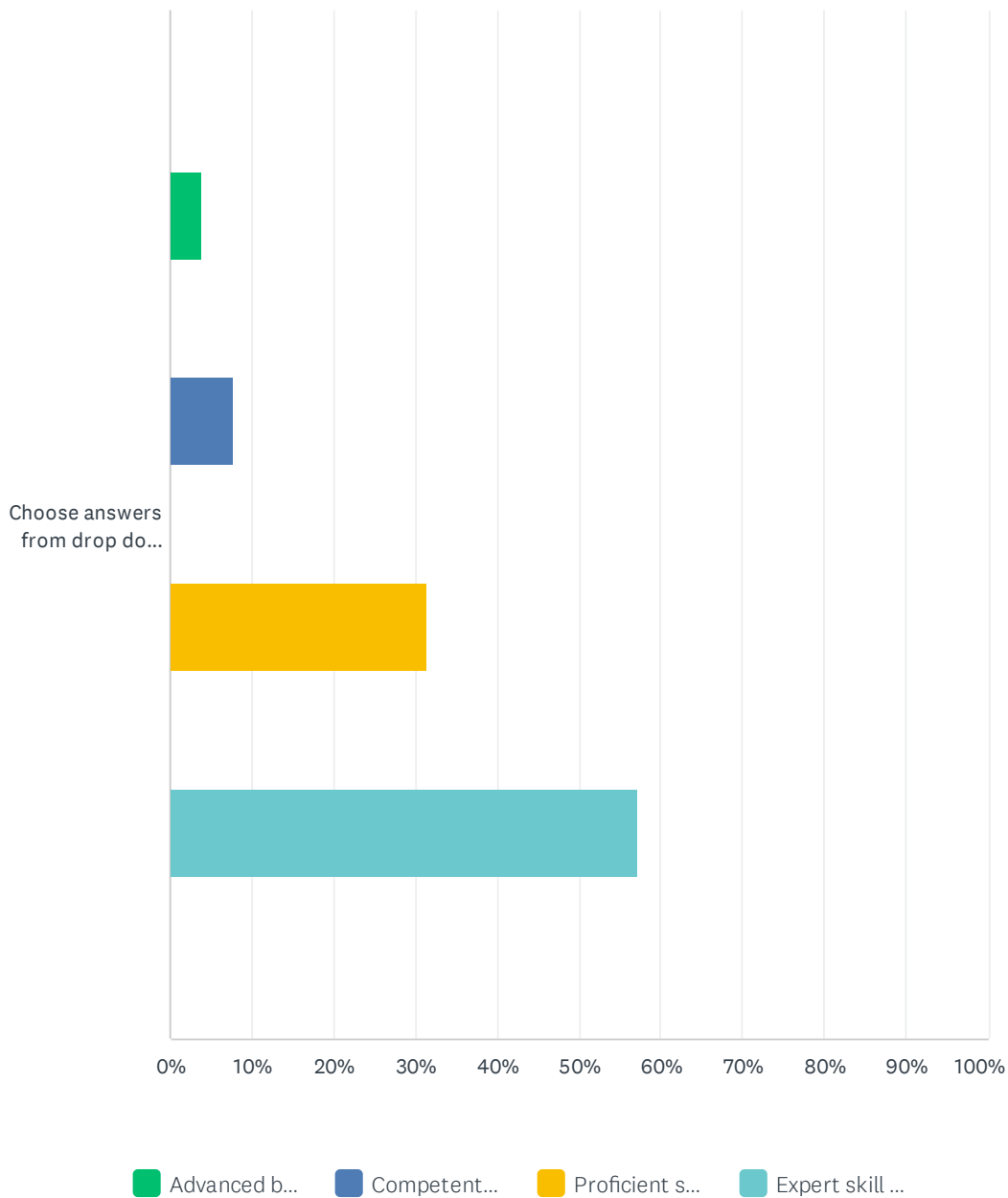
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.36% 1	9.03% 25	90.61% 251	277

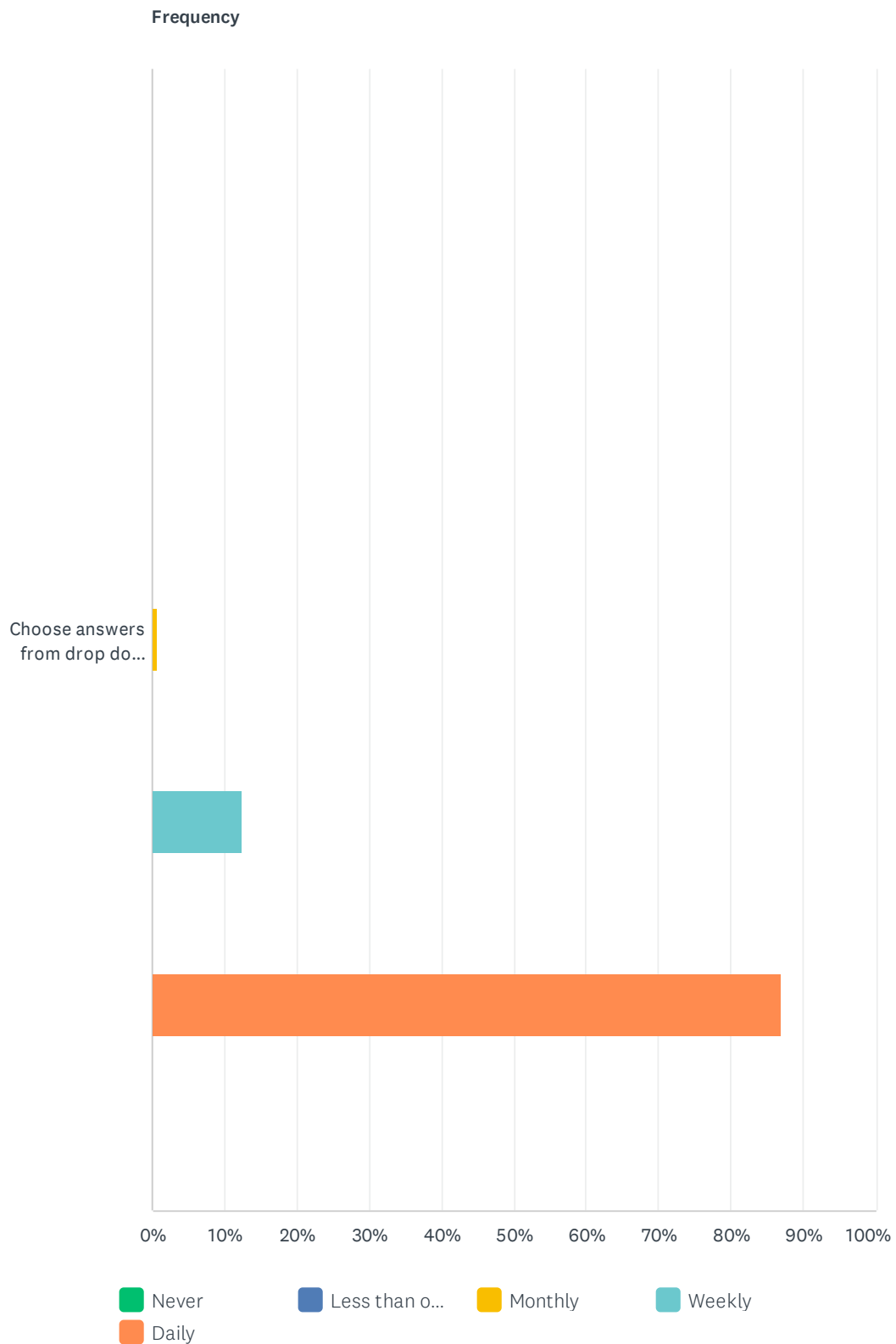
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.37% 1	11.19% 30	88.43% 237	268

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.83% 10	7.66% 20	31.42% 82	57.09% 149	261

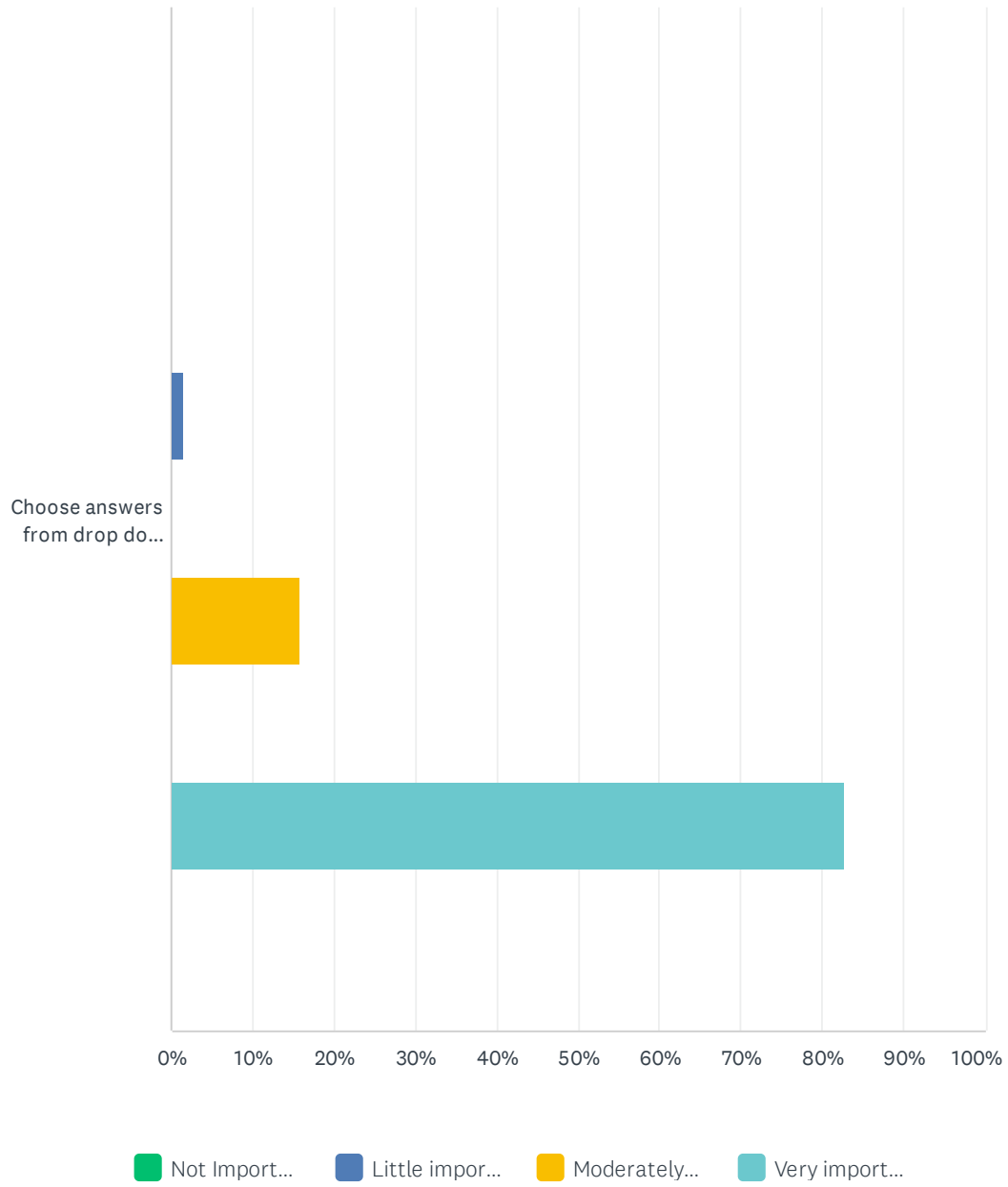
Q87 3.1.3.2 Is comprehensive but has the focus and detail appropriate to the working hypothesis and the patient's problems.

Answered: 275 Skipped: 935



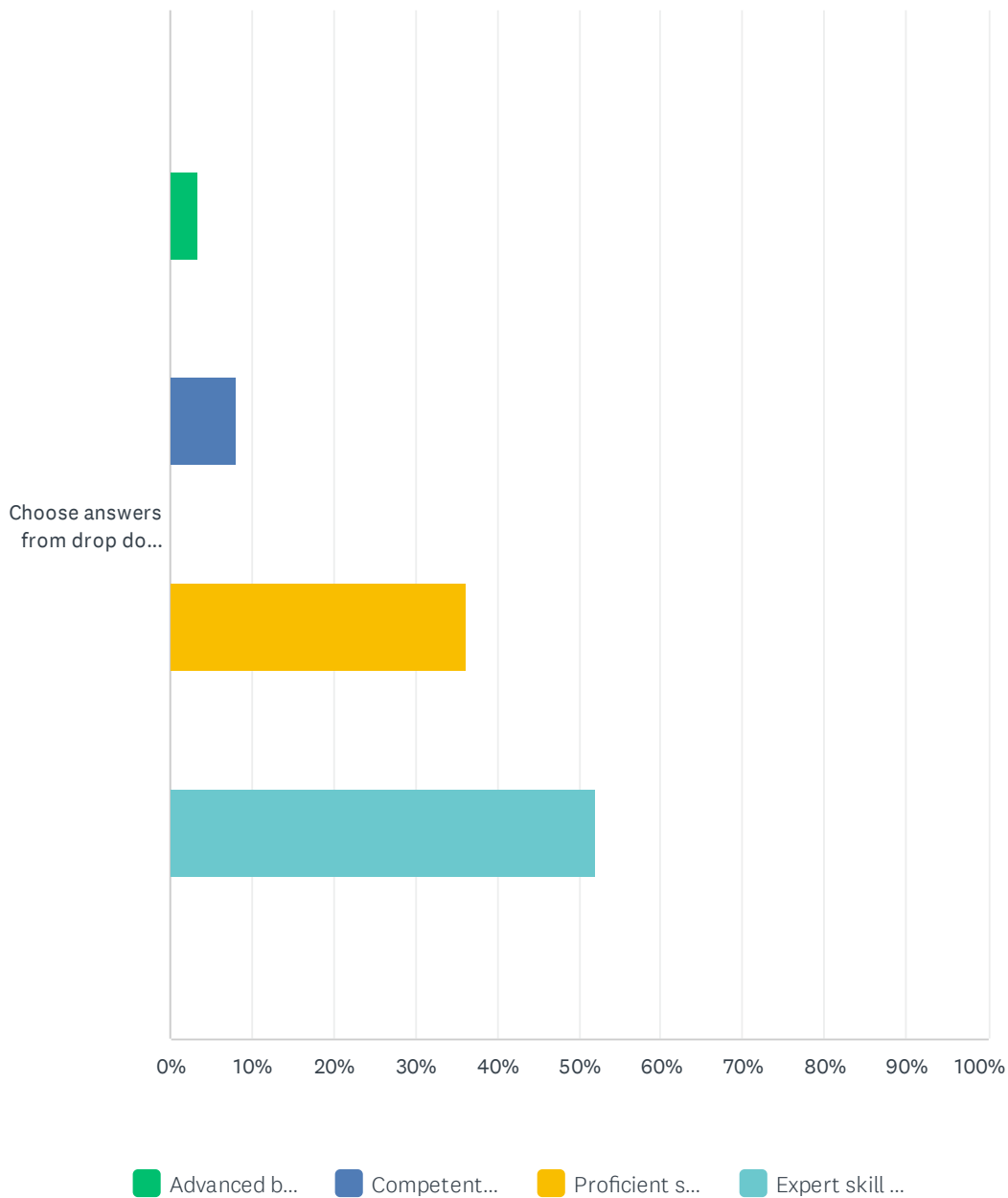
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.73% 2	12.36% 34	86.91% 239	275

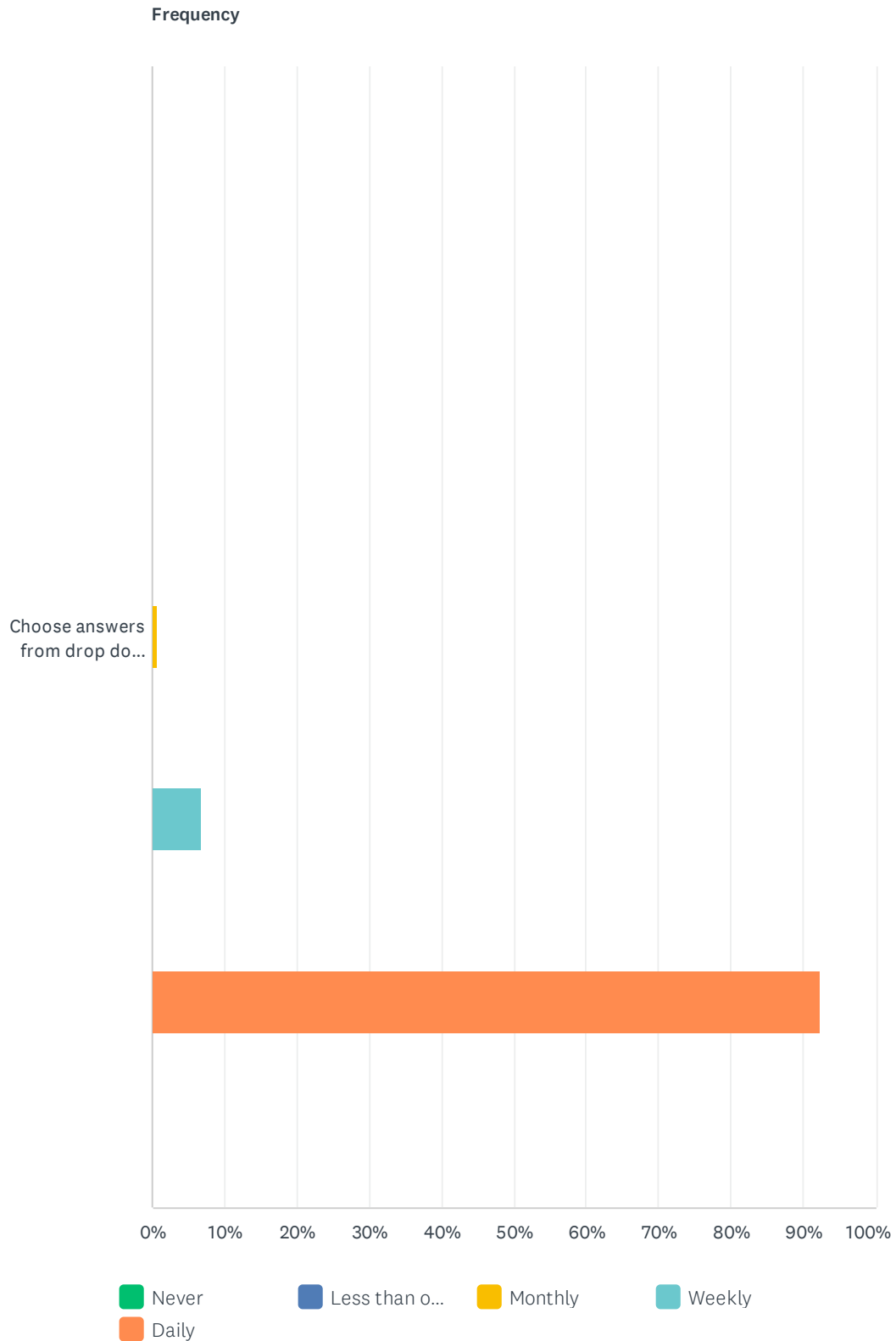
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.50% 4	15.73% 42	82.77% 221	267

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.47% 9	8.11% 21	36.29% 94	52.12% 135	259

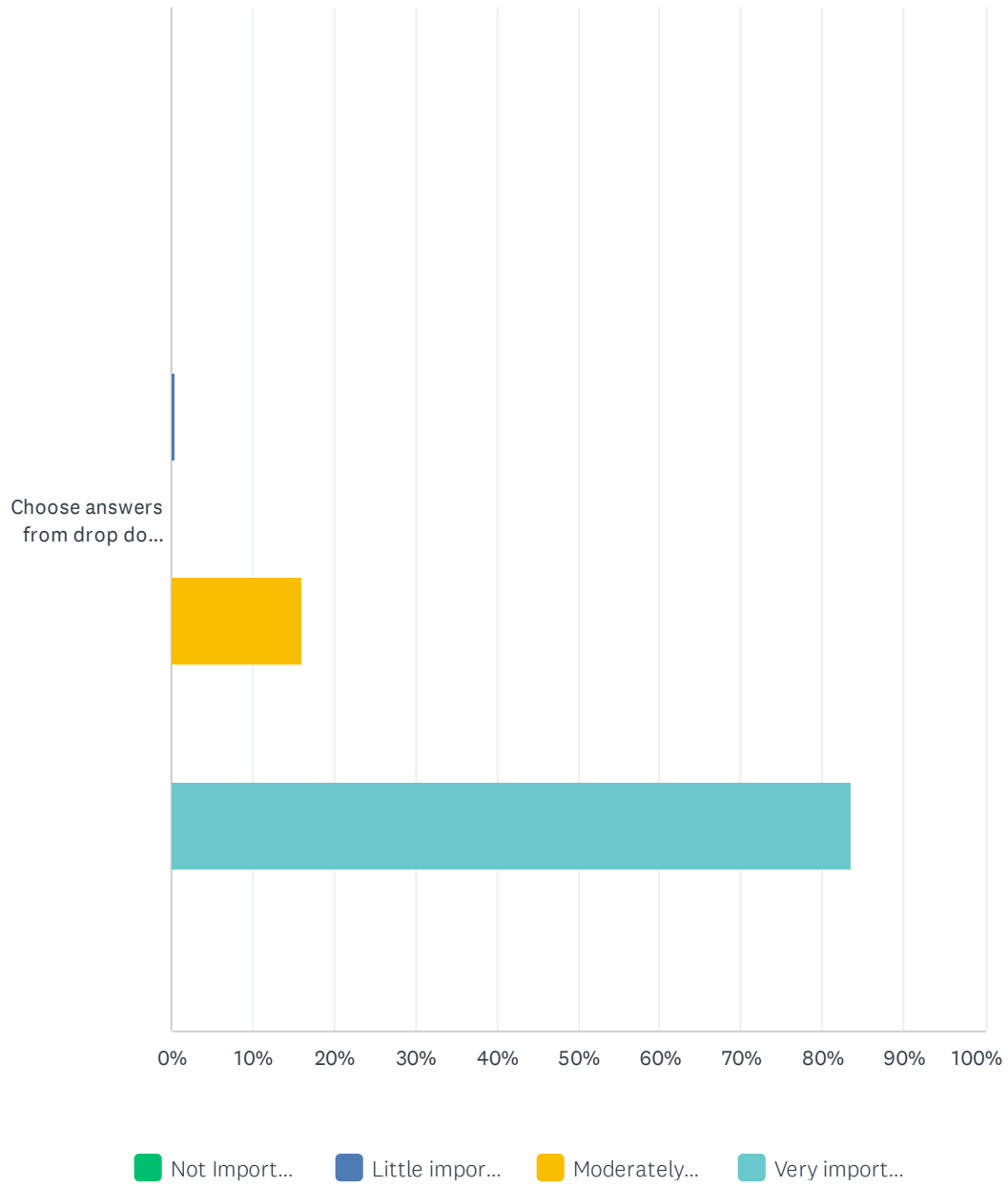
Q88 3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems.

Answered: 276 Skipped: 934



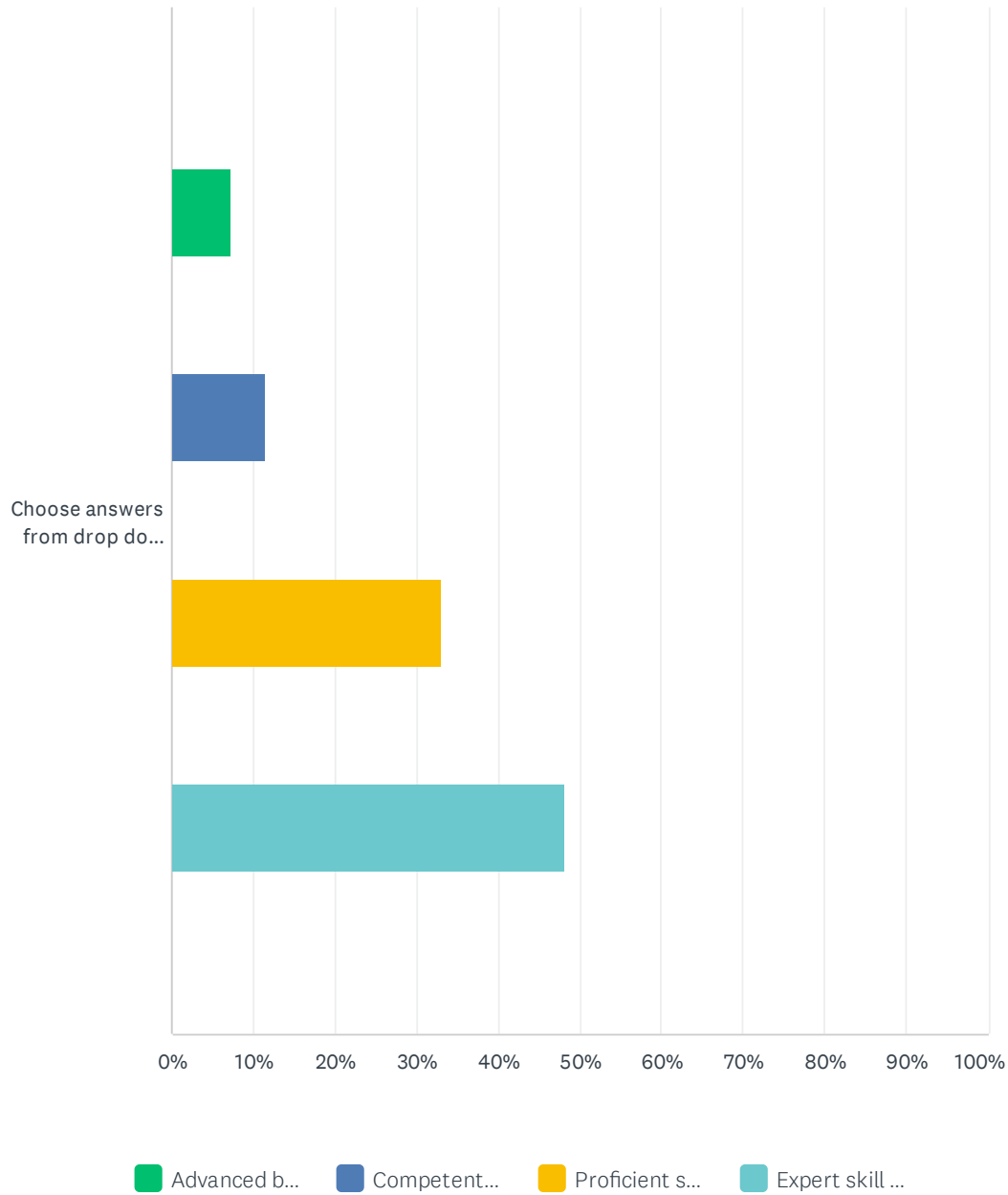
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.72% 2	6.88% 19	92.39% 255	276

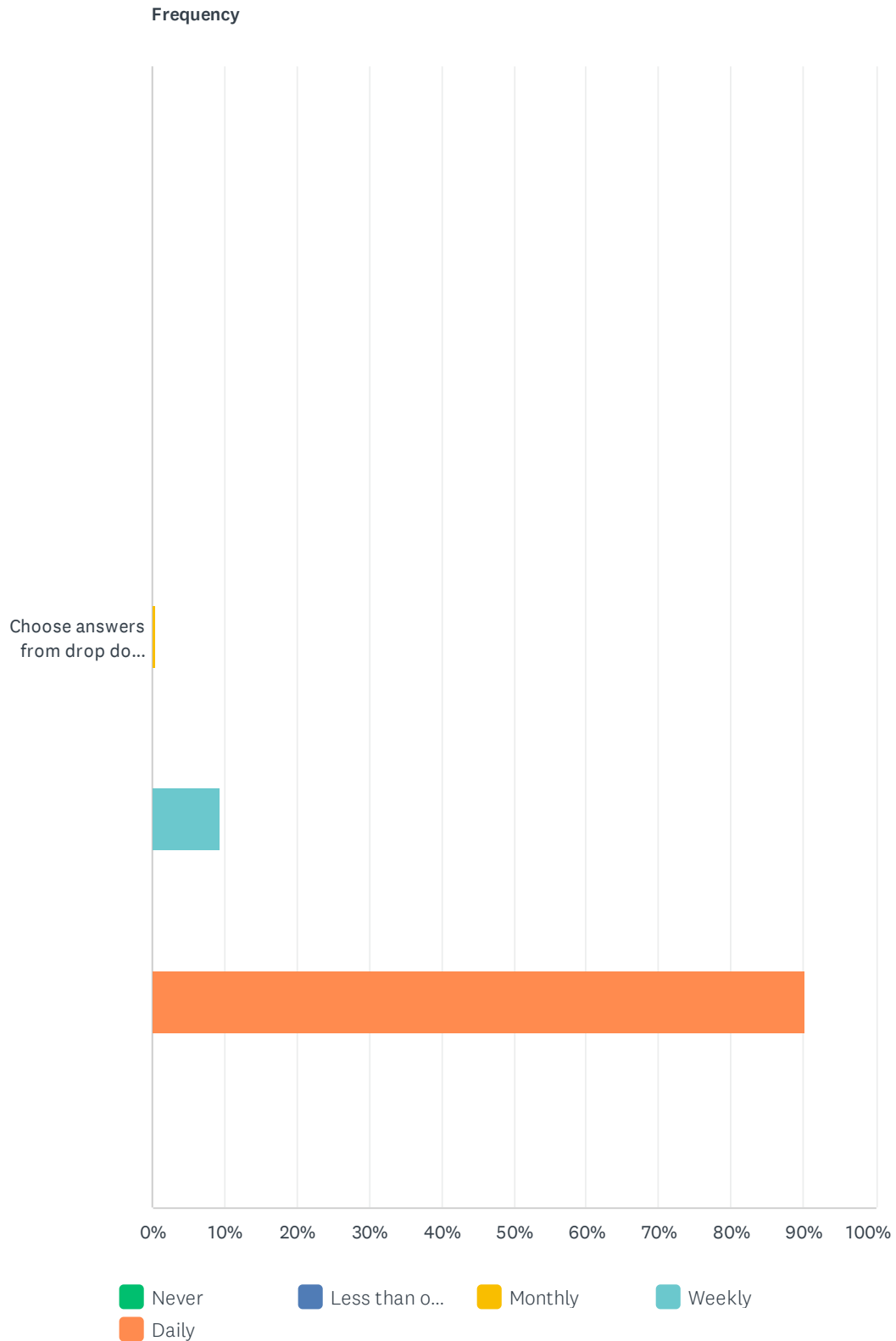
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.37% 1	16.04% 43	83.58% 224	268

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.28% 19	11.49% 30	32.95% 86	48.28% 126	261

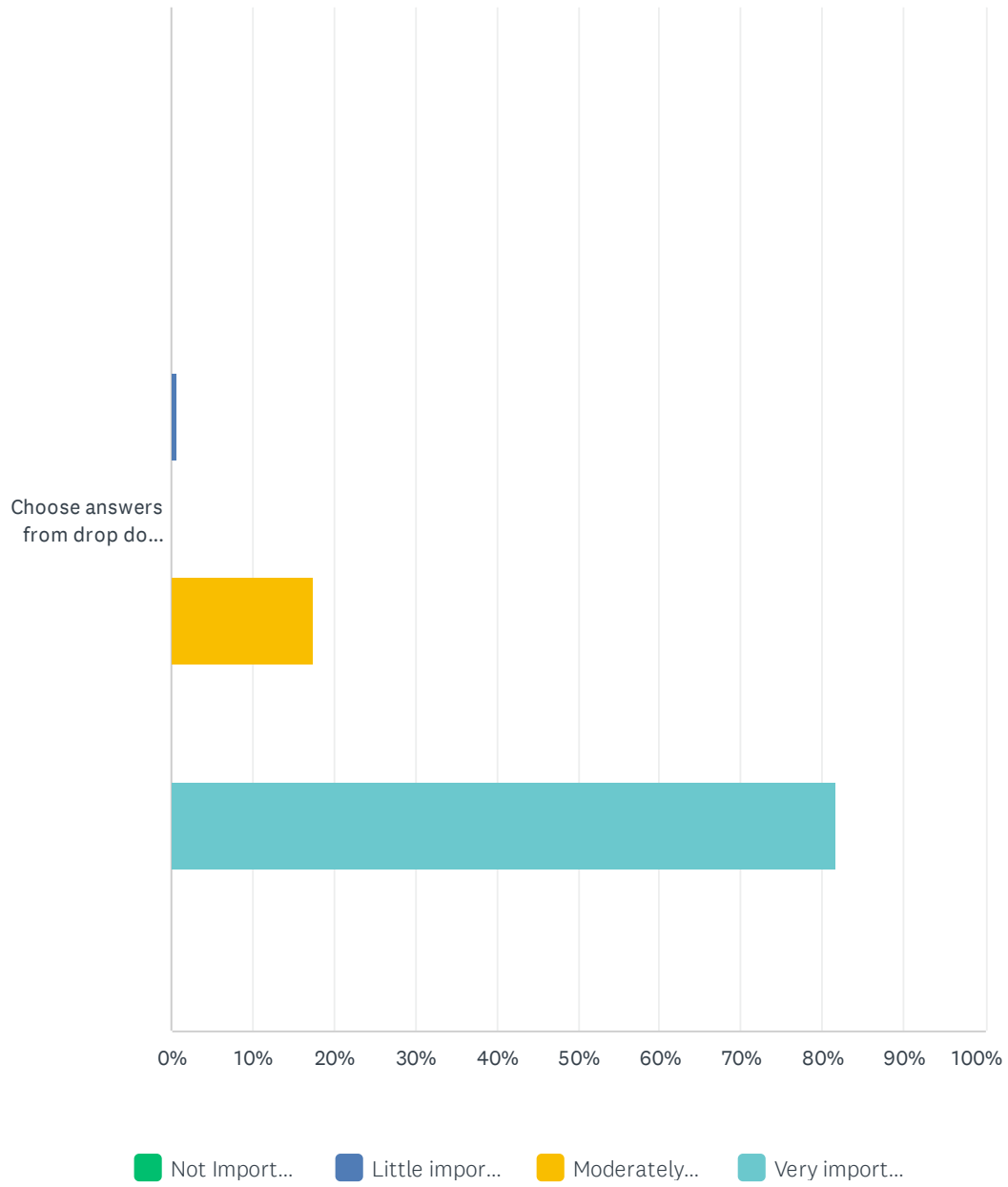
Q89 3.1.3.4 Prioritizes areas, movements, and functional activities to be examined as well as examination procedures and examination sequence.

Answered: 276 Skipped: 934



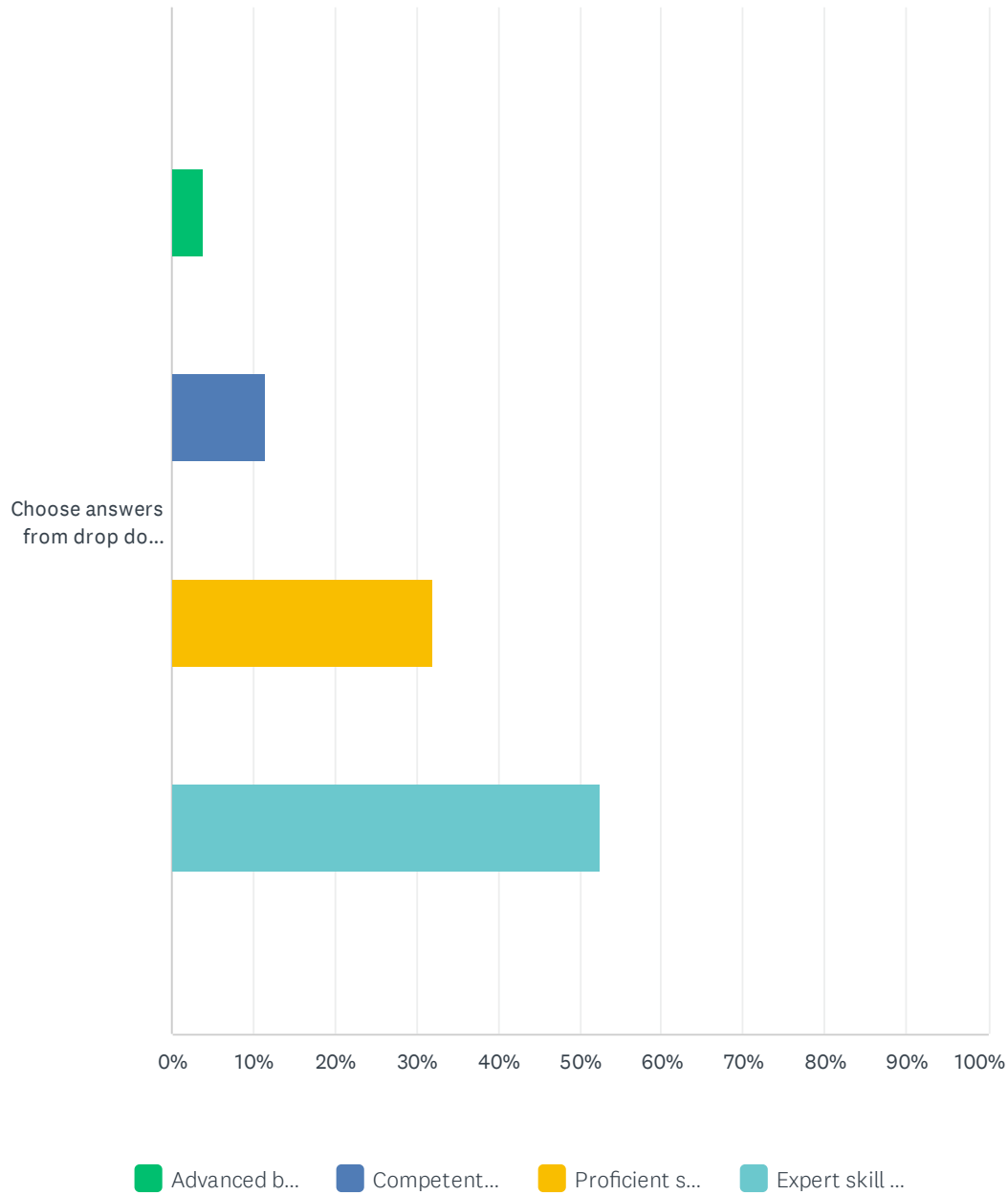
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.36% 1	9.42% 26	90.22% 249	276

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.75% 2	17.54% 47	81.72% 219	268

Spine Validation Practice Analysis Survey 2022

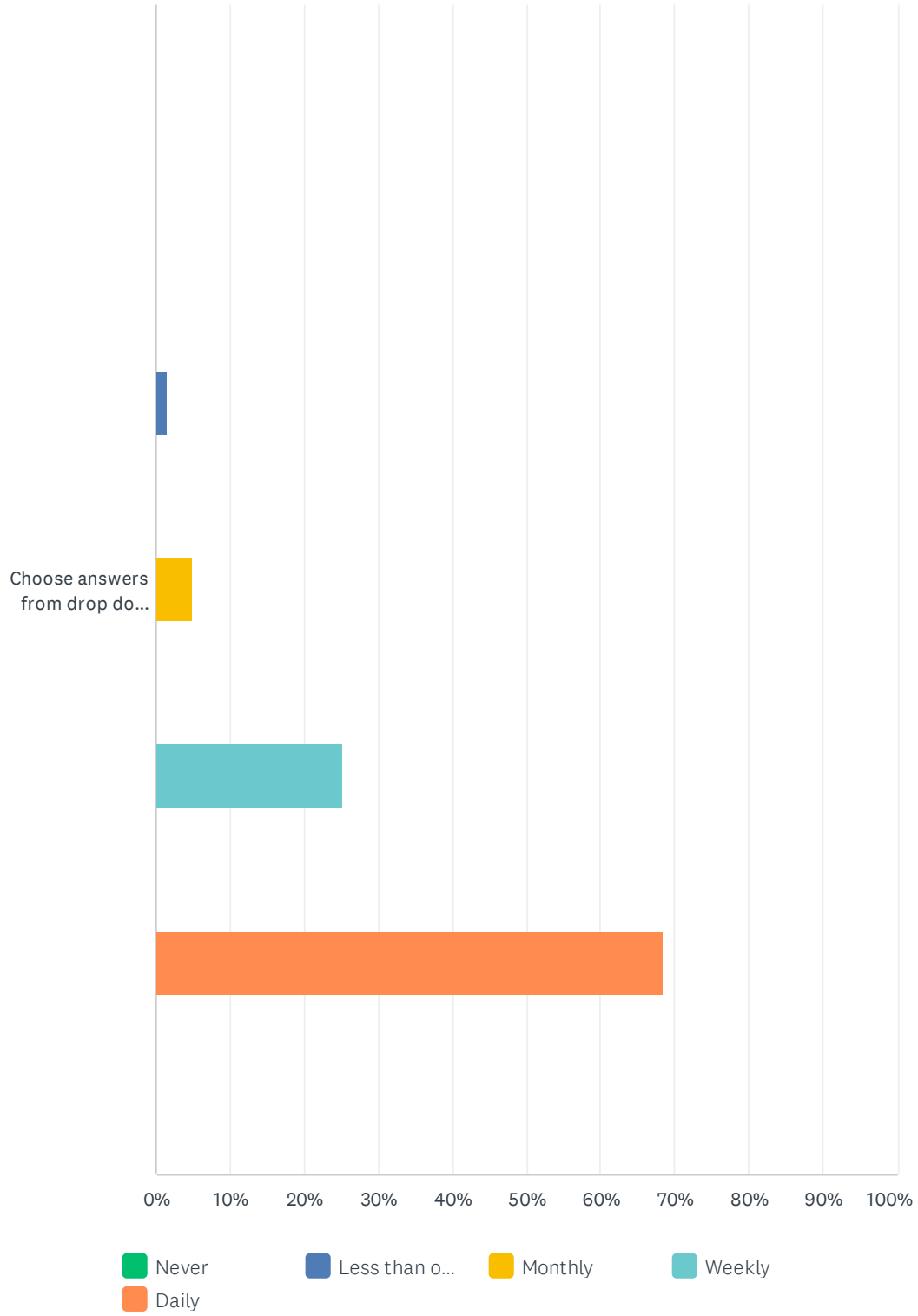
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.86% 10	11.58% 30	32.05% 83	52.51% 136	259

Q90 3.1.4.1 Performing systems review to identify the impaired or unimpaired status of the: cardiovascular/pulmonary system, musculoskeletal system, neuromotor system, integumentary system, and/or communication ability.

Answered: 266 Skipped: 944

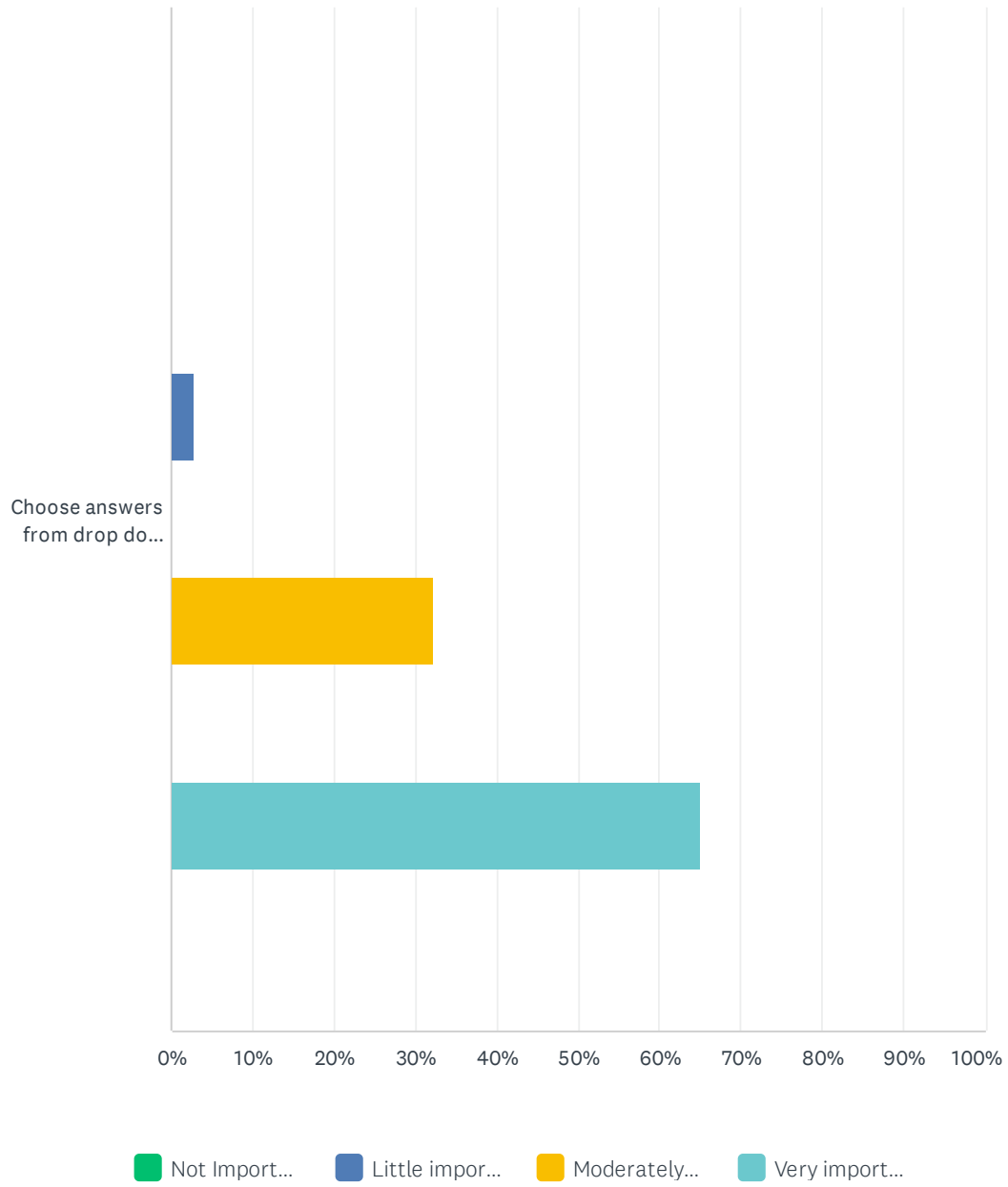
Spine Validation Practice Analysis Survey 2022

Frequency



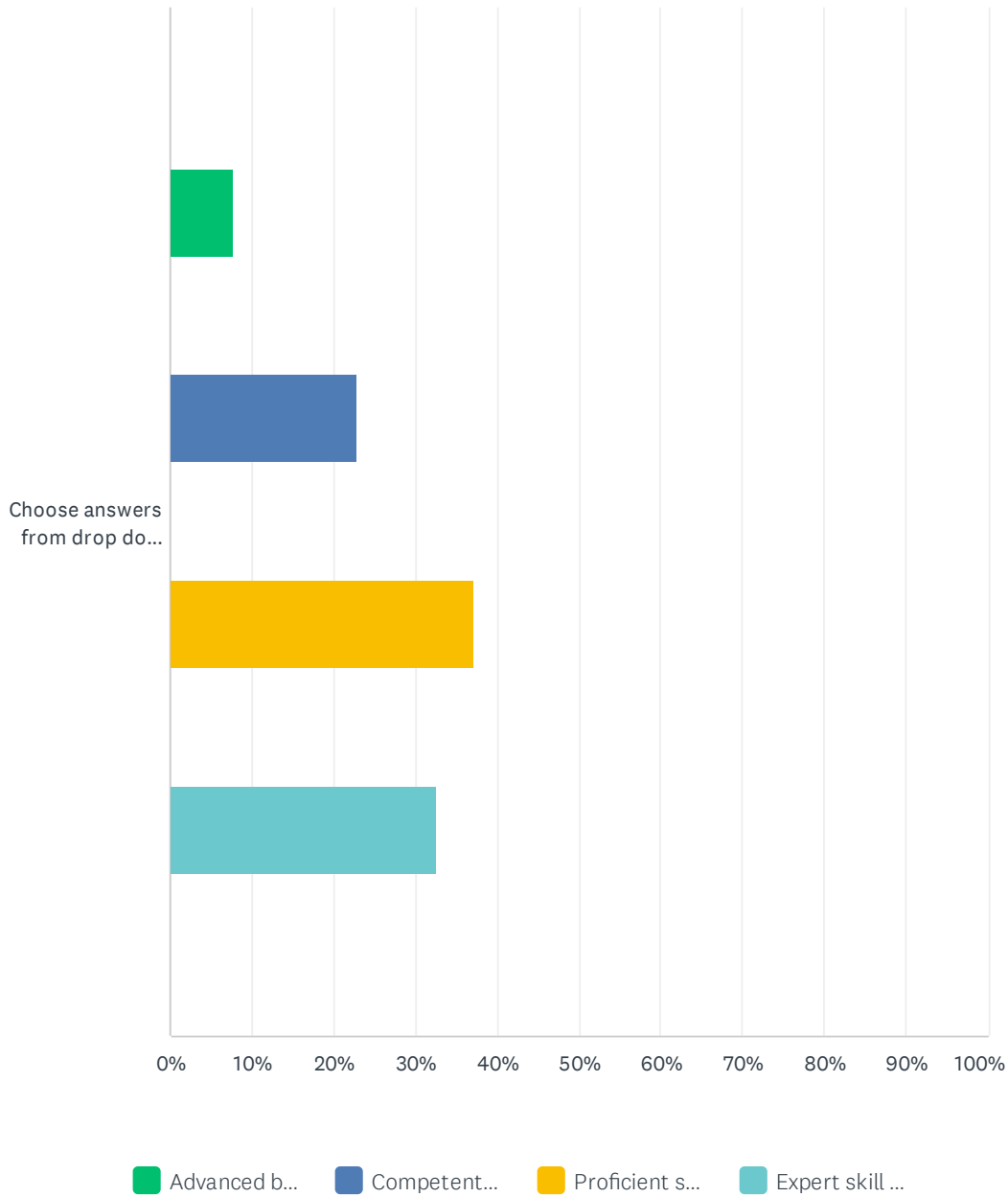
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.50% 4	4.89% 13	25.19% 67	68.42% 182	266

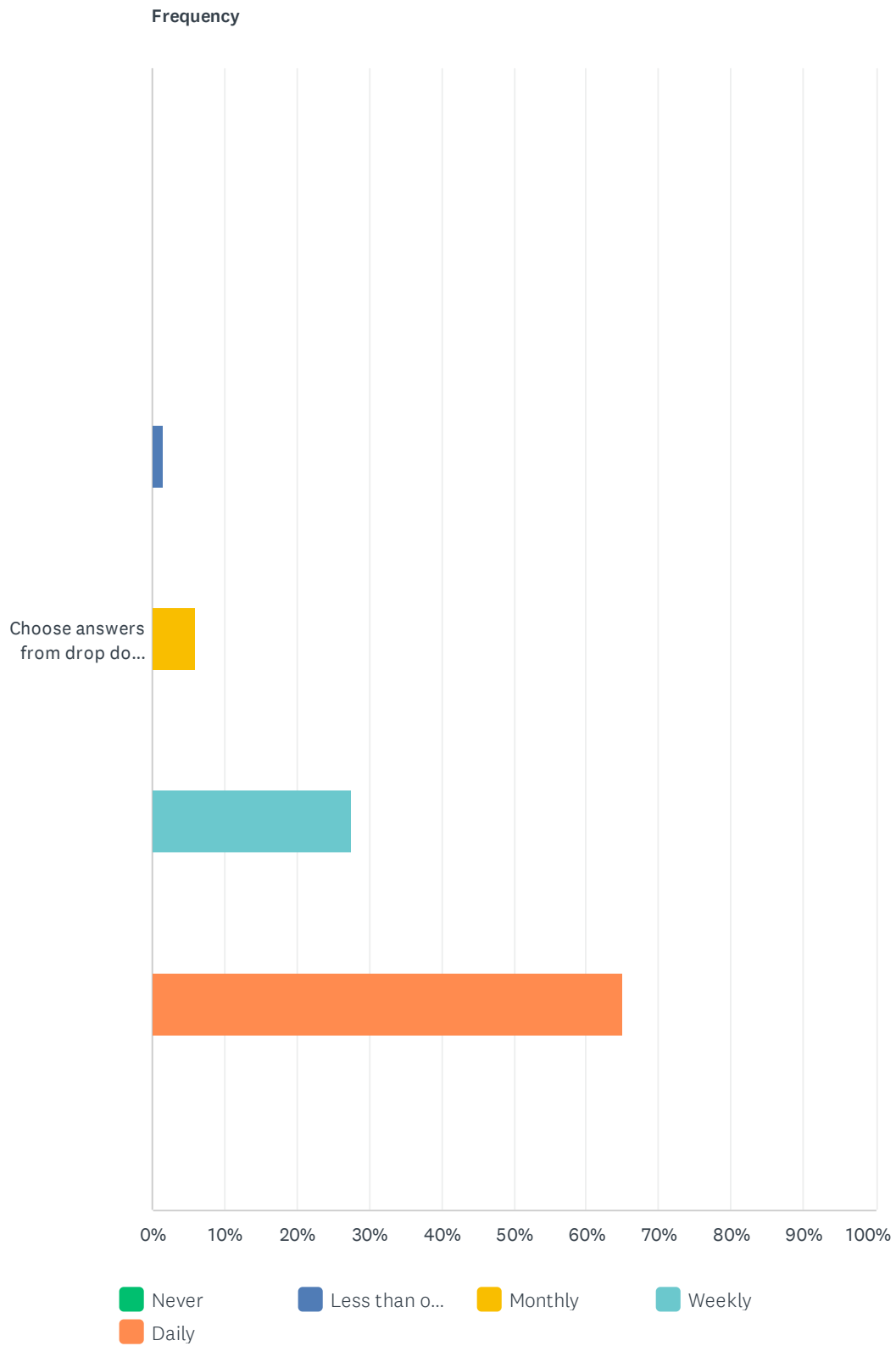
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	2.71% 7	32.17% 83	65.12% 168	258

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.57% 19	22.71% 57	37.05% 93	32.67% 82	251

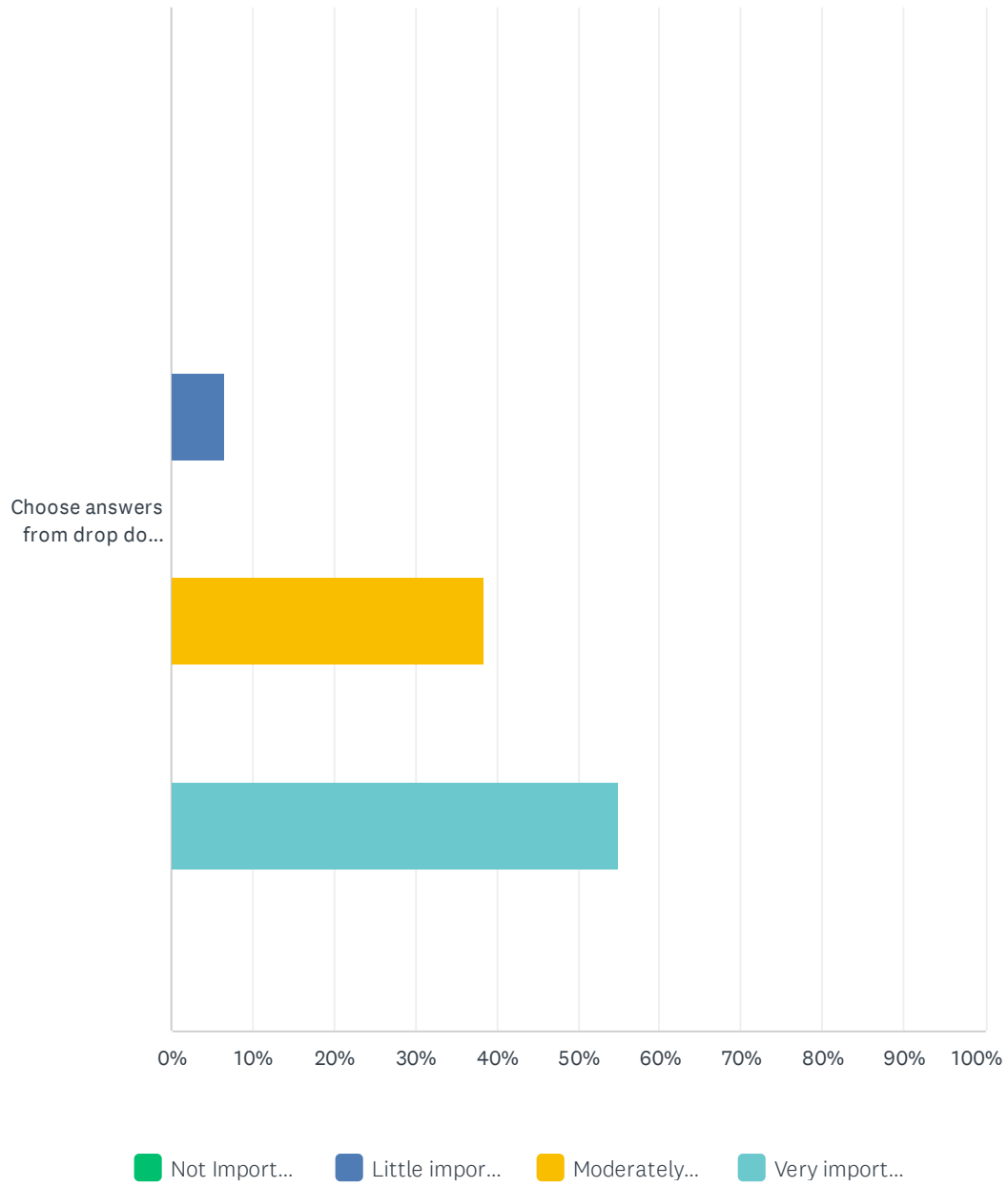
Q91 3.1.5.1 Ergonomics and body mechanics.

Answered: 266 Skipped: 944



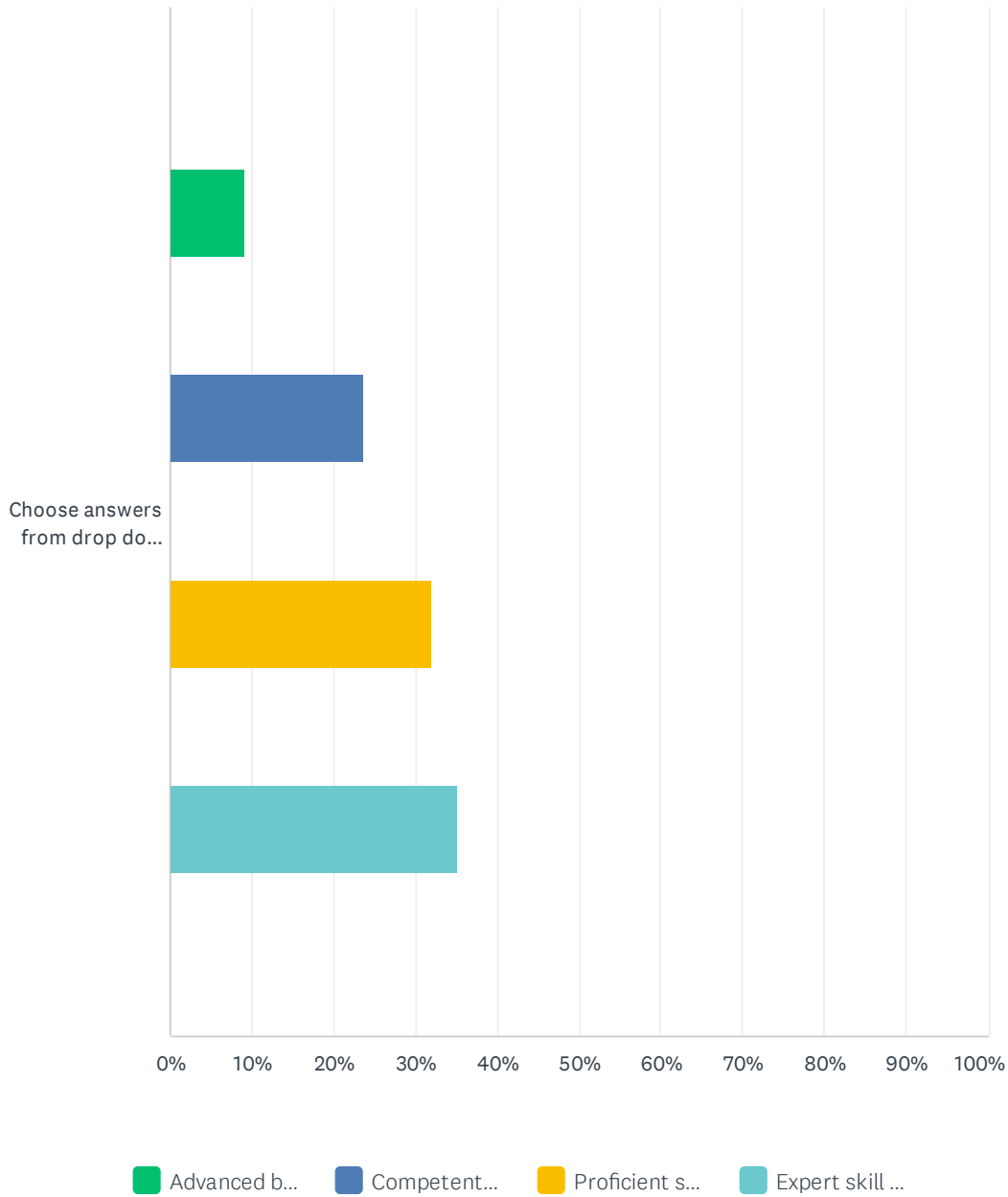
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.50% 4	6.02% 16	27.44% 73	65.04% 173	266

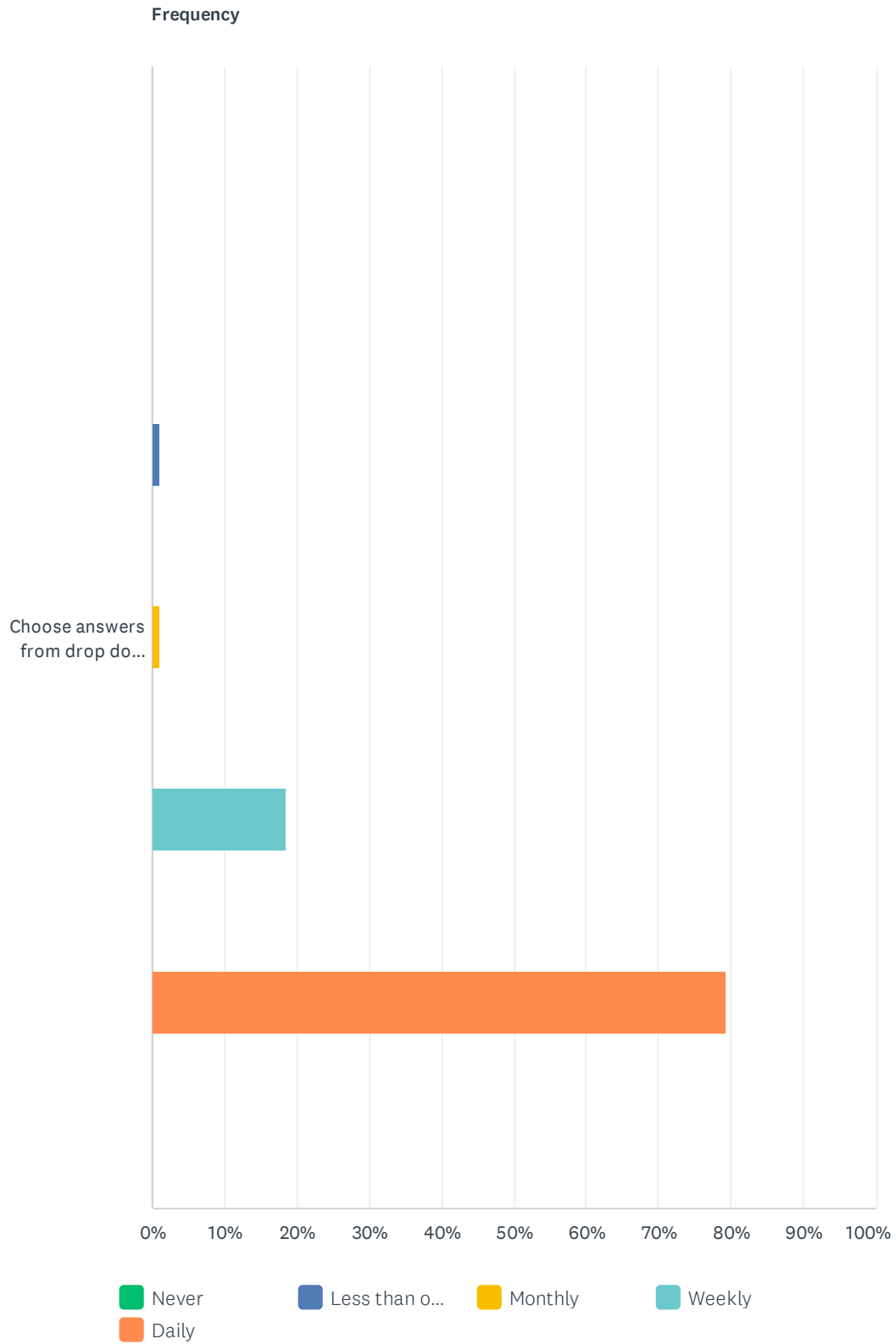
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	6.59% 17	38.37% 99	55.04% 142	258

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.20% 23	23.60% 59	32.00% 80	35.20% 88	250

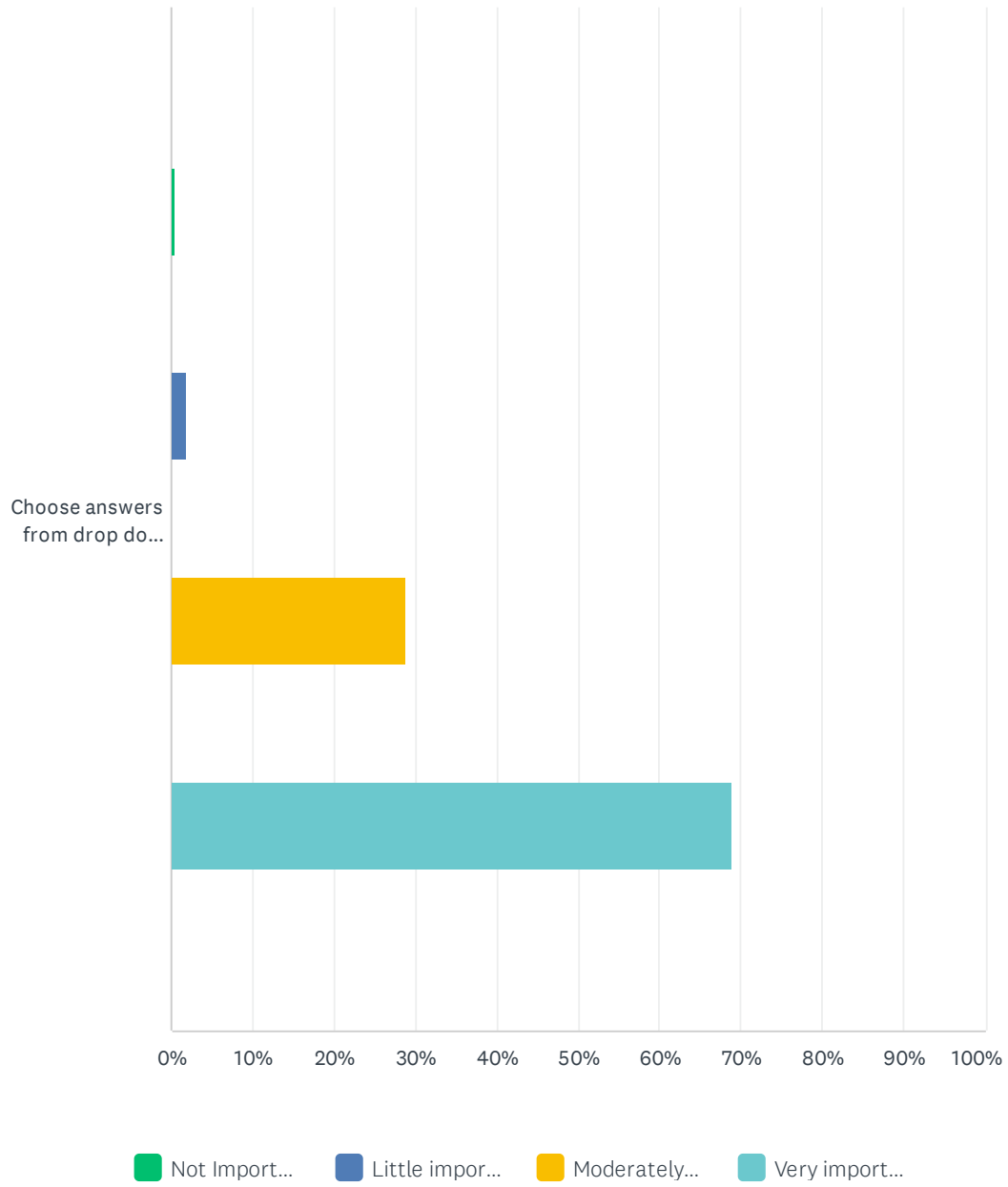
Q92 3.1.5.2 Gait, locomotion, and balance.

Answered: 265 Skipped: 945



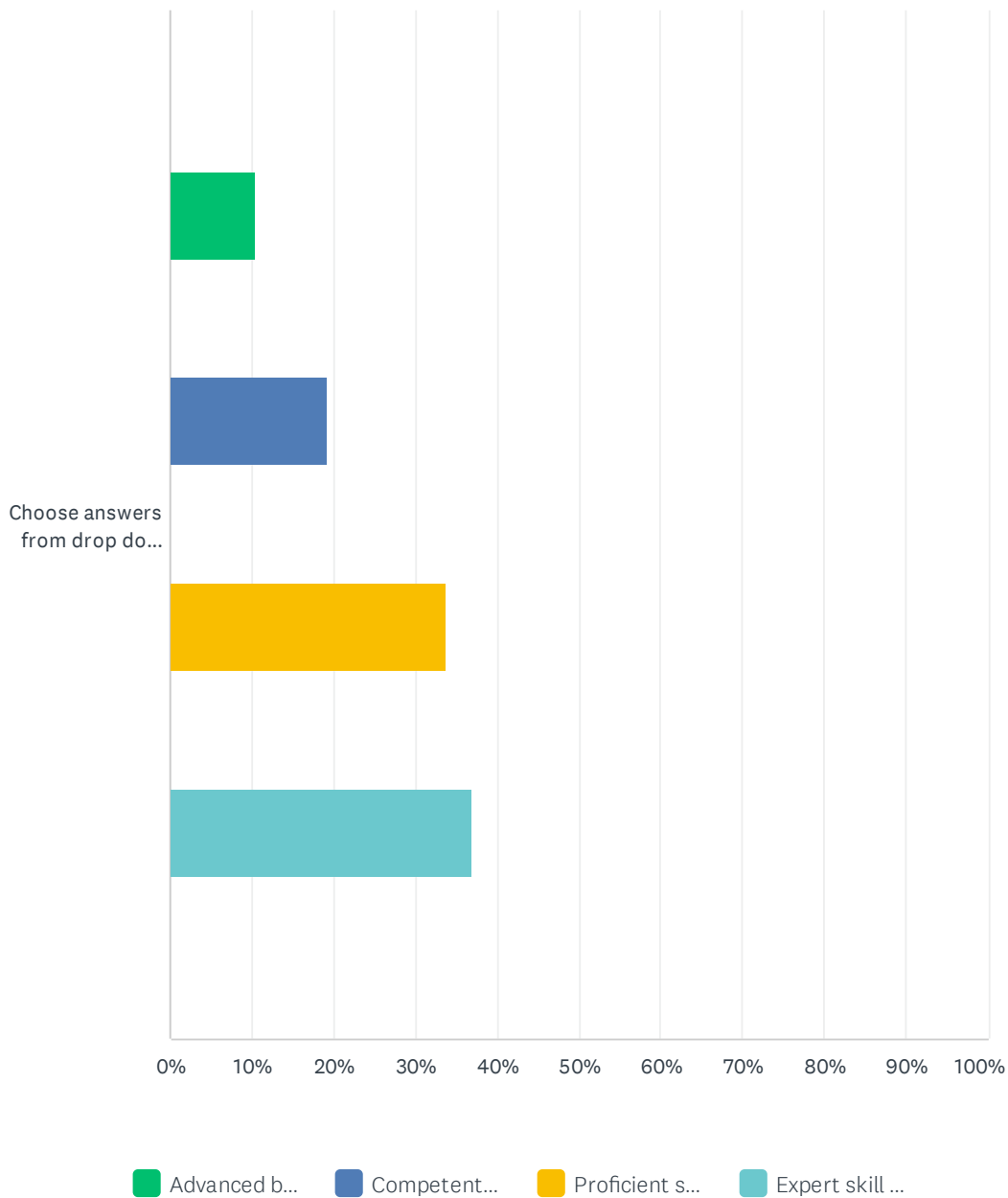
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.13% 3	1.13% 3	18.49% 49	79.25% 210	265

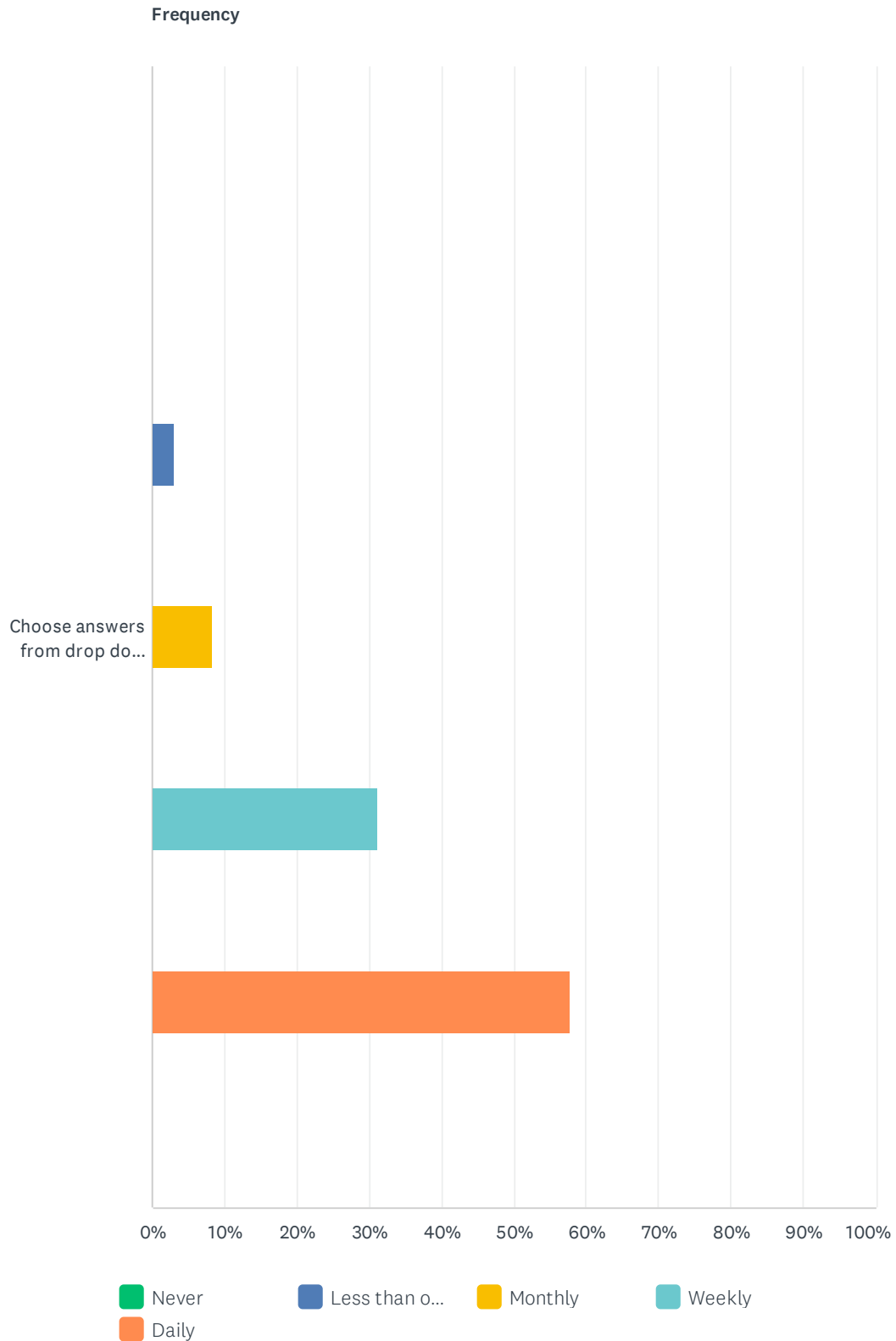
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.39% 1	1.95% 5	28.79% 74	68.87% 177	257

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.40% 26	19.20% 48	33.60% 84	36.80% 92	250

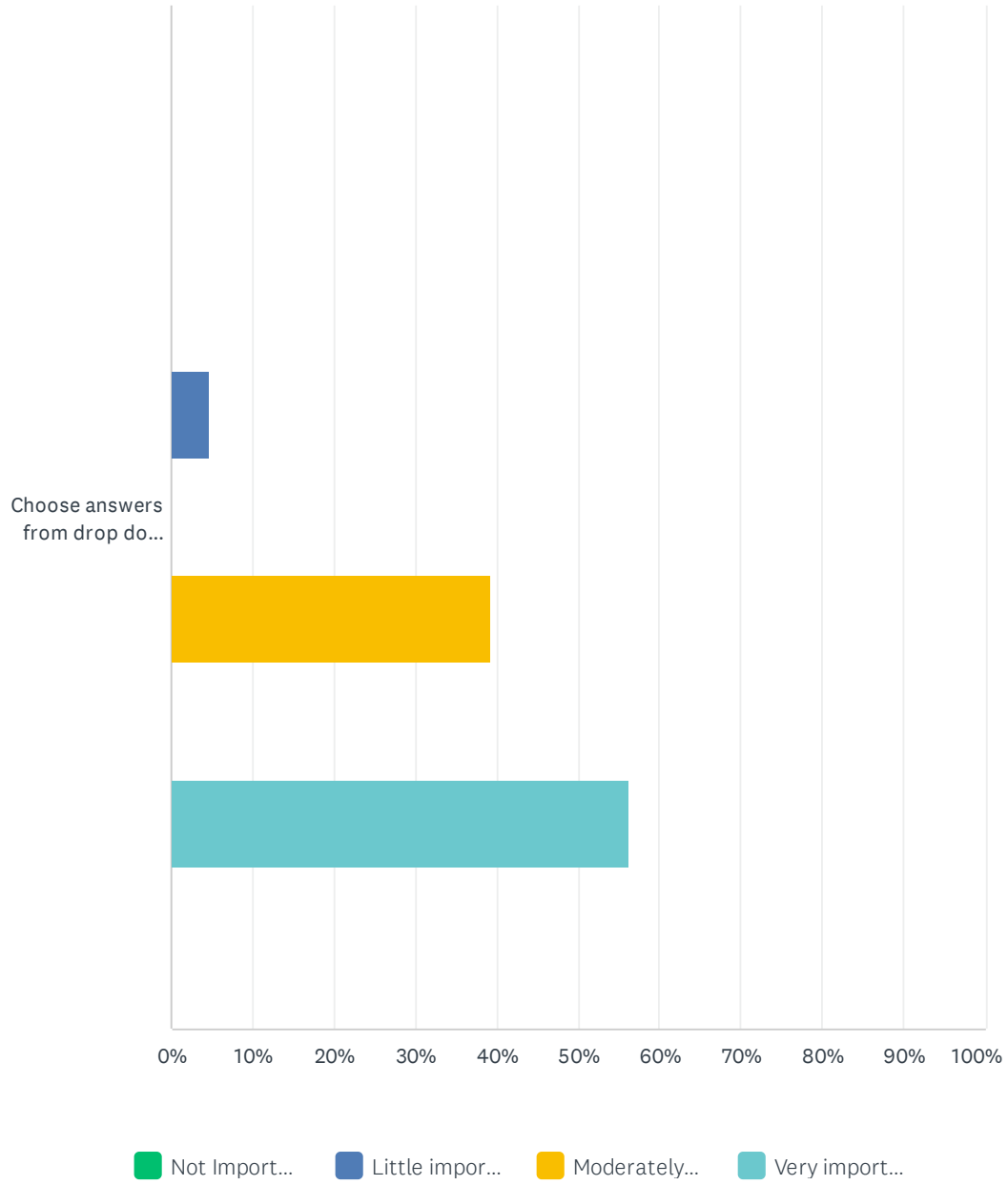
Q93 3.1.5.3 Work (job/school/play), community and leisure integration or reintegration (including IADL).

Answered: 267 Skipped: 943



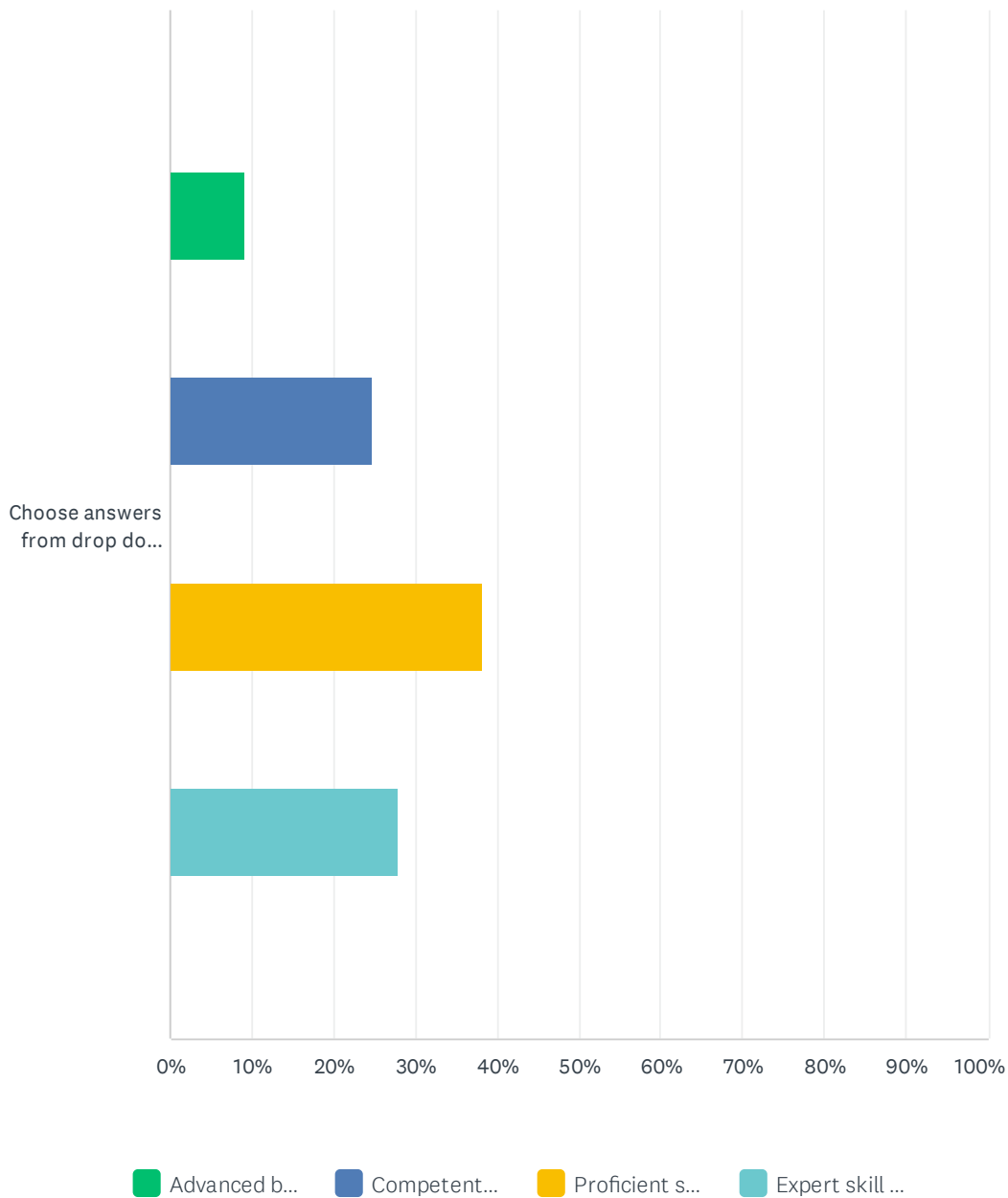
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	3.00% 8	8.24% 22	31.09% 83	57.68% 154	267

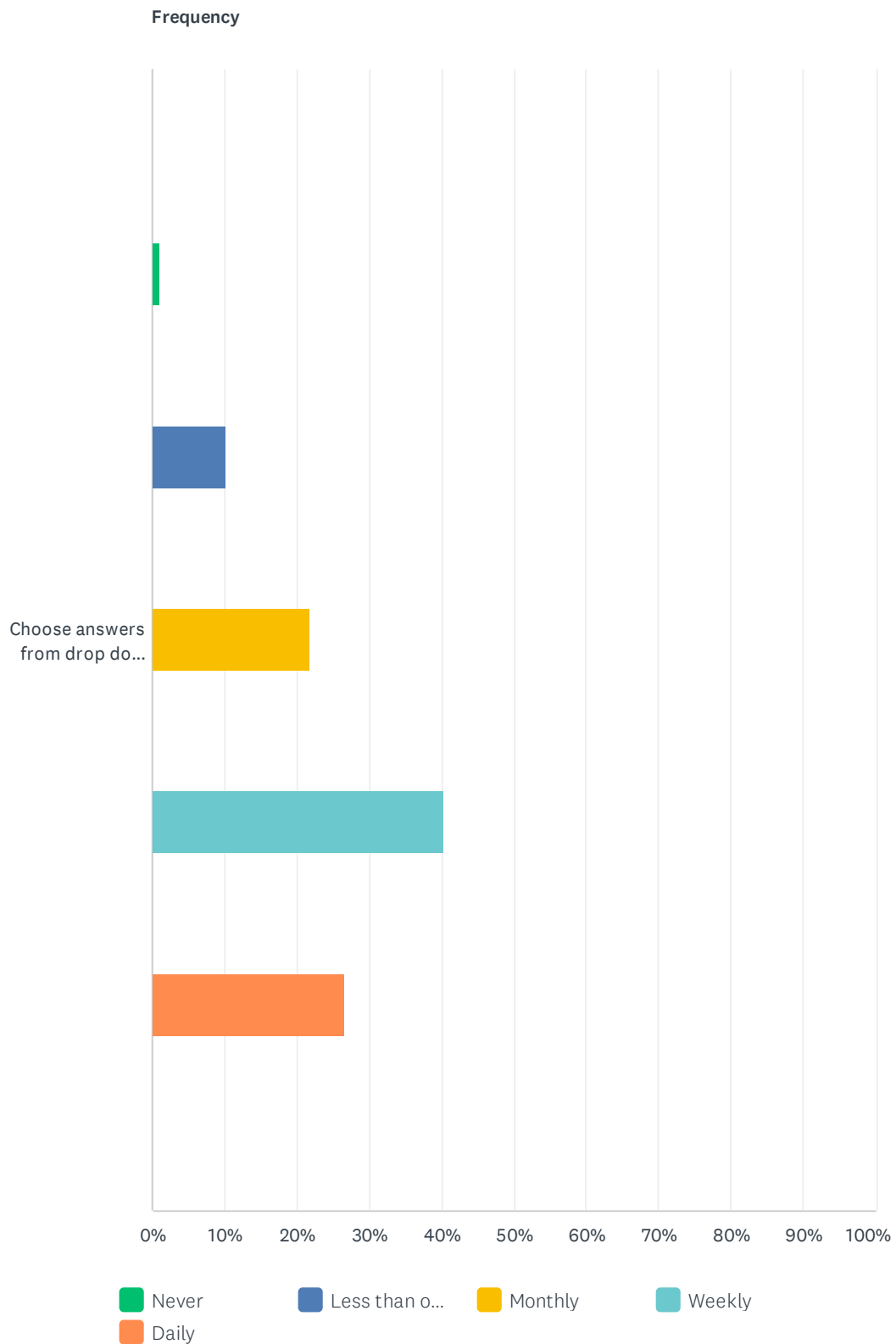
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	4.65% 12	39.15% 101	56.20% 145	258

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.16% 23	24.70% 62	38.25% 96	27.89% 70	251

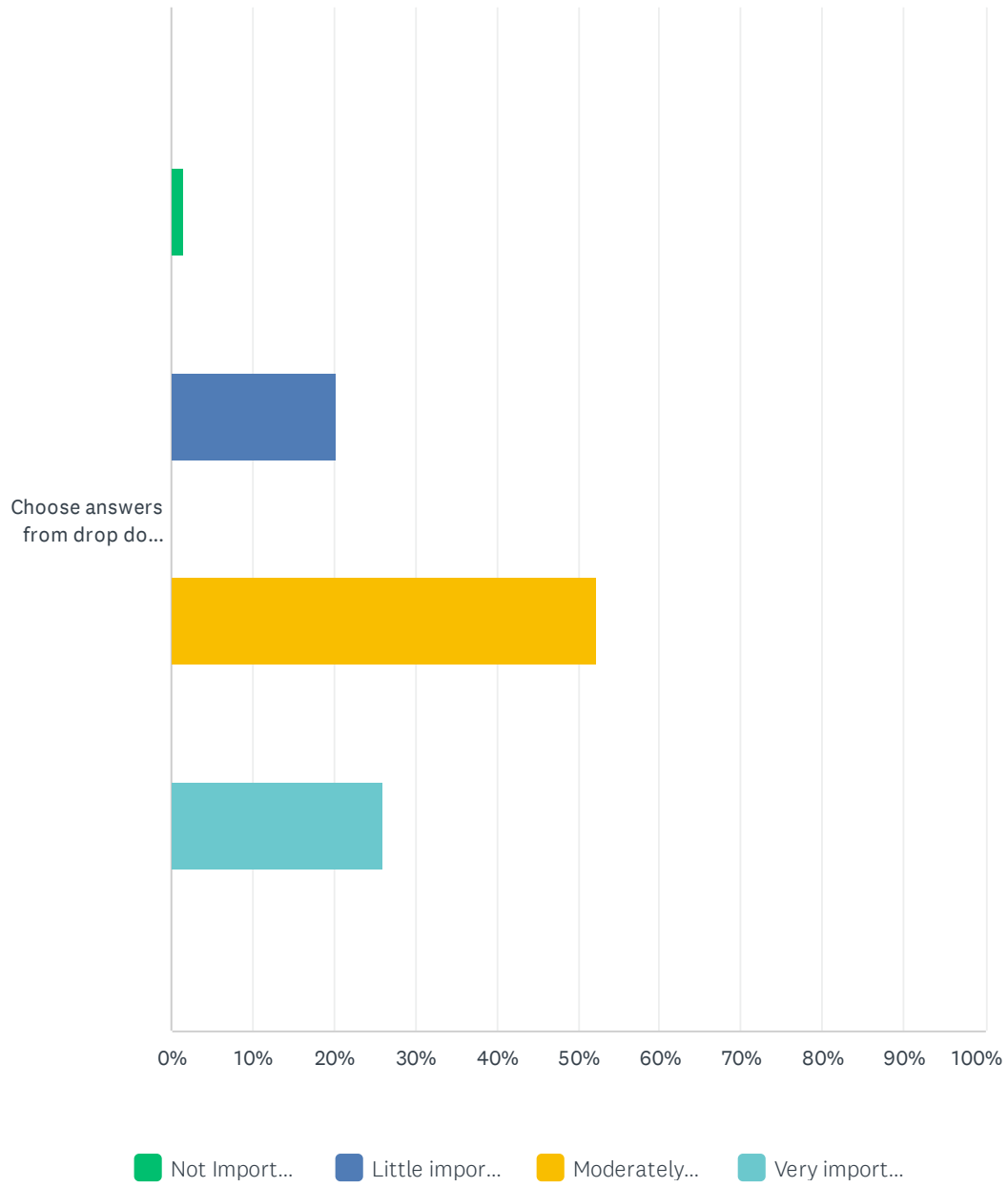
Q94 3.1.5.4 Adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).

Answered: 267 Skipped: 943



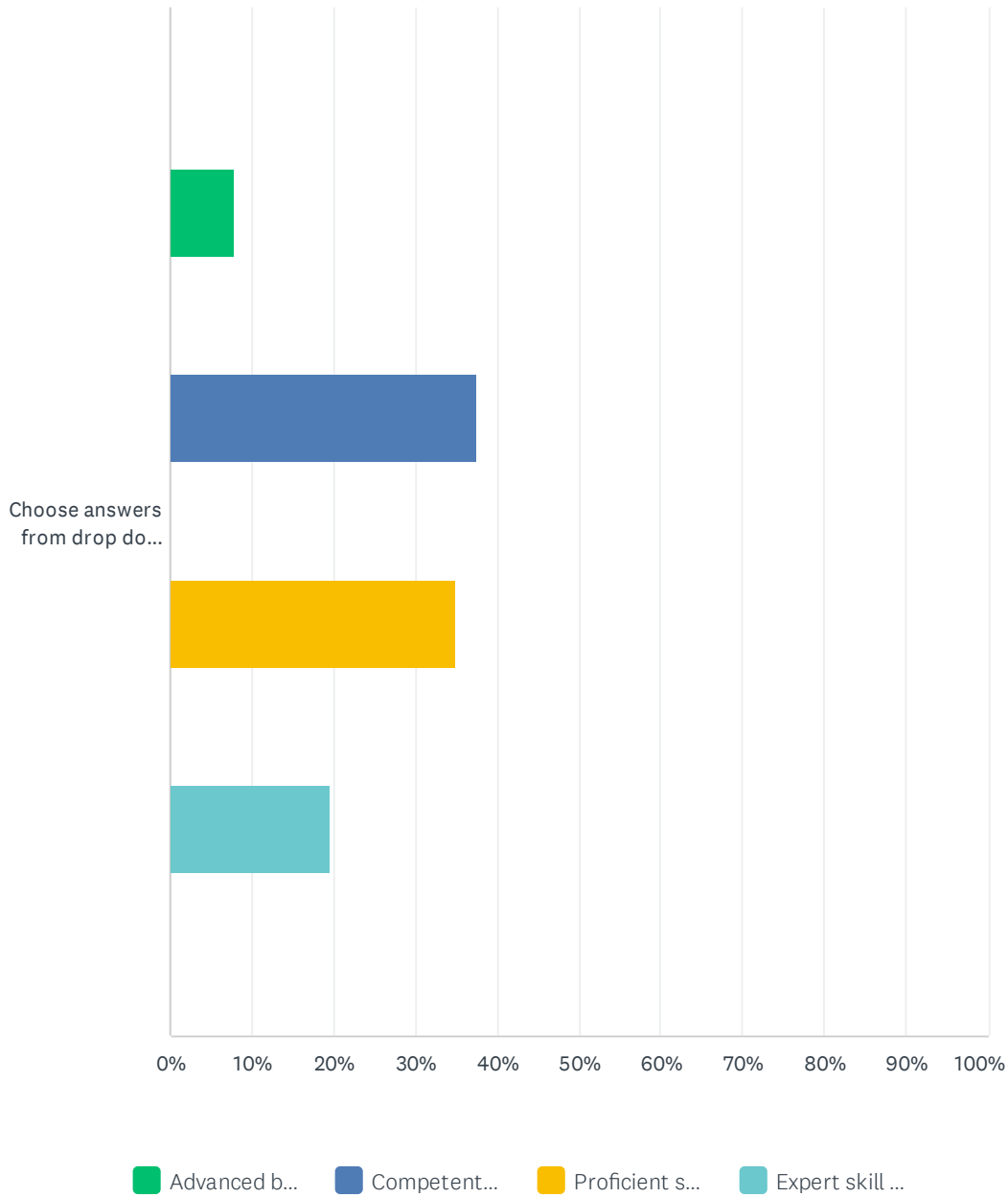
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.13% 3	10.15% 27	21.80% 58	40.23% 107	26.69% 71	266

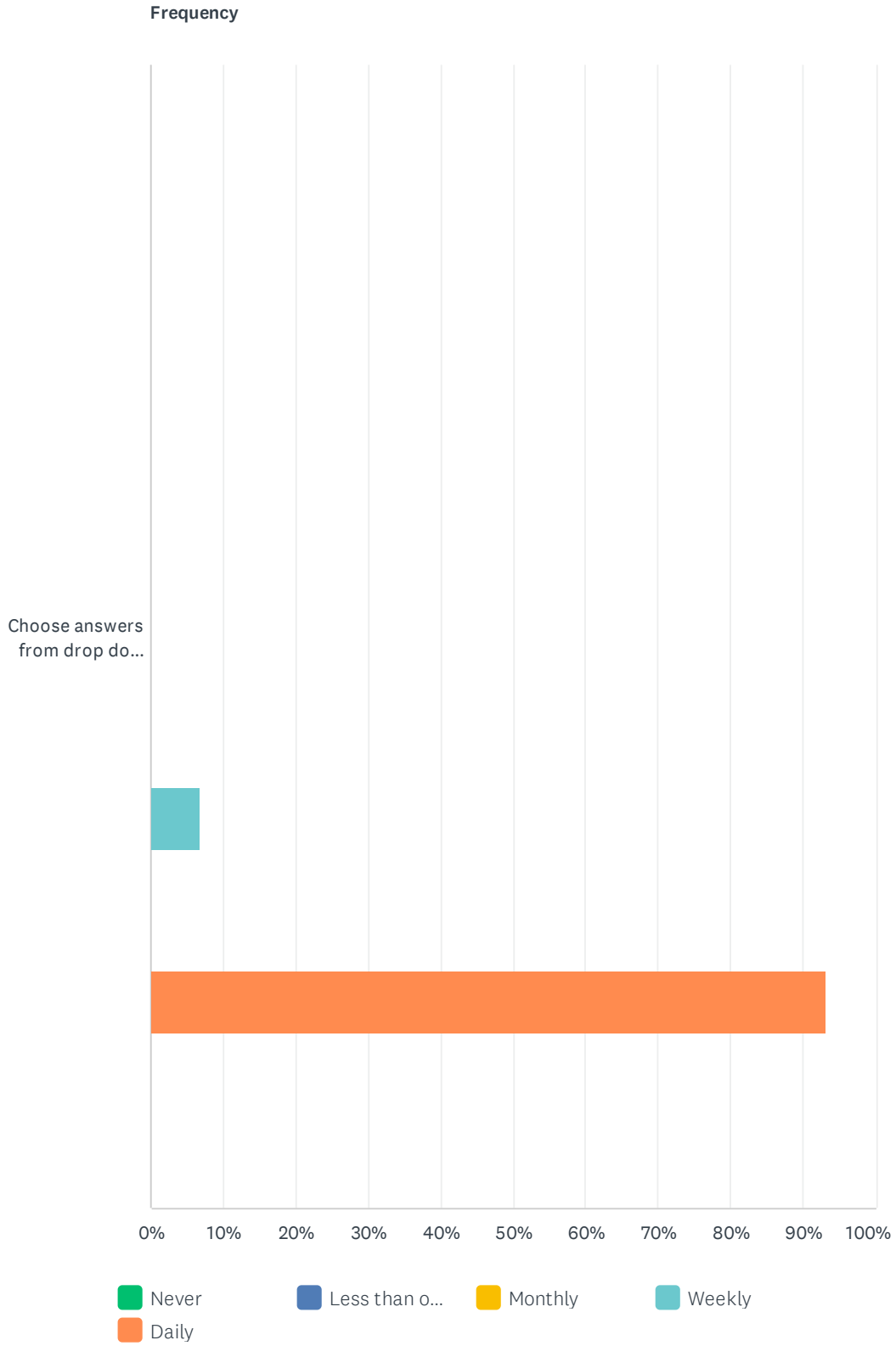
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.55% 4	20.16% 52	52.33% 135	25.97% 67	258

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.97% 20	37.45% 94	35.06% 88	19.52% 49	251

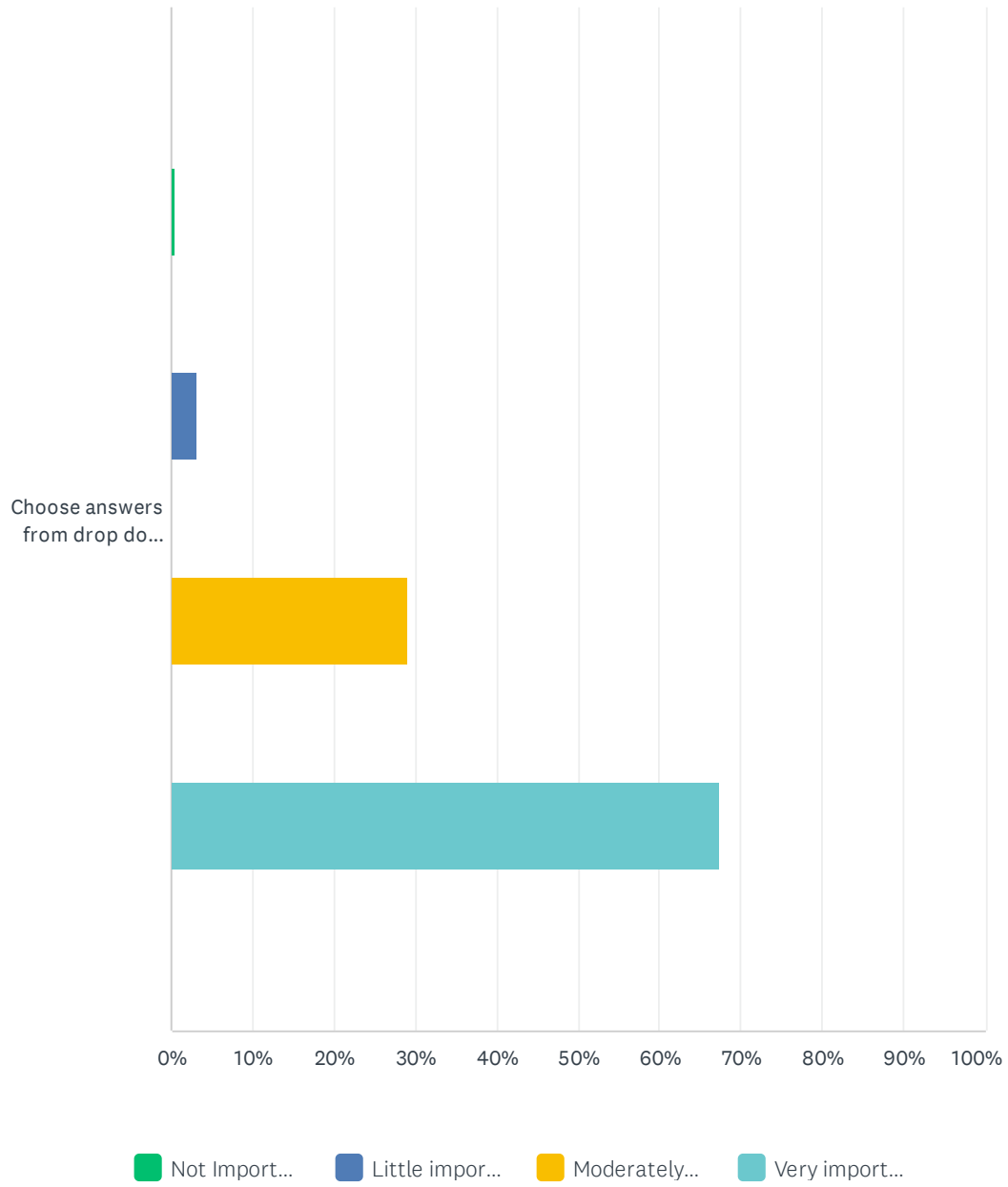
Q95 3.1.5.5 Pain.

Answered: 266 Skipped: 944



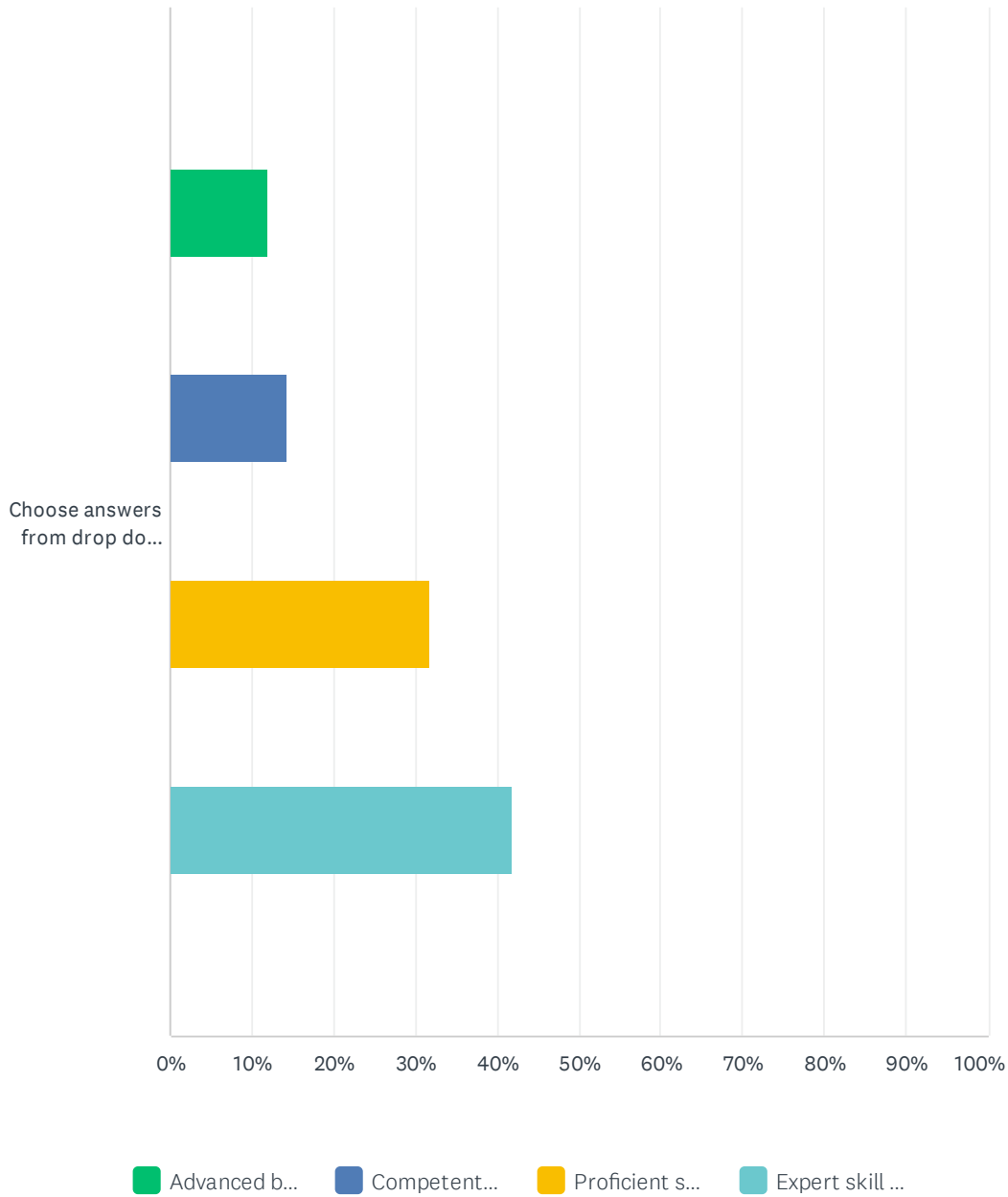
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	0.00% 0	6.77% 18	93.23% 248	266

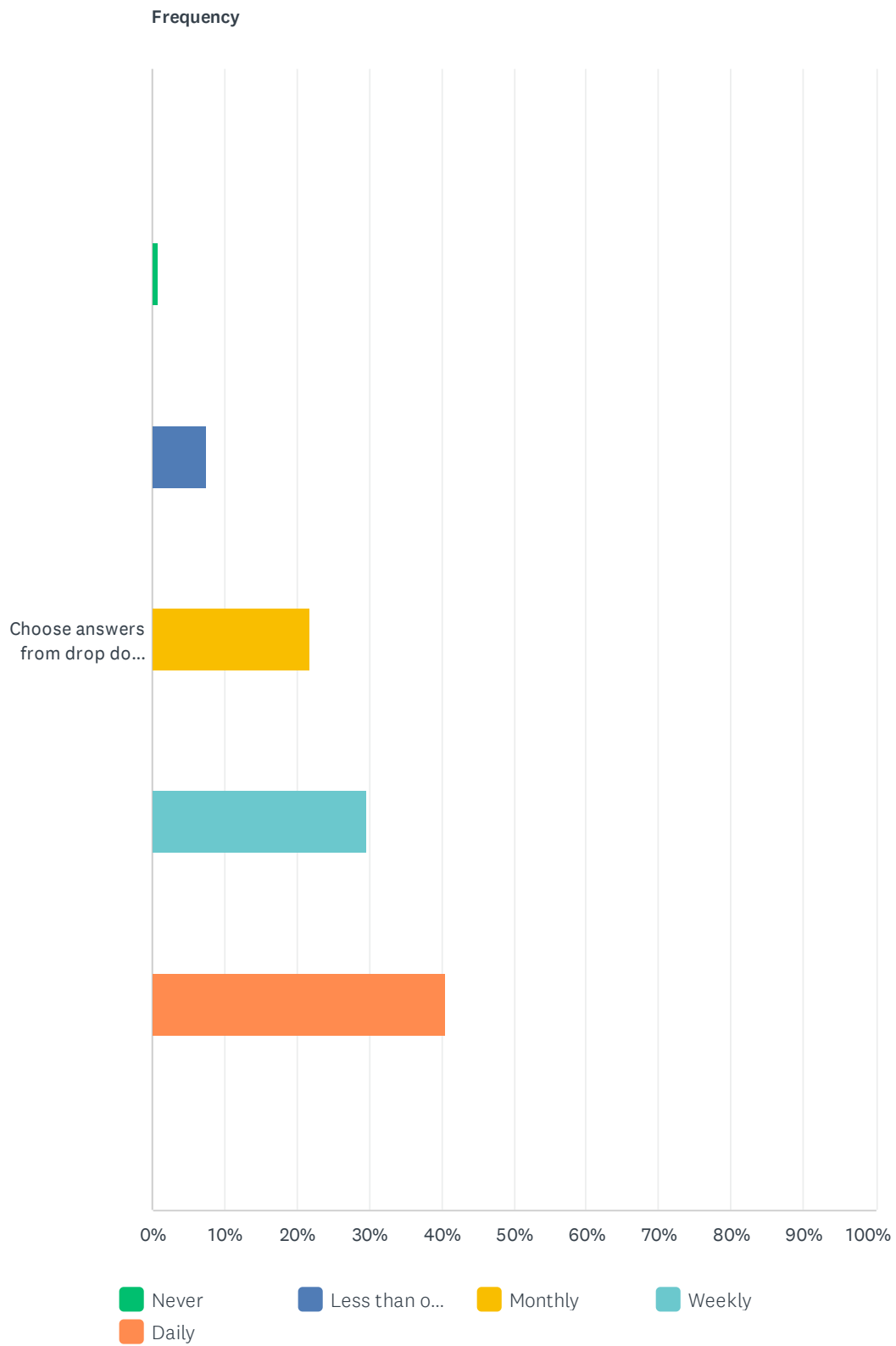
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.39% 1	3.10% 8	29.07% 75	67.44% 174	258

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.95% 30	14.34% 36	31.87% 80	41.83% 105	251

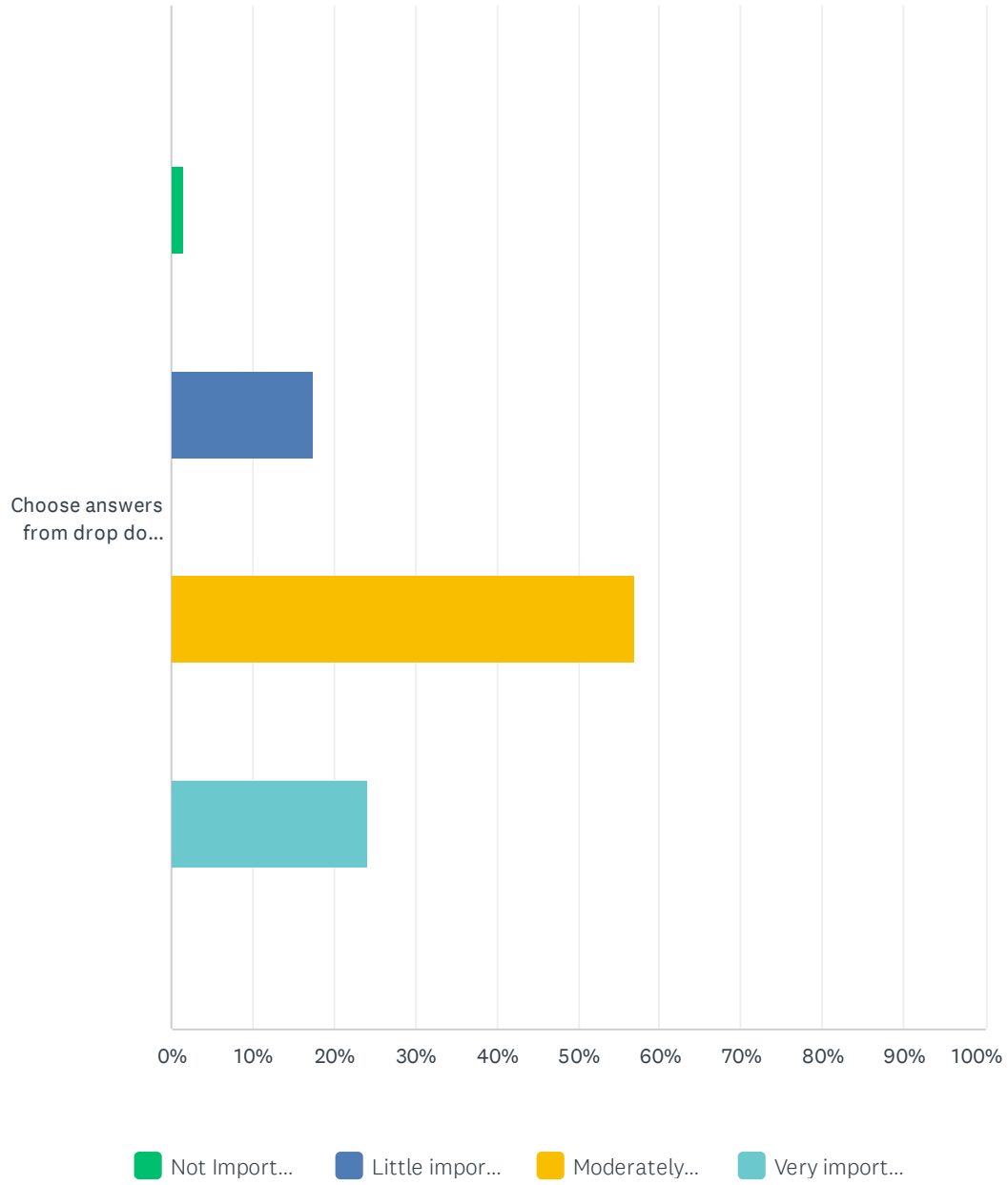
Q96 3.1.5.6 Anthropometric characteristics (e.g., edema, body dimensions and composition).

Answered: 267 Skipped: 943



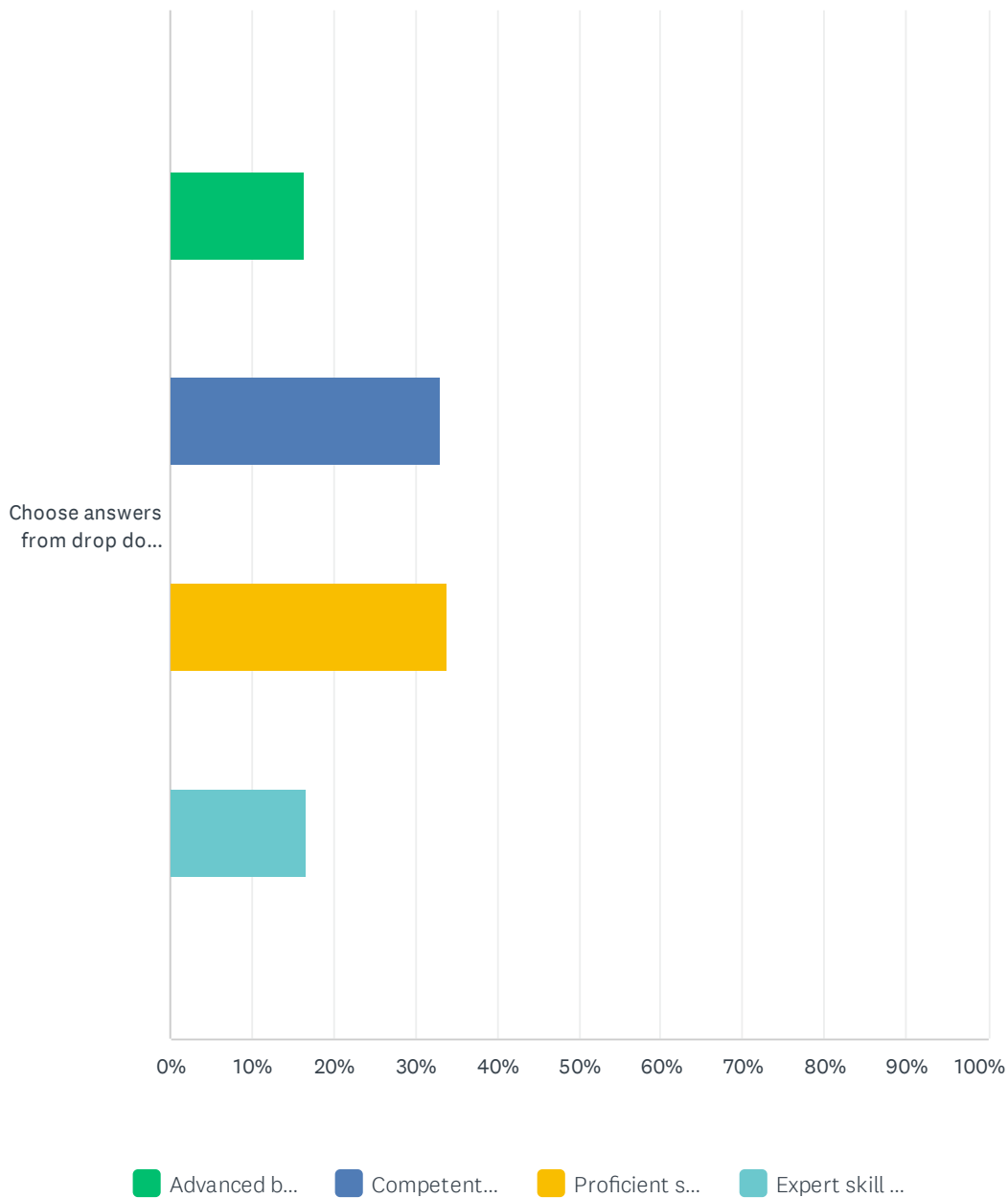
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.75% 2	7.49% 20	21.72% 58	29.59% 79	40.45% 108	267

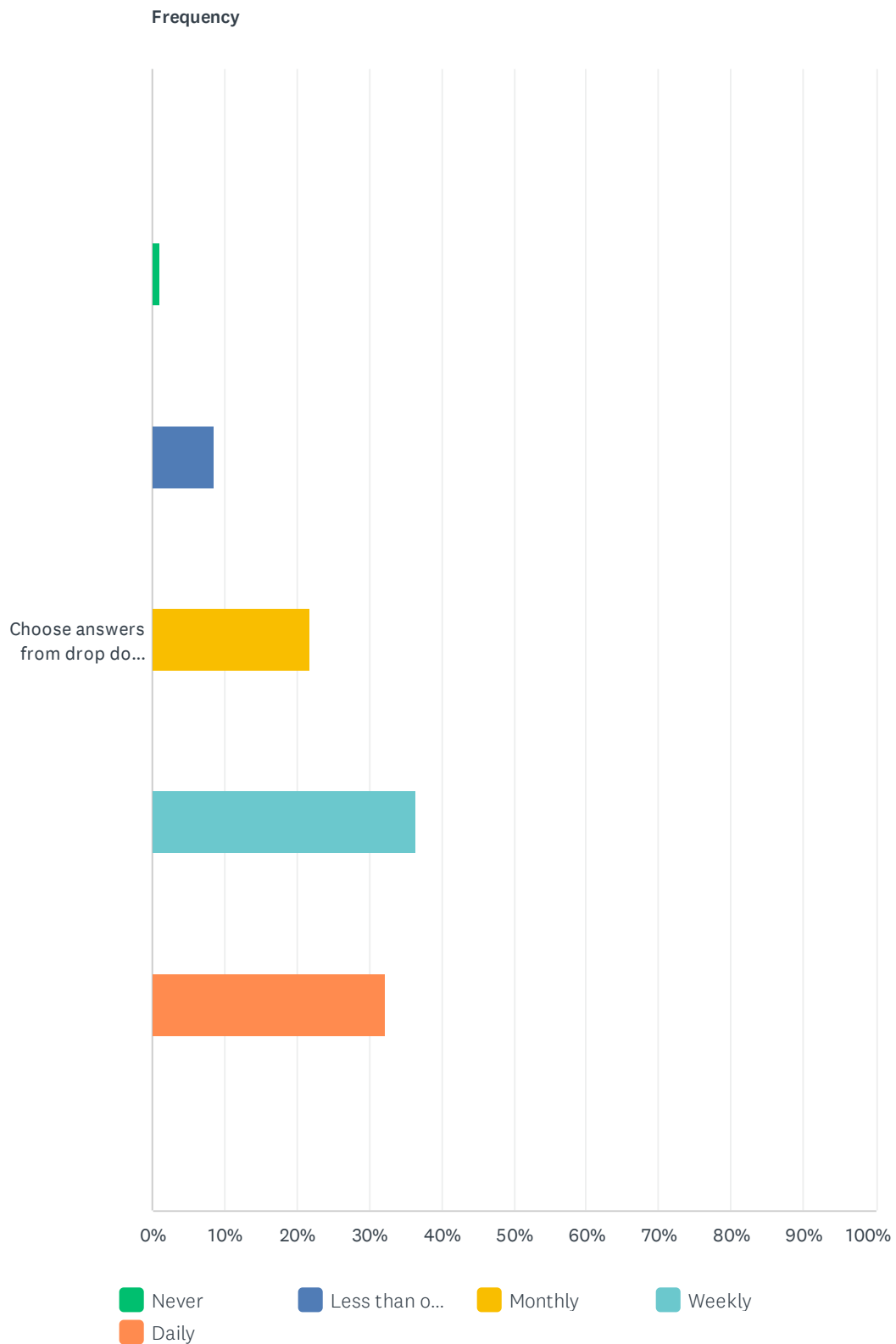
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.55% 4	17.44% 45	56.98% 147	24.03% 62	258

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	16.33% 41	33.07% 83	33.86% 85	16.73% 42	251

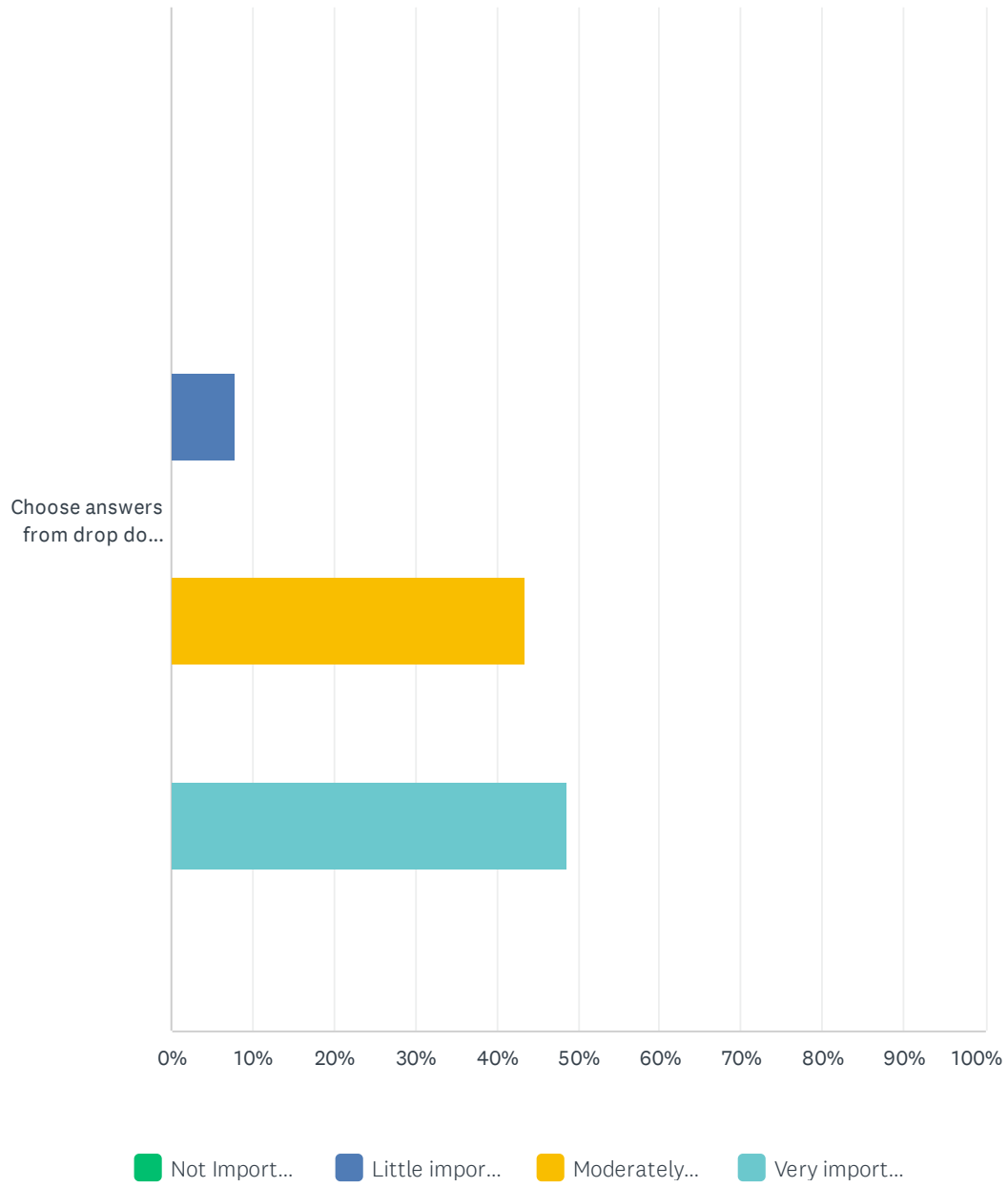
Q97 3.1.5.7 Circulation (e.g., vertebral artery examination, skin condition, thoracic outlet tests, and peripheral pulses).

Answered: 261 Skipped: 949



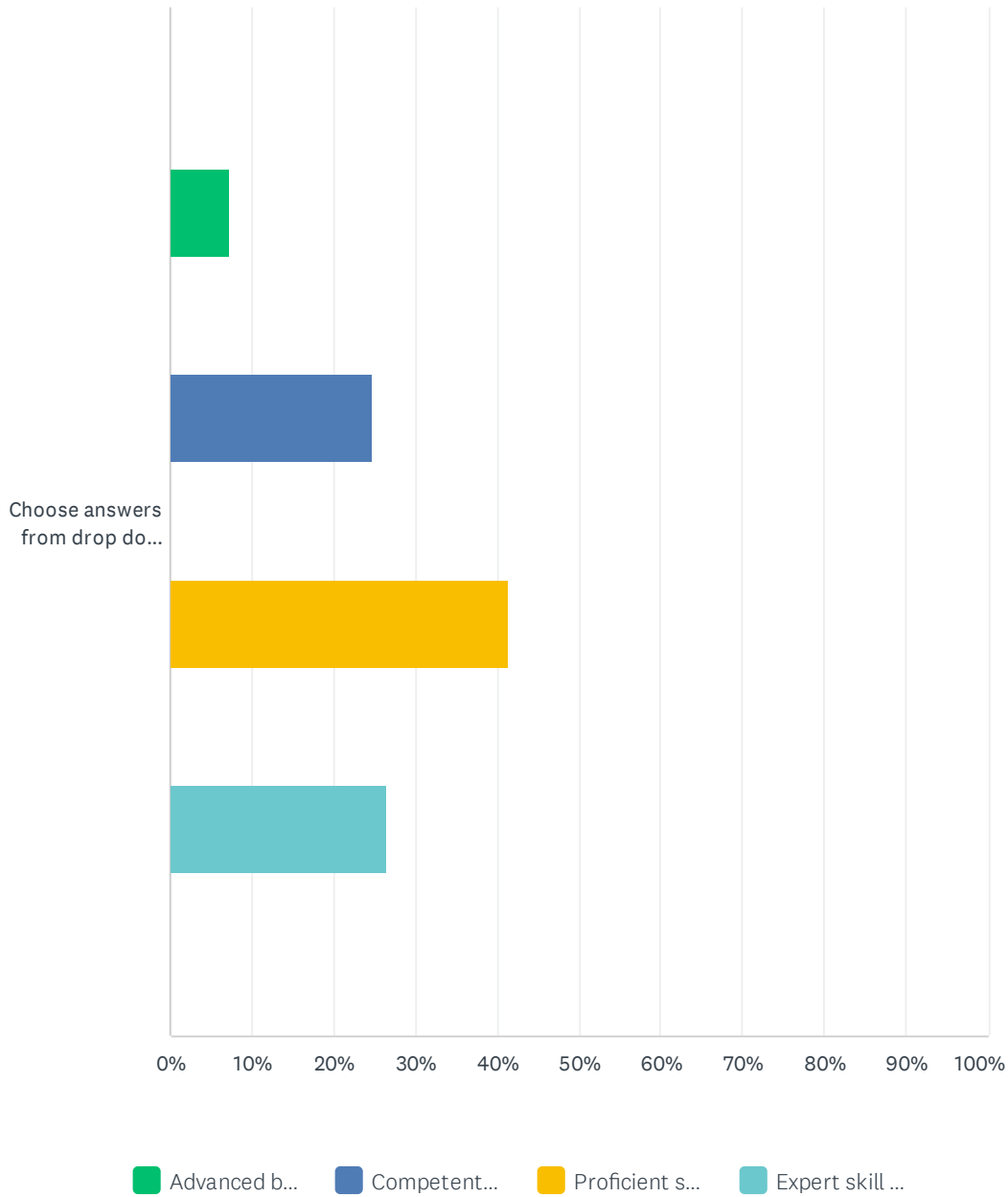
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.15% 3	8.43% 22	21.84% 57	36.40% 95	32.18% 84	261

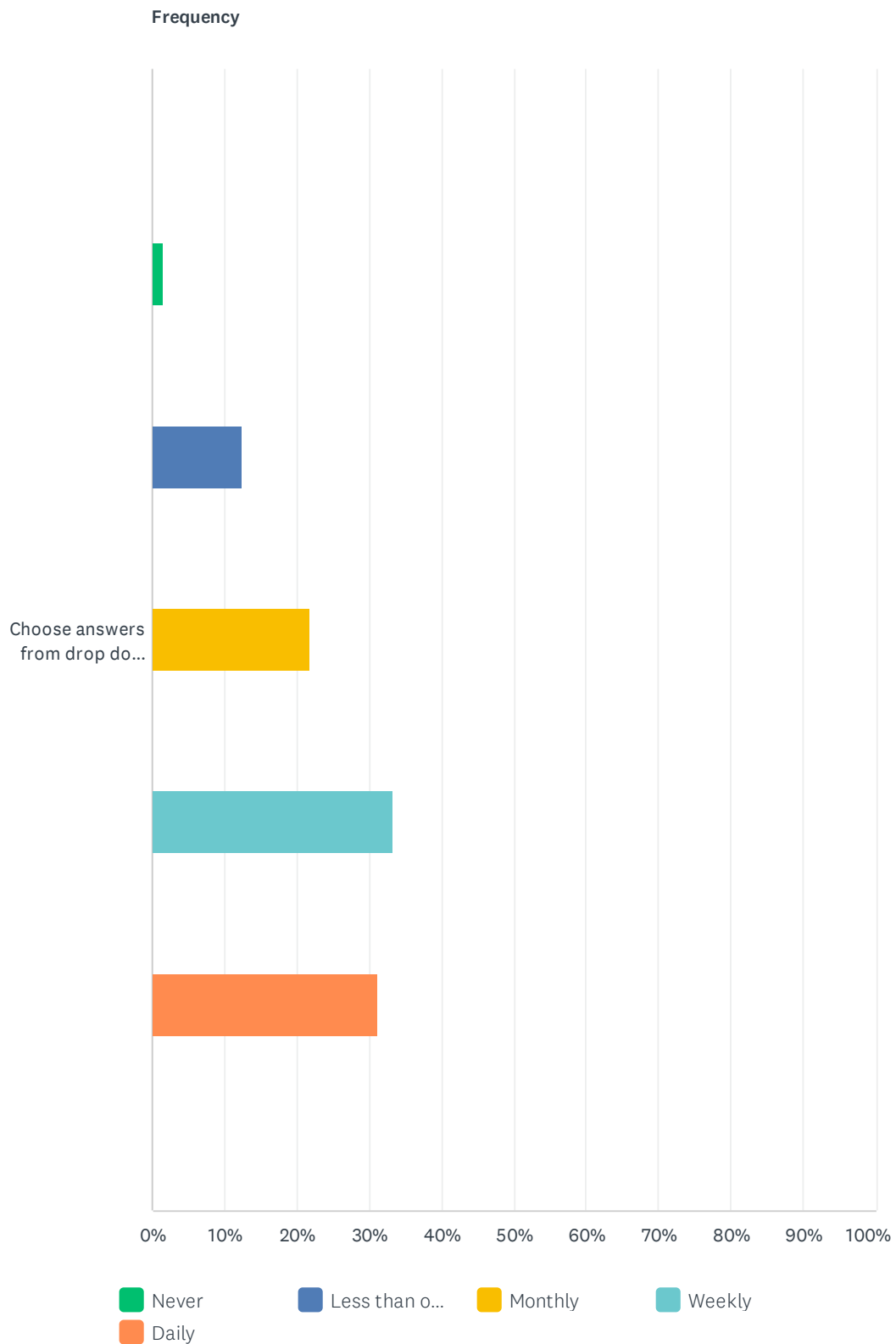
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	7.91% 20	43.48% 110	48.62% 123	253

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.32% 18	24.80% 61	41.46% 102	26.42% 65	246

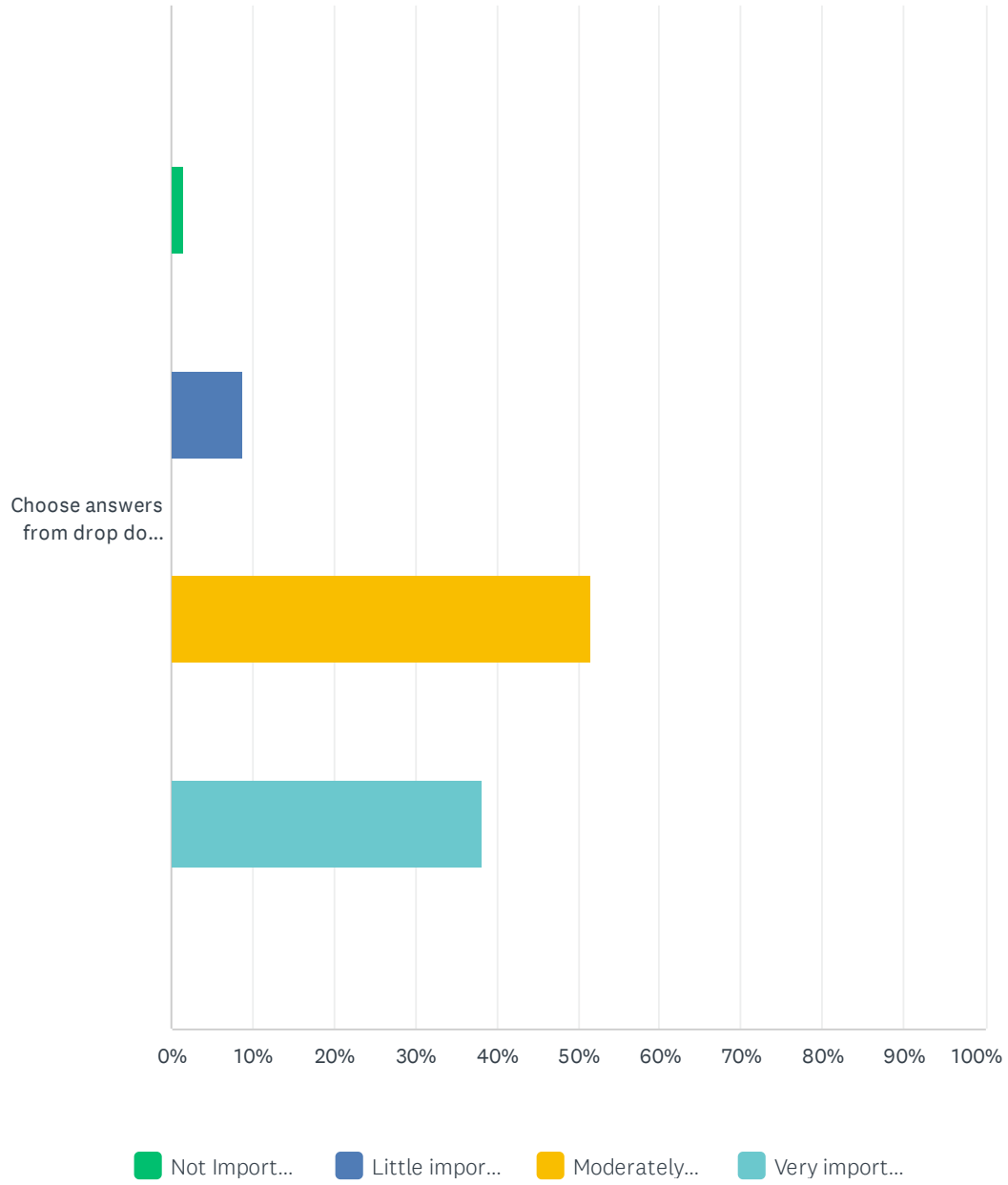
Q98 3.1.5.8 Aerobic capacity and endurance (e.g., dyspnea perceived exertion, heart rate).

Answered: 261 Skipped: 949



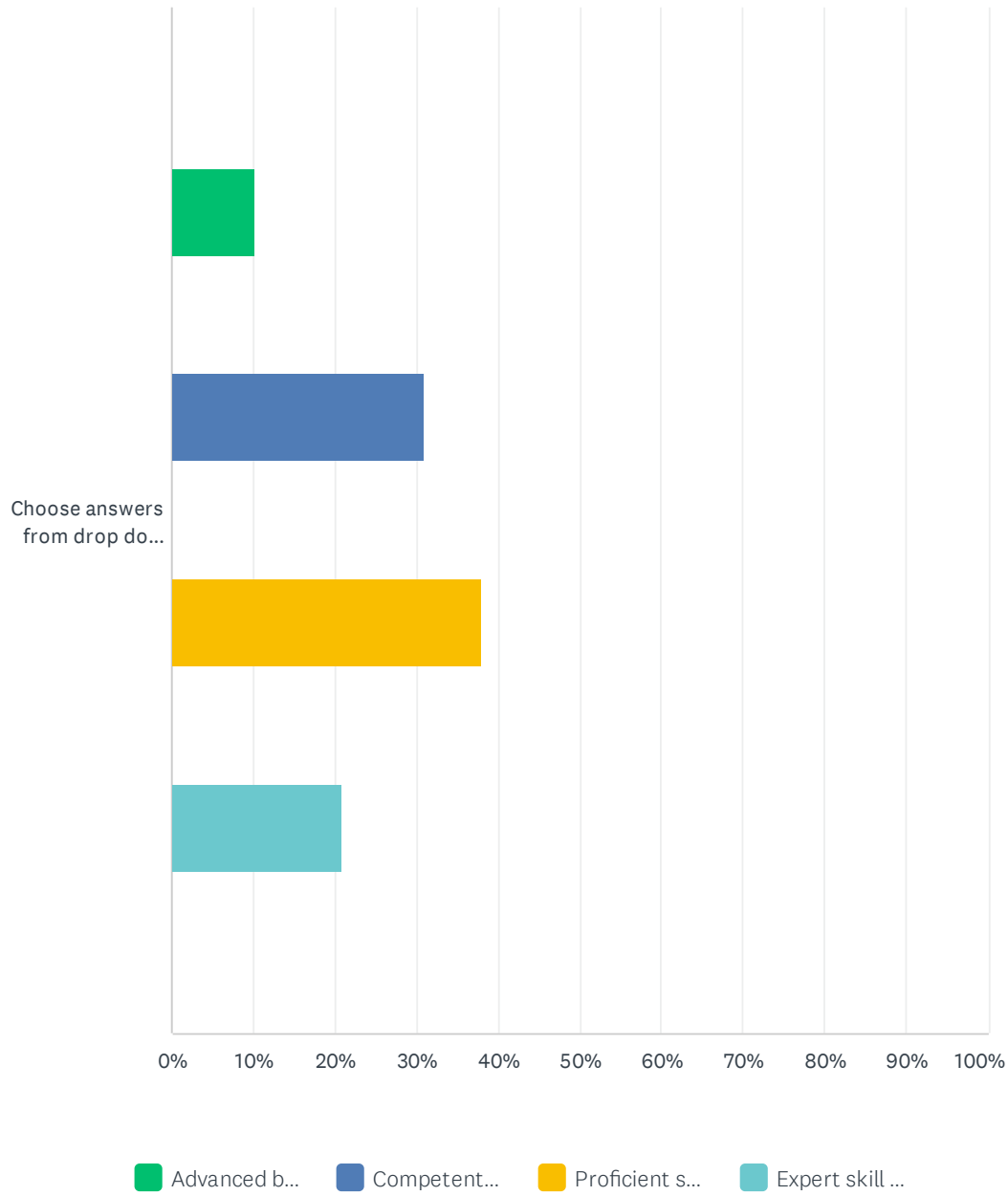
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.53% 4	12.26% 32	21.84% 57	33.33% 87	31.03% 81	261

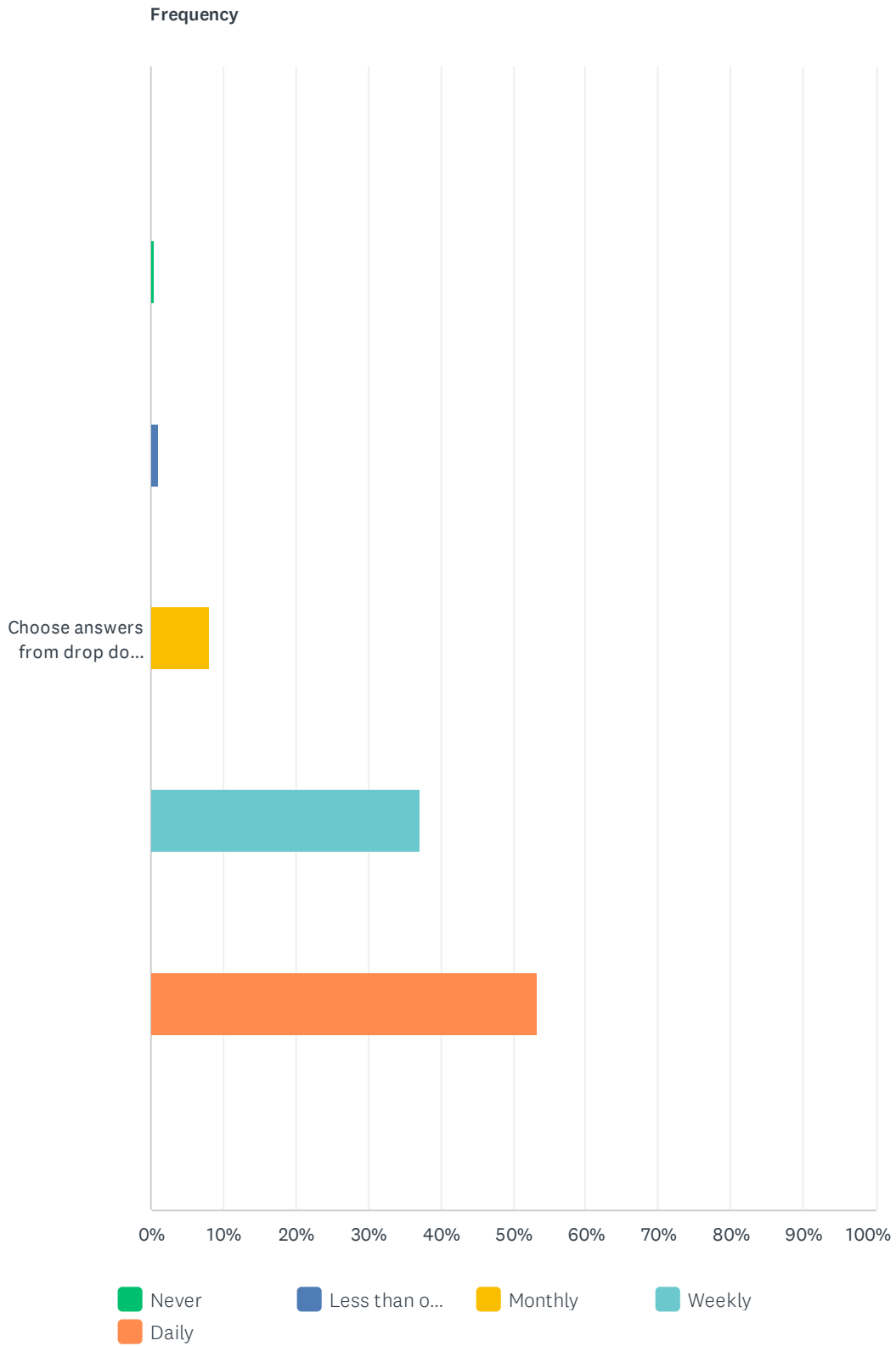
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.59% 4	8.73% 22	51.59% 130	38.10% 96	252

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.20% 25	31.02% 76	37.96% 93	20.82% 51	245

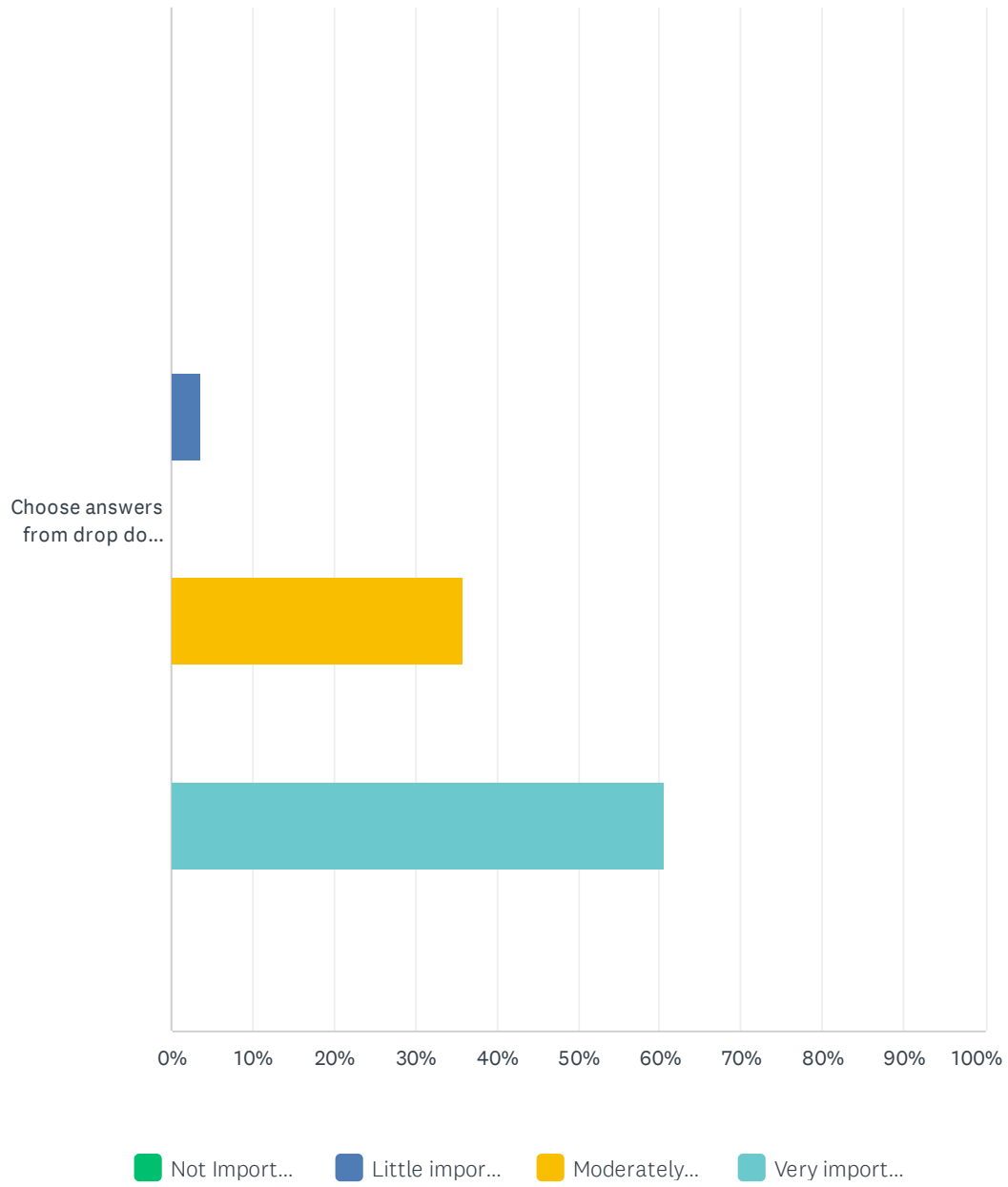
Q99 3.1.5.9 Neurodynamics.

Answered: 259 Skipped: 951



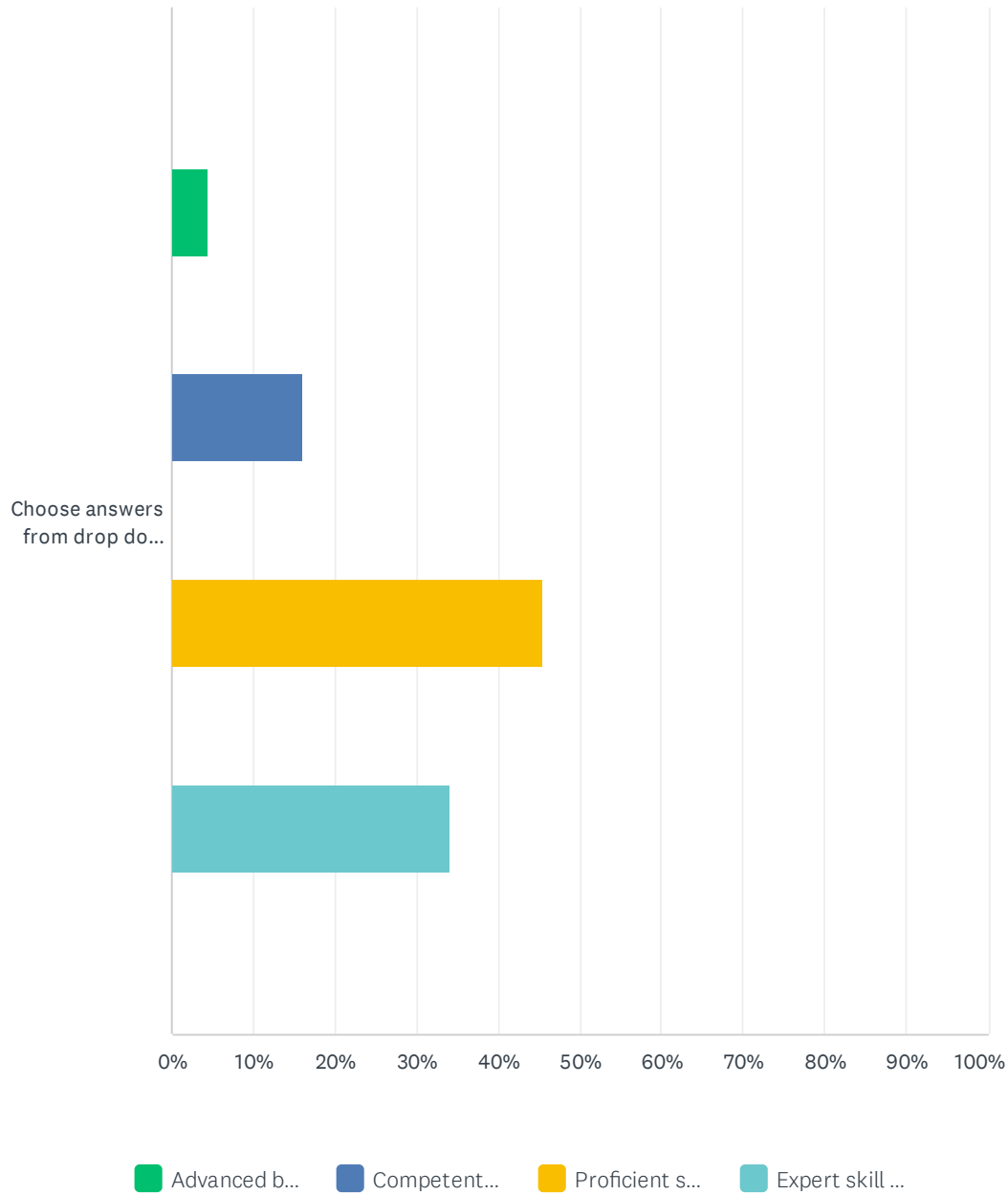
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.39% 1	1.16% 3	8.11% 21	37.07% 96	53.28% 138	259

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.59% 9	35.86% 90	60.56% 152	251

Spine Validation Practice Analysis Survey 2022

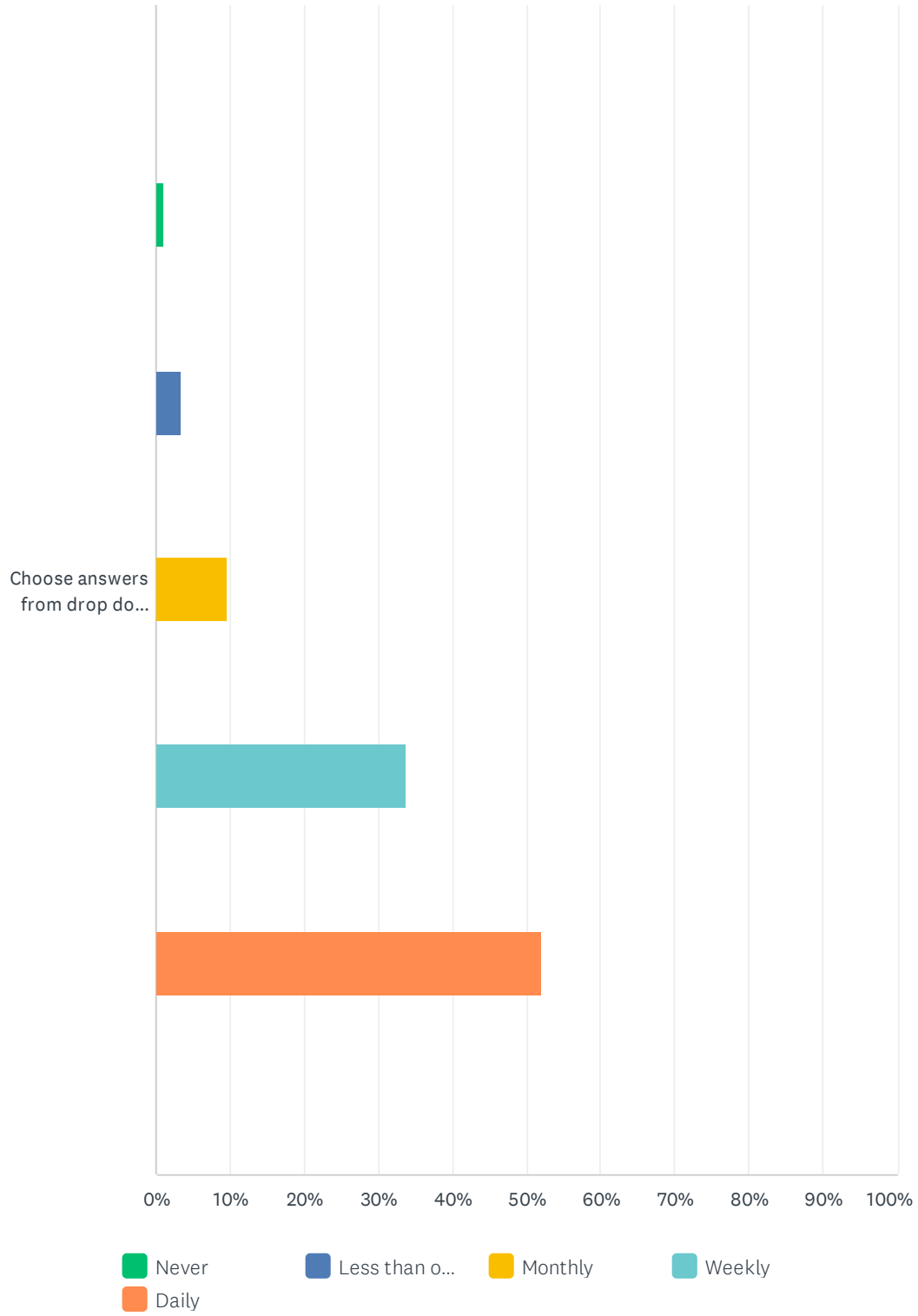
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.51% 11	15.98% 39	45.49% 111	34.02% 83	244

Q100 3.1.5.10 Sensory integrity (e.g., assessment of superficial sensation, dermatomes, myotomes, proprioception and kinesthesia, 2-point discrimination, quantitative sensory testing).

Answered: 261 Skipped: 949

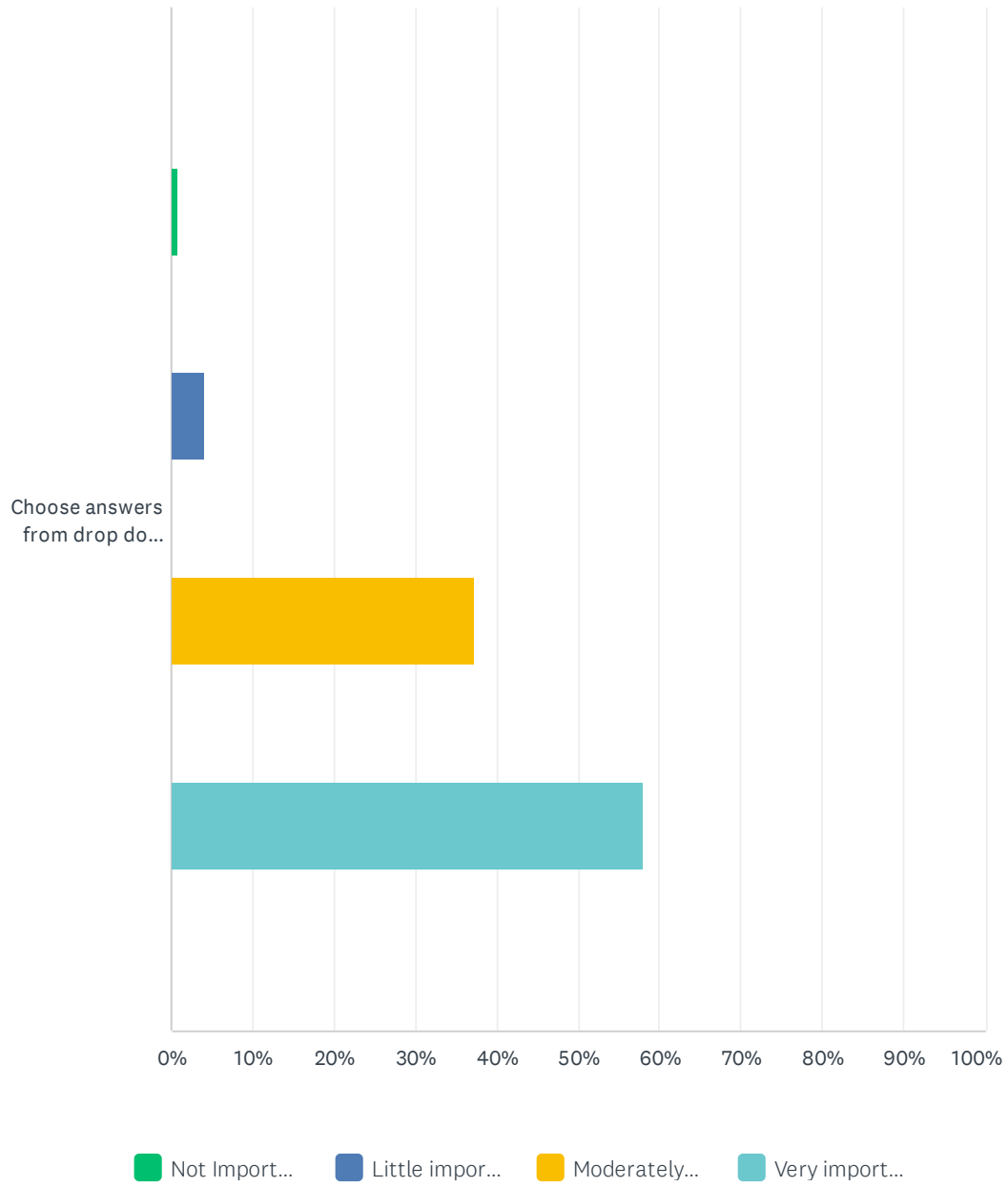
Spine Validation Practice Analysis Survey 2022

Frequency



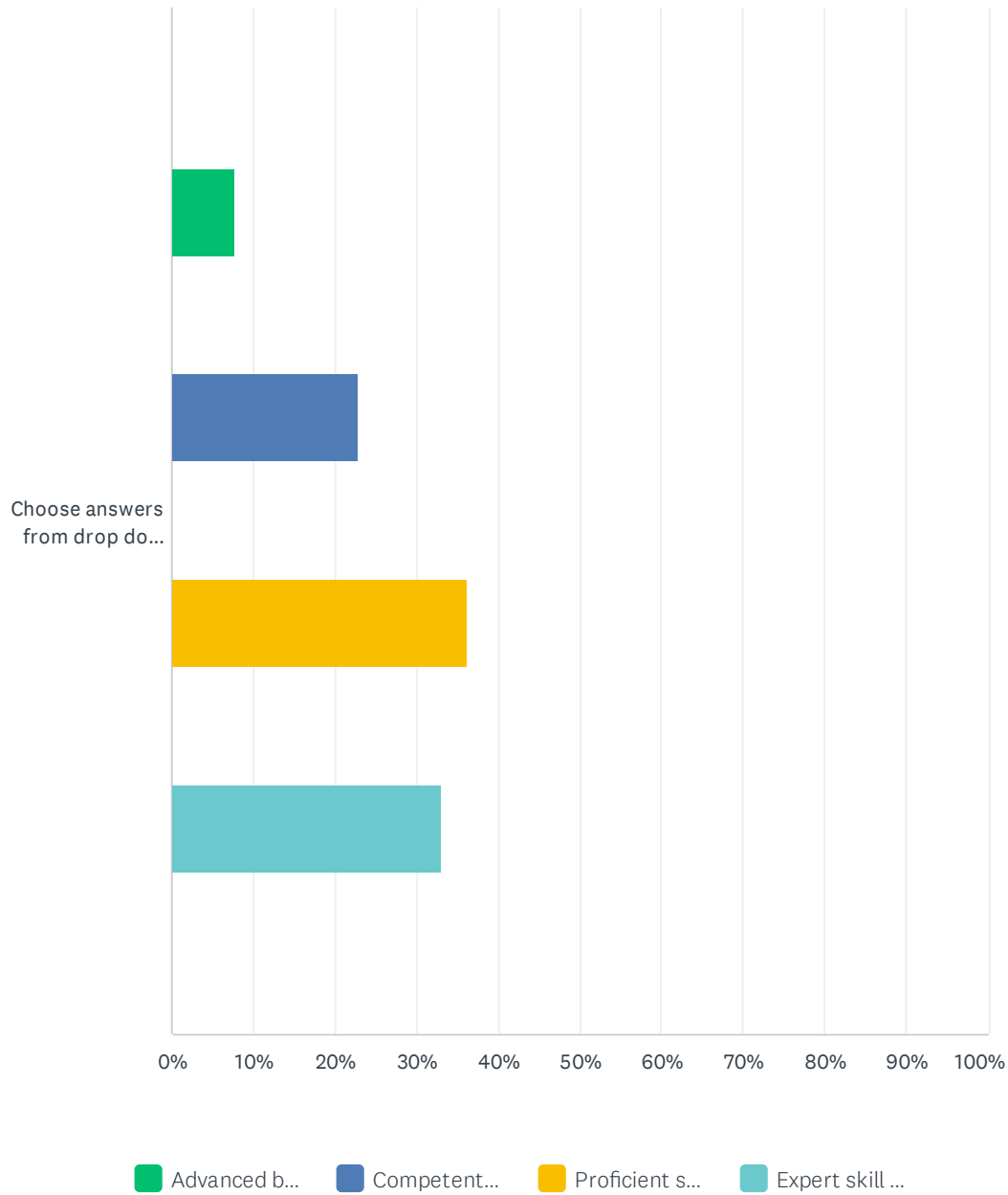
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.15% 3	3.45% 9	9.58% 25	33.72% 88	52.11% 136	261

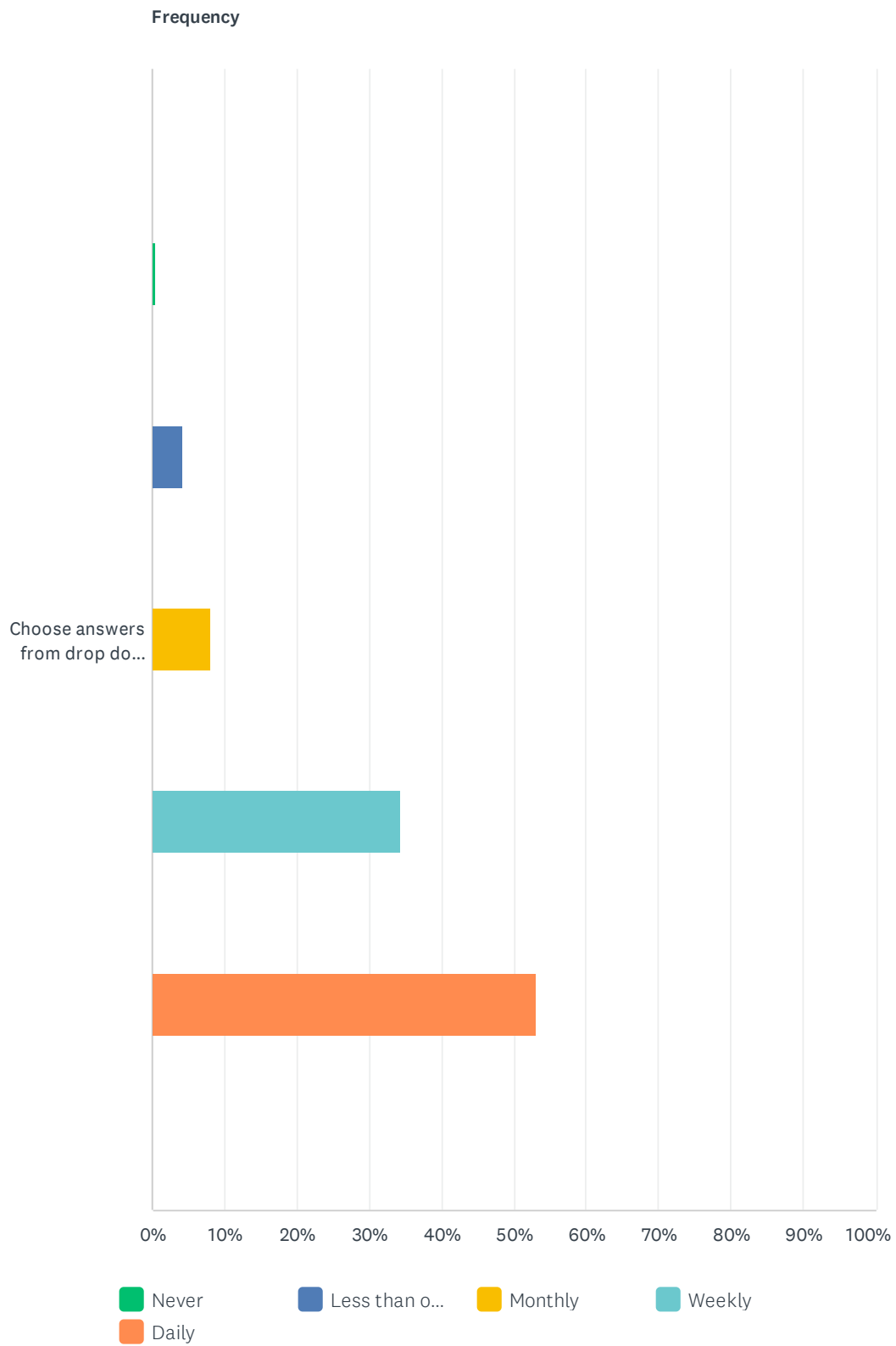
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.79% 2	3.97% 10	37.30% 94	57.94% 146	252

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.76% 19	22.86% 56	36.33% 89	33.06% 81	245

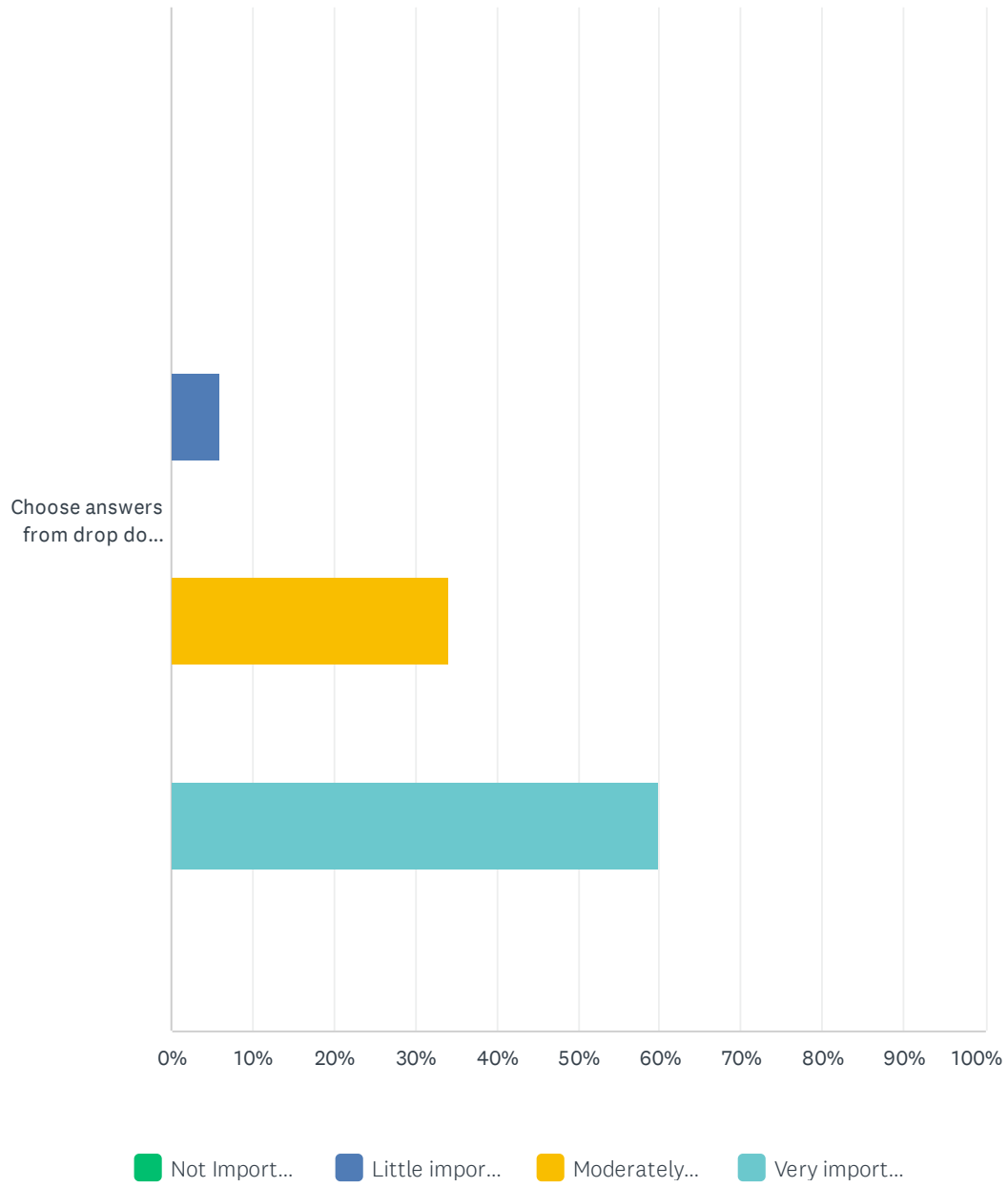
Q101 3.1.5.11 Reflex integrity (e.g., assessment of normal and pathological reflexes).

Answered: 260 Skipped: 950



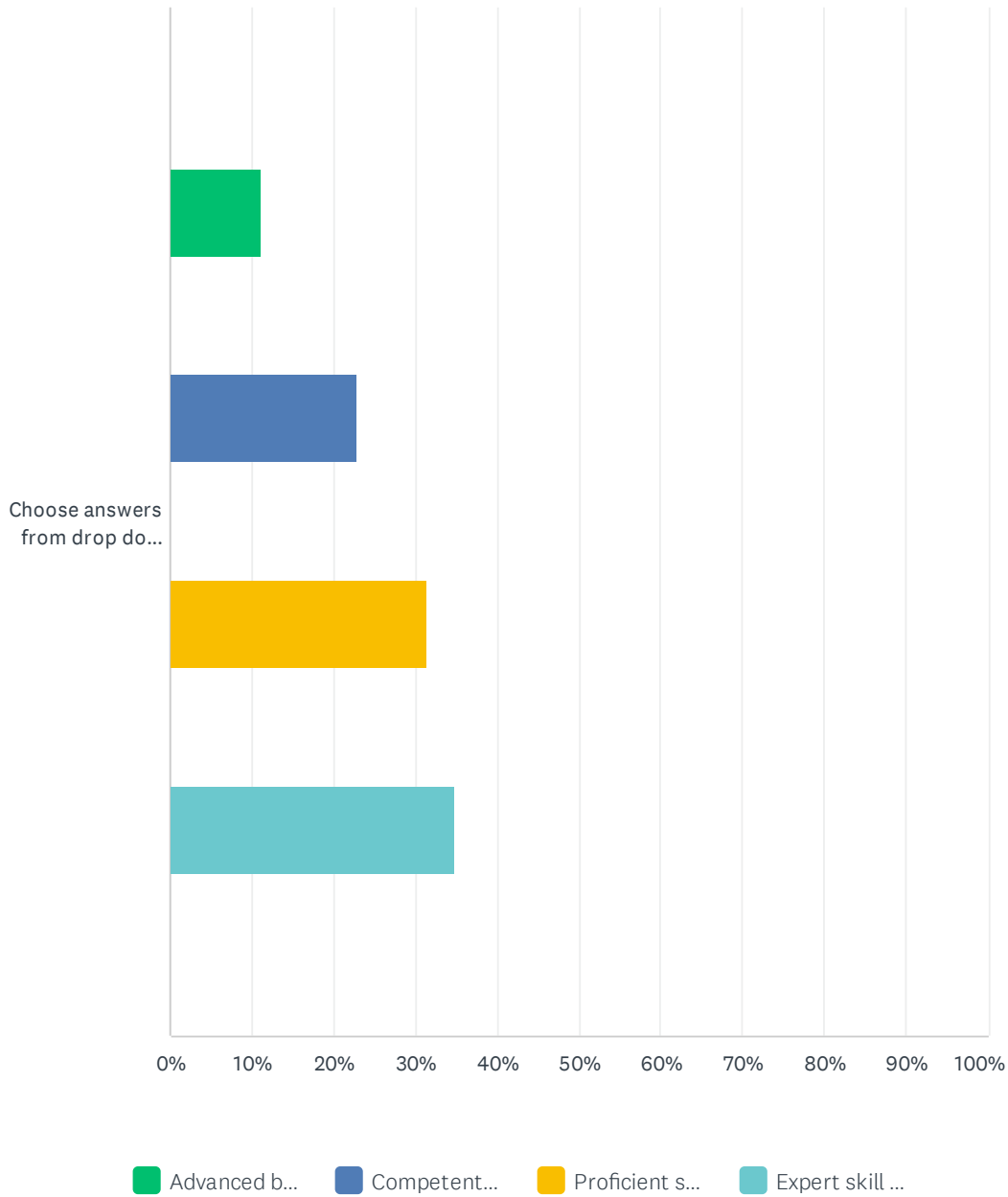
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.38% 1	4.23% 11	8.08% 21	34.23% 89	53.08% 138	260

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	5.95% 15	34.13% 86	59.92% 151	252

Spine Validation Practice Analysis Survey 2022

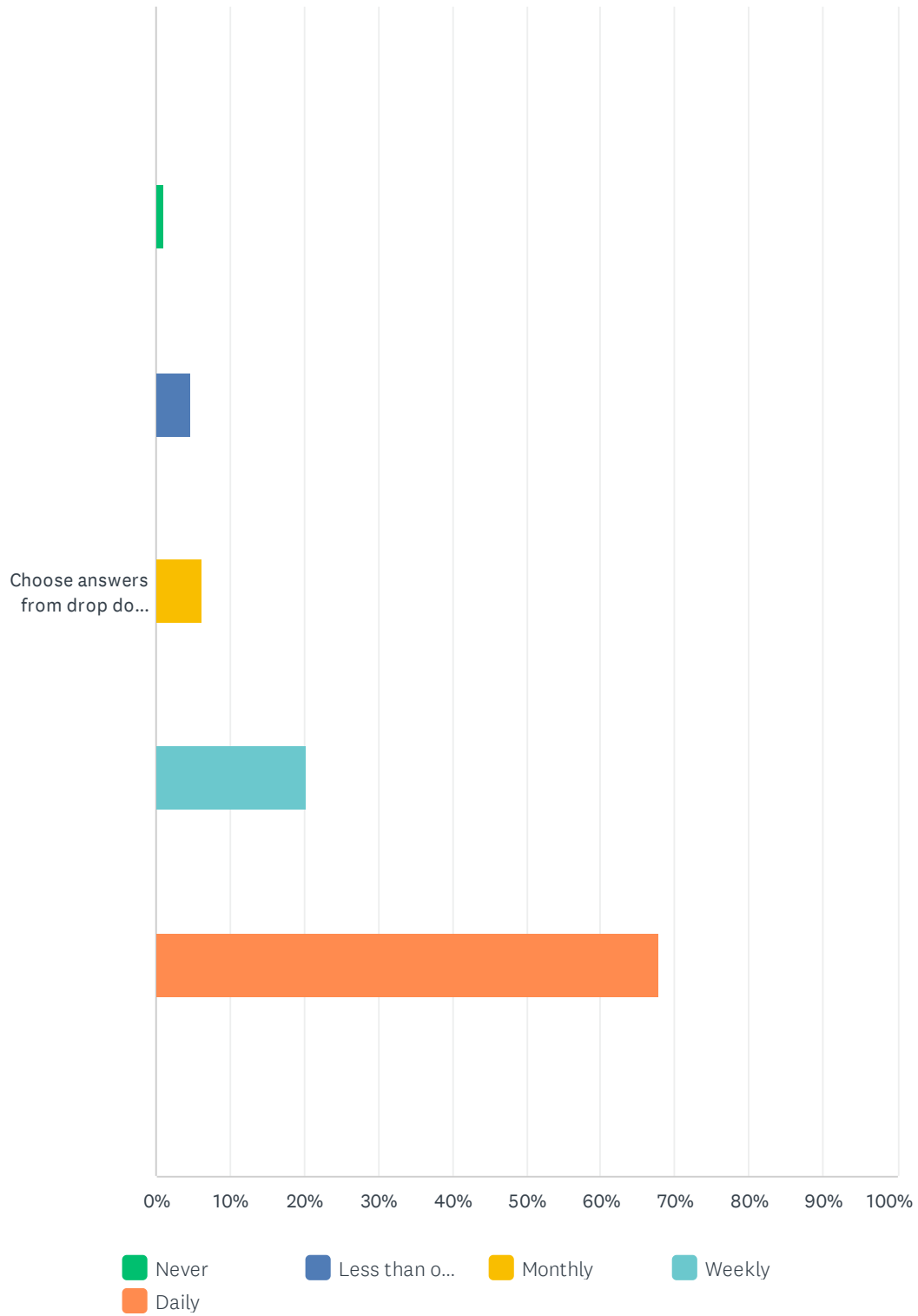
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.02% 27	22.86% 56	31.43% 77	34.69% 85	245

Q102 3.1.5.12 Motor control and coordination (e.g., assessment of timing of movements across segments, capability of acquiring new movement strategies).

Answered: 261 Skipped: 949

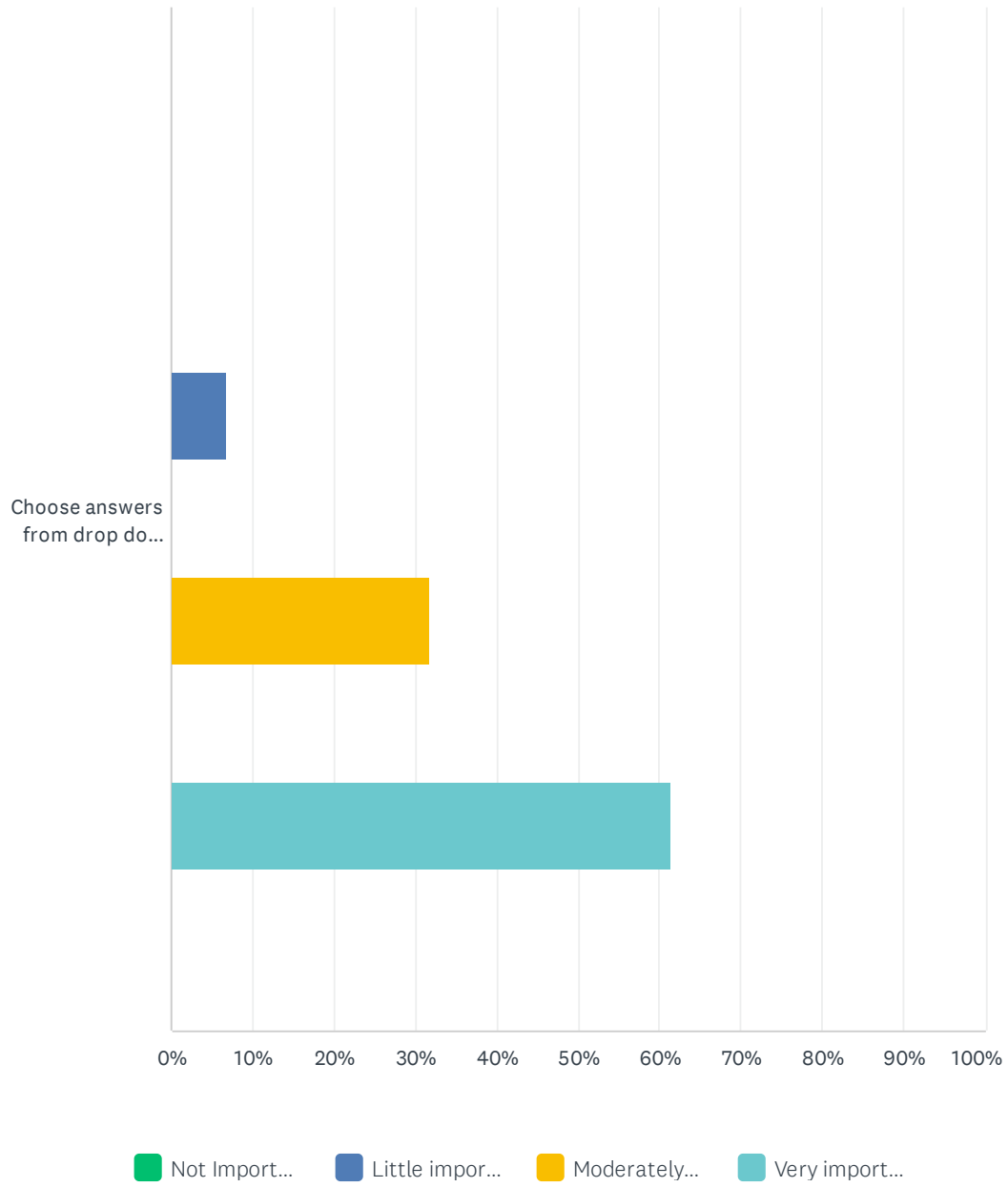
Spine Validation Practice Analysis Survey 2022

Frequency



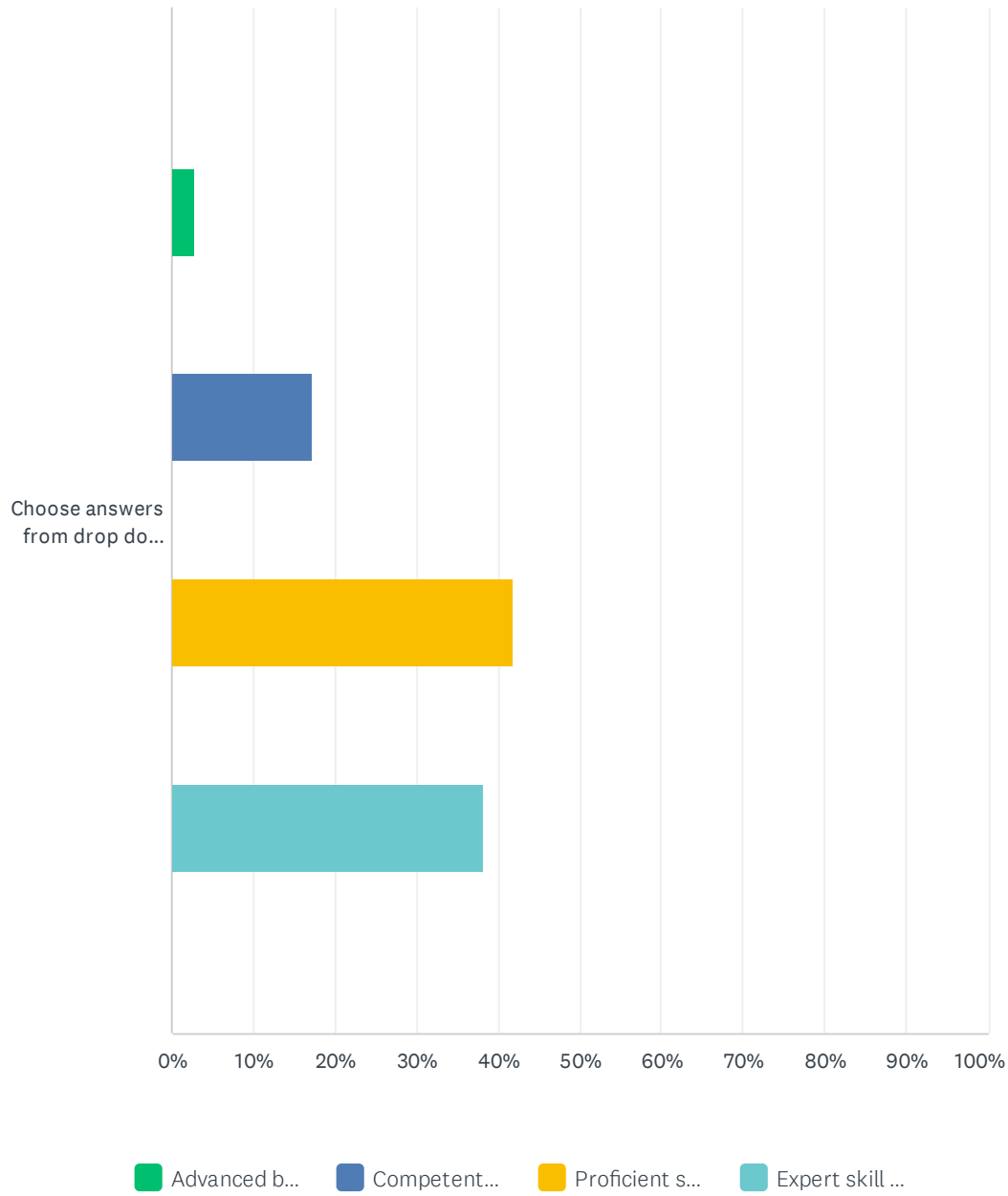
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.15% 3	4.60% 12	6.13% 16	20.31% 53	67.82% 177	261

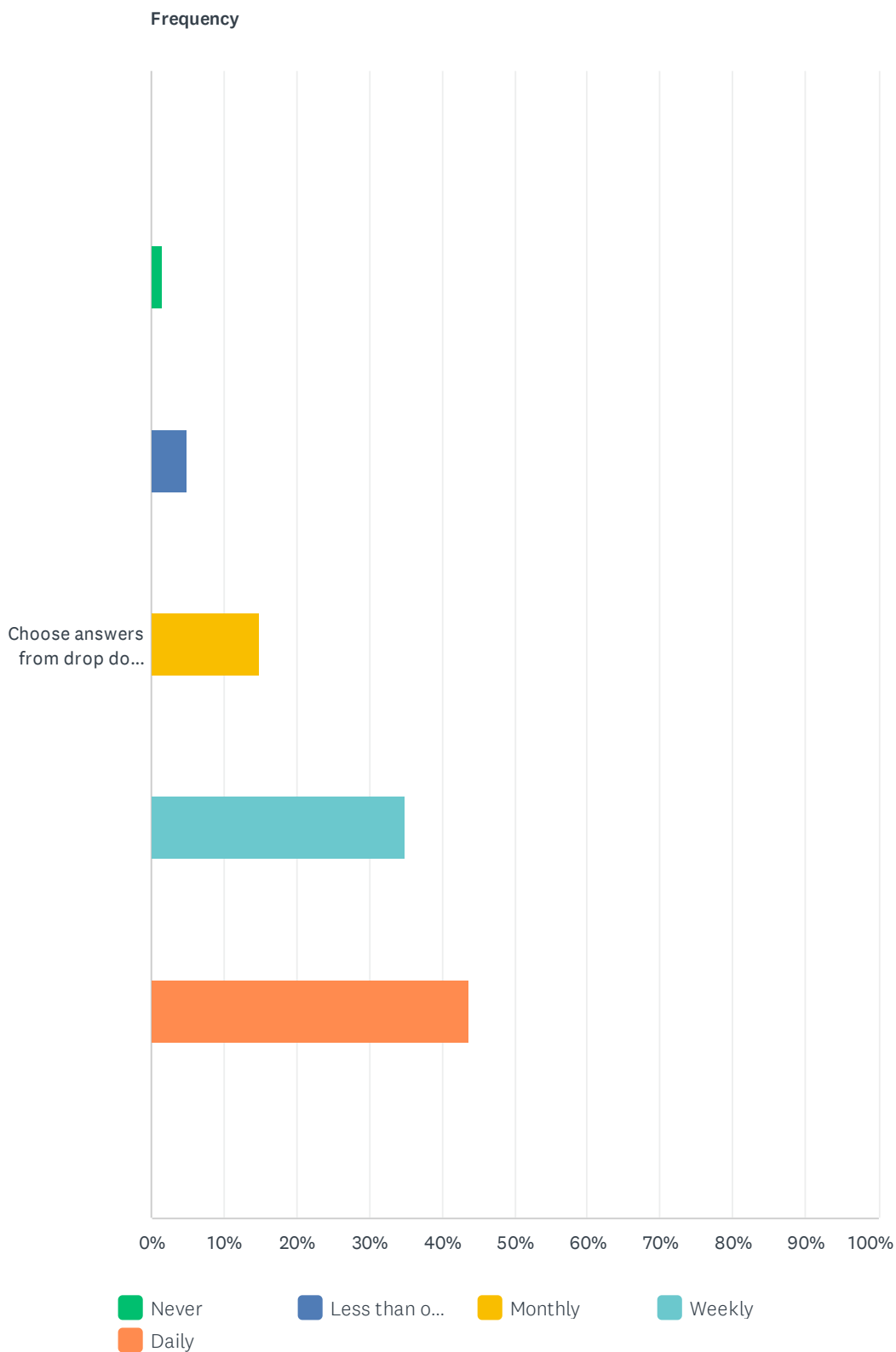
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	6.75% 17	31.75% 80	61.51% 155	252

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.87% 7	17.21% 42	41.80% 102	38.11% 93	244

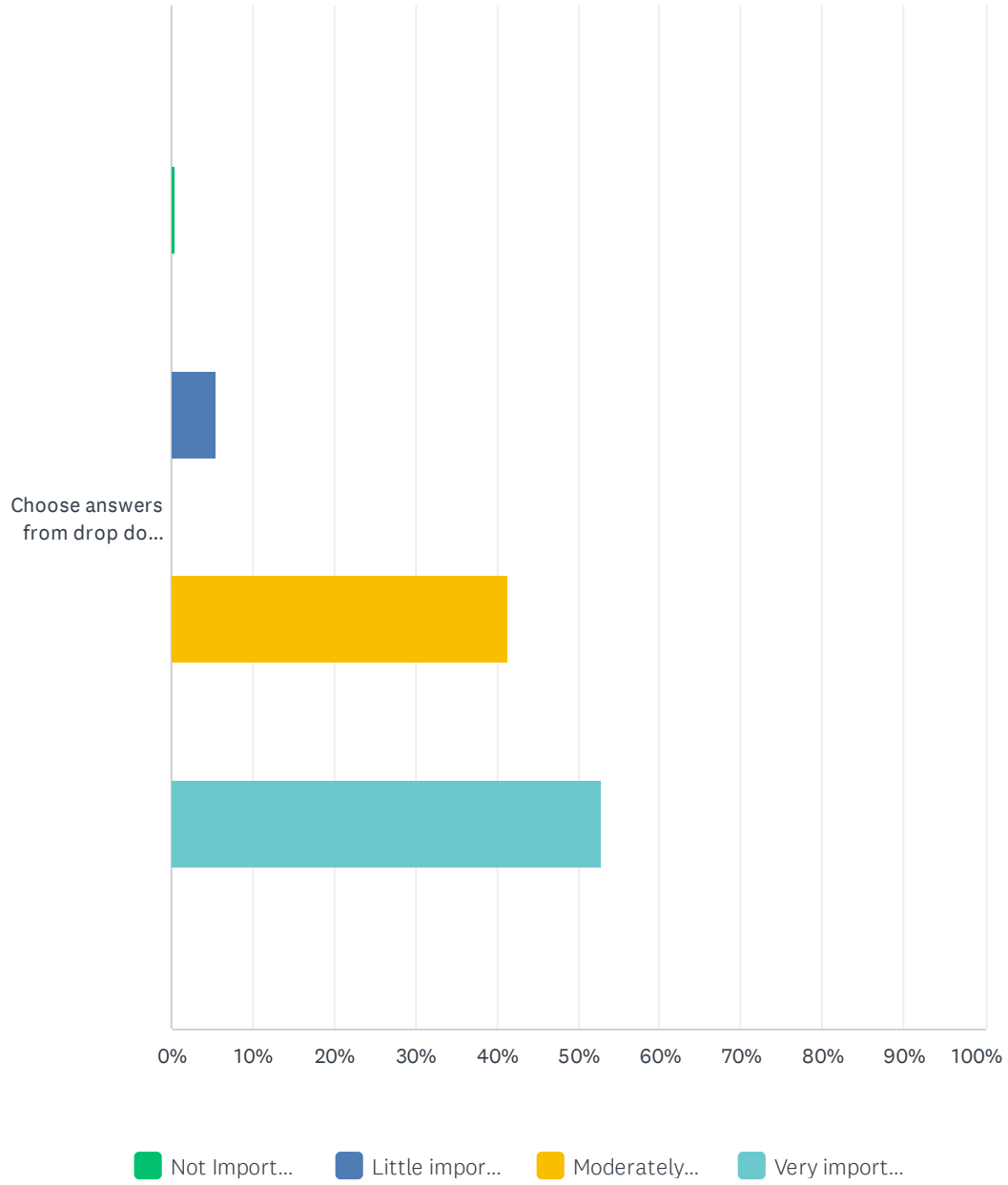
Q103 3.1.5.13 Biopsychosocial functioning (e.g., depression, impaired motivation, FABQ, STarT Back, Tampa Kinesiophobia).

Answered: 261 Skipped: 949



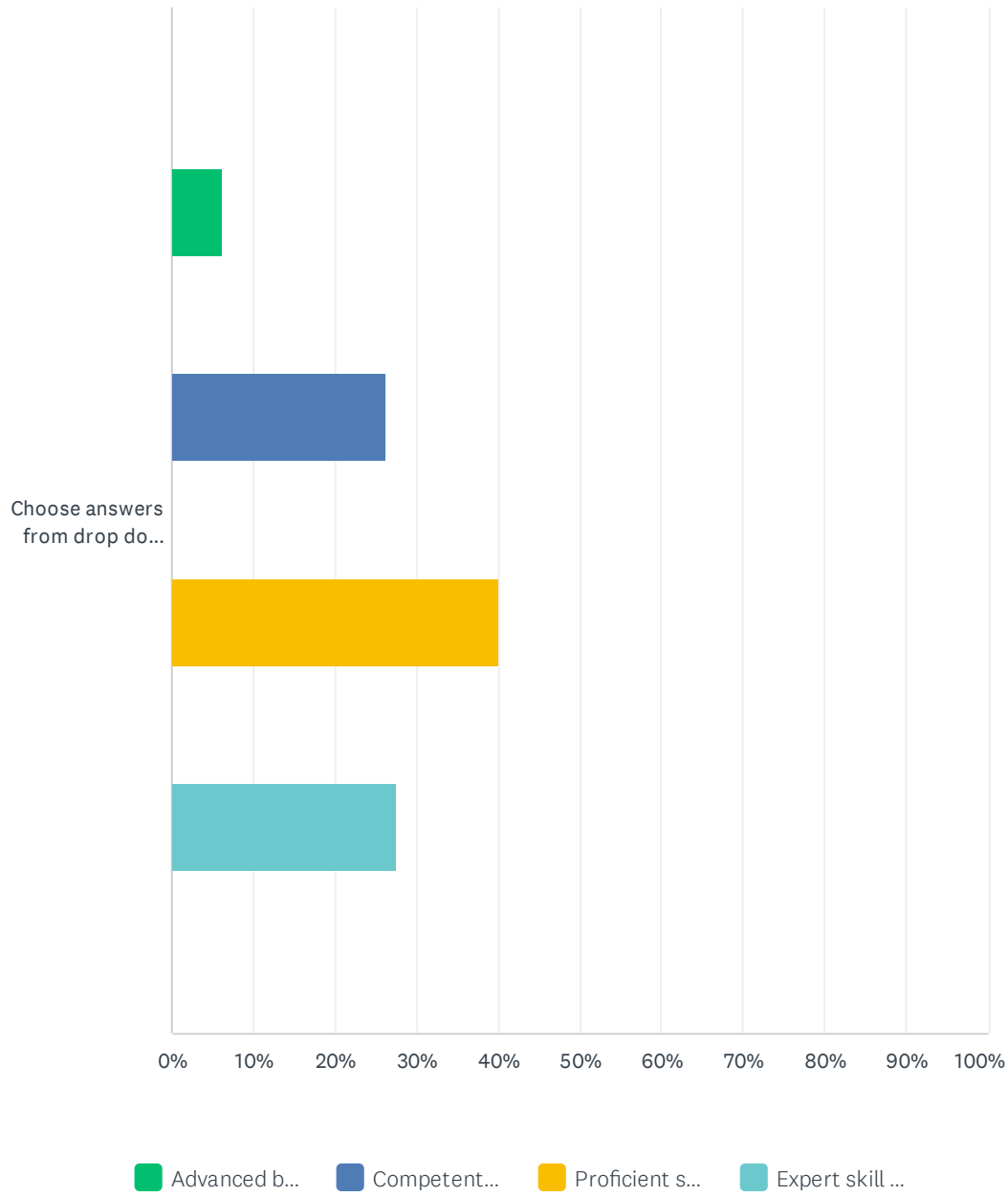
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.53% 4	4.98% 13	14.94% 39	34.87% 91	43.68% 114	261

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.40% 1	5.56% 14	41.27% 104	52.78% 133	252

Spine Validation Practice Analysis Survey 2022

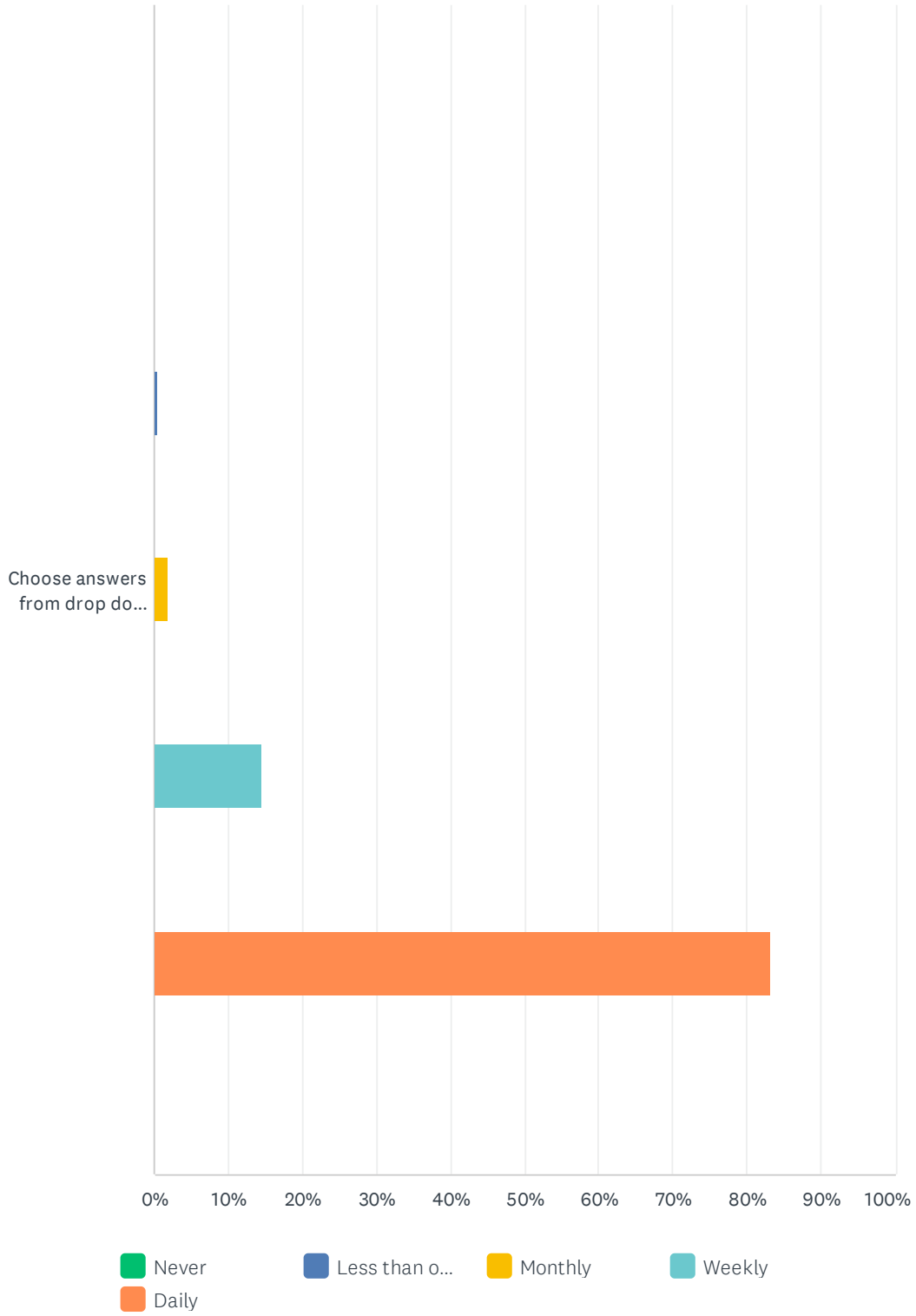
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.15% 15	26.23% 64	40.16% 98	27.46% 67	244

Q104 3.1.5.14 Joint integrity (i.e., mobility assessment of joint hypermobility and hypomobility to include passive range of motion, passive accessory motions, response to manual provocation).

Answered: 261 Skipped: 949

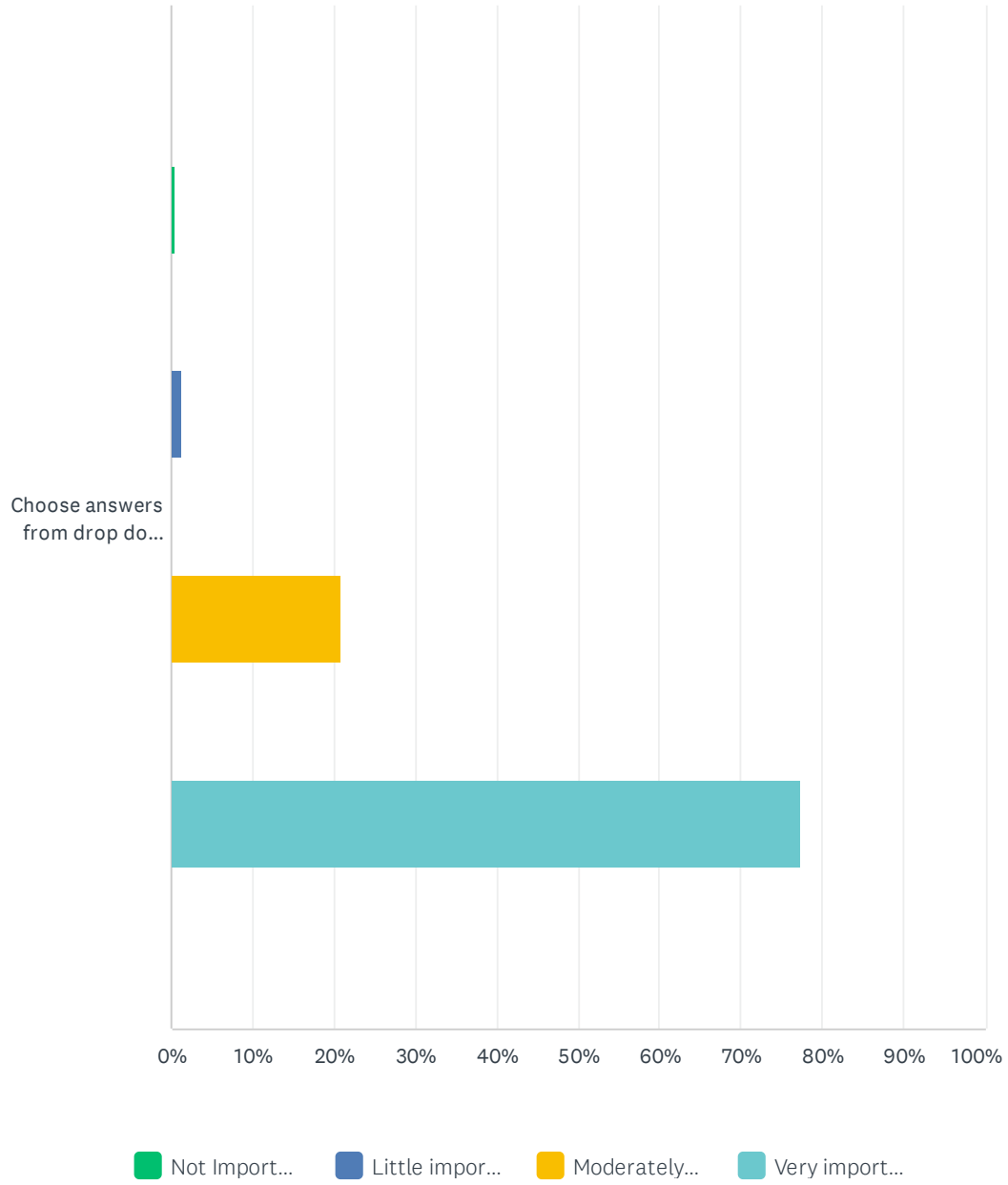
Spine Validation Practice Analysis Survey 2022

Frequency



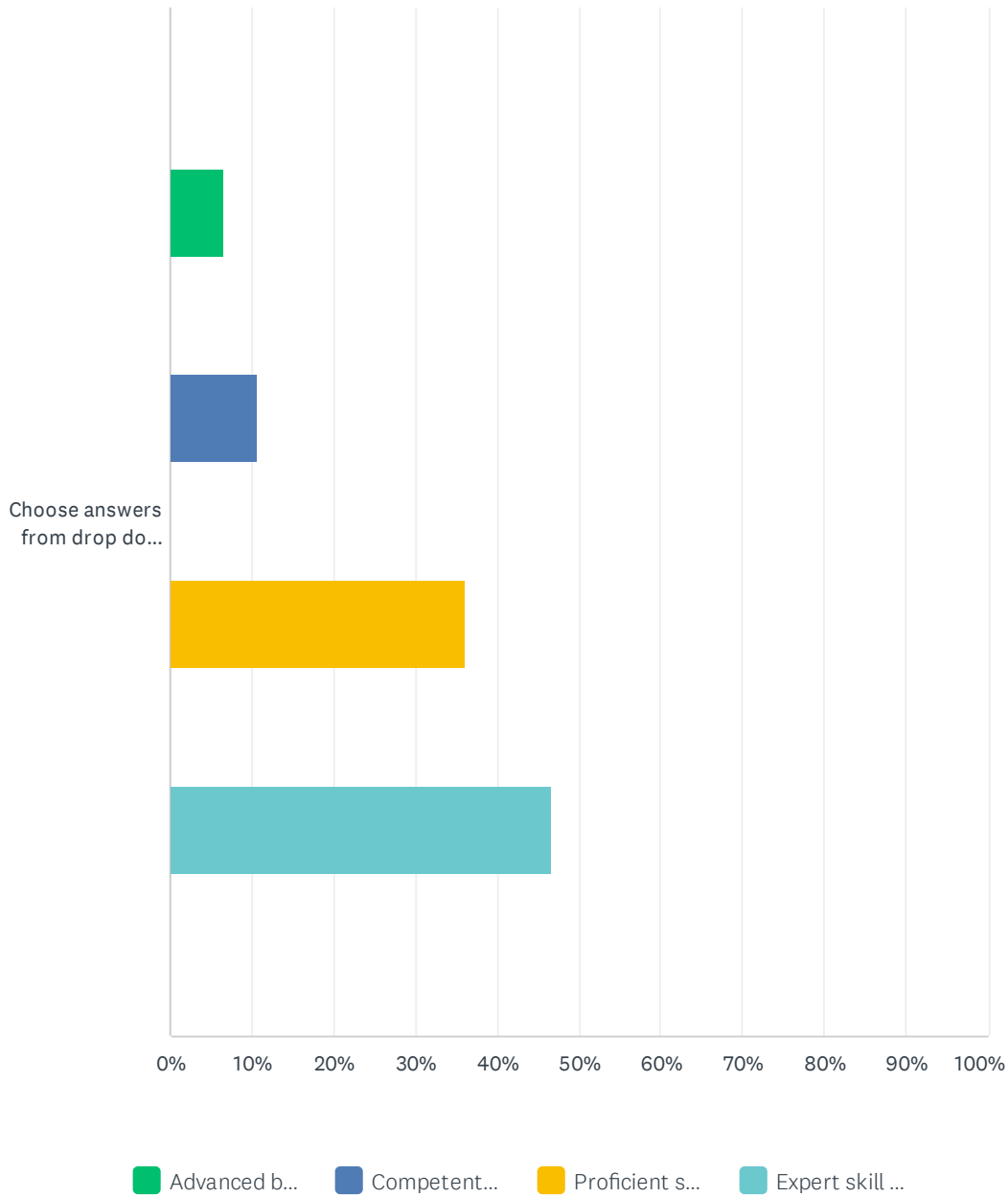
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.38% 1	1.92% 5	14.56% 38	83.14% 217	261

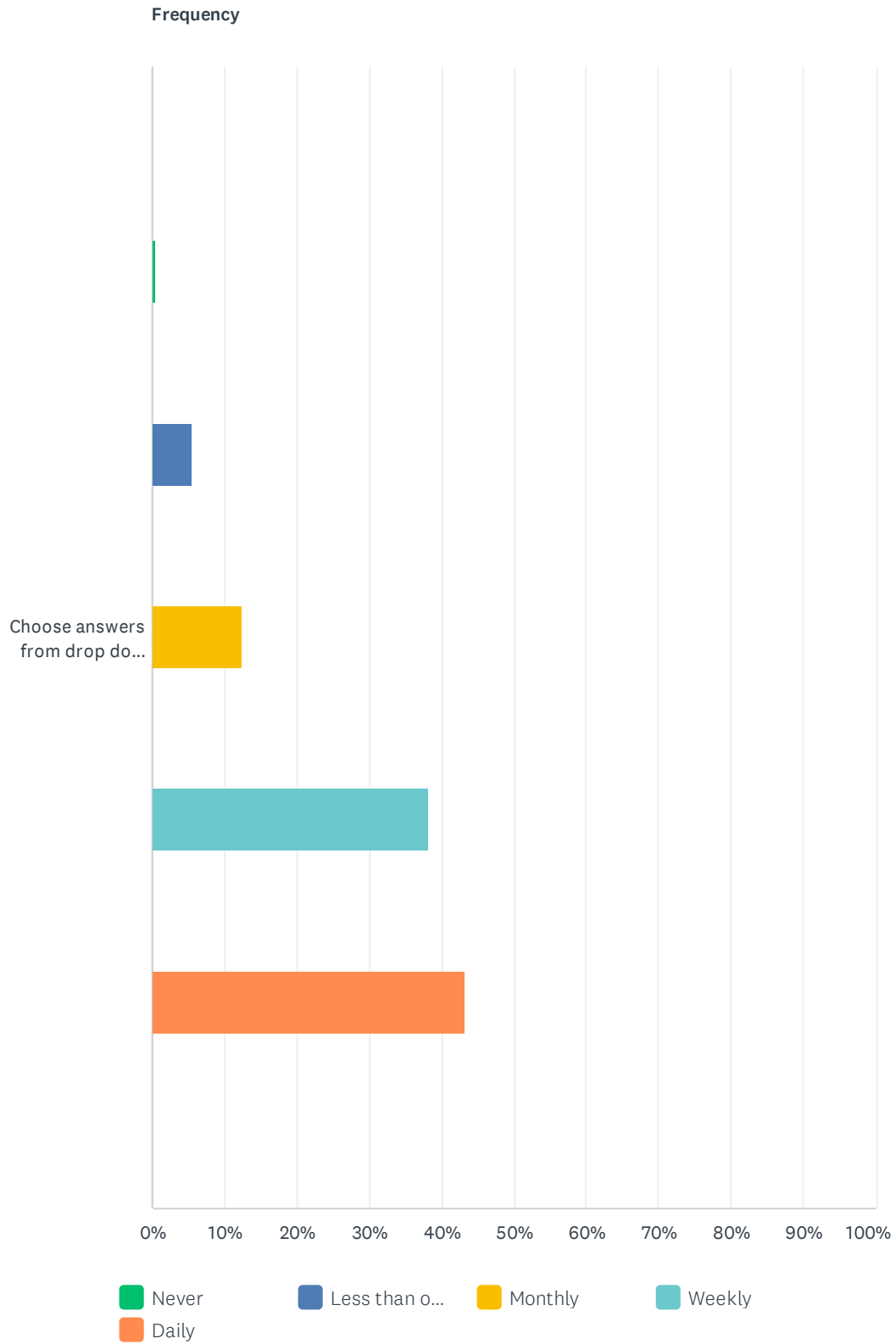
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.40% 1	1.19% 3	20.95% 53	77.47% 196	253

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.56% 16	10.66% 26	36.07% 88	46.72% 114	244

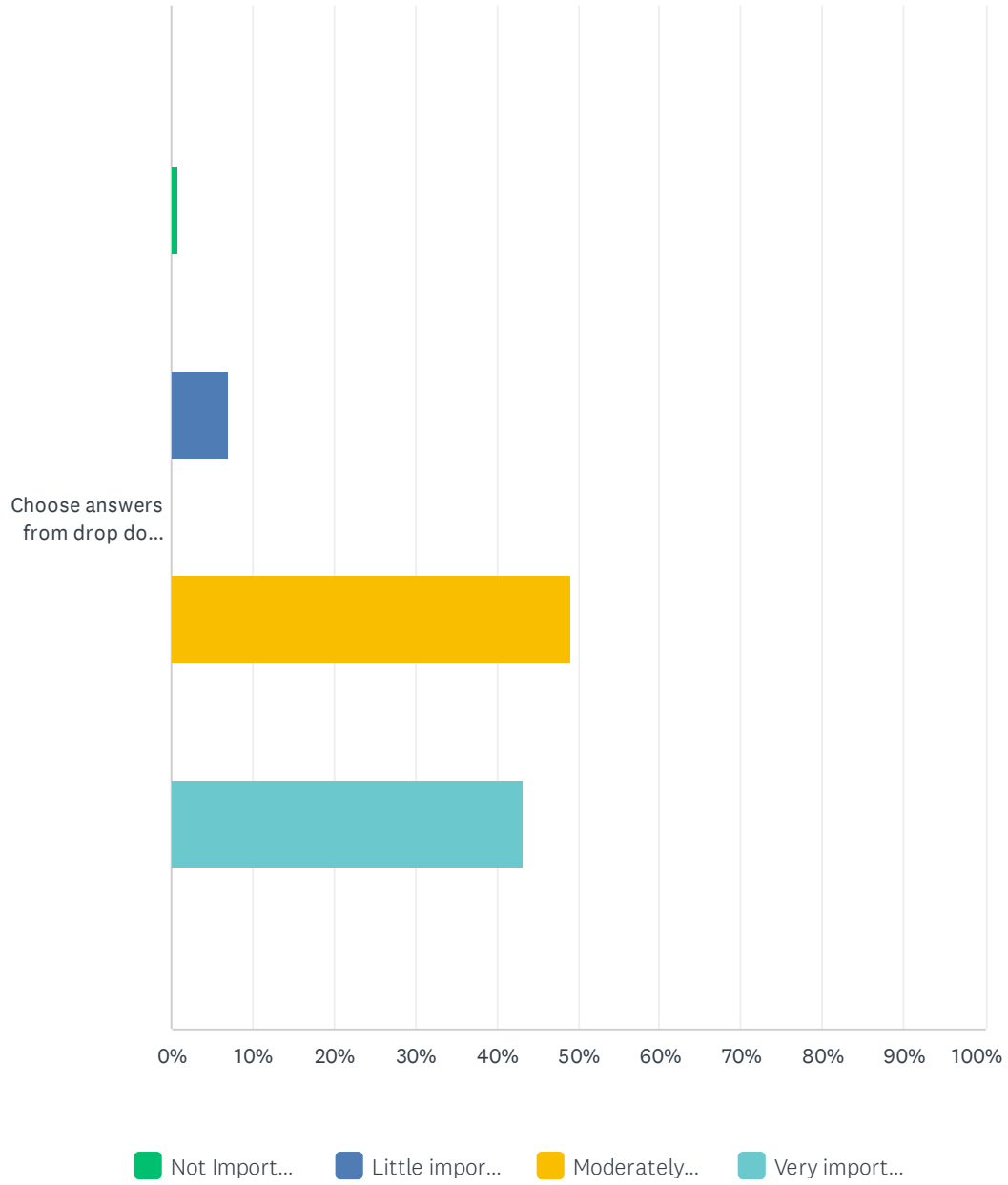
Q105 3.1.5.15 Community, home, and work barriers.

Answered: 250 Skipped: 960



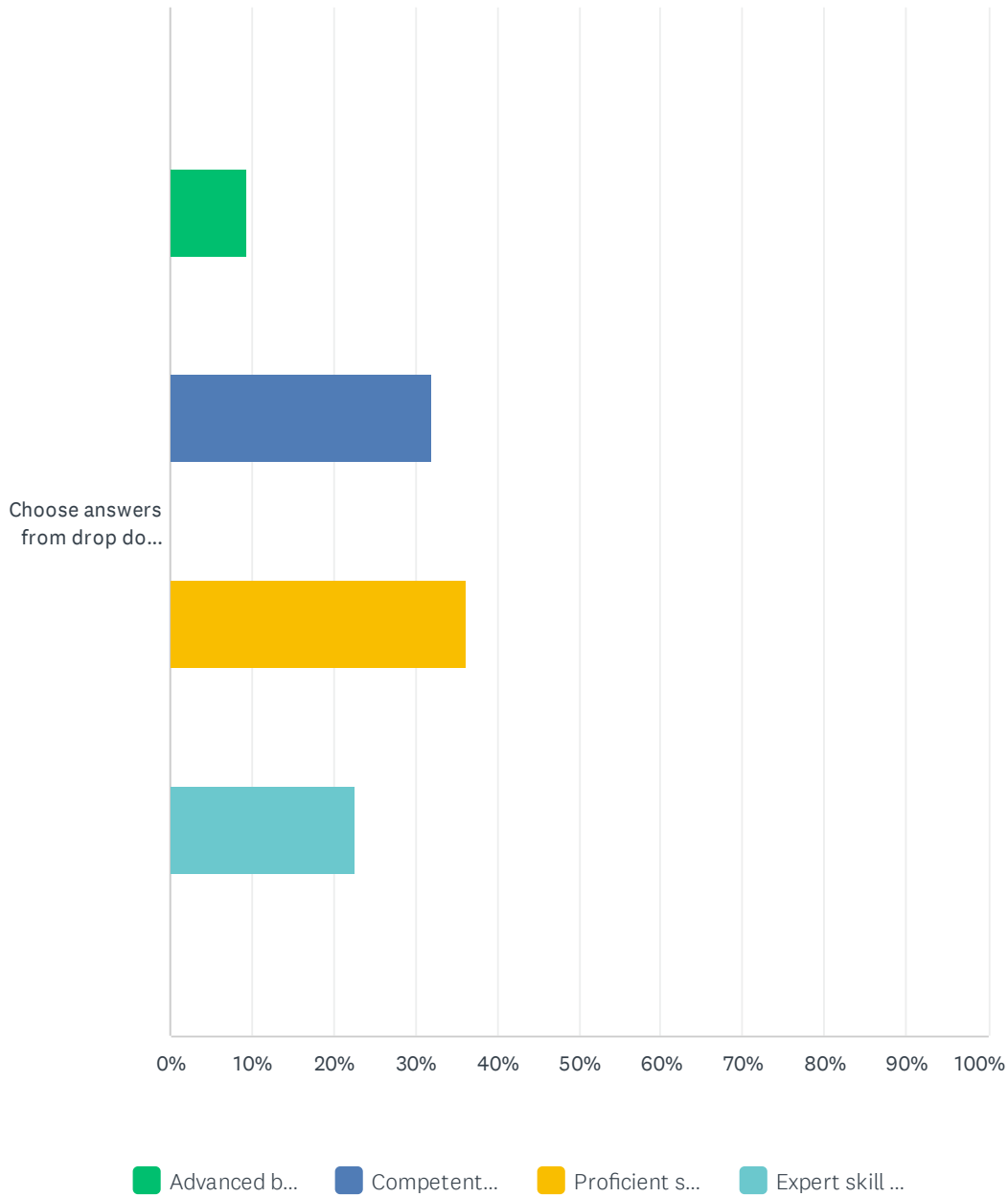
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.40% 1	5.62% 14	12.45% 31	38.15% 95	43.37% 108	249

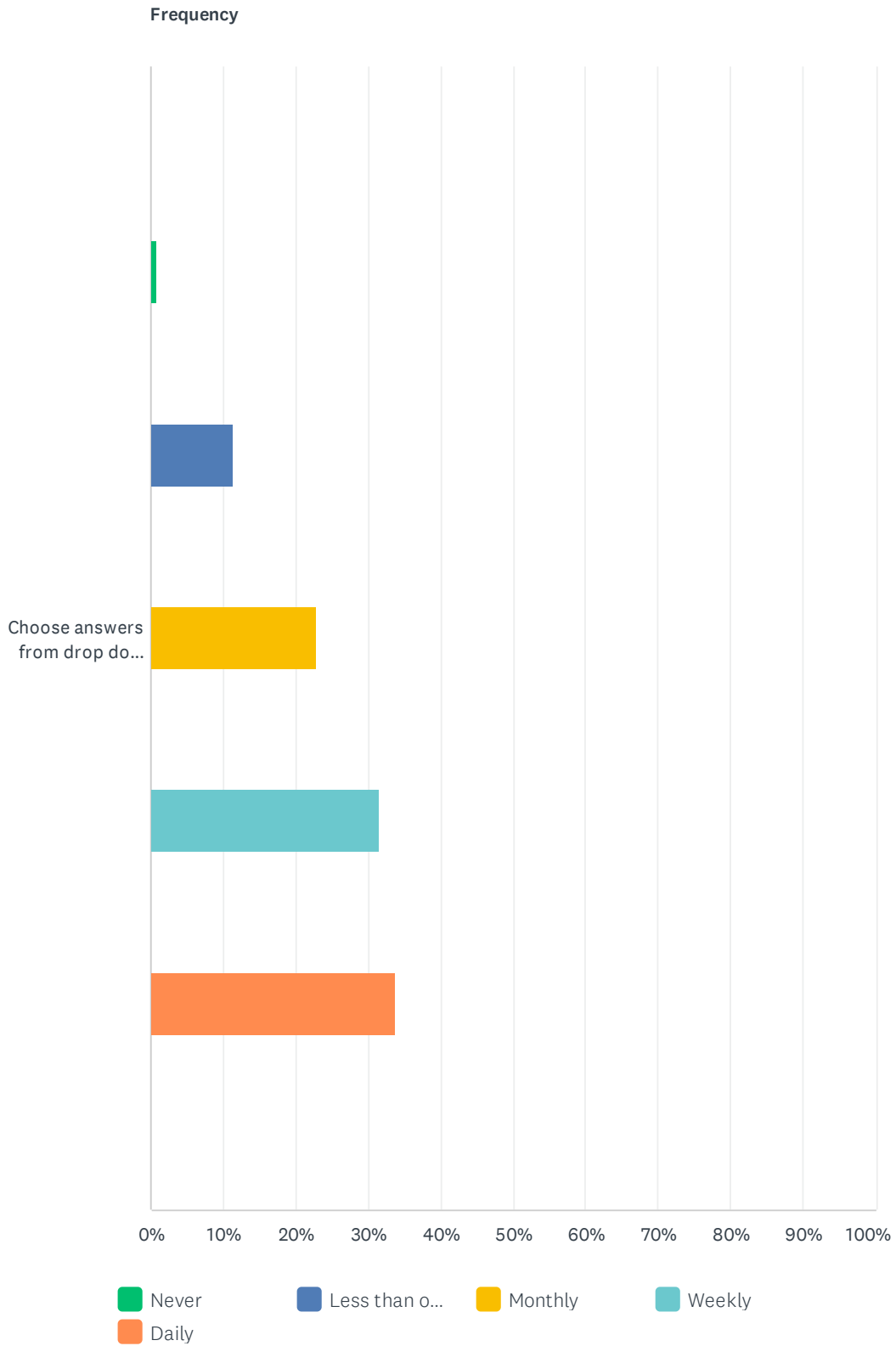
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.82% 2	7.00% 17	48.97% 119	43.21% 105	243

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.36% 22	31.91% 75	36.17% 85	22.55% 53	235

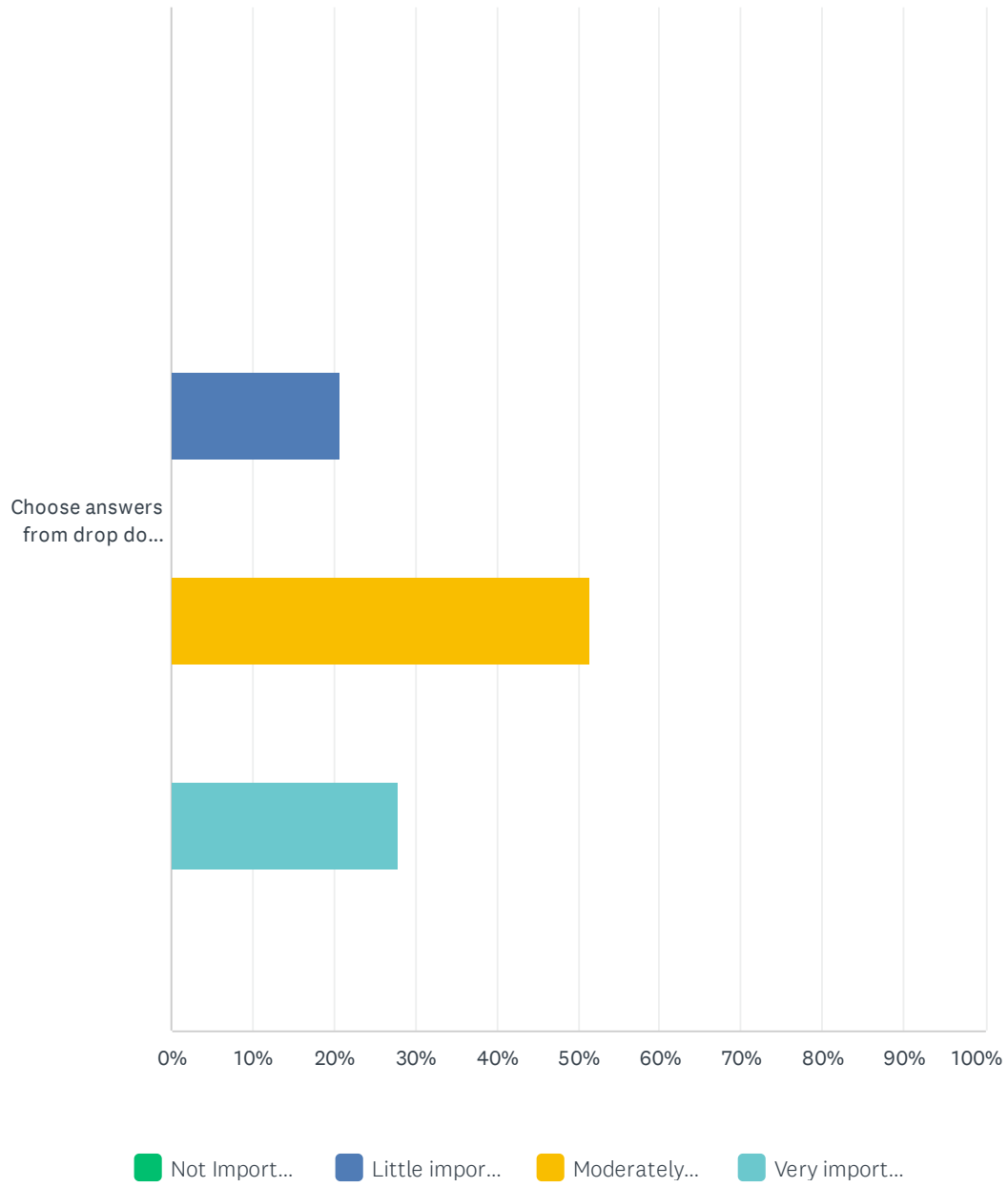
Q106 3.1.5.16 Integumentary integrity.

Answered: 250 Skipped: 960



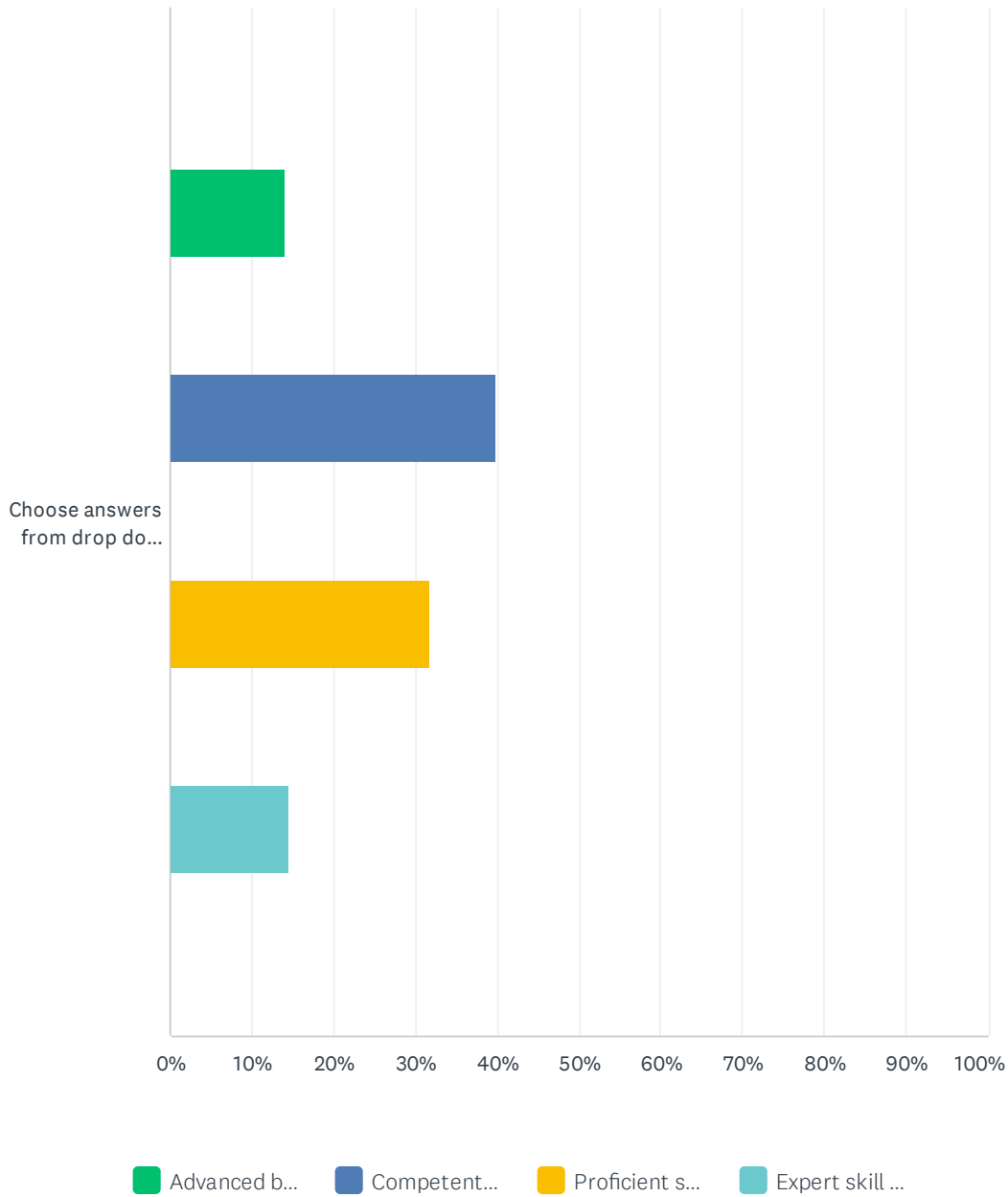
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.80% 2	11.20% 28	22.80% 57	31.60% 79	33.60% 84	250

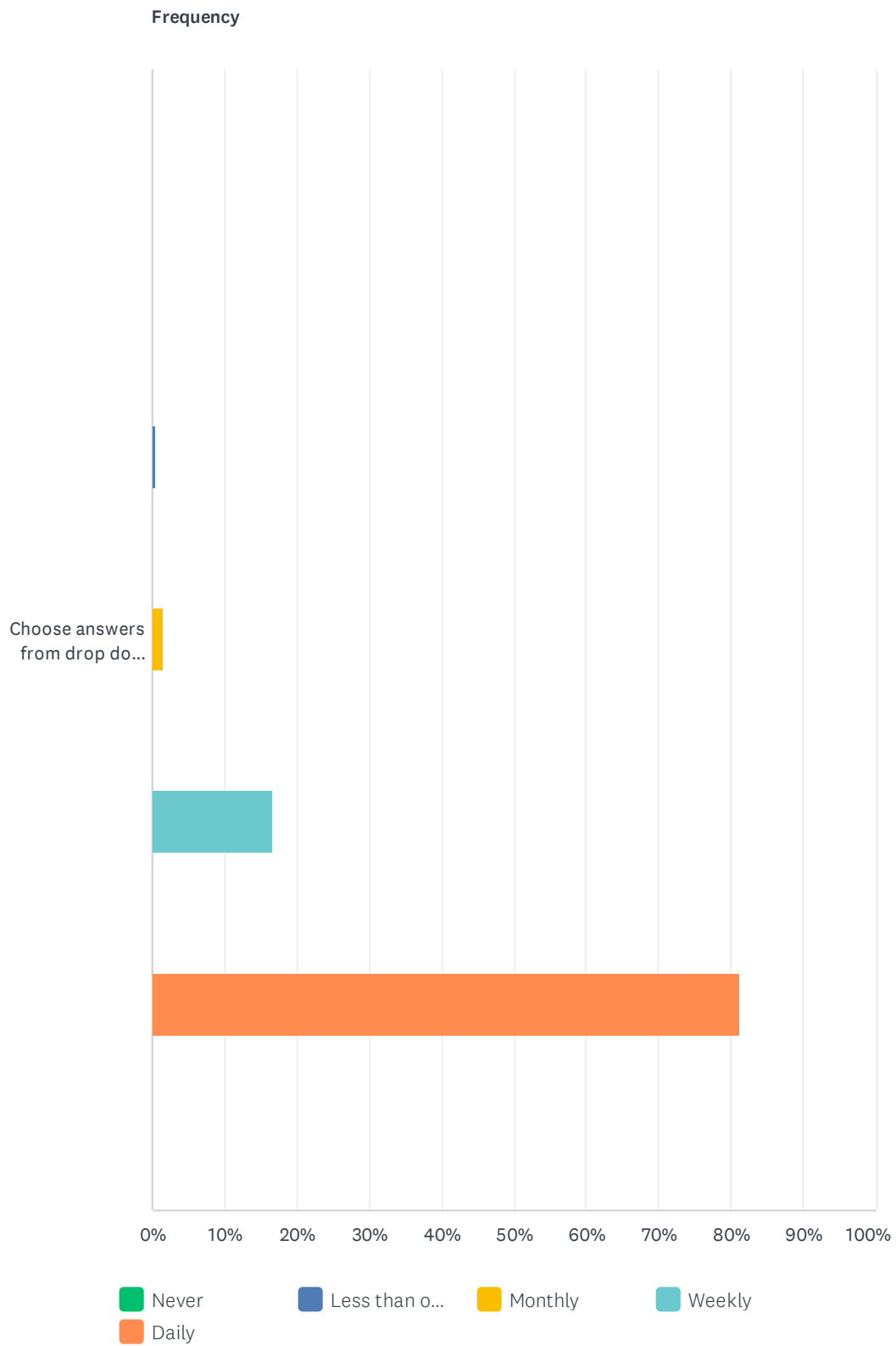
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	20.58% 50	51.44% 125	27.98% 68	243

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	13.98% 33	39.83% 94	31.78% 75	14.41% 34	236

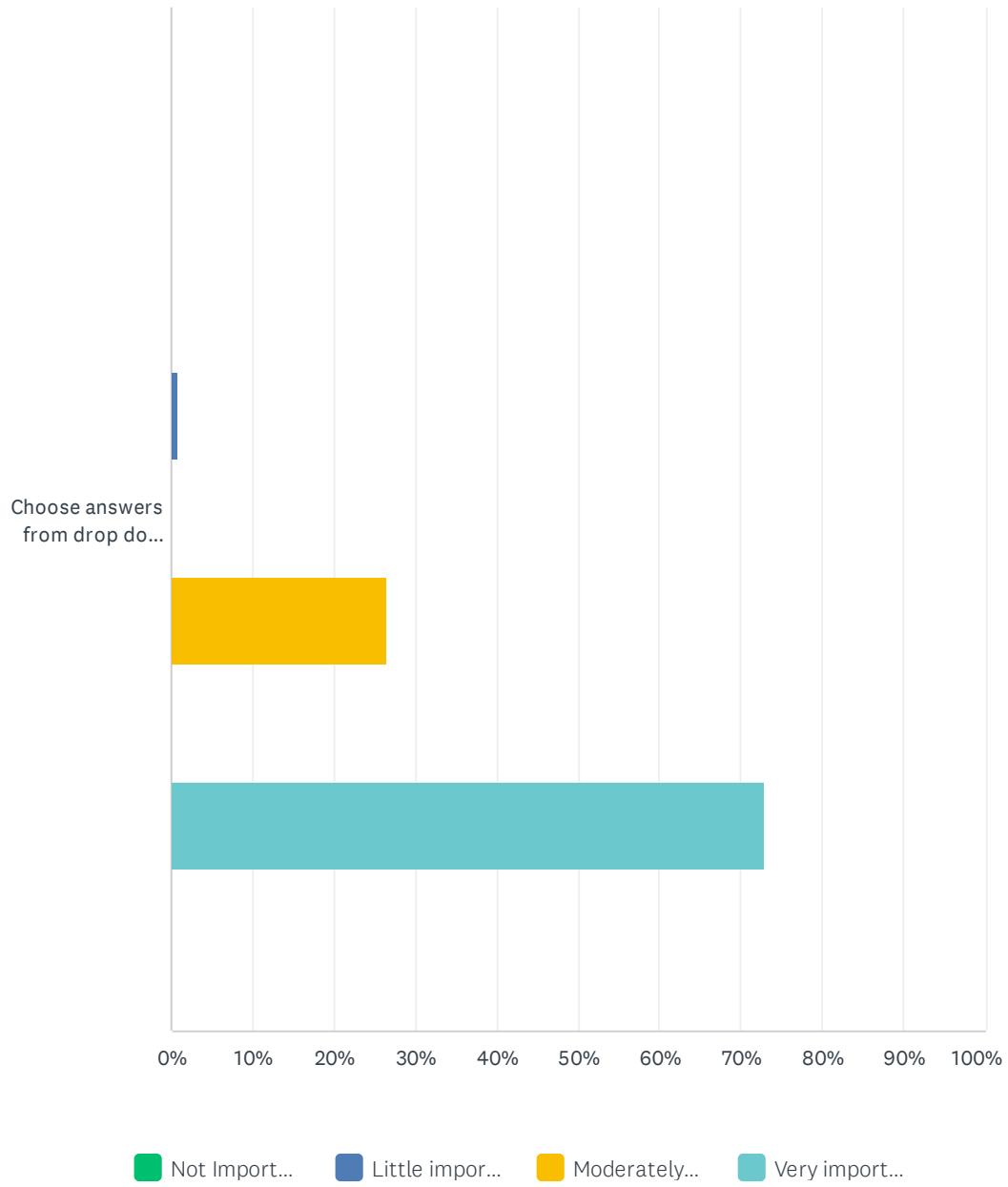
Q107 3.1.5.17 Muscle performance (e.g., strength, power, and endurance).

Answered: 251 Skipped: 959



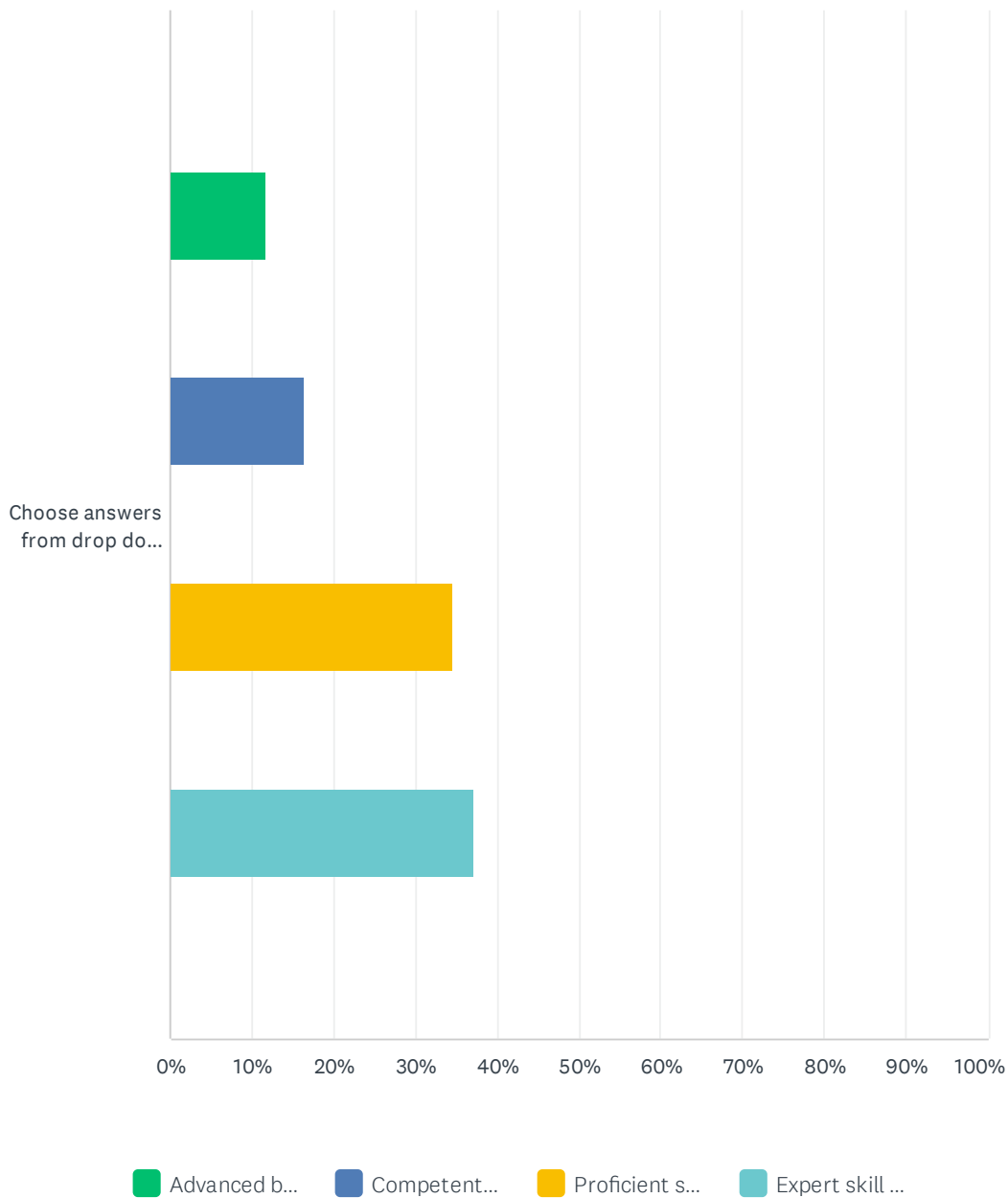
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.40% 1	1.59% 4	16.73% 42	81.27% 204	251

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.82% 2	26.34% 64	72.84% 177	243

Spine Validation Practice Analysis Survey 2022

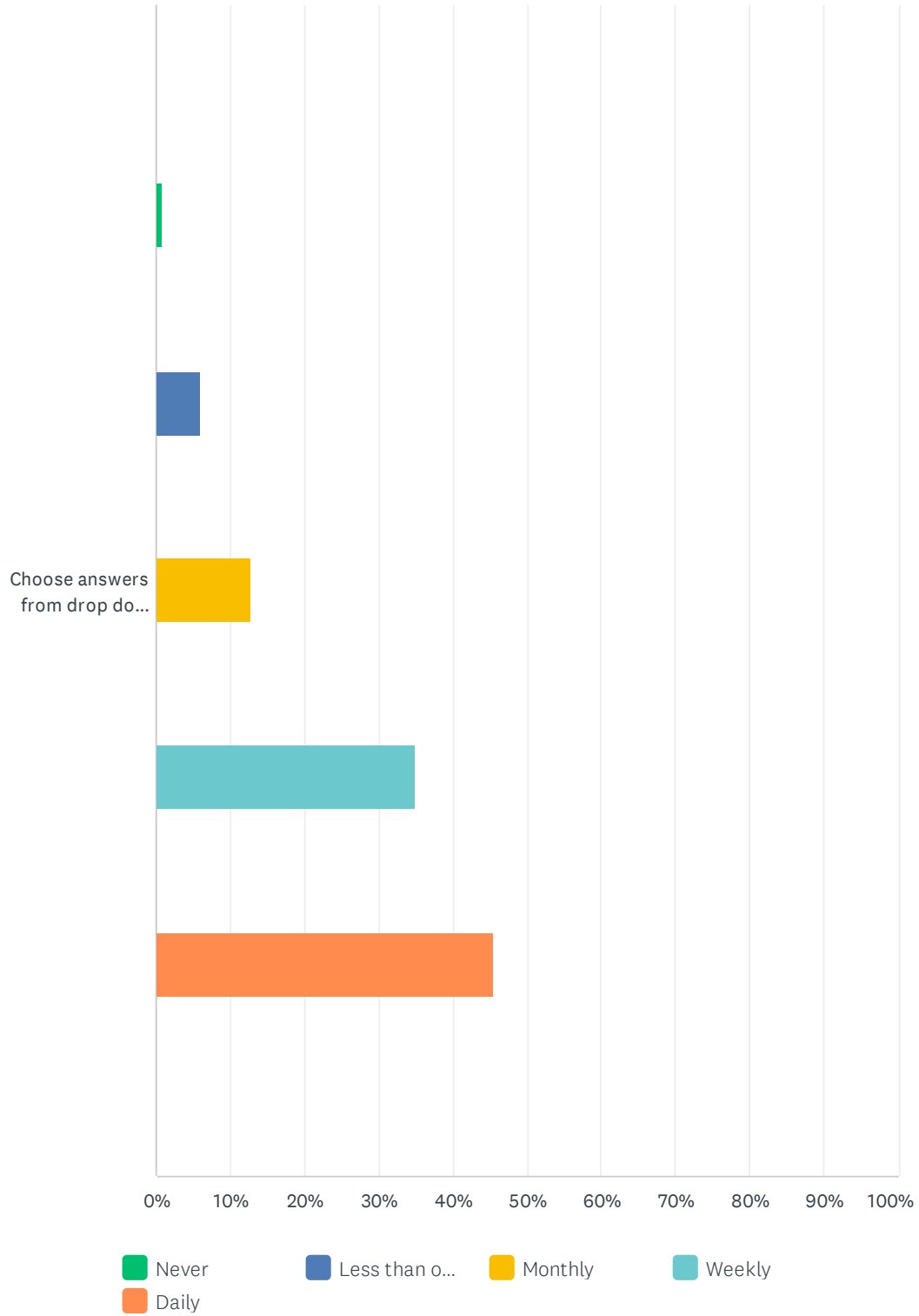
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.81% 28	16.46% 39	34.60% 82	37.13% 88	237

Q108 3.1.5.18 Neuromotor development and sensory integration (e.g., assessment of appropriate development, dexterity, coordination, and integration of the somatosensory system).

Answered: 251 Skipped: 959

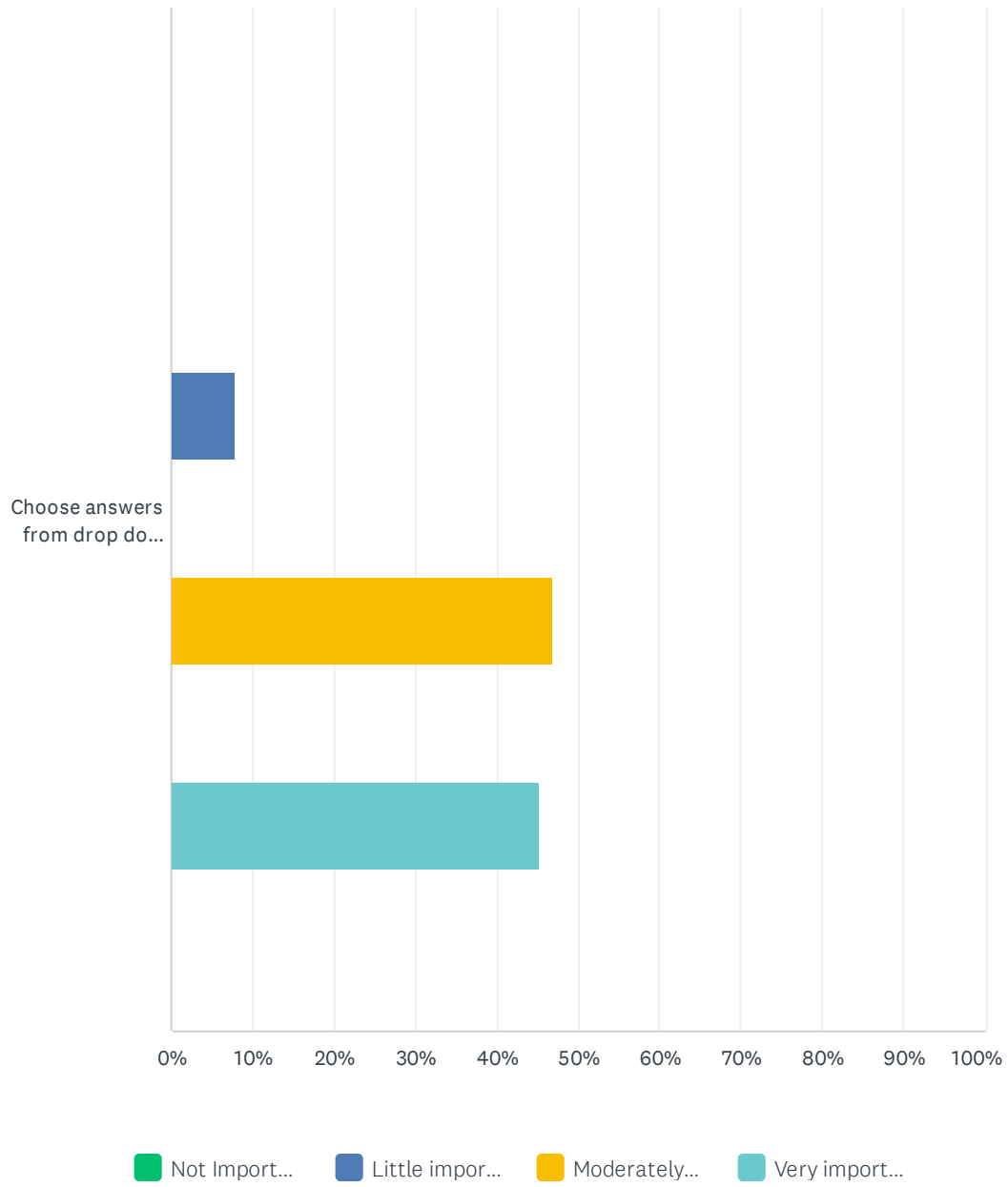
Spine Validation Practice Analysis Survey 2022

Frequency



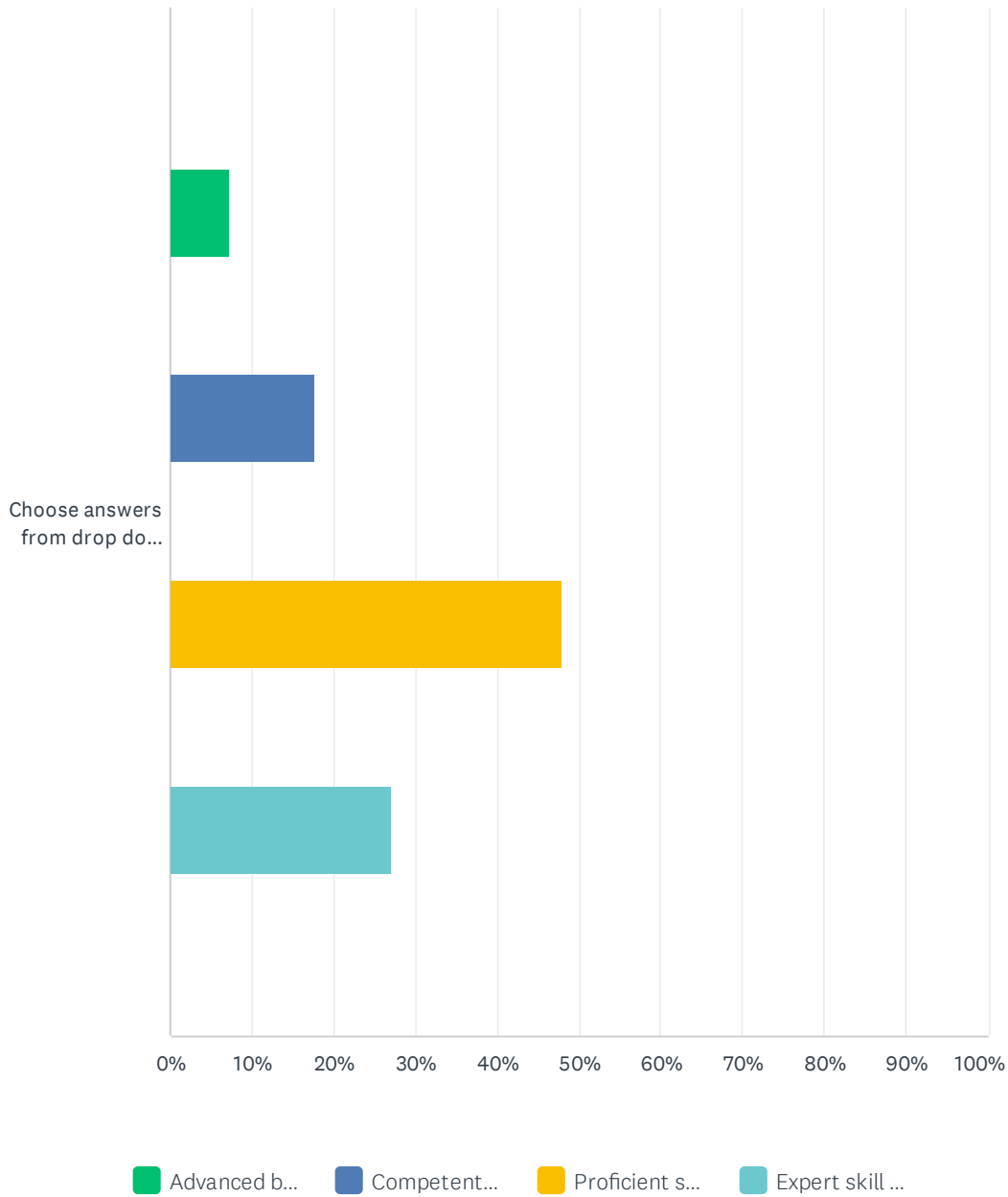
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.80% 2	5.98% 15	12.75% 32	35.06% 88	45.42% 114	251

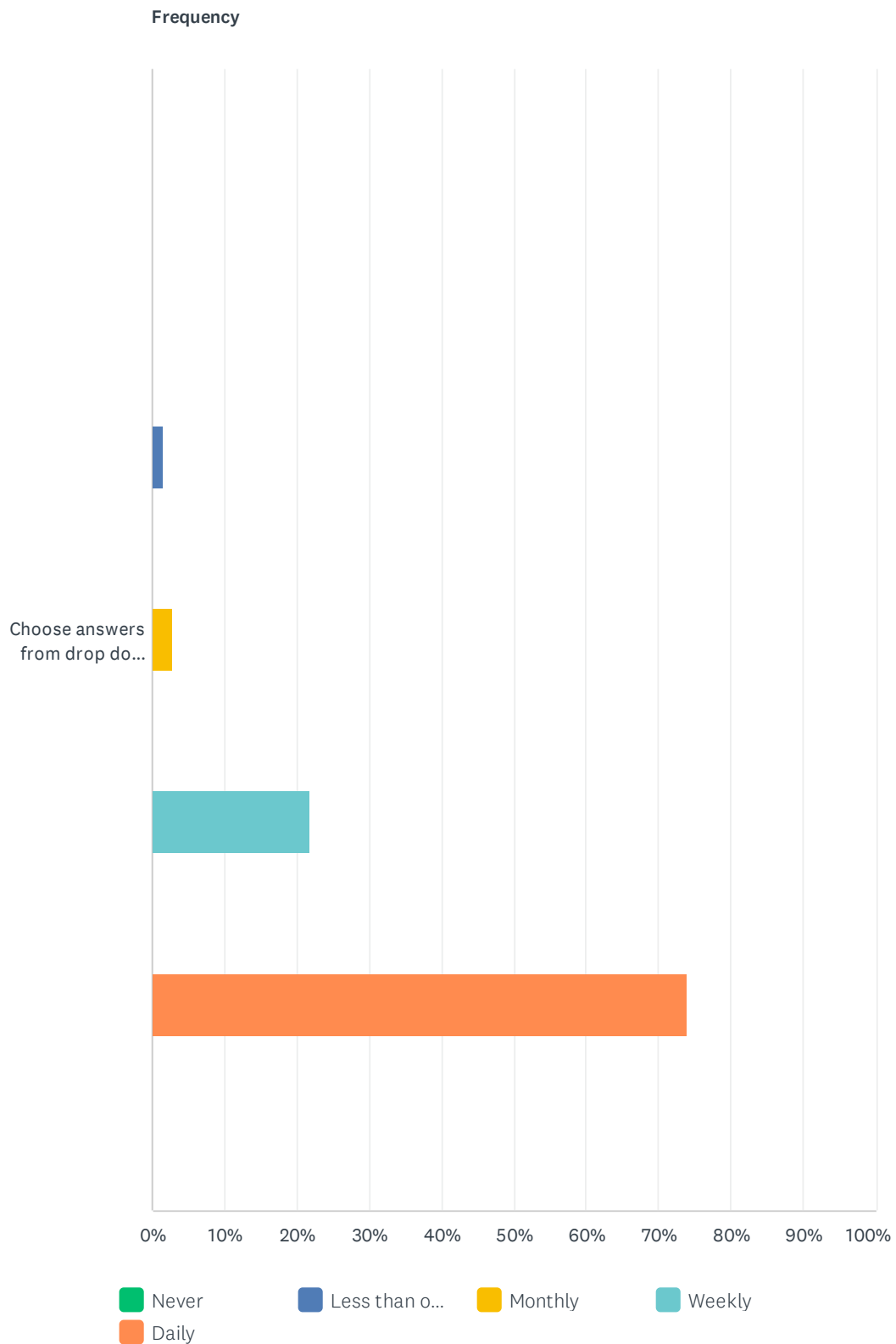
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	7.82% 19	46.91% 114	45.27% 110	243

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.20% 17	17.80% 42	47.88% 113	27.12% 64	236

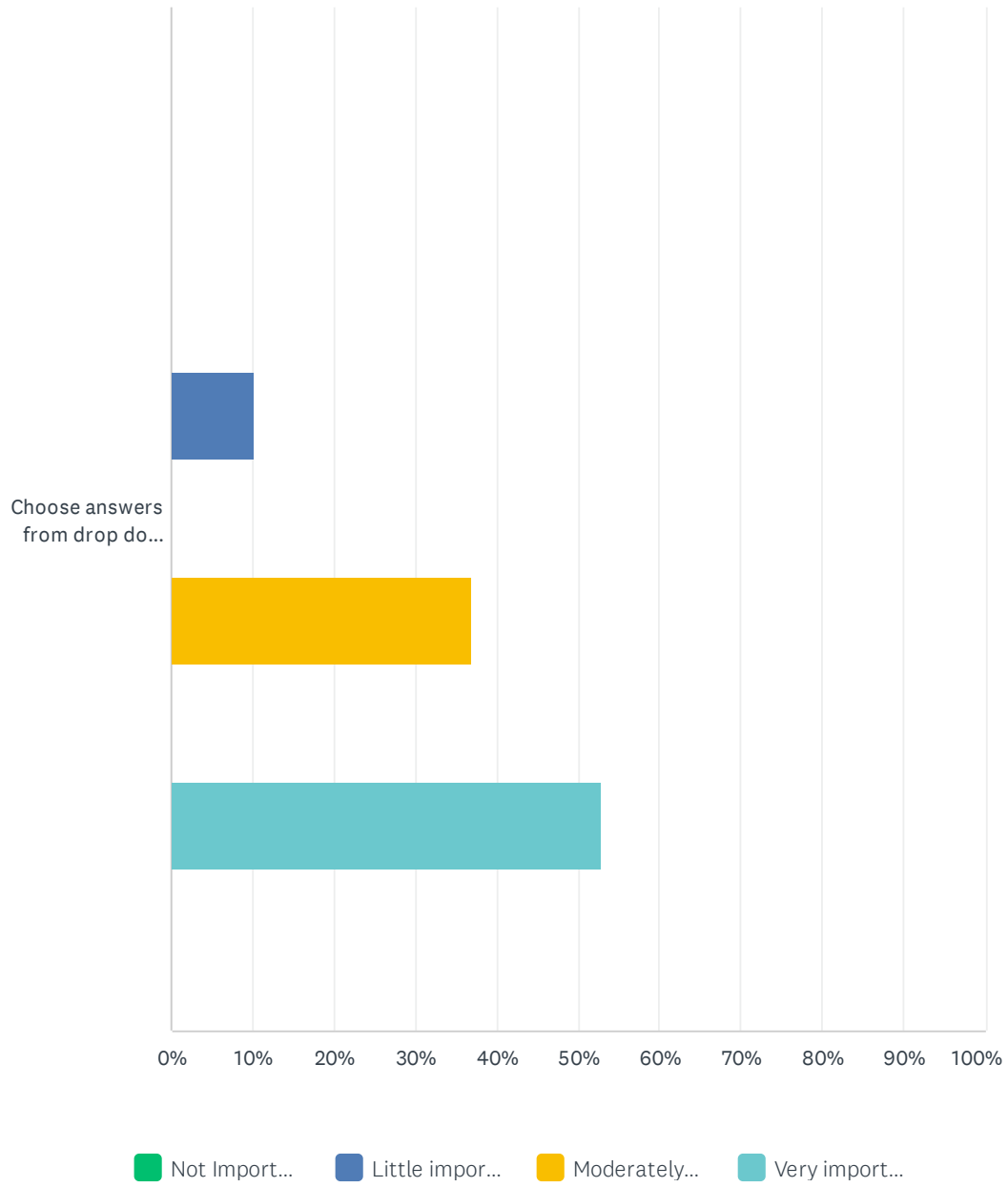
Q109 3.1.5.19 Posture (e.g., assessment of body or body segment(s) structure, alignment, changes in different positions, body contours).

Answered: 253 Skipped: 957



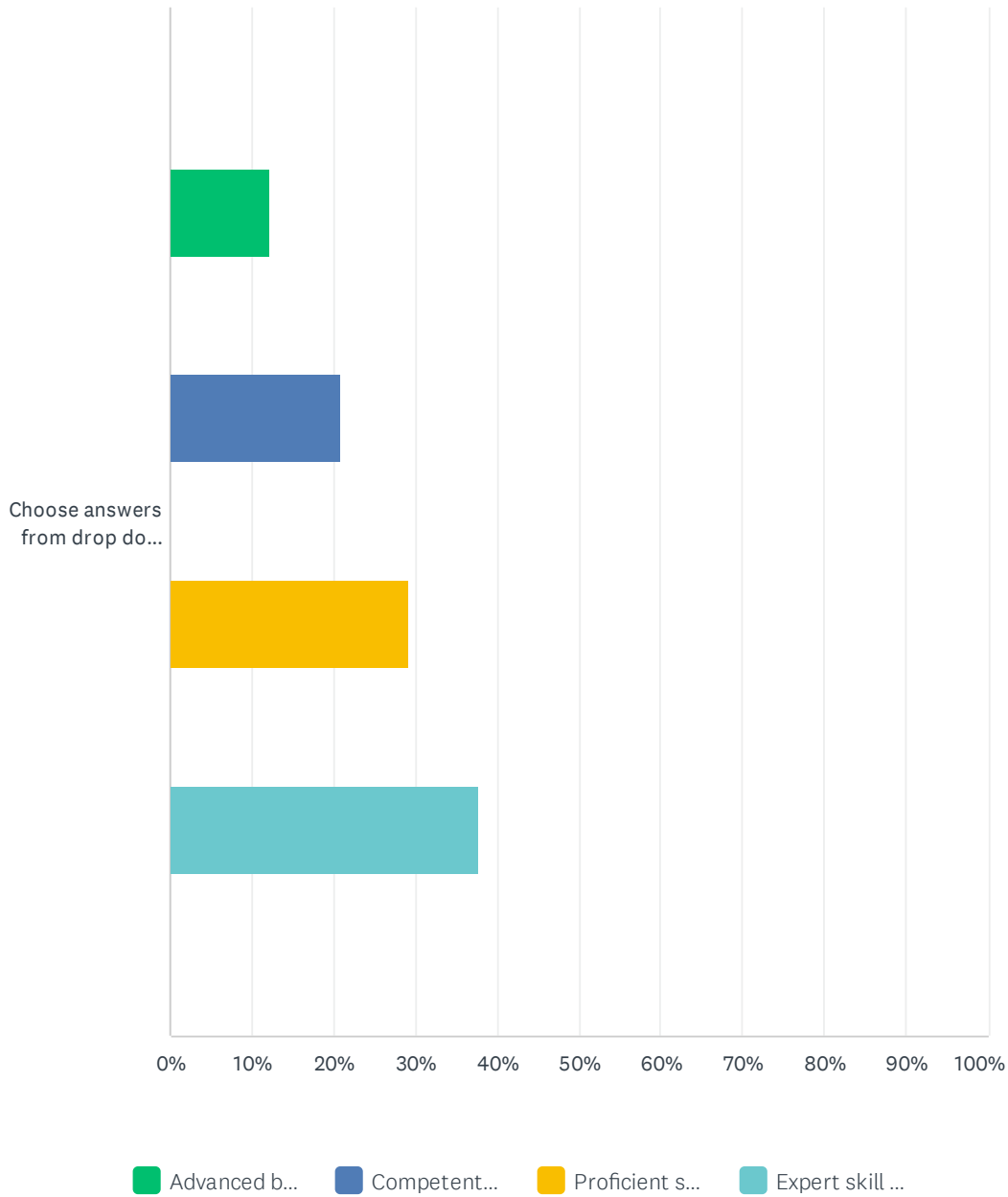
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.58% 4	2.77% 7	21.74% 55	73.91% 187	253

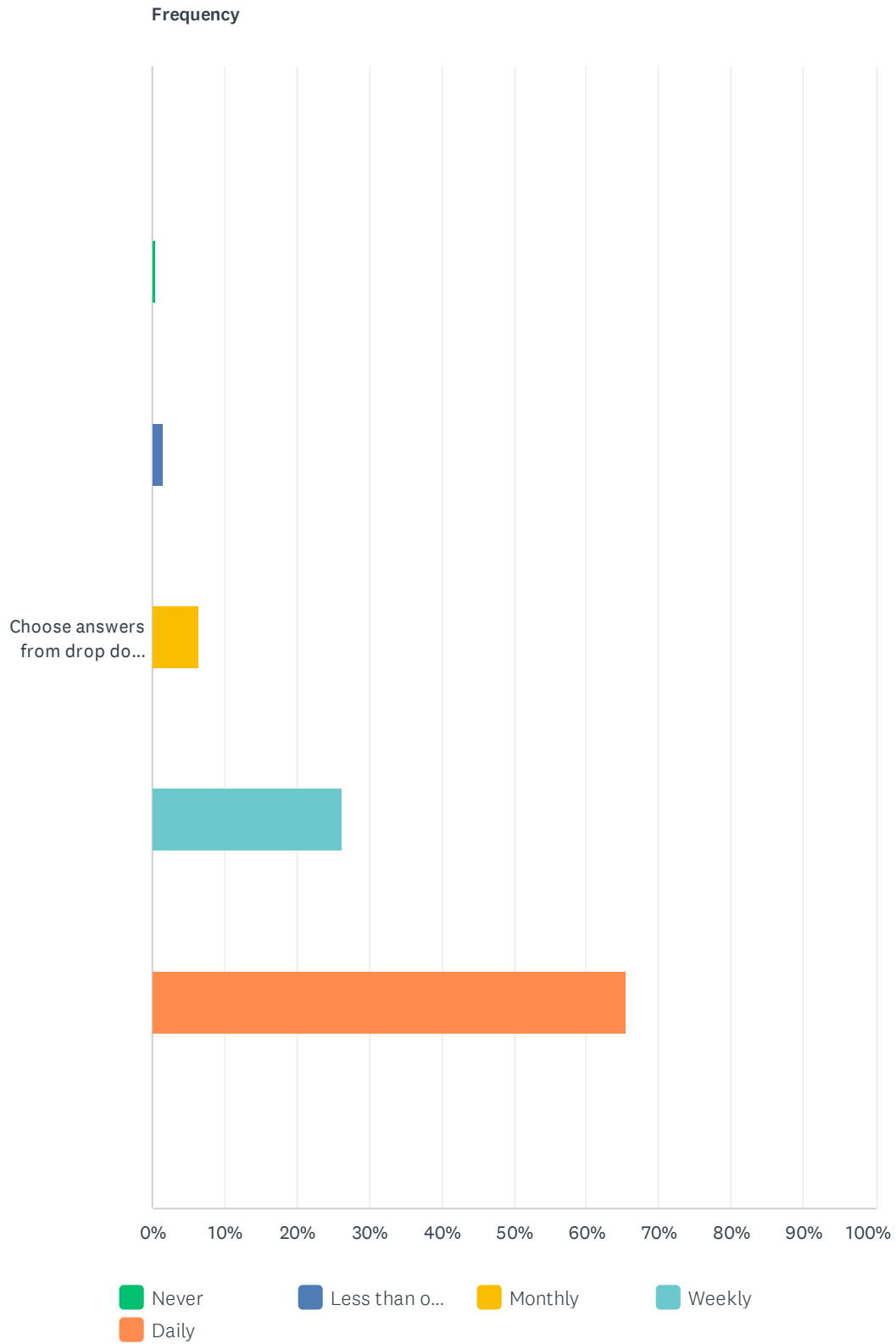
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	10.16% 25	36.99% 91	52.85% 130	246

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.13% 29	20.92% 50	29.29% 70	37.66% 90	239

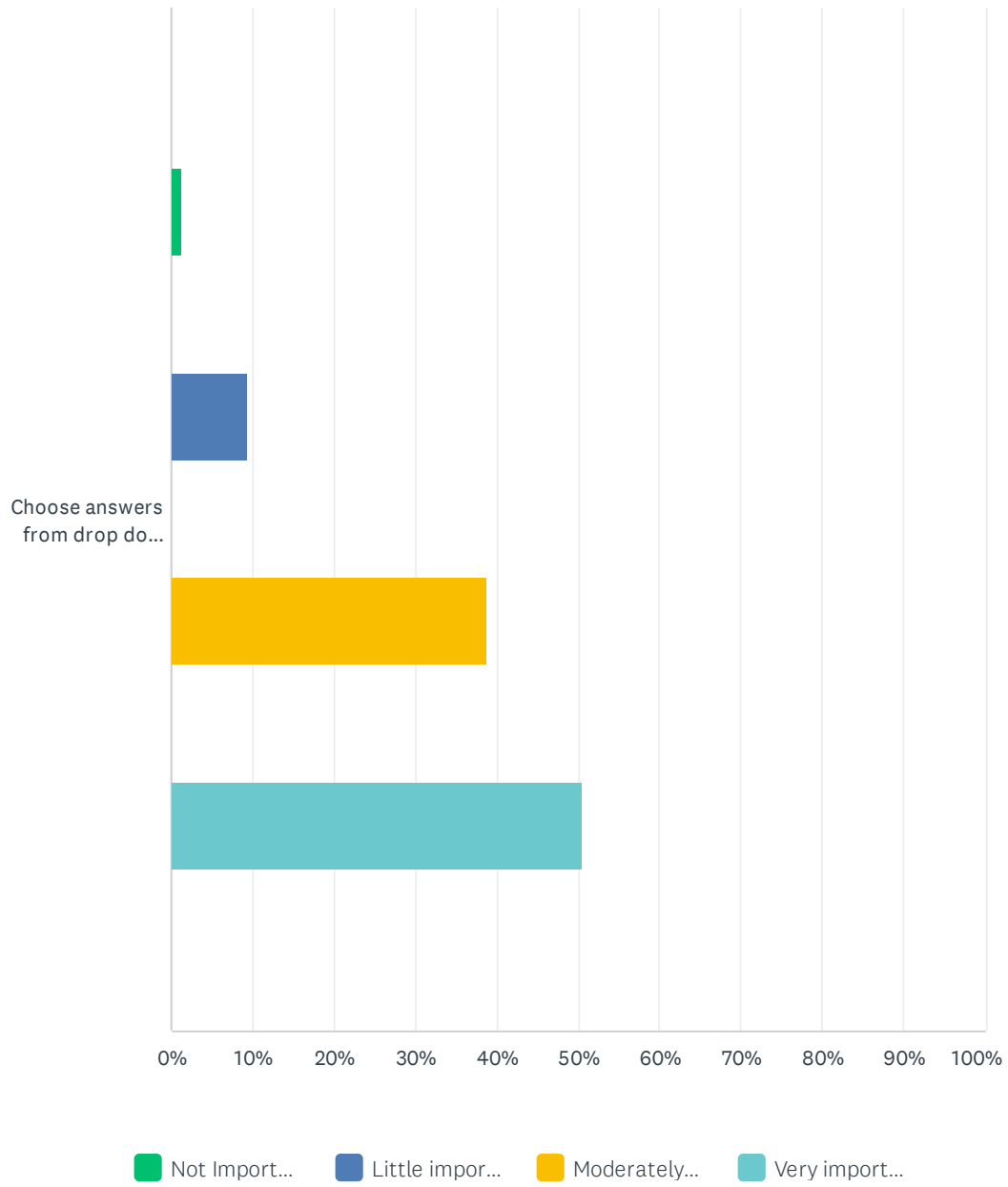
Q110 3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests).

Answered: 252 Skipped: 958



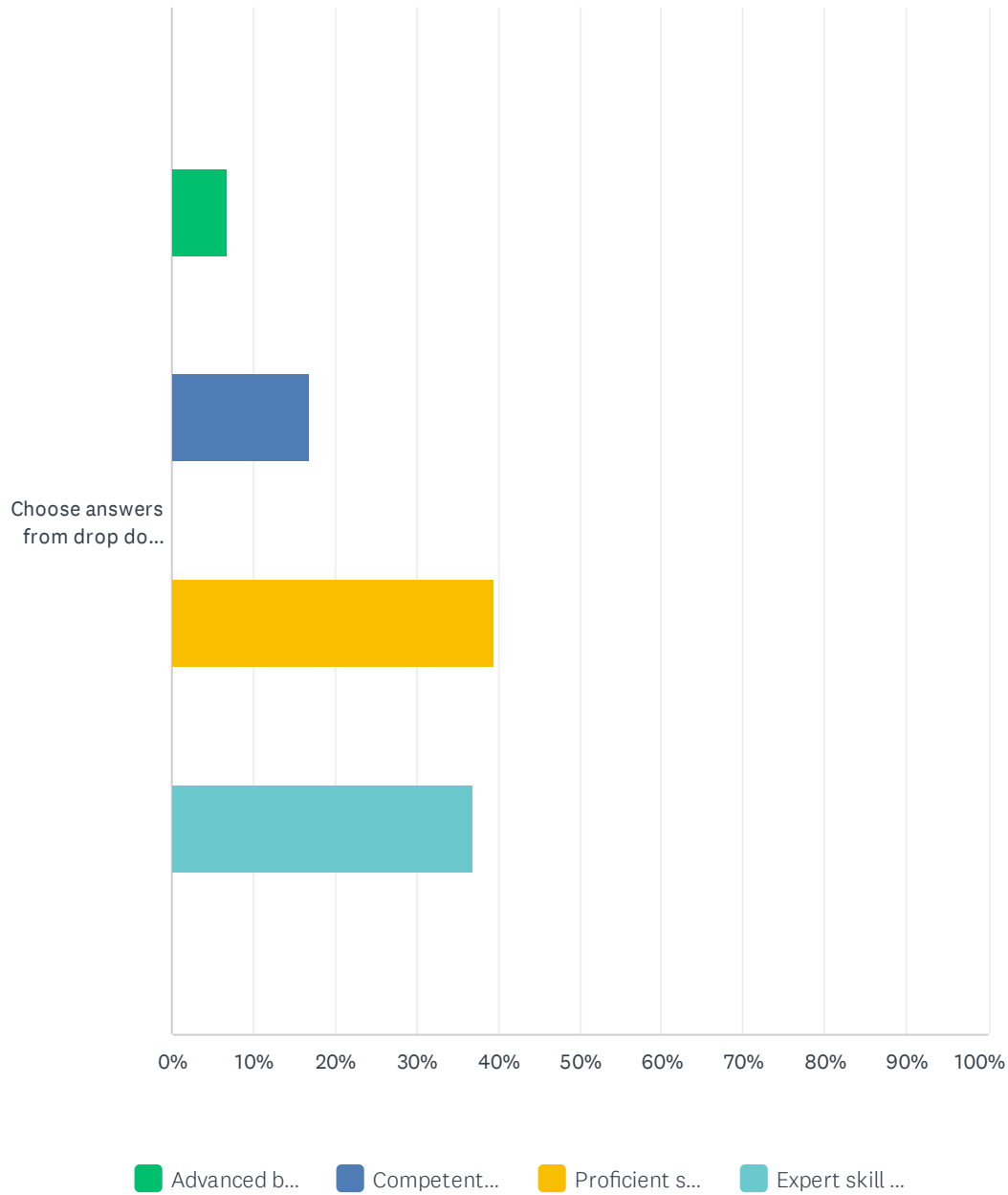
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.40% 1	1.59% 4	6.35% 16	26.19% 66	65.48% 165	252

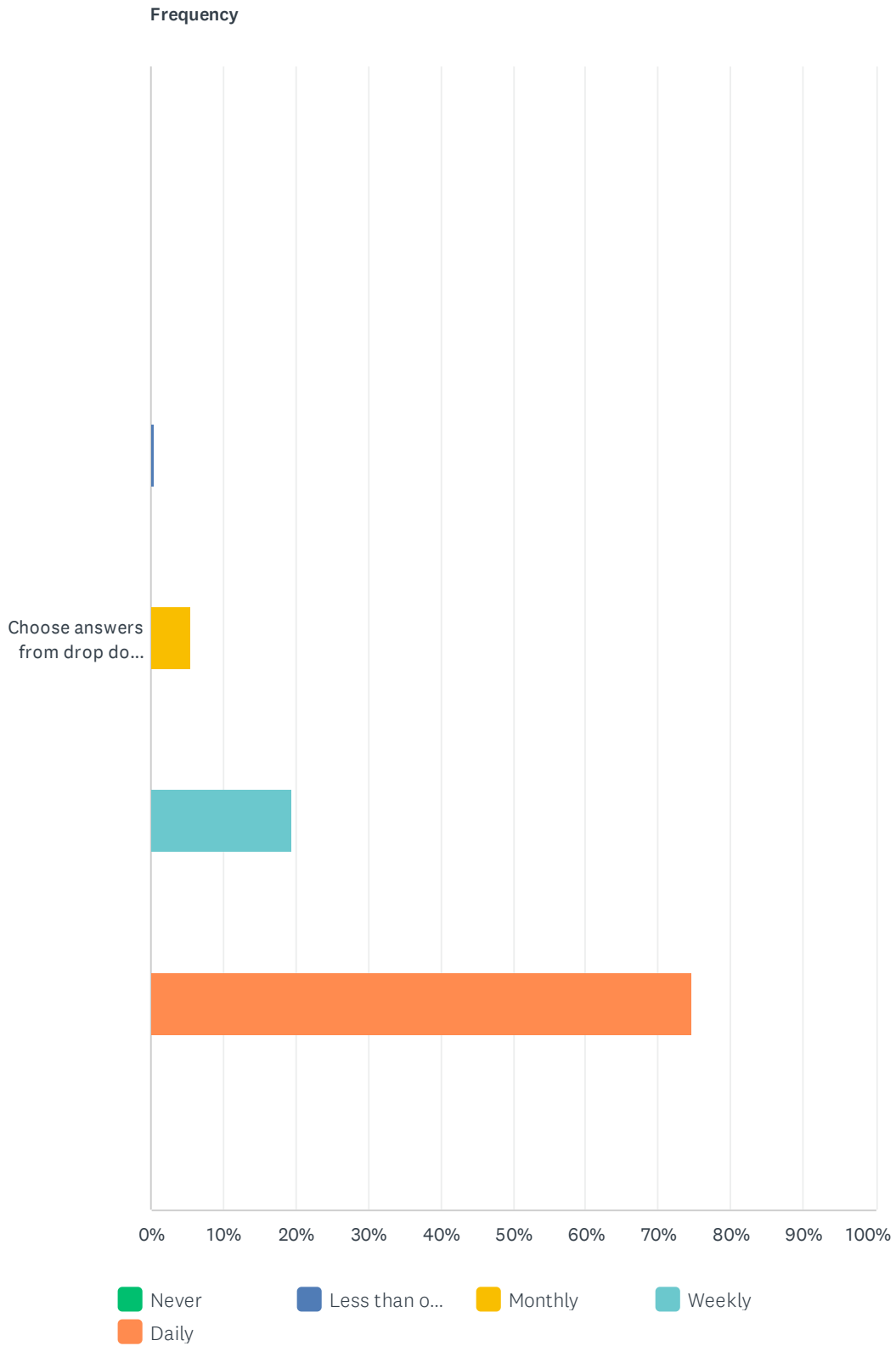
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.22% 3	9.39% 23	38.78% 95	50.61% 124	245

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.72% 16	16.81% 40	39.50% 94	36.97% 88	238

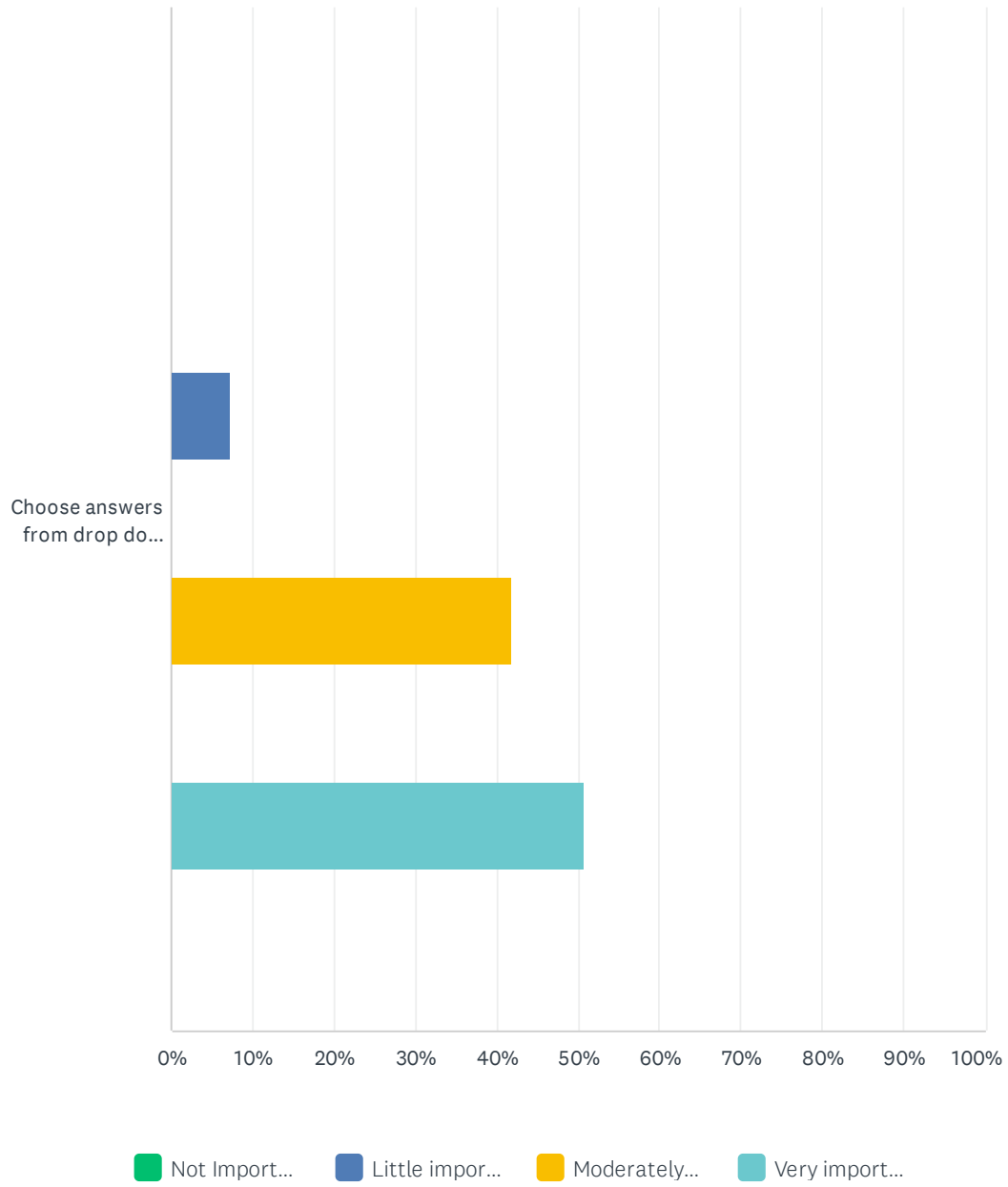
Q111 3.1.5.21 Flexibility (e.g., length, stiffness).

Answered: 253 Skipped: 957



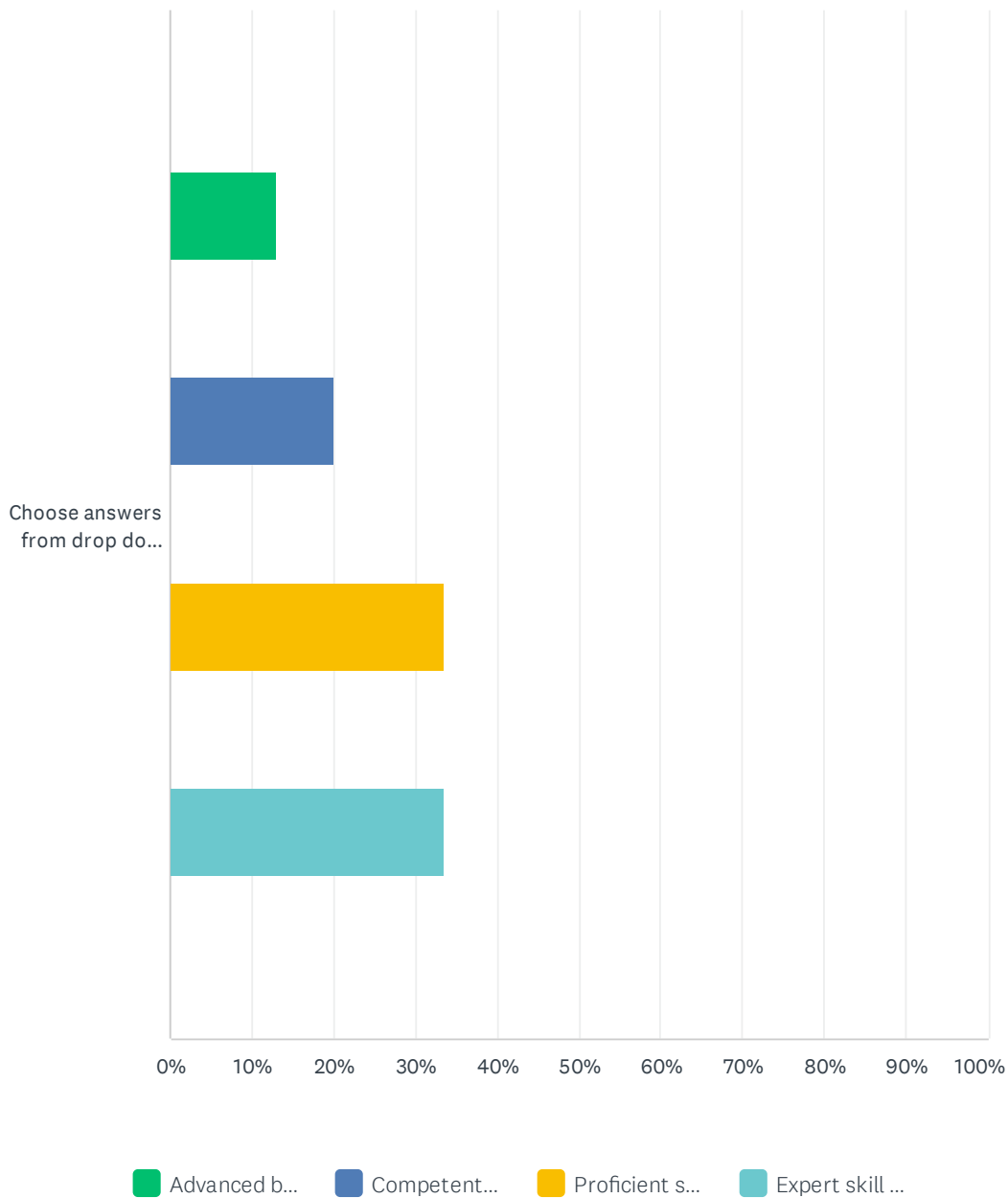
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.40% 1	5.53% 14	19.37% 49	74.70% 189	253

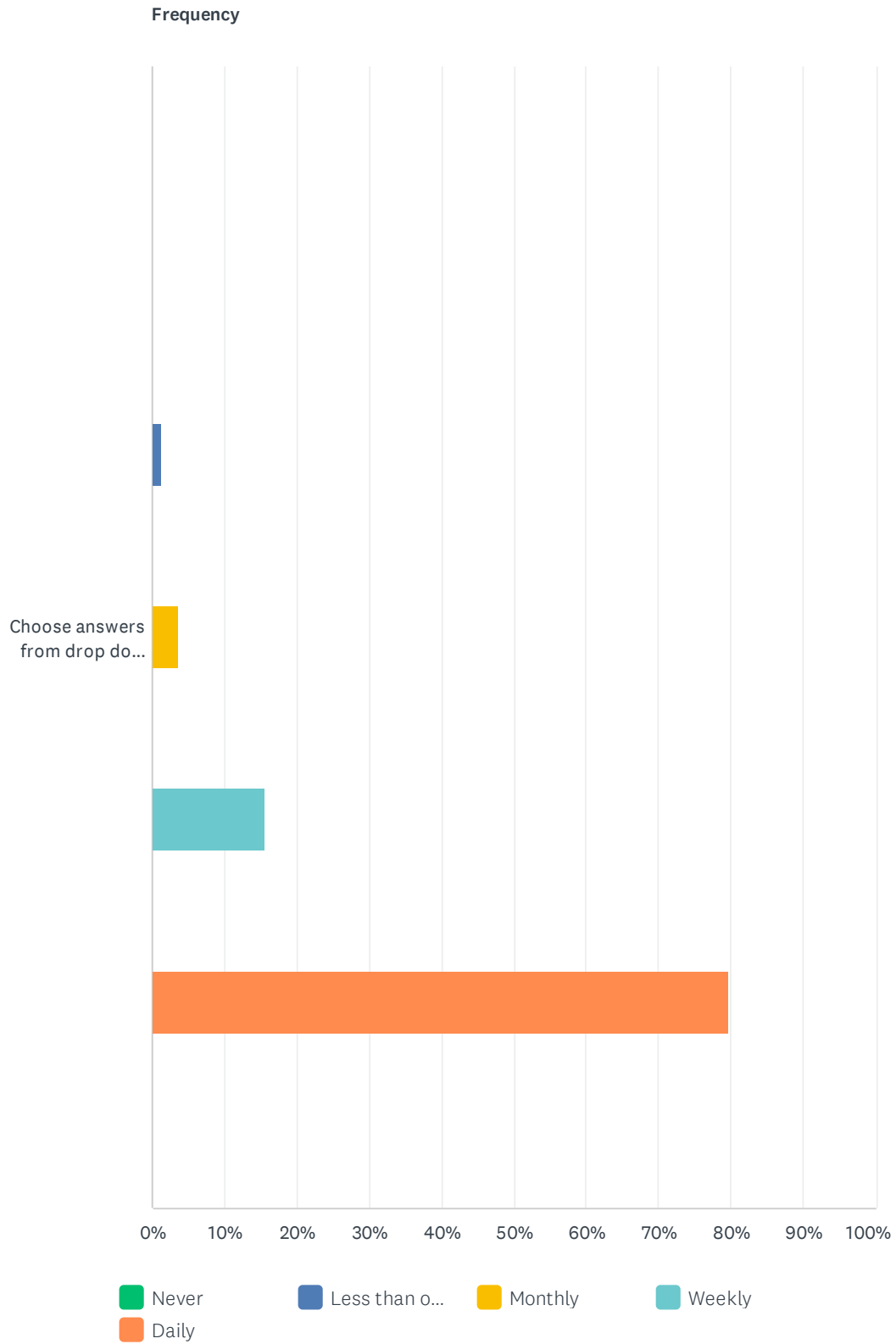
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	7.32% 18	41.87% 103	50.81% 125	246

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.97% 31	20.08% 48	33.47% 80	33.47% 80	239

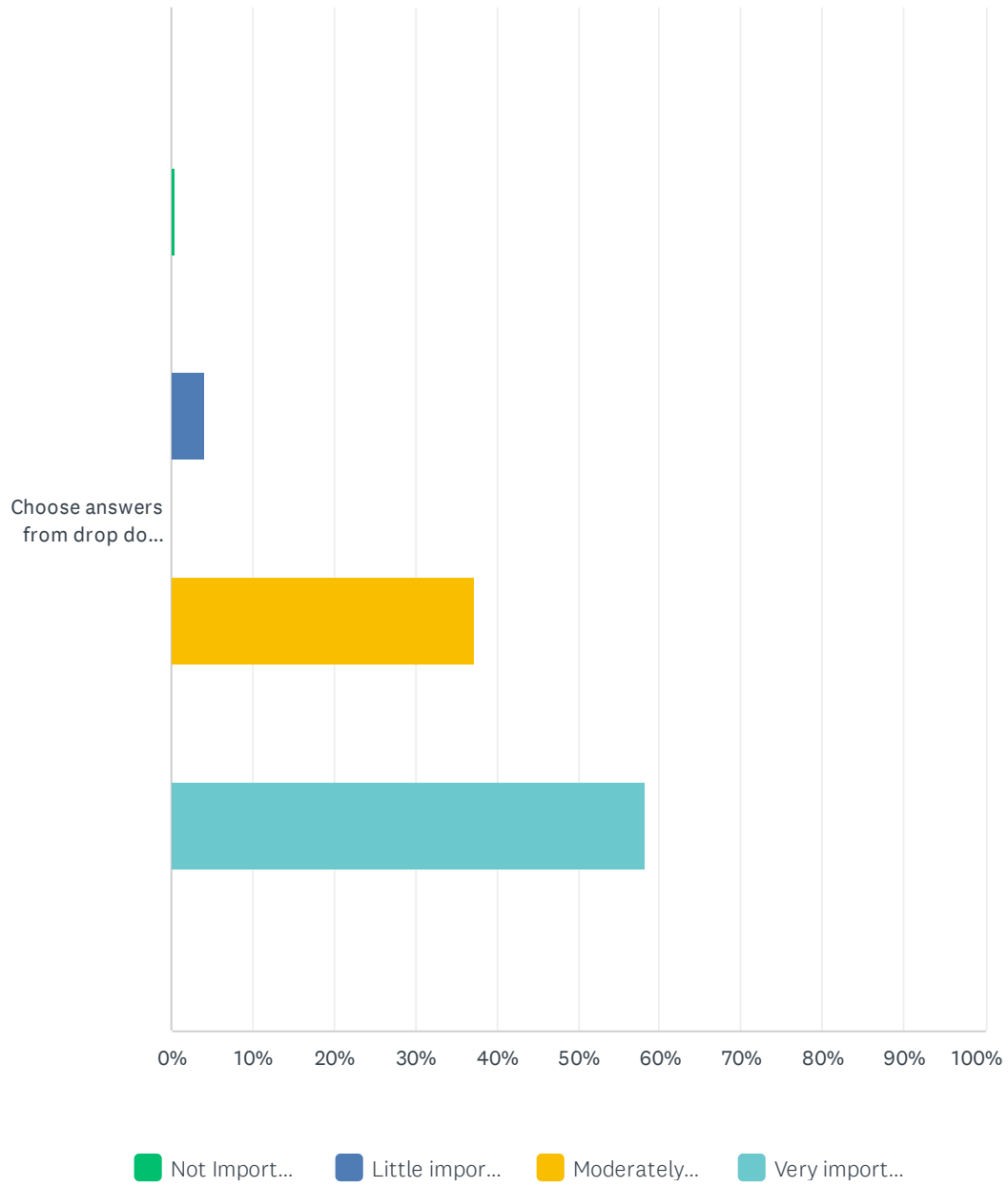
Q112 3.1.5.22 Soft tissue quality (e.g., mobility, provocation).

Answered: 251 Skipped: 959



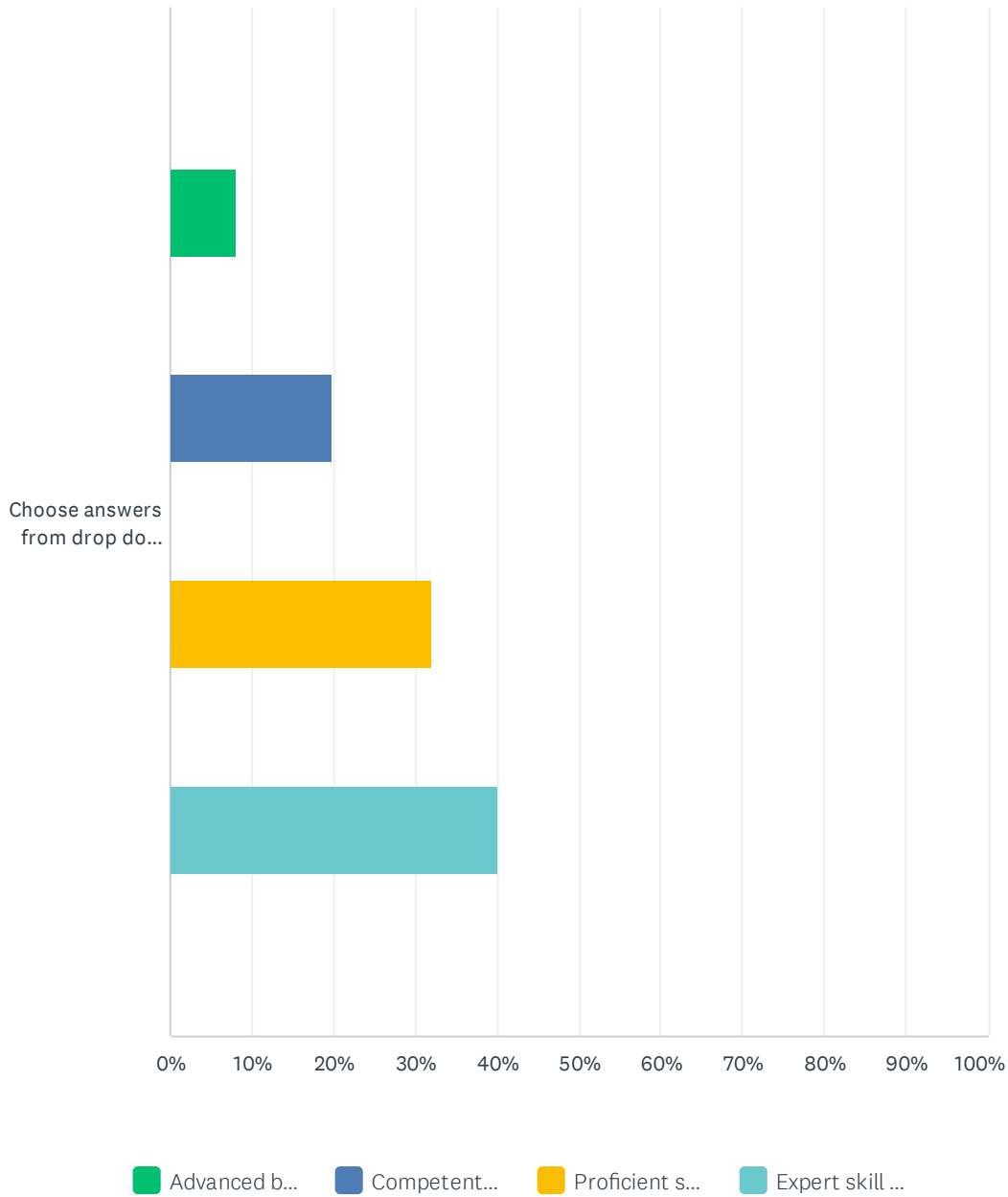
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.20% 3	3.59% 9	15.54% 39	79.68% 200	251

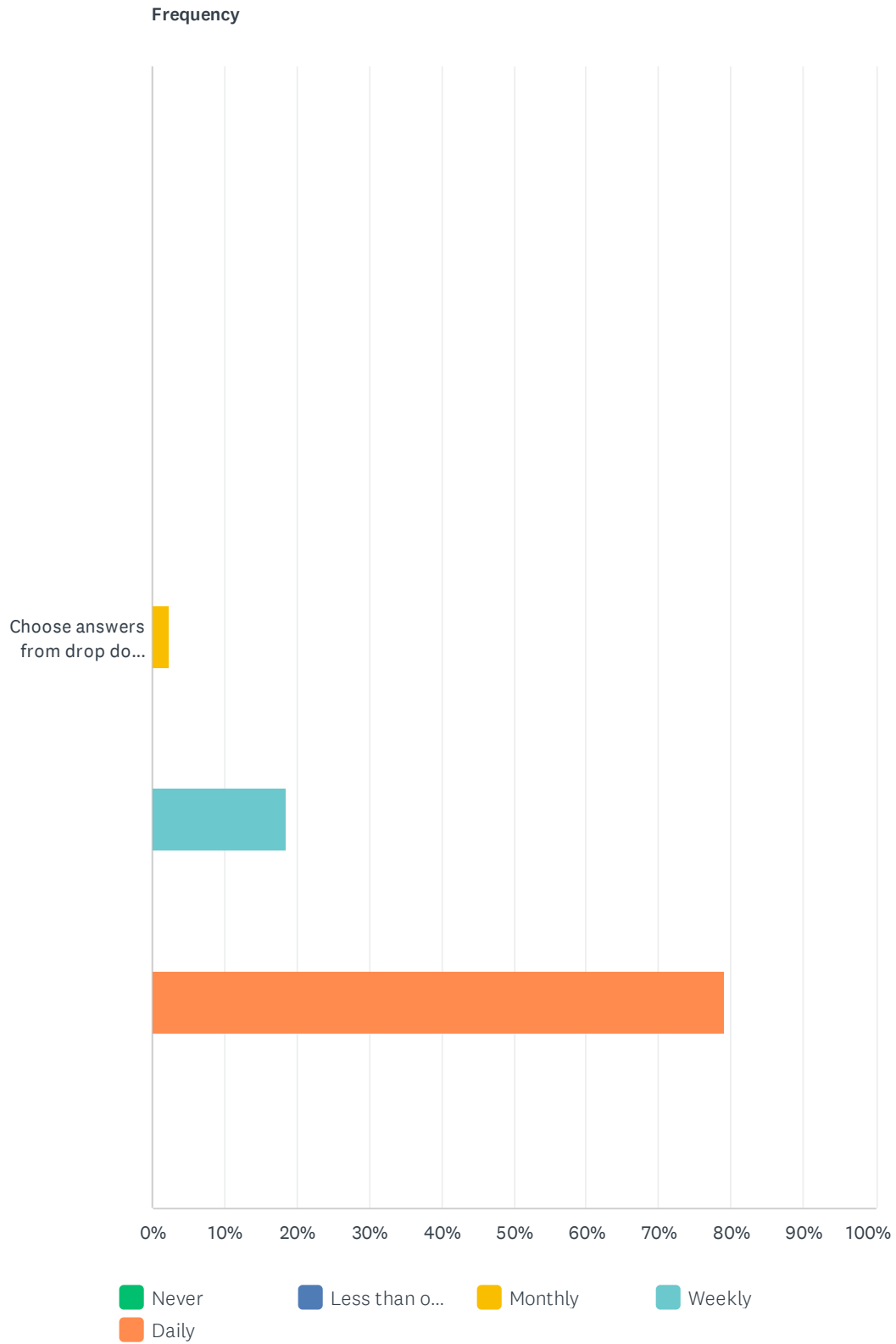
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.41% 1	4.10% 10	37.30% 91	58.20% 142	244

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	8.02% 19	19.83% 47	32.07% 76	40.08% 95	237

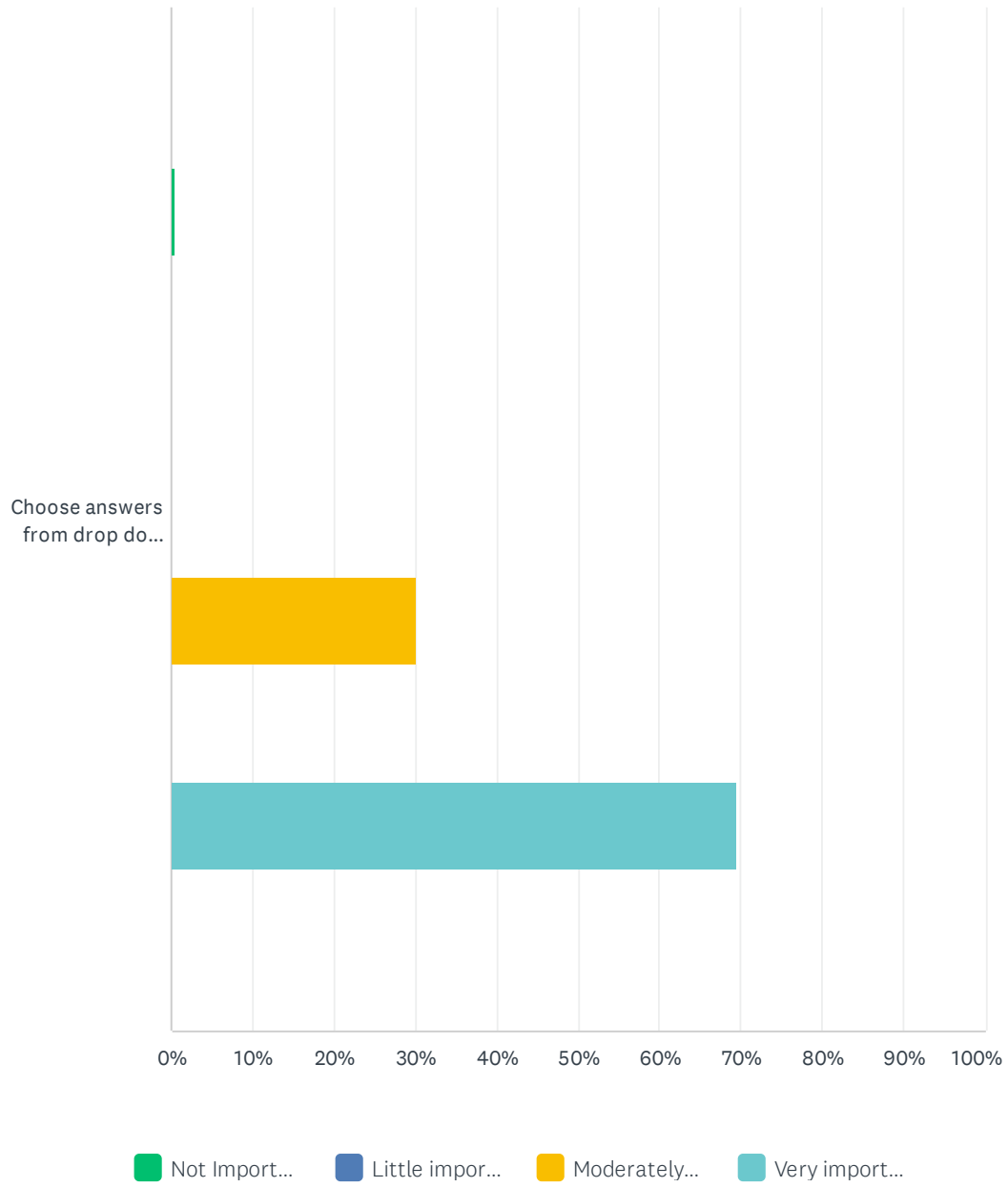
Q113 3.1.5.23 Task-specific activities (e.g., lifting, bending, reaching).

Answered: 253 Skipped: 957



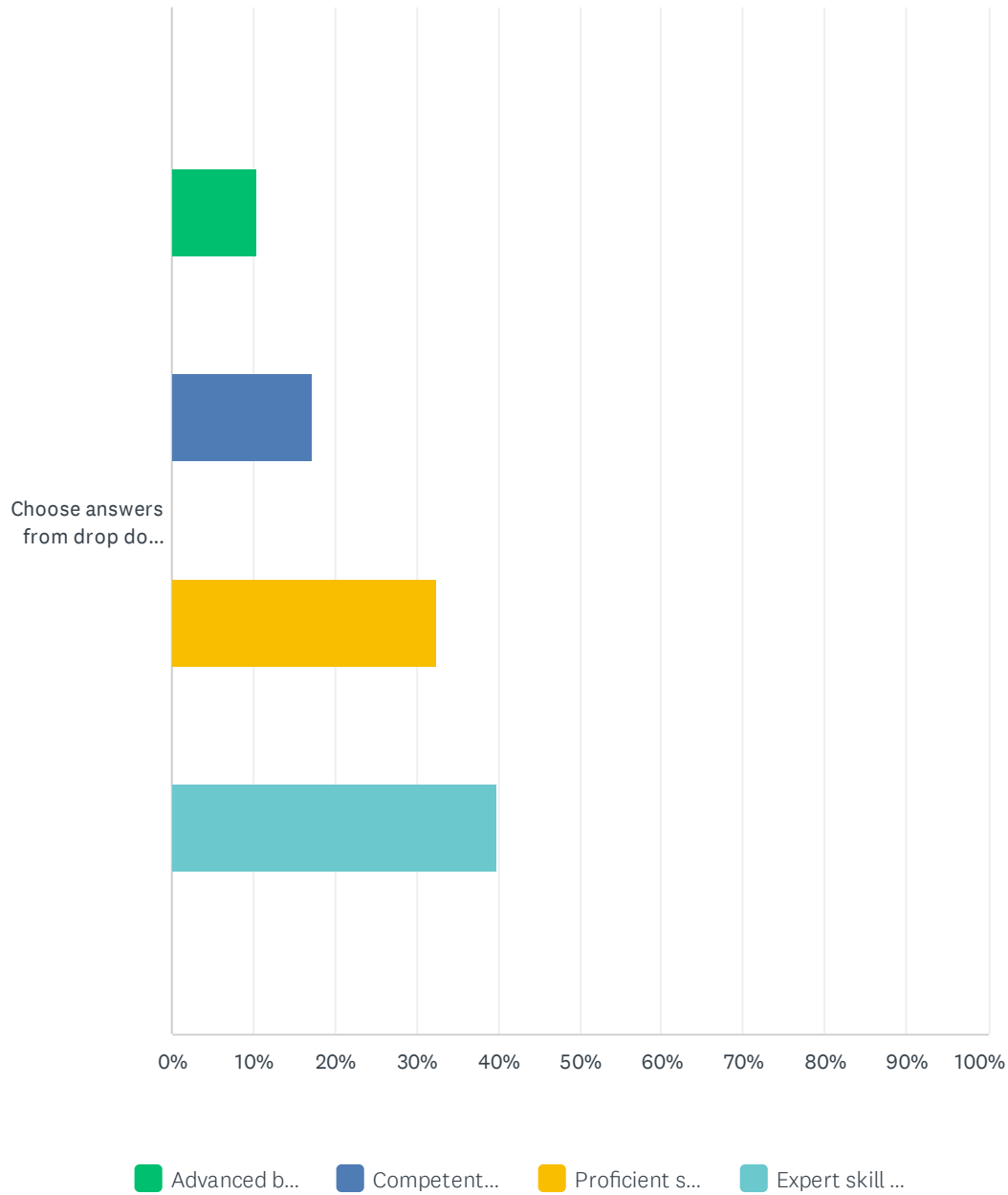
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	2.37% 6	18.58% 47	79.05% 200	253

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.41% 1	0.00% 0	30.08% 74	69.51% 171	246

Spine Validation Practice Analysis Survey 2022

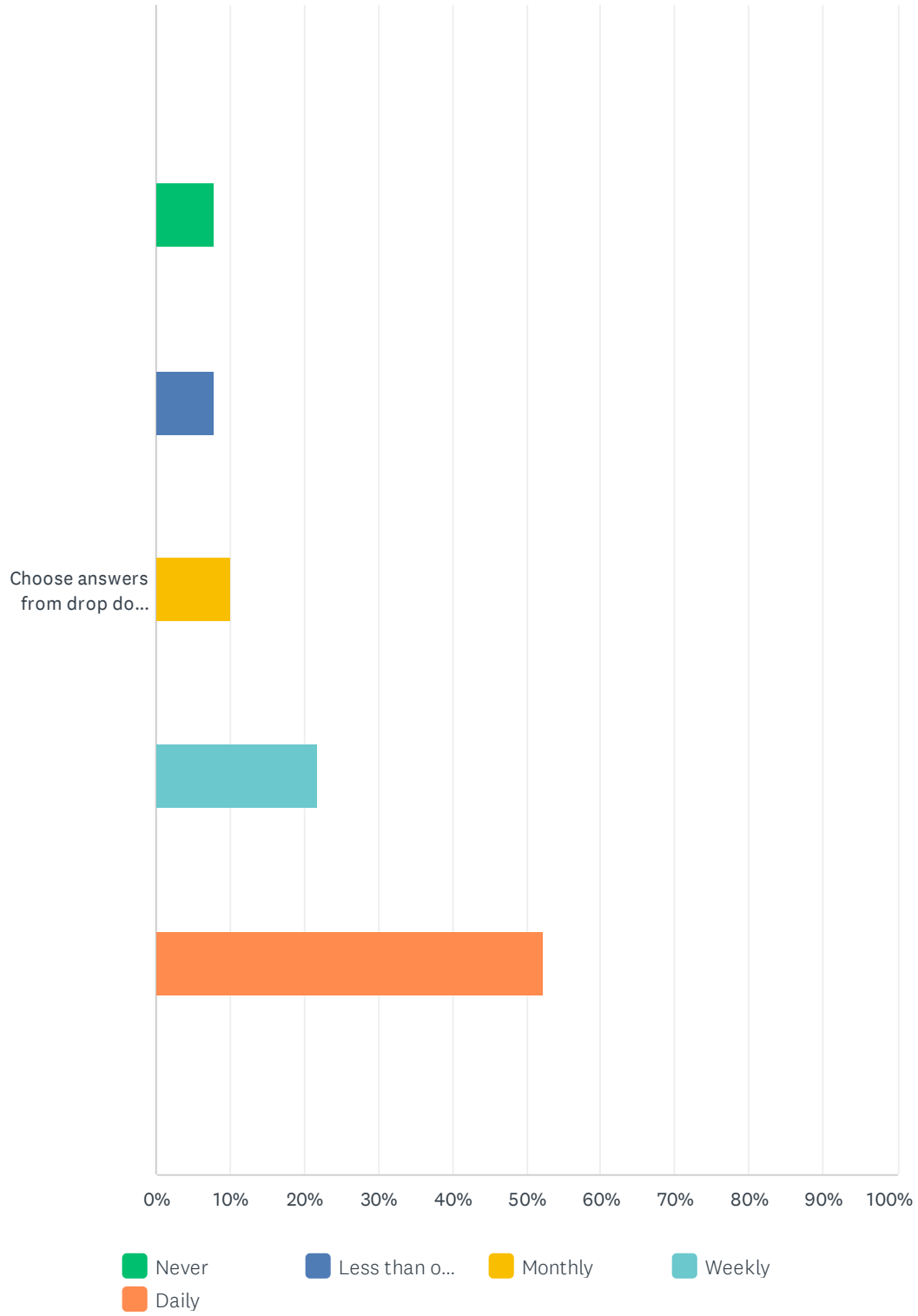
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.50% 25	17.23% 41	32.35% 77	39.92% 95	238

Q114 3.2.1 Using the International Classification of Functioning, Disability and Health (ICF) model to synthesize data from history, systems review, and physical examination (e.g., identify relevant, consistent, accurate data, prioritize impairments, assess patient's/client's needs, motivations and goals).

Answered: 239 Skipped: 971

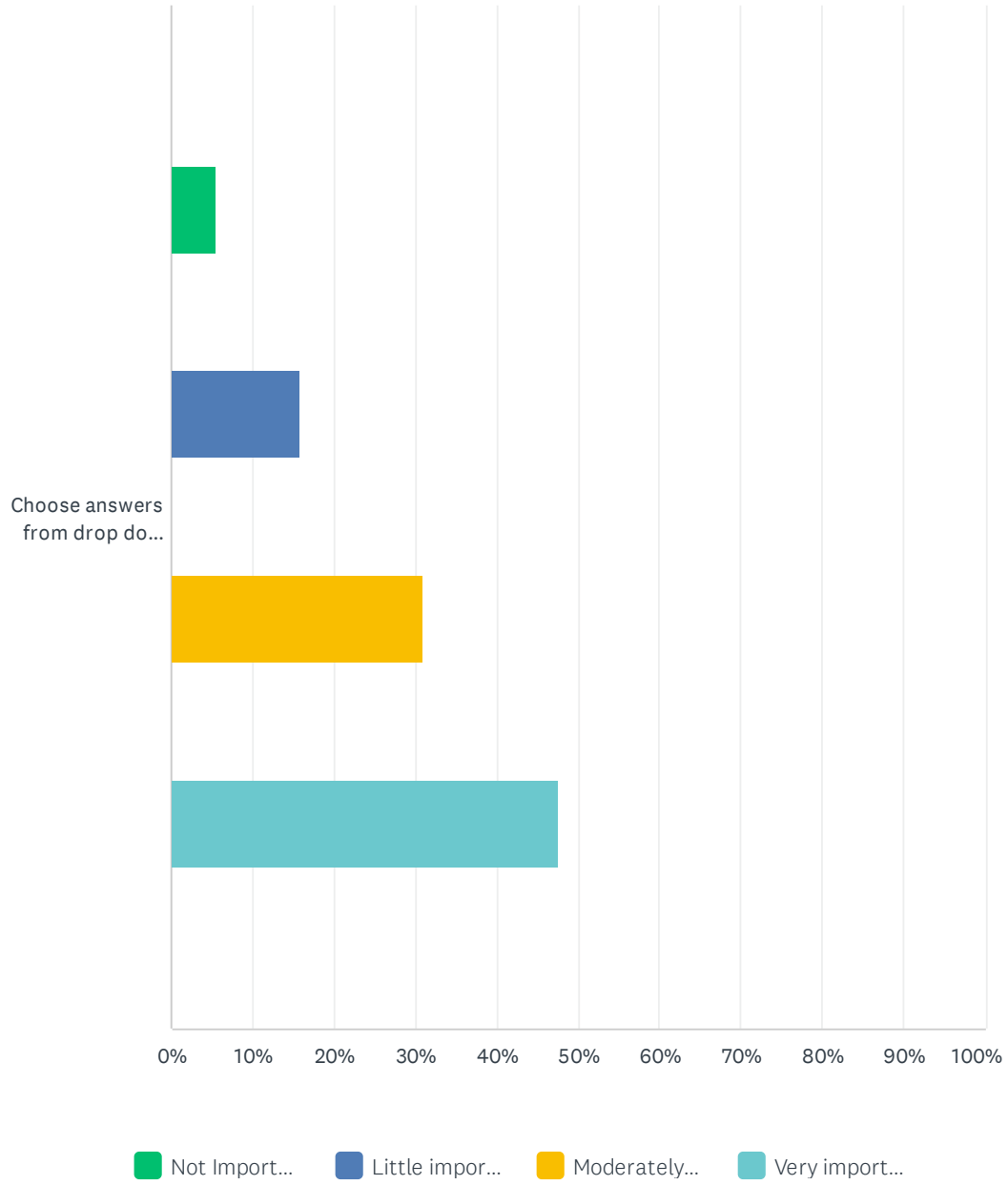
Spine Validation Practice Analysis Survey 2022

Frequency



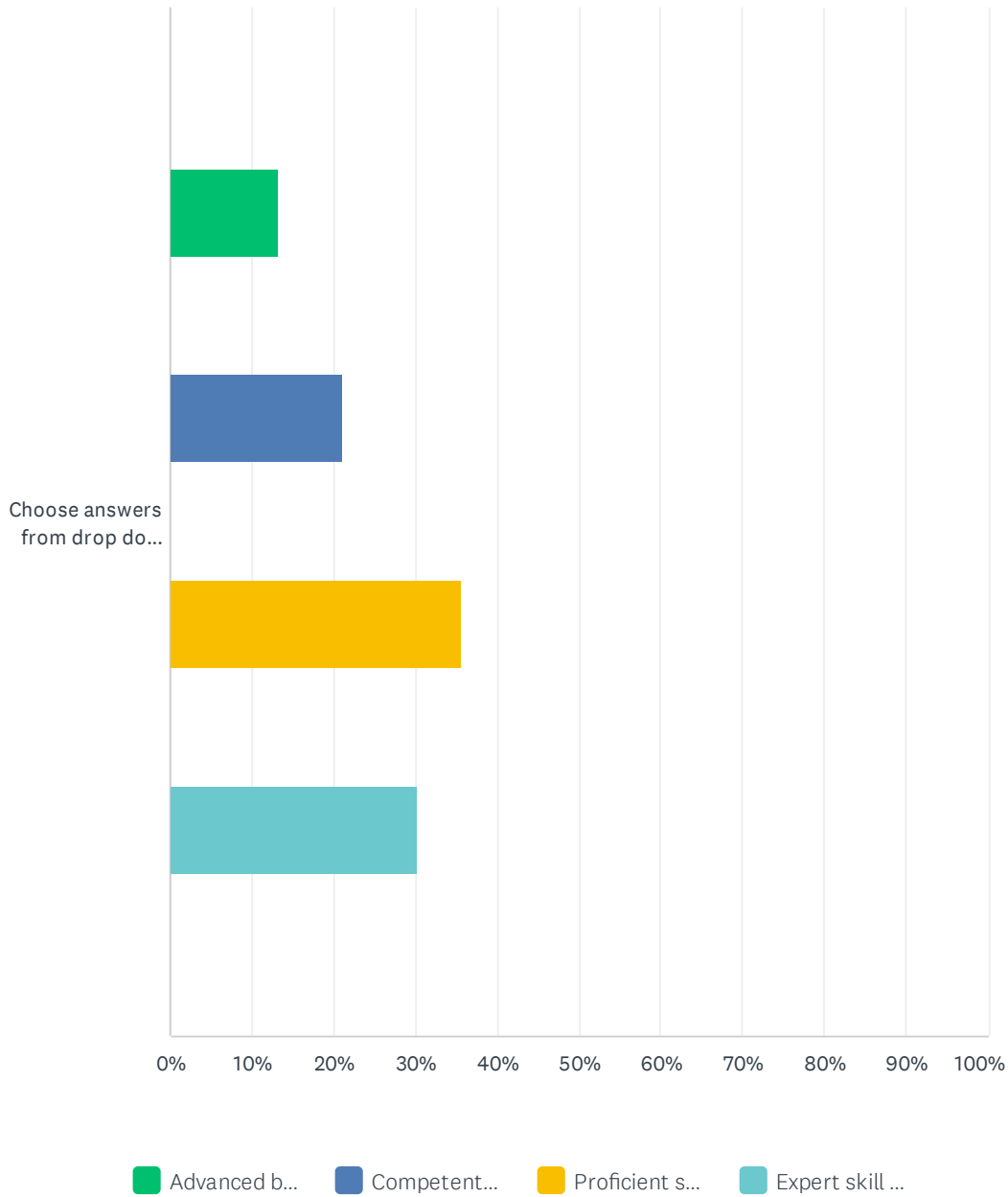
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	7.95% 19	7.95% 19	10.04% 24	21.76% 52	52.30% 125	239

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	5.58% 13	15.88% 37	30.90% 72	47.64% 111	233

Spine Validation Practice Analysis Survey 2022

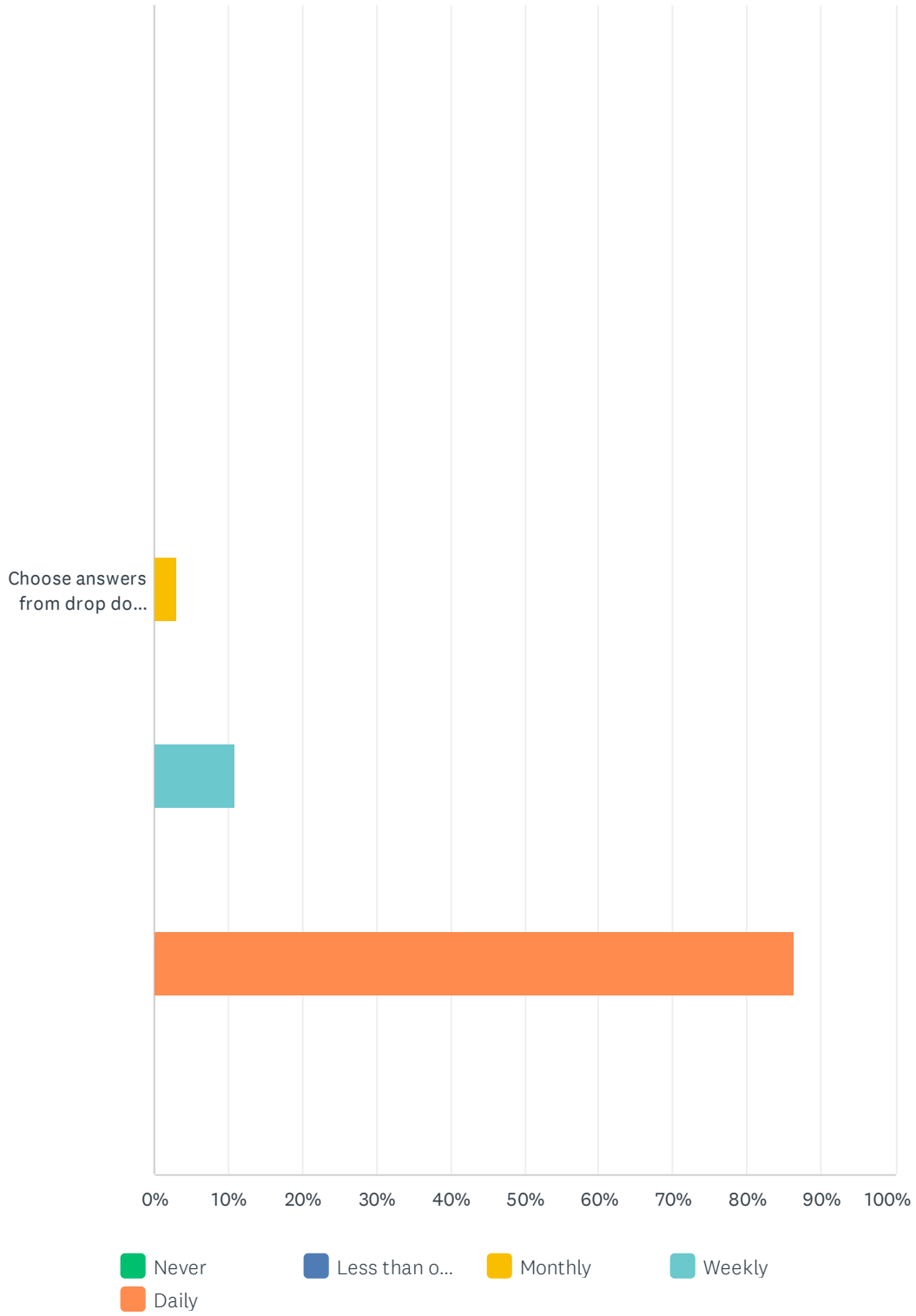
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	13.16% 30	21.05% 48	35.53% 81	30.26% 69	228

Q115 3.2.2 Developing a working diagnosis, including nature of complaint, probable cause, anatomical structures involved, stage of condition, pain mechanisms, psychosocial factors, and possible contraindications for physical therapy intervention.

Answered: 241 Skipped: 969

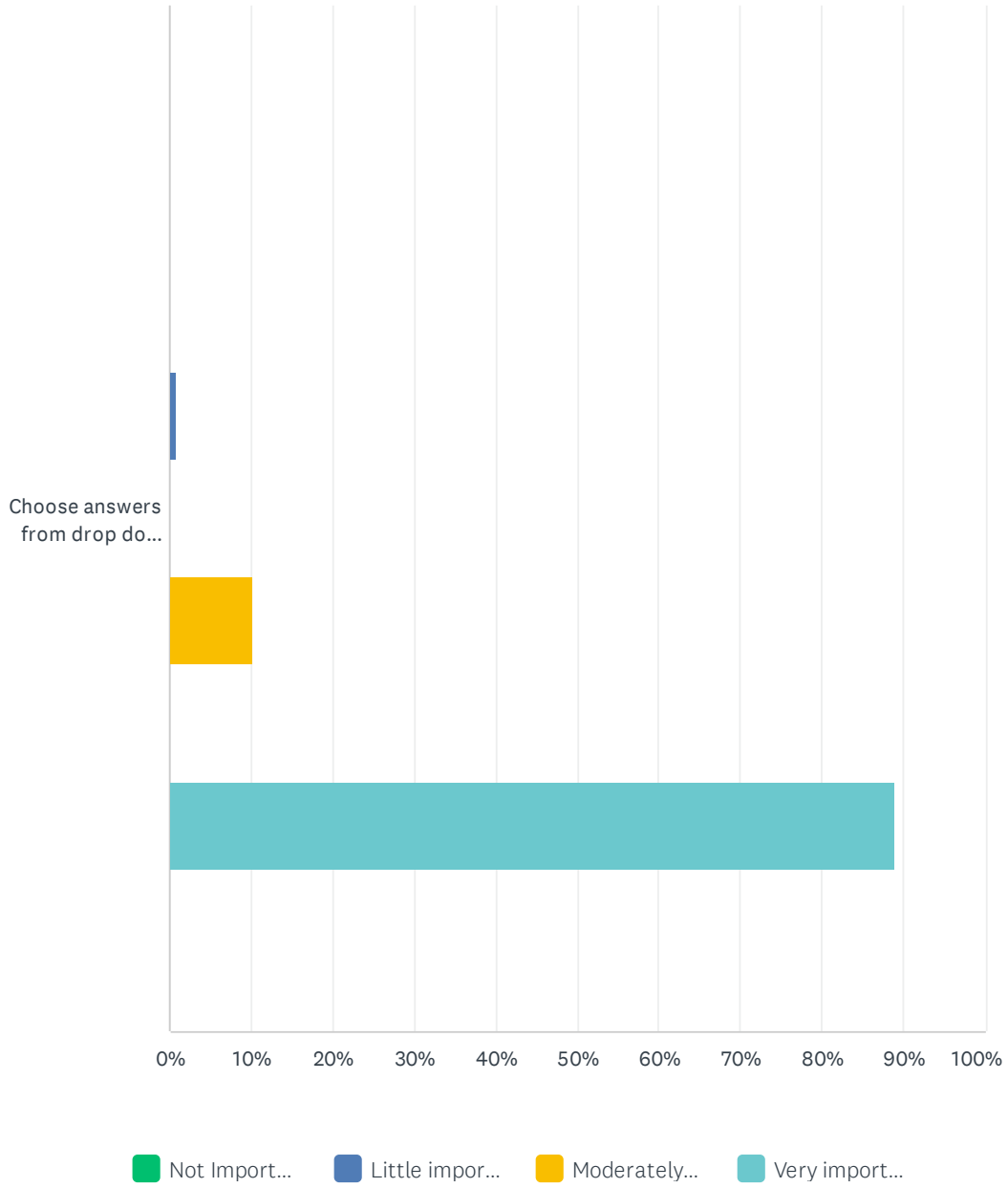
Spine Validation Practice Analysis Survey 2022

Frequency



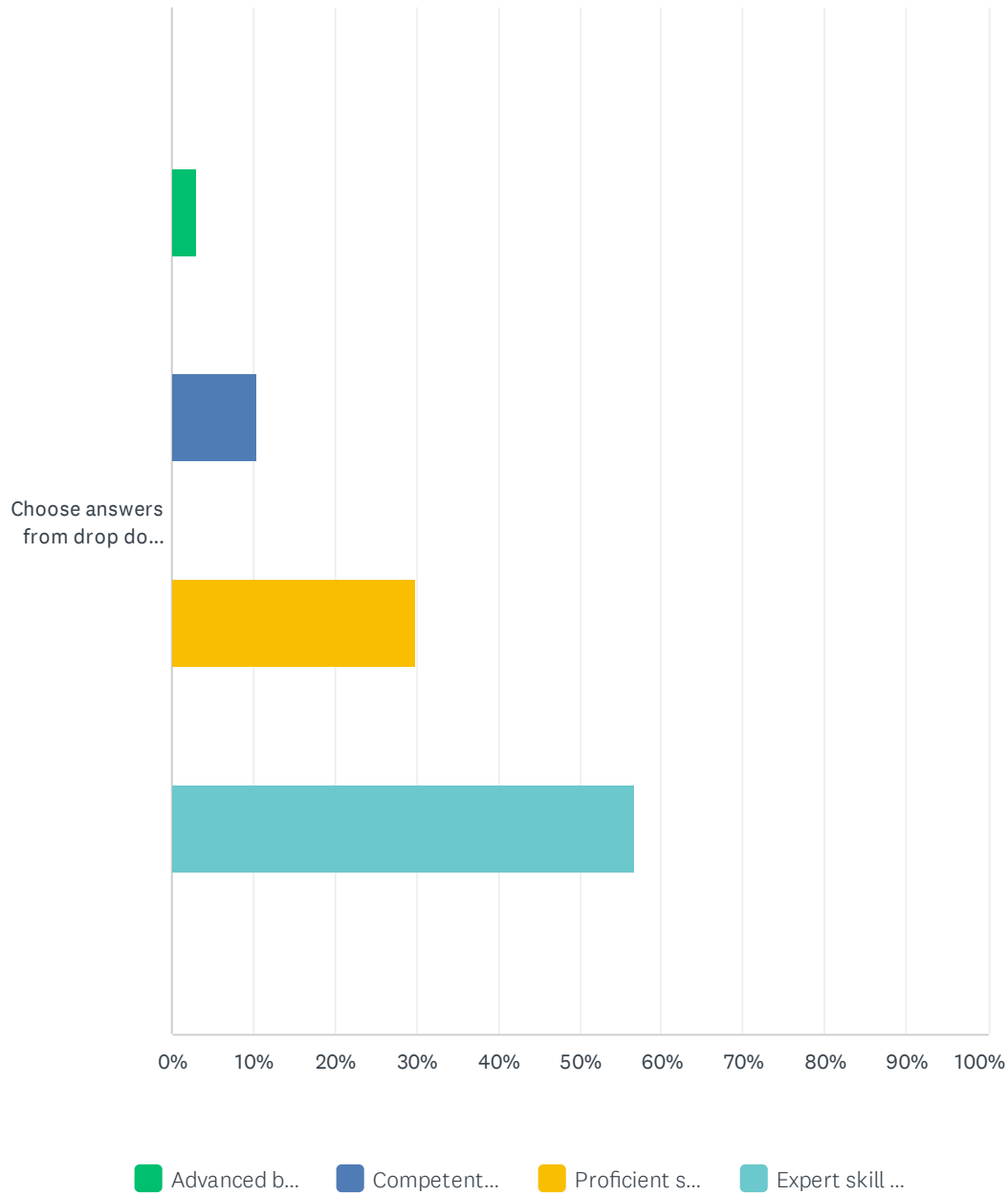
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	2.90% 7	10.79% 26	86.31% 208	241

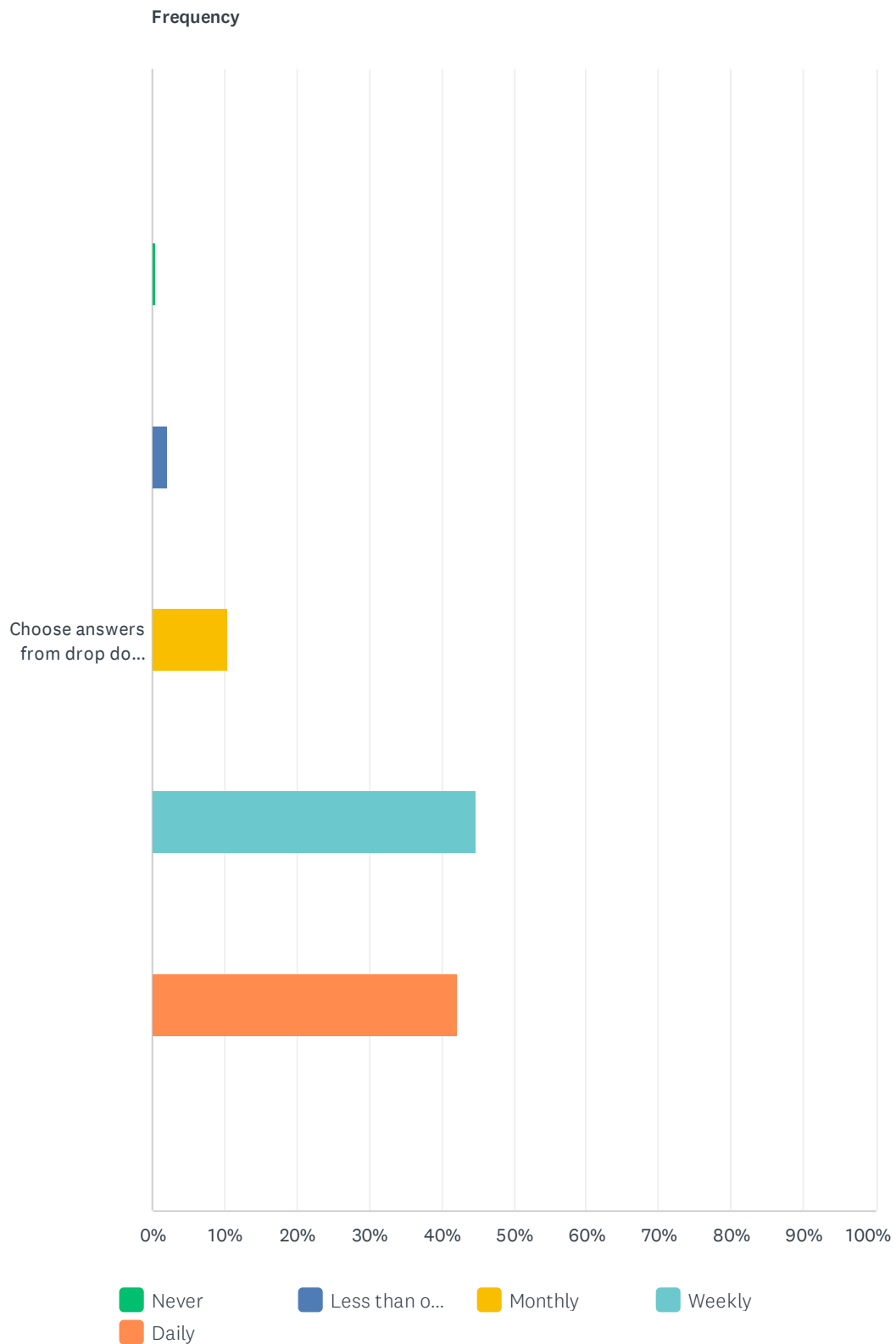
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.85% 2	10.21% 24	88.94% 209	235

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.03% 7	10.39% 24	29.87% 69	56.71% 131	231

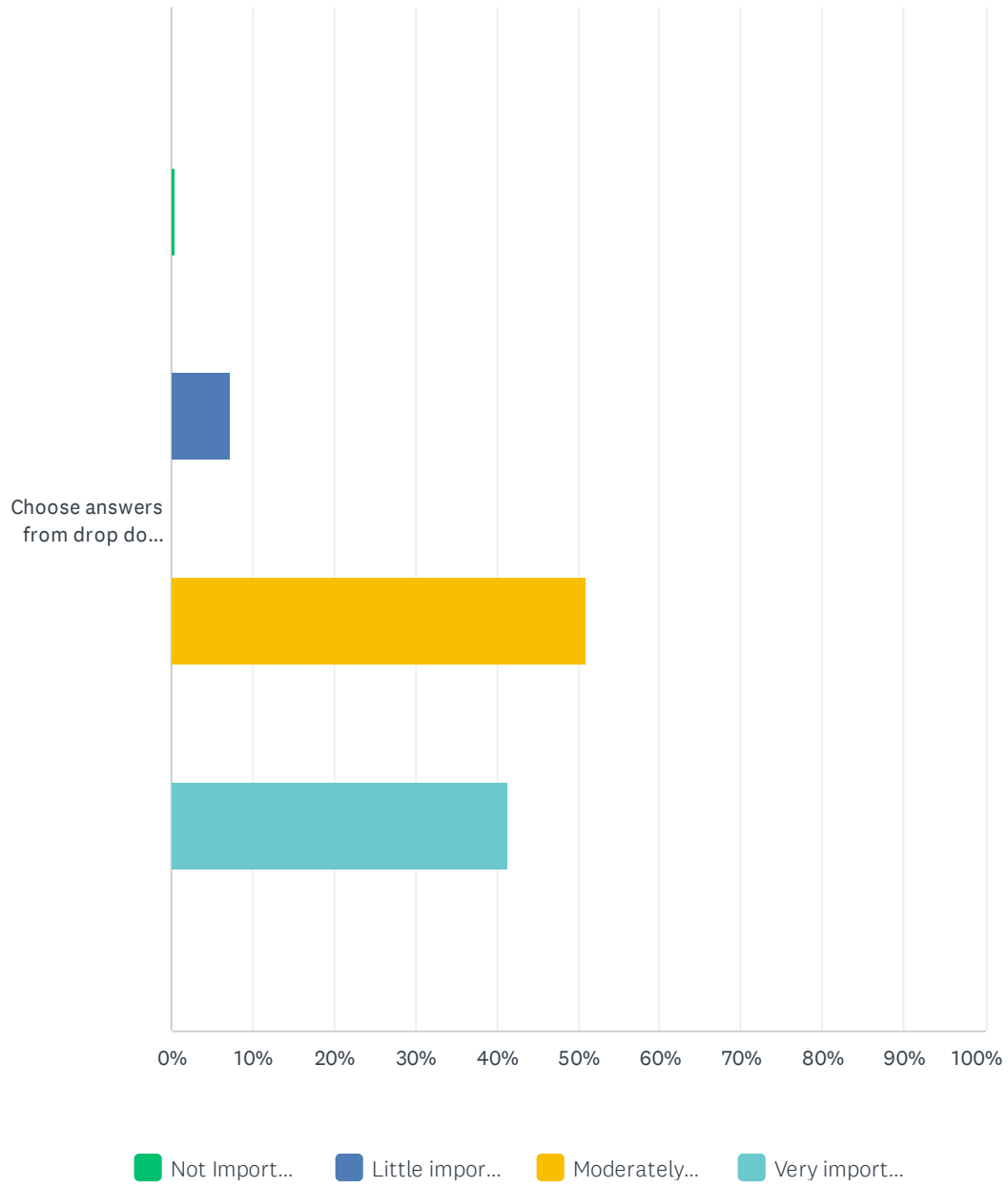
Q116 3.2.3 Incorporating data from ancillary testing (e.g., imaging, labs, electrophysiological studies).

Answered: 241 Skipped: 969



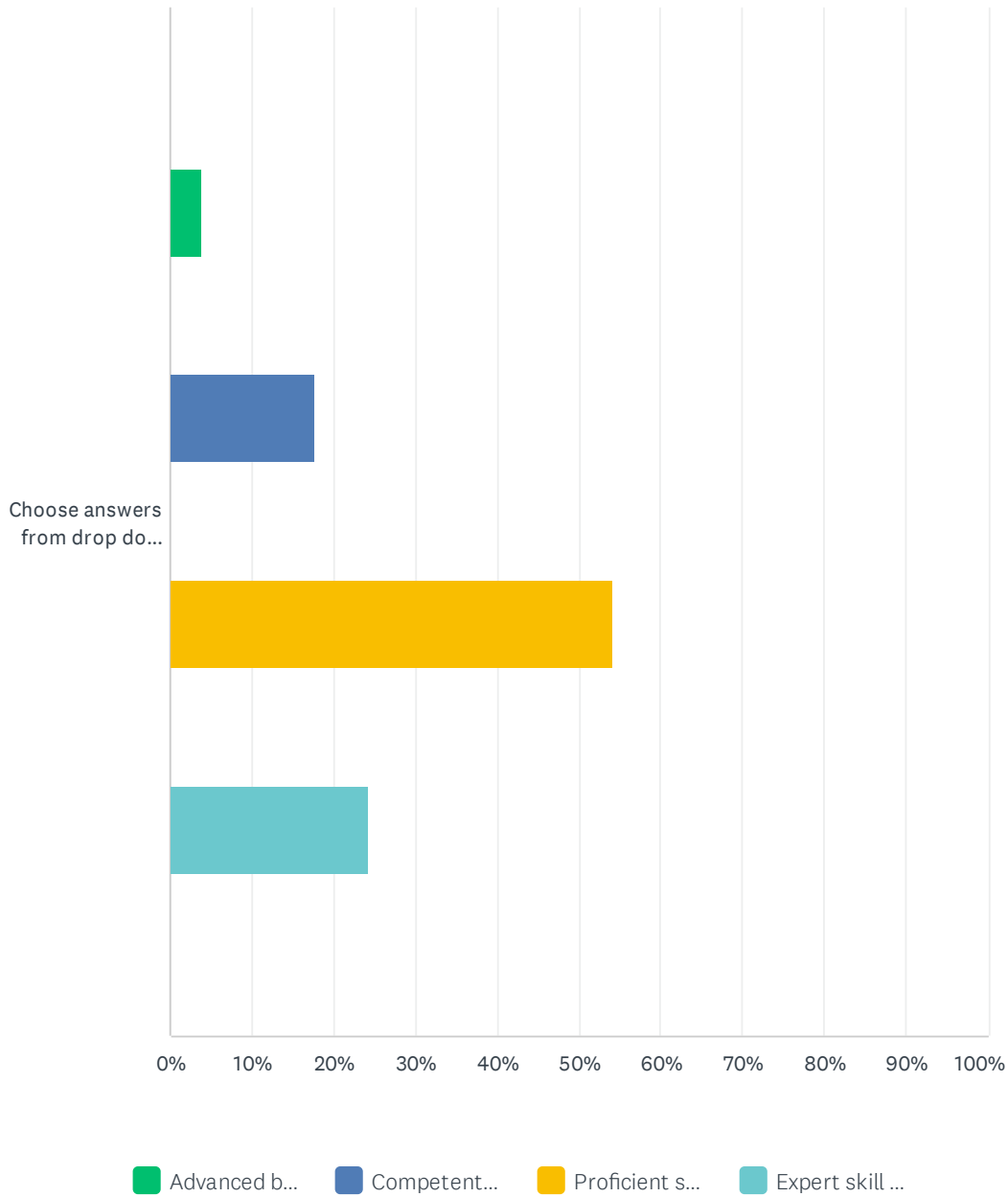
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.41% 1	2.07% 5	10.37% 25	44.81% 108	42.32% 102	241

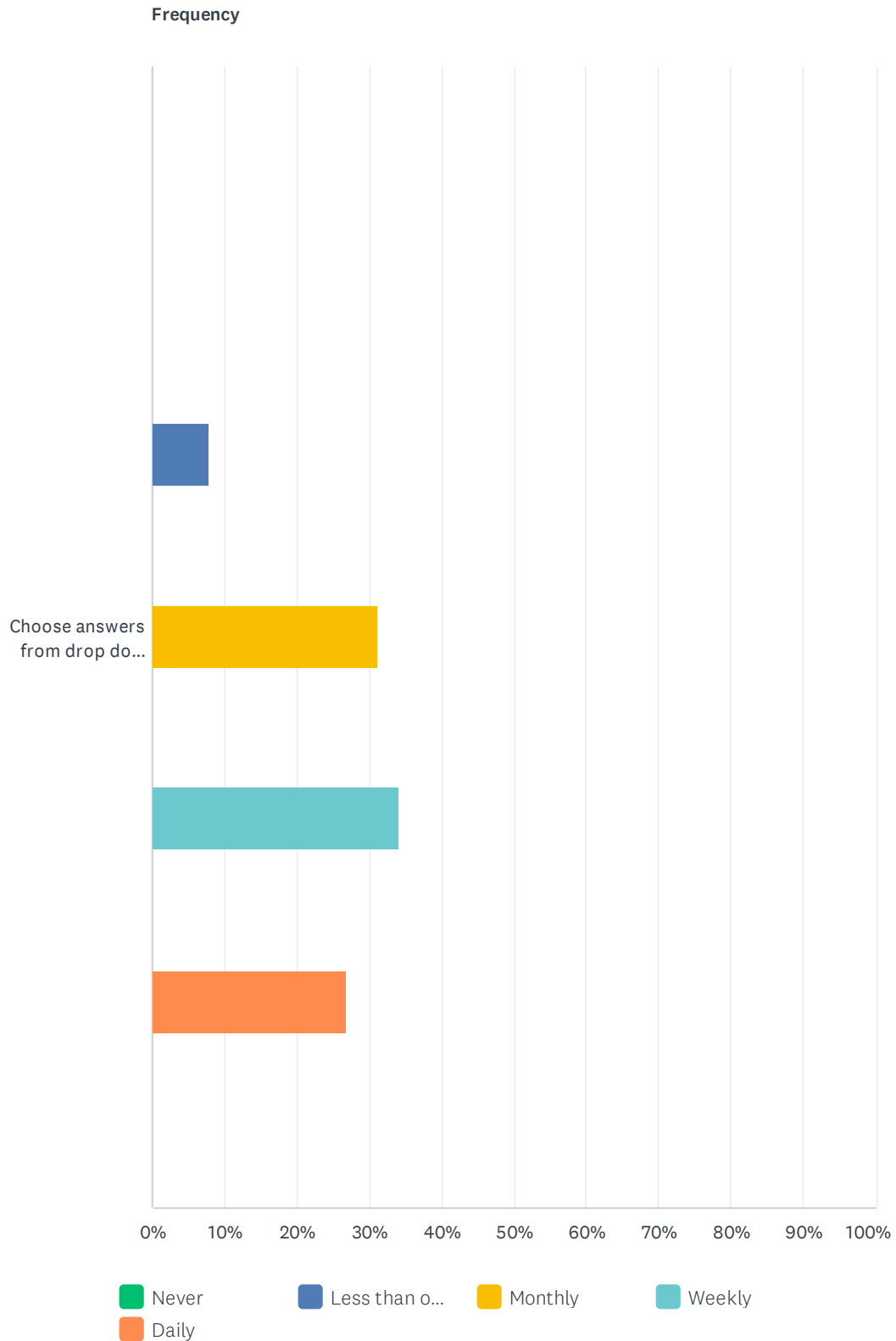
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.43% 1	7.23% 17	51.06% 120	41.28% 97	235

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.90% 9	17.75% 41	54.11% 125	24.24% 56	231

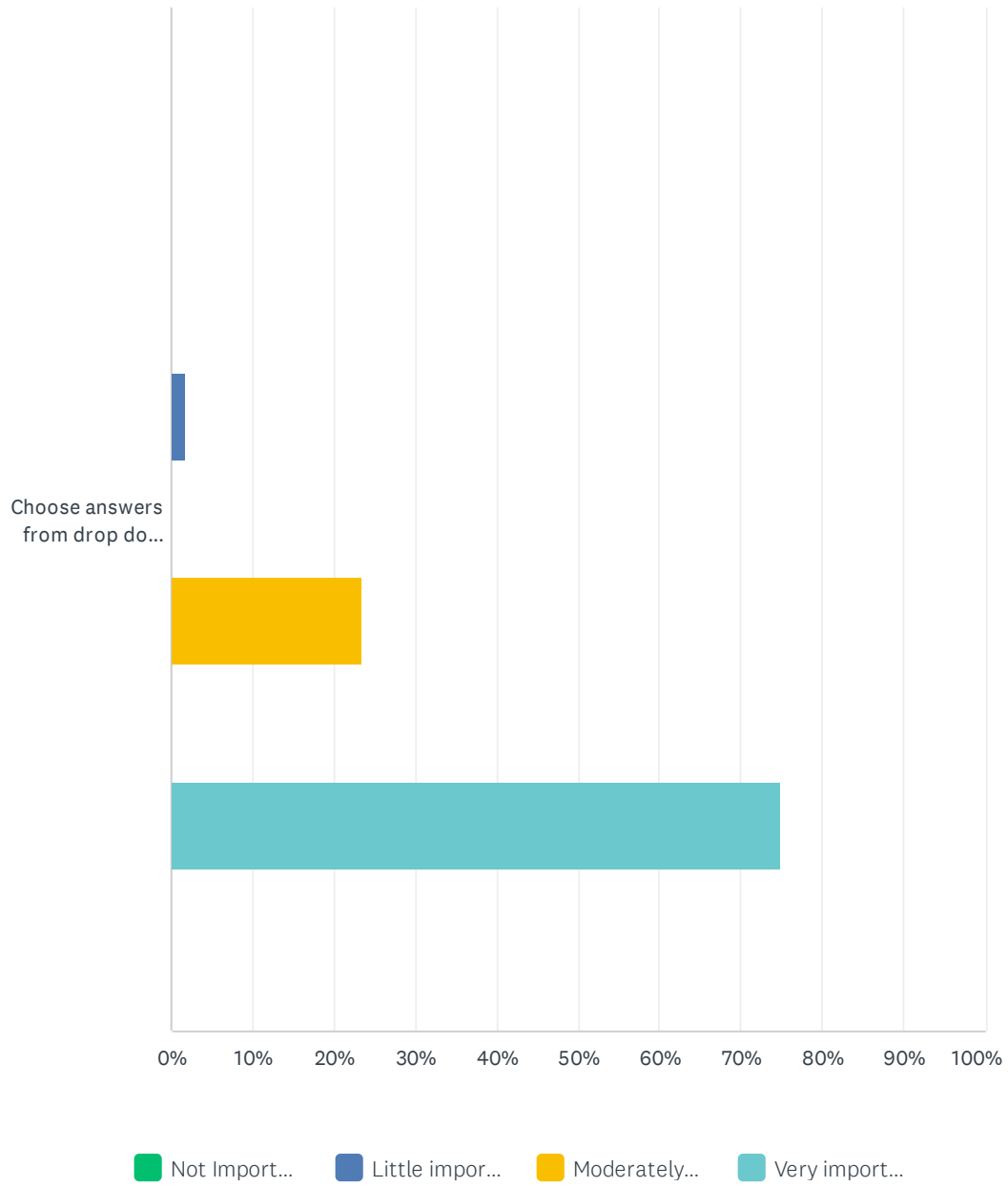
Q117 3.2.4 Referring patient/client to other health care professionals for further examination as appropriate.

Answered: 241 Skipped: 969



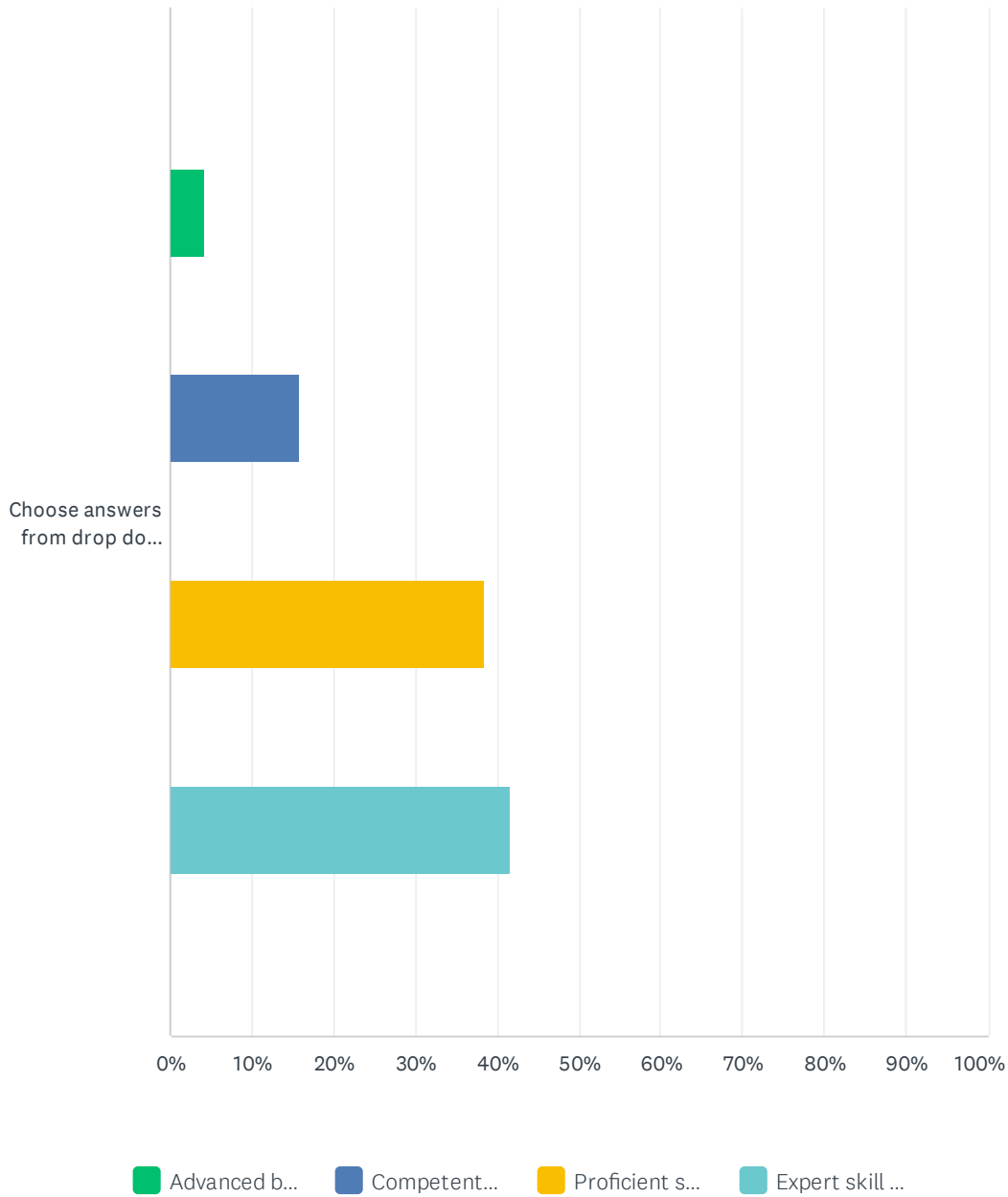
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	7.88% 19	31.12% 75	34.02% 82	26.97% 65	241

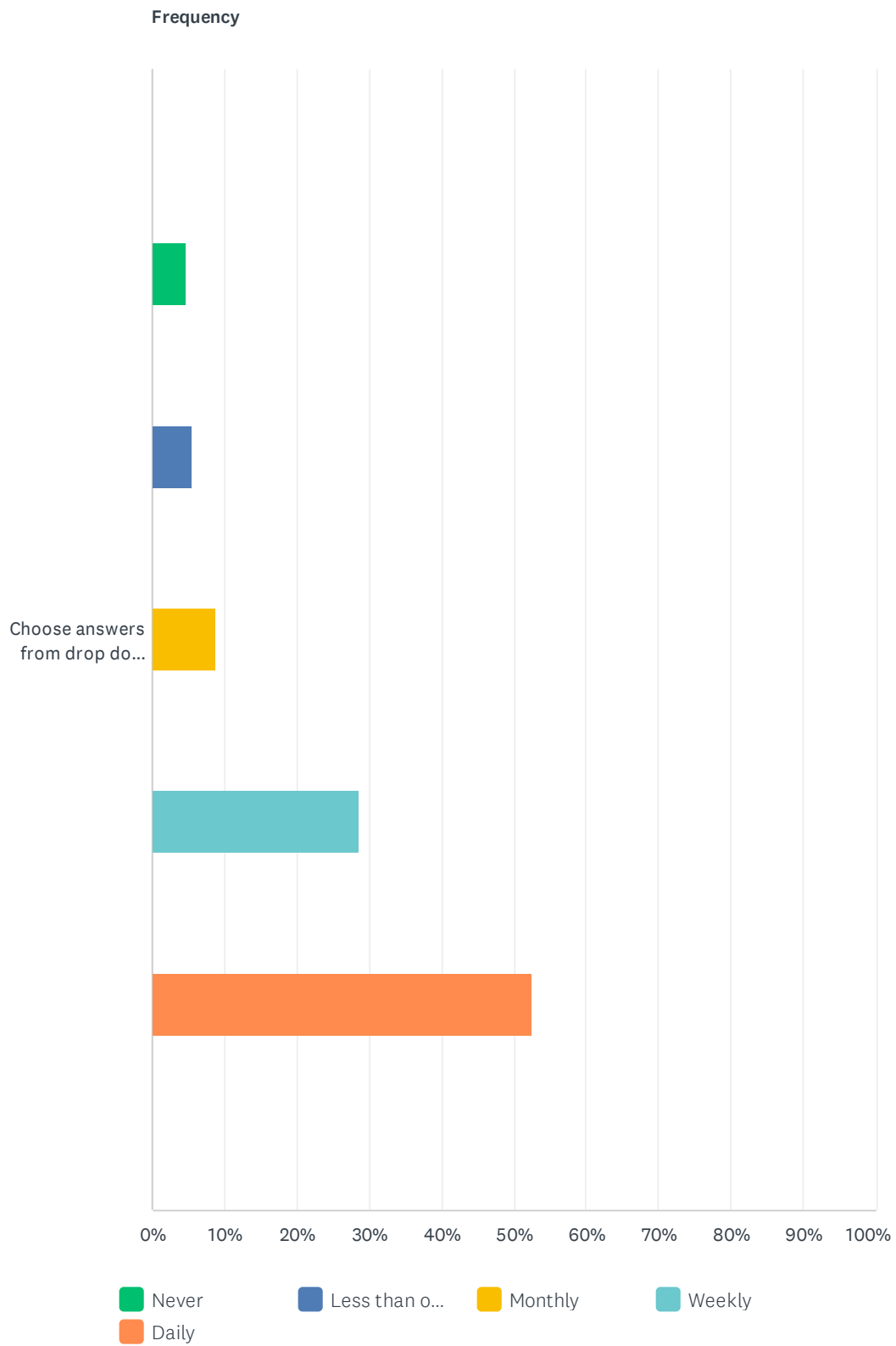
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.70% 4	23.40% 55	74.89% 176	235

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.37% 10	15.72% 36	38.43% 88	41.48% 95	229

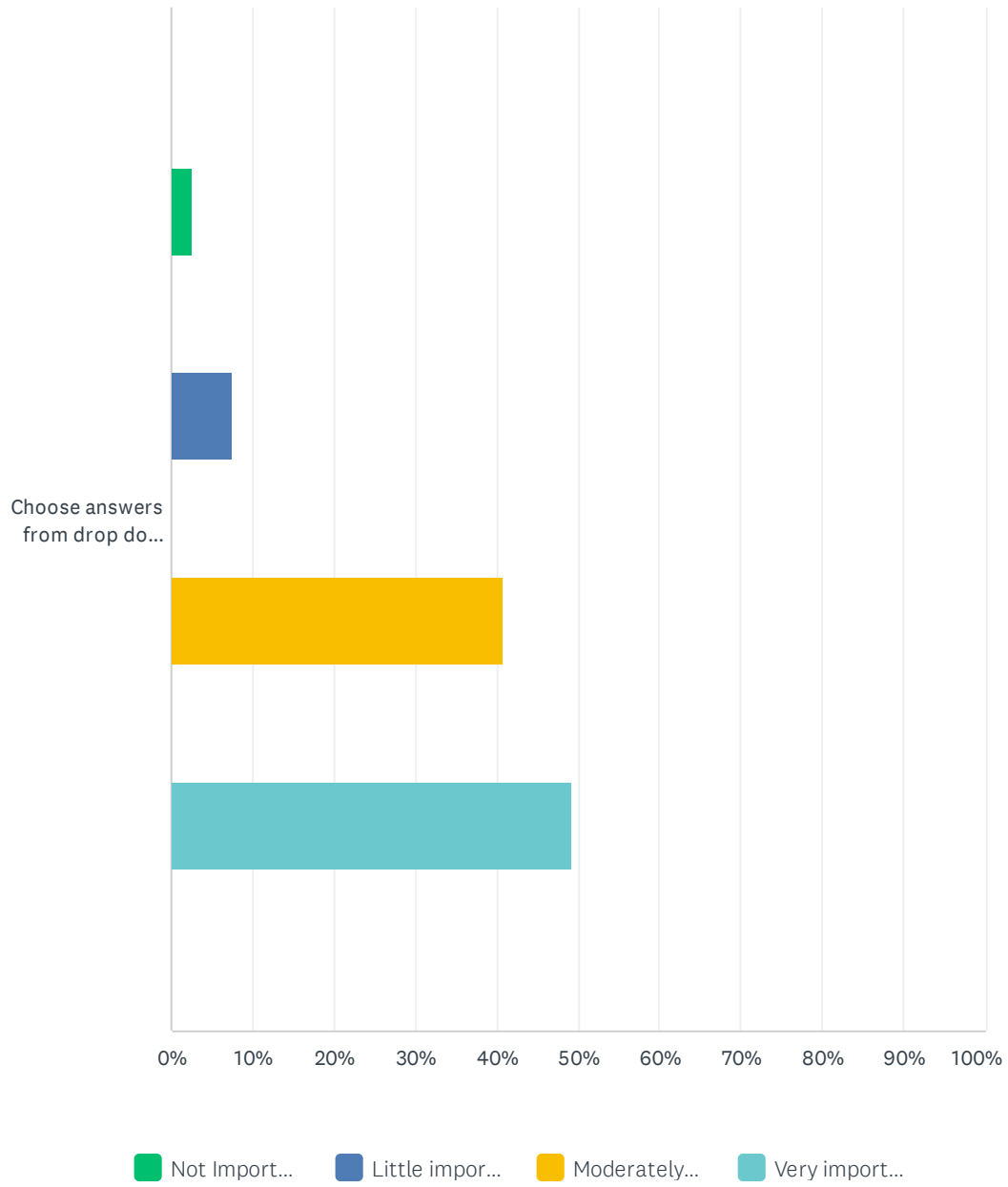
Q118 3.2.5 Considering implications of exam findings on activity, quality of life, and wellness as established by the ICF.

Answered: 239 Skipped: 971



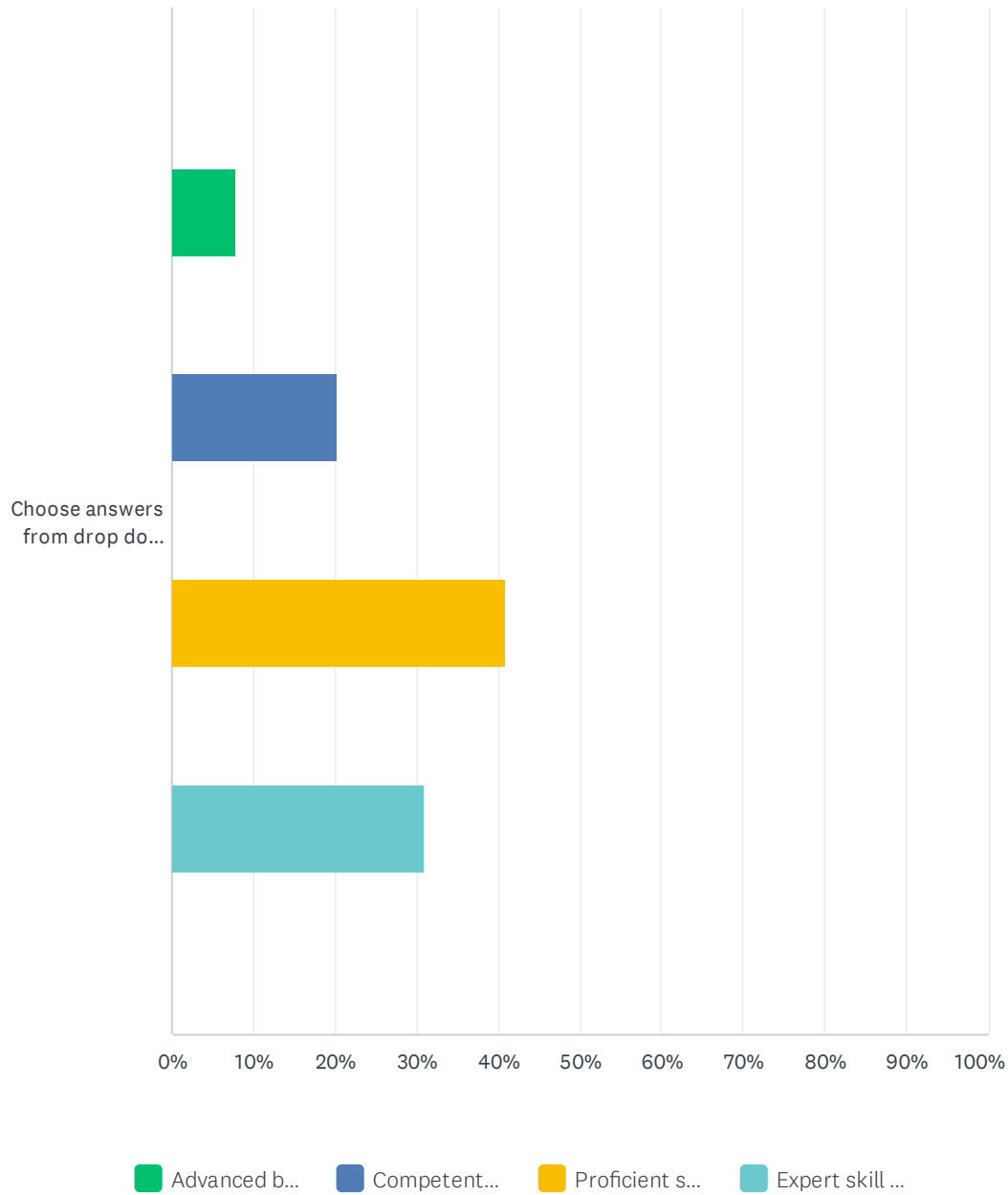
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	4.62% 11	5.46% 13	8.82% 21	28.57% 68	52.52% 125	238

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.60% 6	7.36% 17	40.69% 94	49.35% 114	231

Spine Validation Practice Analysis Survey 2022

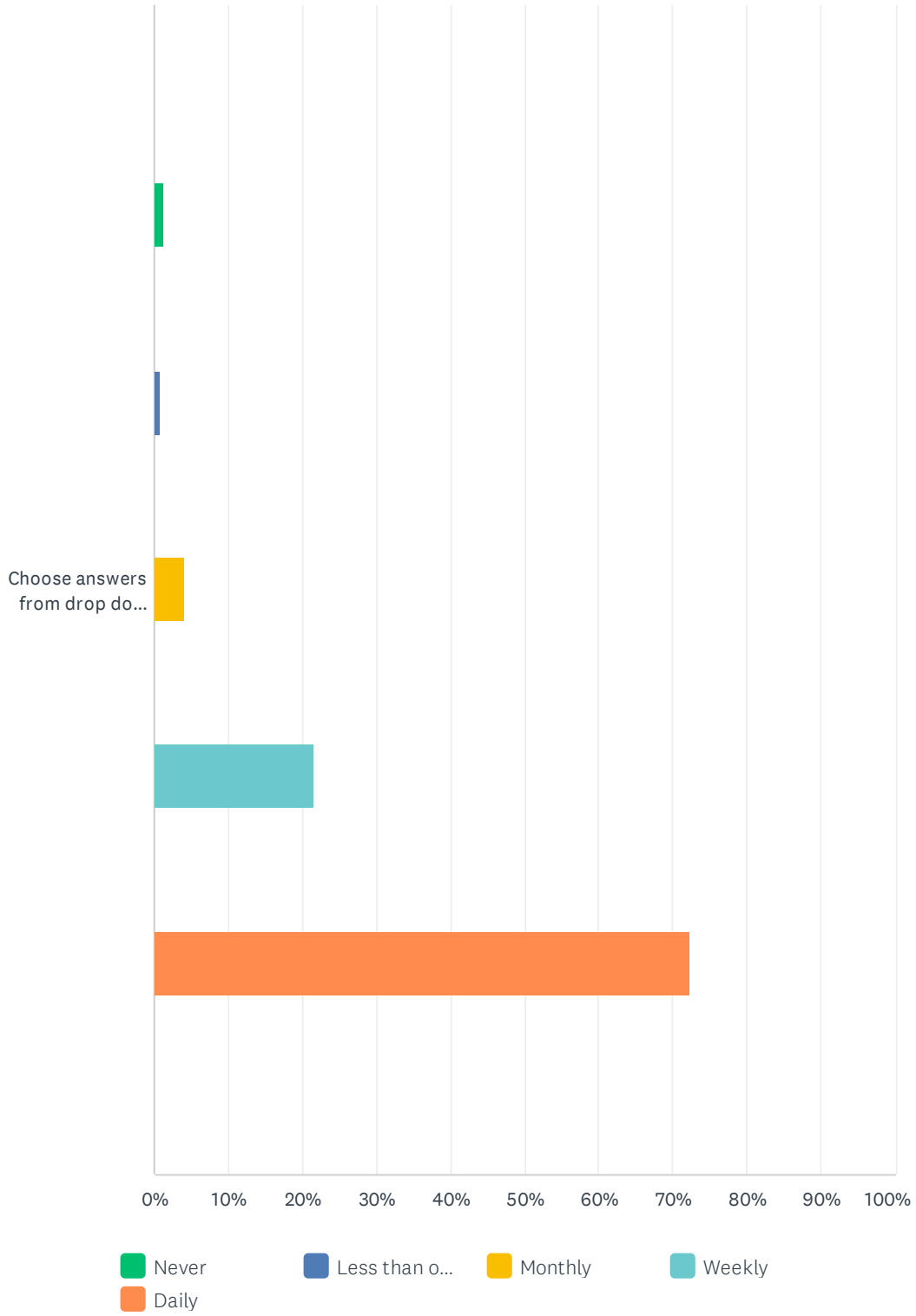
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.93% 18	20.26% 46	40.97% 93	30.84% 70	227

Q119 3.3.1 Organizing examination findings into clusters, syndromes, or categories to which physical therapy interventions will be directed and to determine prognosis.

Answered: 241 Skipped: 969

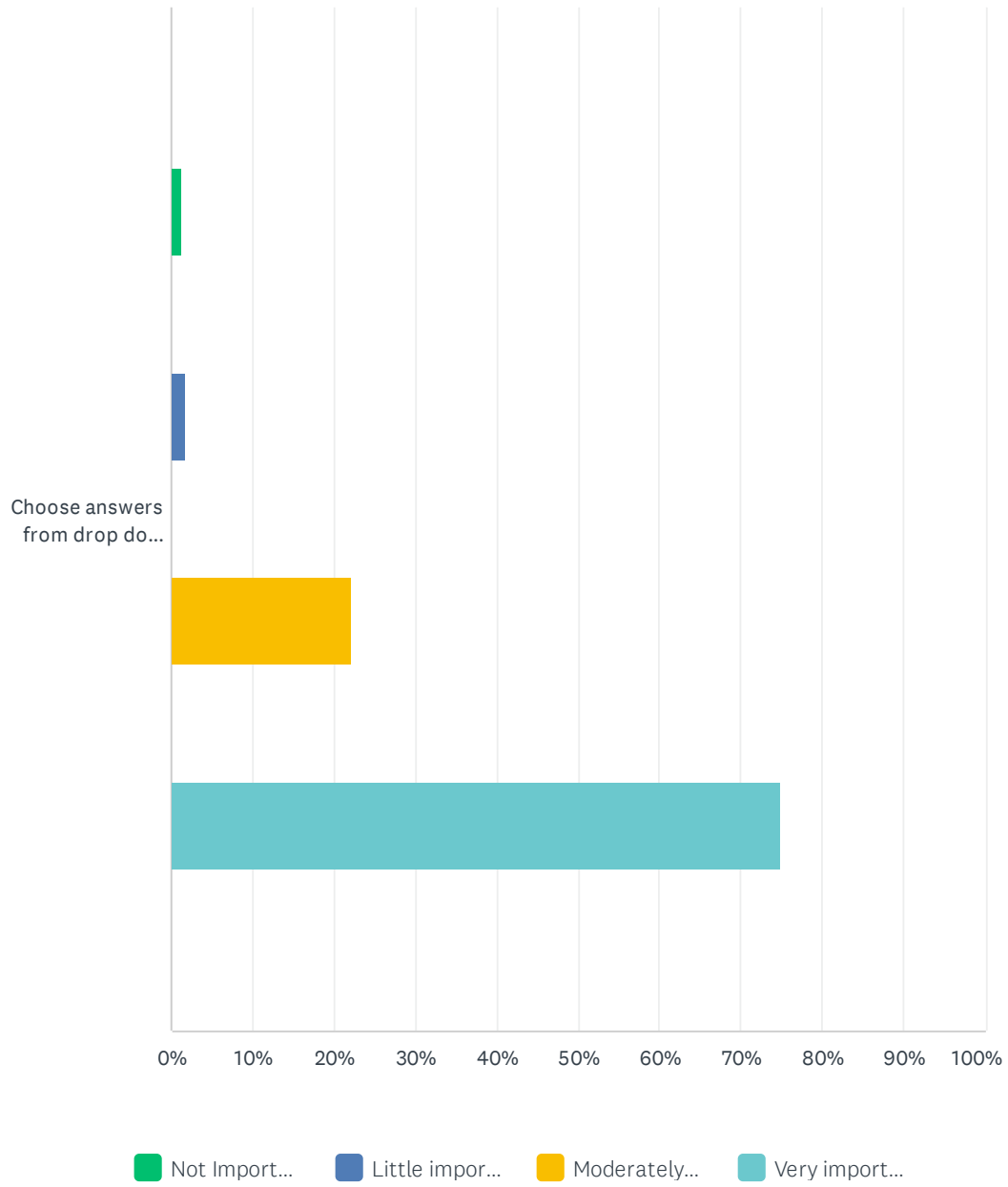
Spine Validation Practice Analysis Survey 2022

Frequency



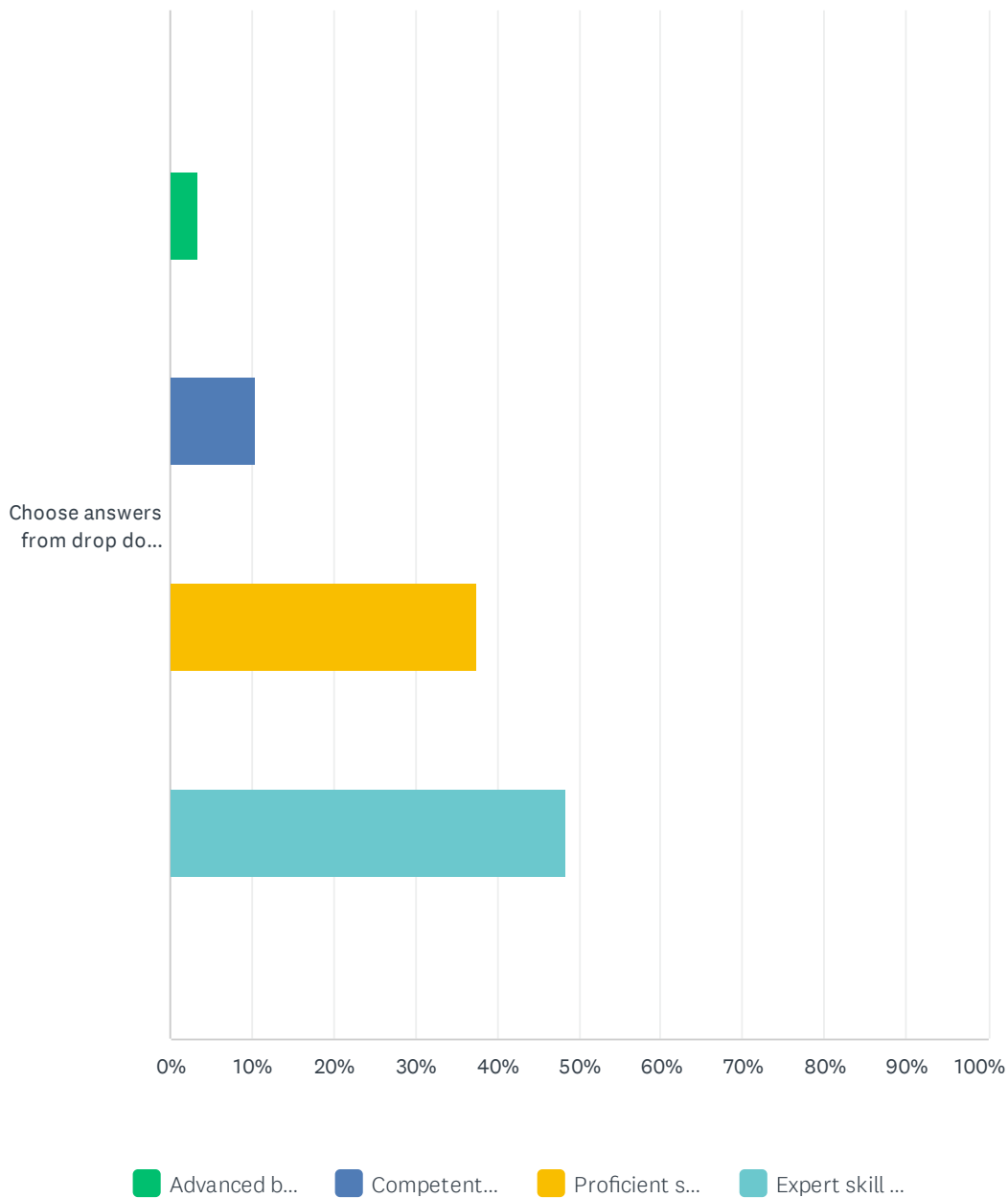
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.24% 3	0.83% 2	4.15% 10	21.58% 52	72.20% 174	241

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.28% 3	1.71% 4	22.22% 52	74.79% 175	234

Spine Validation Practice Analysis Survey 2022

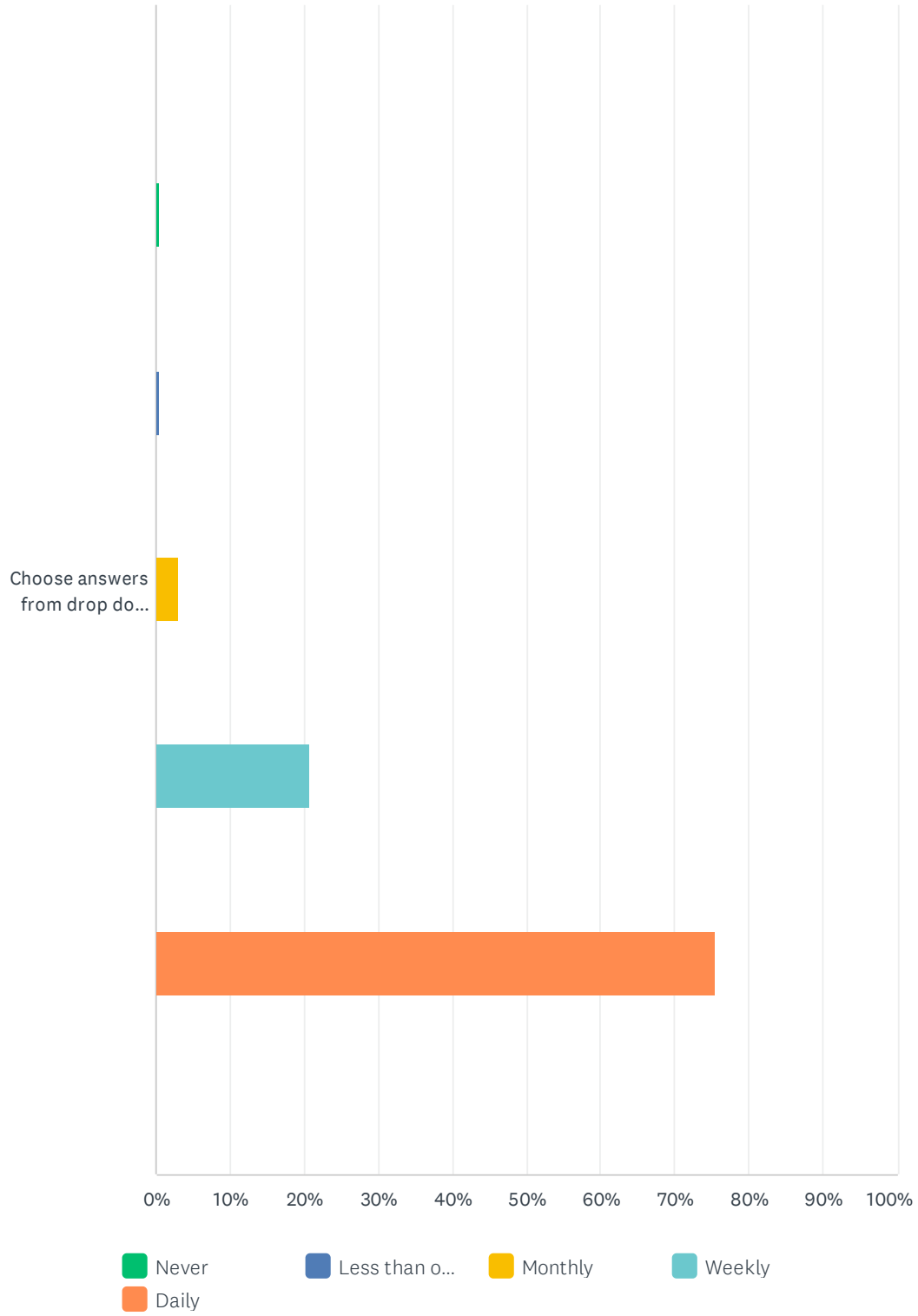
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.49% 8	10.48% 24	37.55% 86	48.47% 111	229

Q120 3.4.1 Accounting for the complexity of the patient/client's dysfunctions/conditions, the predicted optimal level of improvement in function, and the amount of time needed to reach that level.

Answered: 241 Skipped: 969

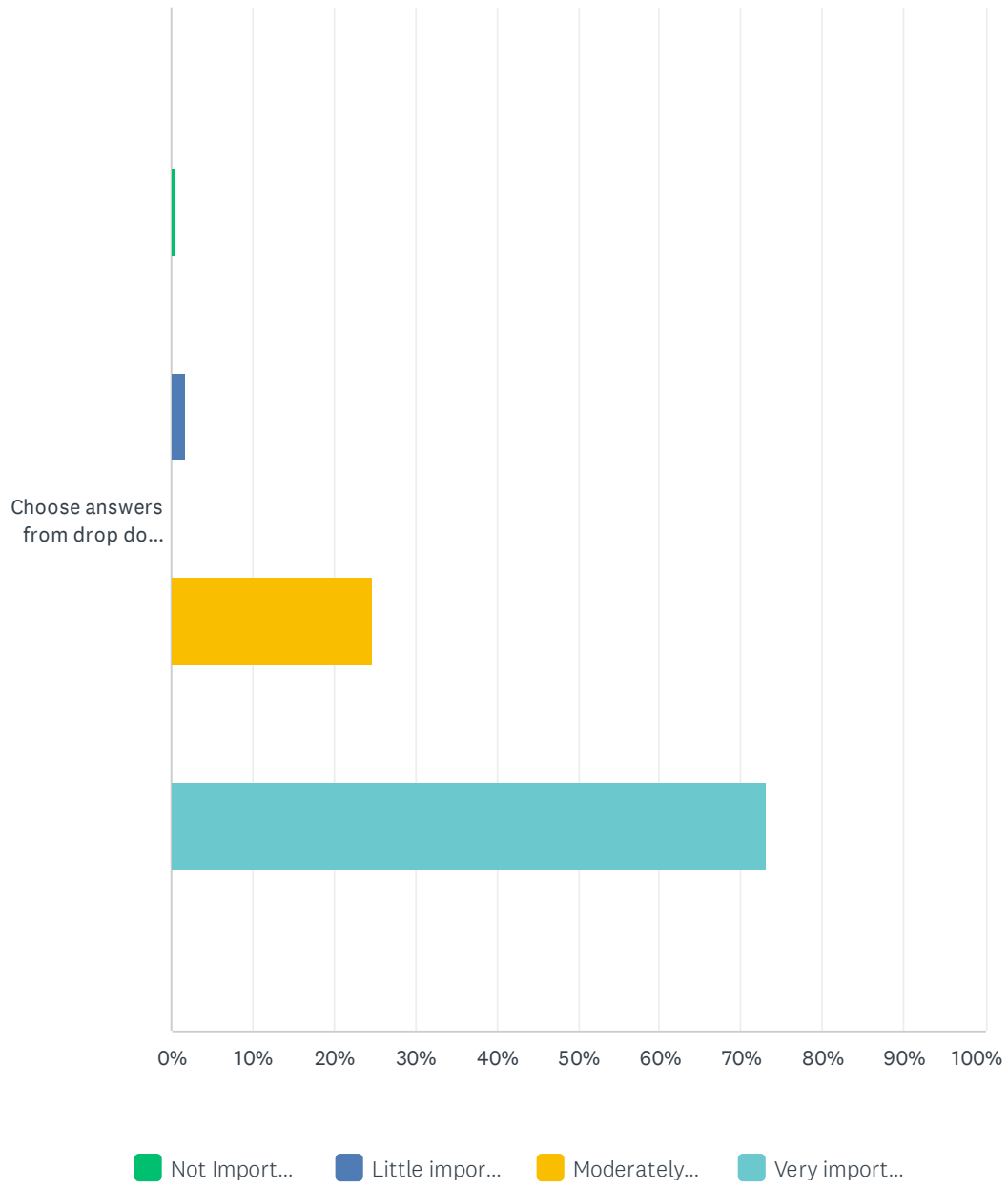
Spine Validation Practice Analysis Survey 2022

Frequency



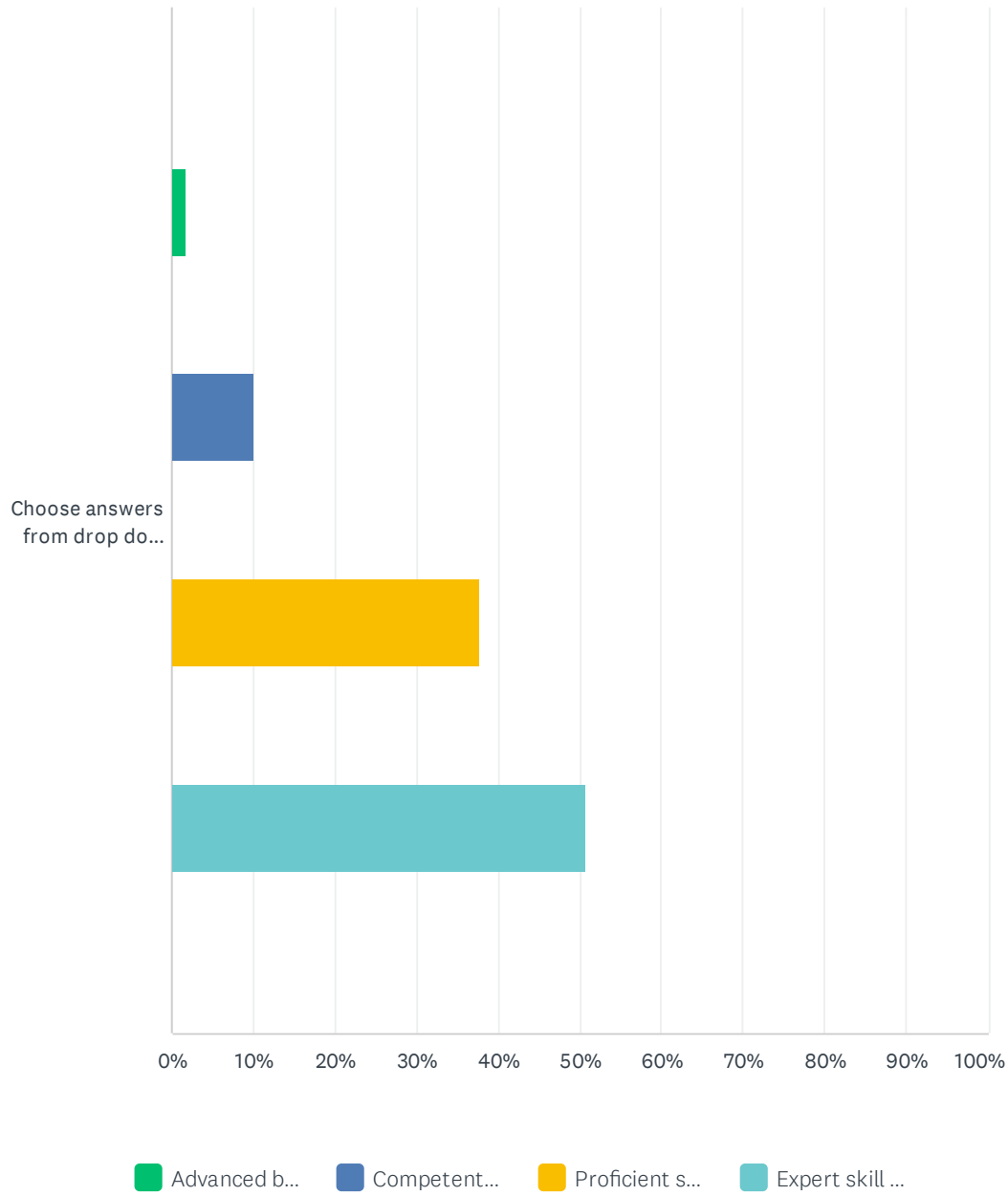
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.41% 1	0.41% 1	2.90% 7	20.75% 50	75.52% 182	241

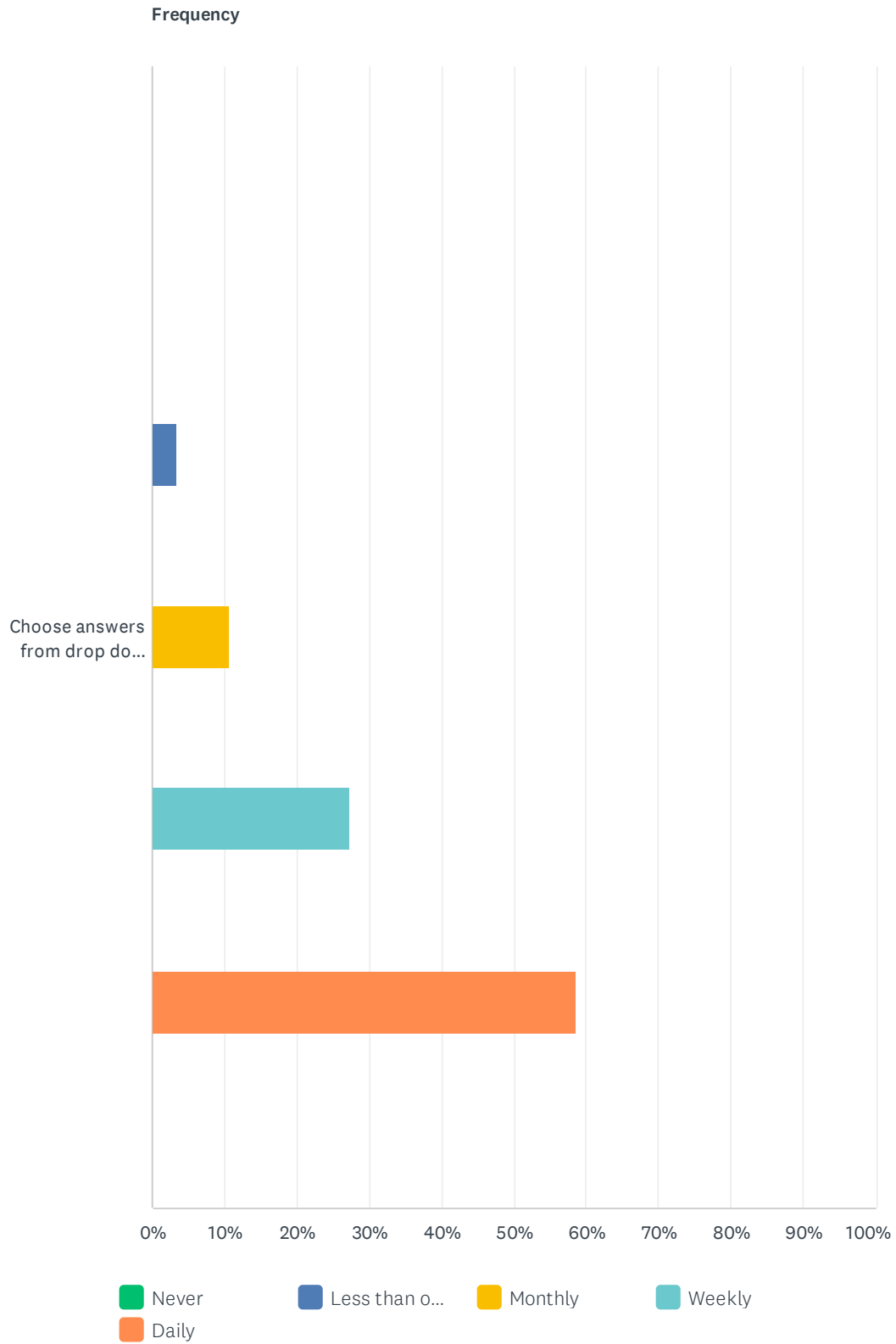
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.43% 1	1.70% 4	24.68% 58	73.19% 172	235

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.73% 4	9.96% 23	37.66% 87	50.65% 117	231

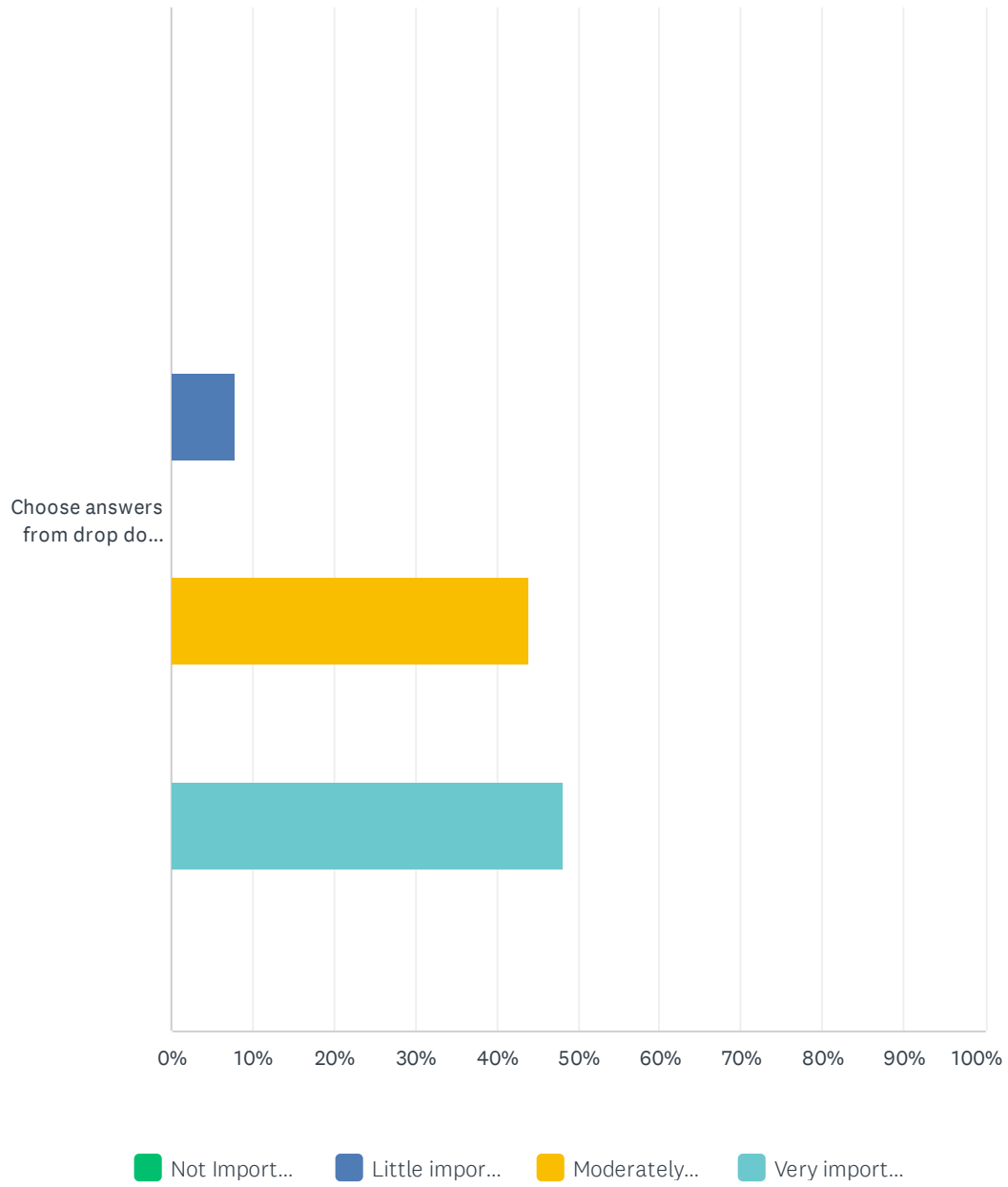
Q121 3.5.1 Ergonomics (influences of environment and occupation on posture and movement).

Answered: 235 Skipped: 975



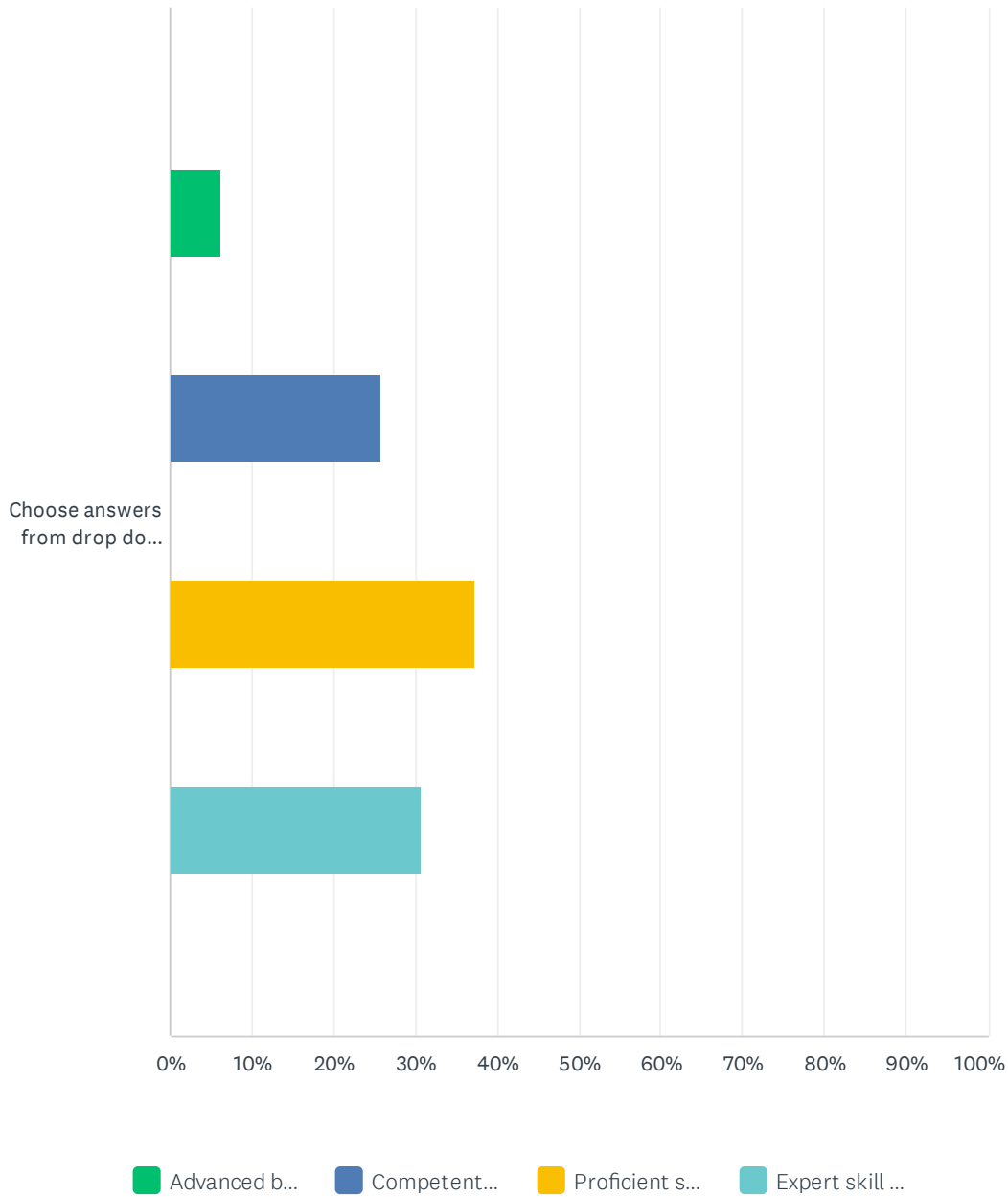
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	3.40% 8	10.64% 25	27.23% 64	58.72% 138	235

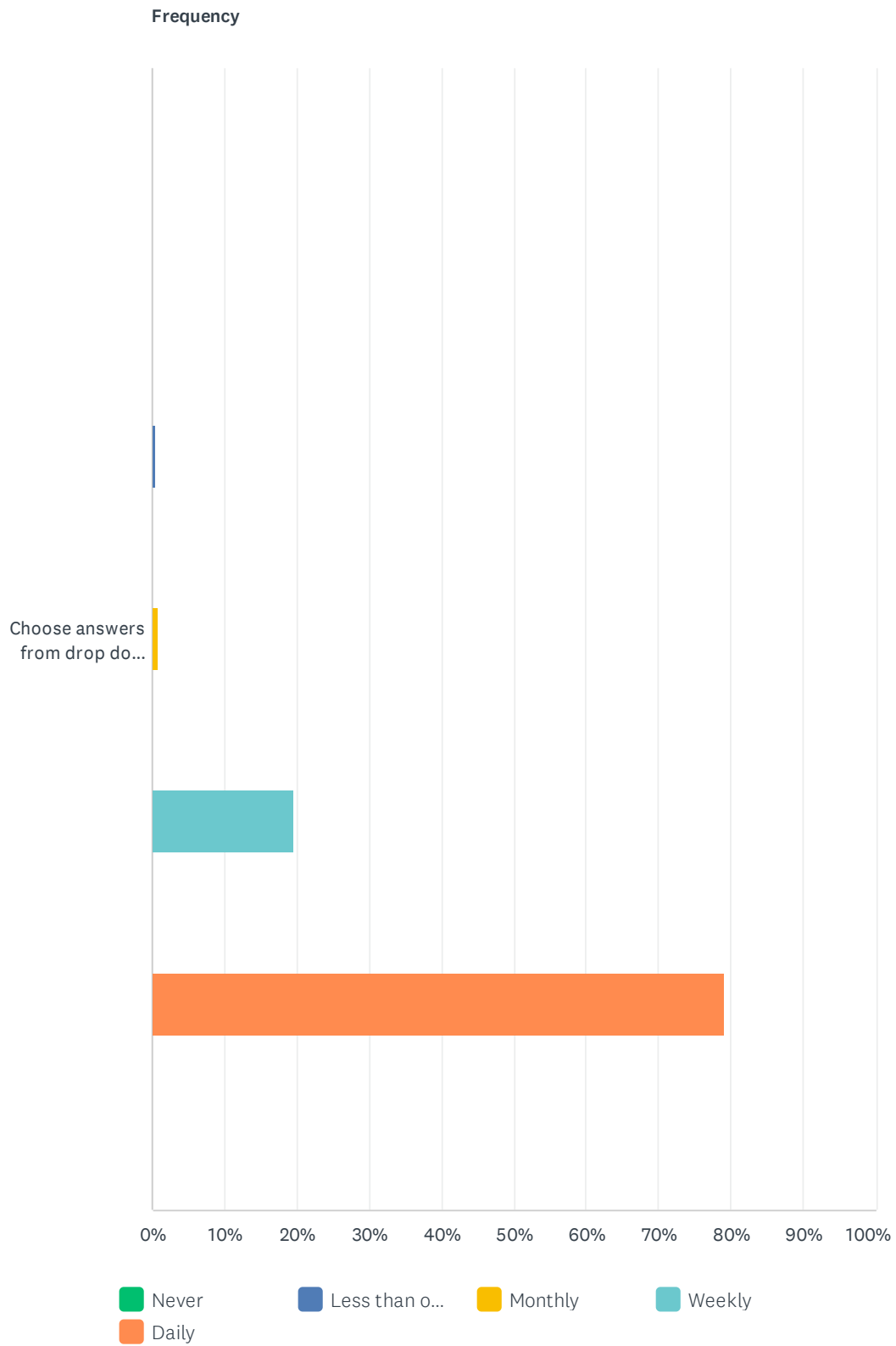
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	7.89% 18	43.86% 100	48.25% 110	228

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.22% 14	25.78% 58	37.33% 84	30.67% 69	225

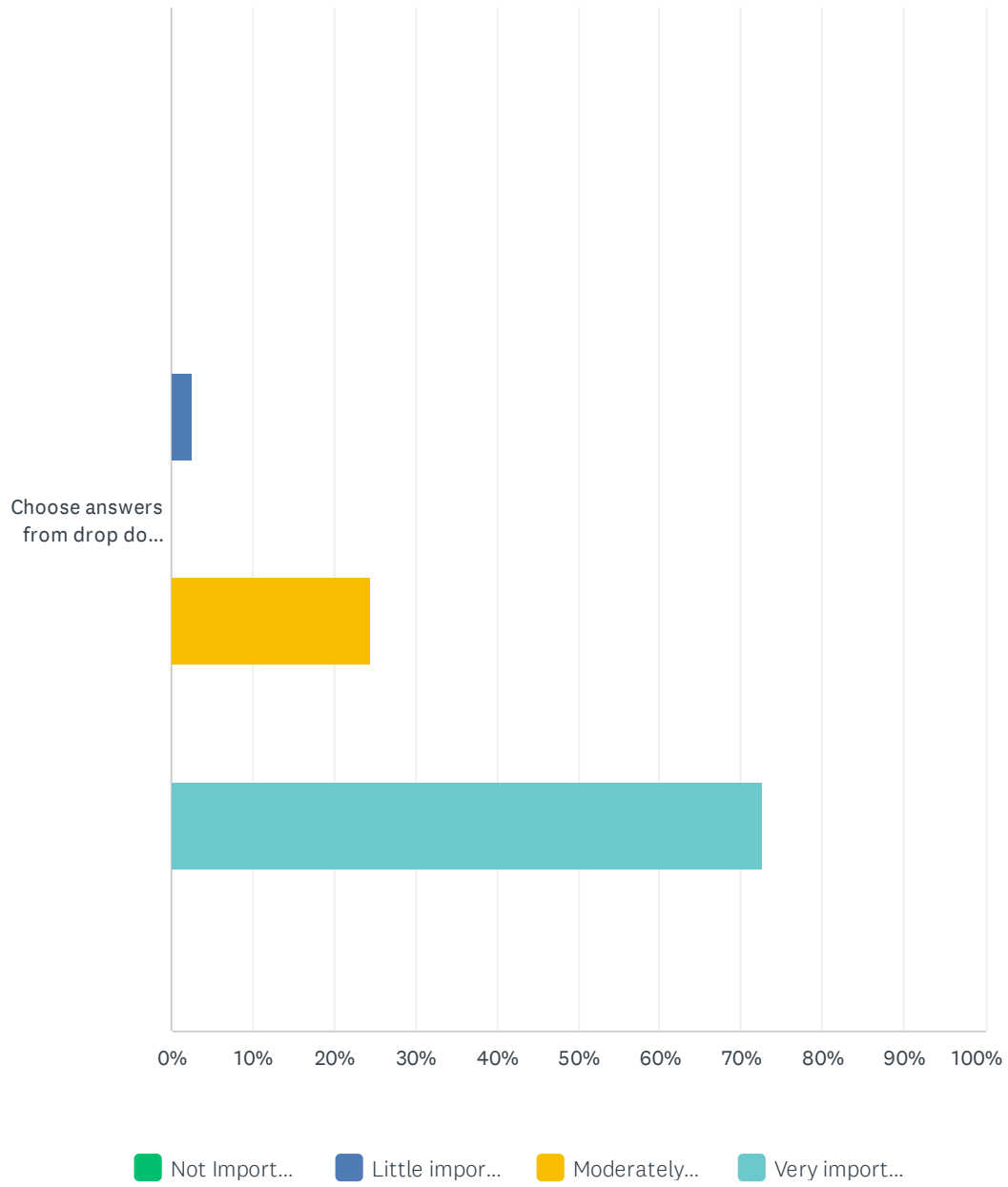
Q122 3.5.2 Education/training of functional activities.

Answered: 234 Skipped: 976



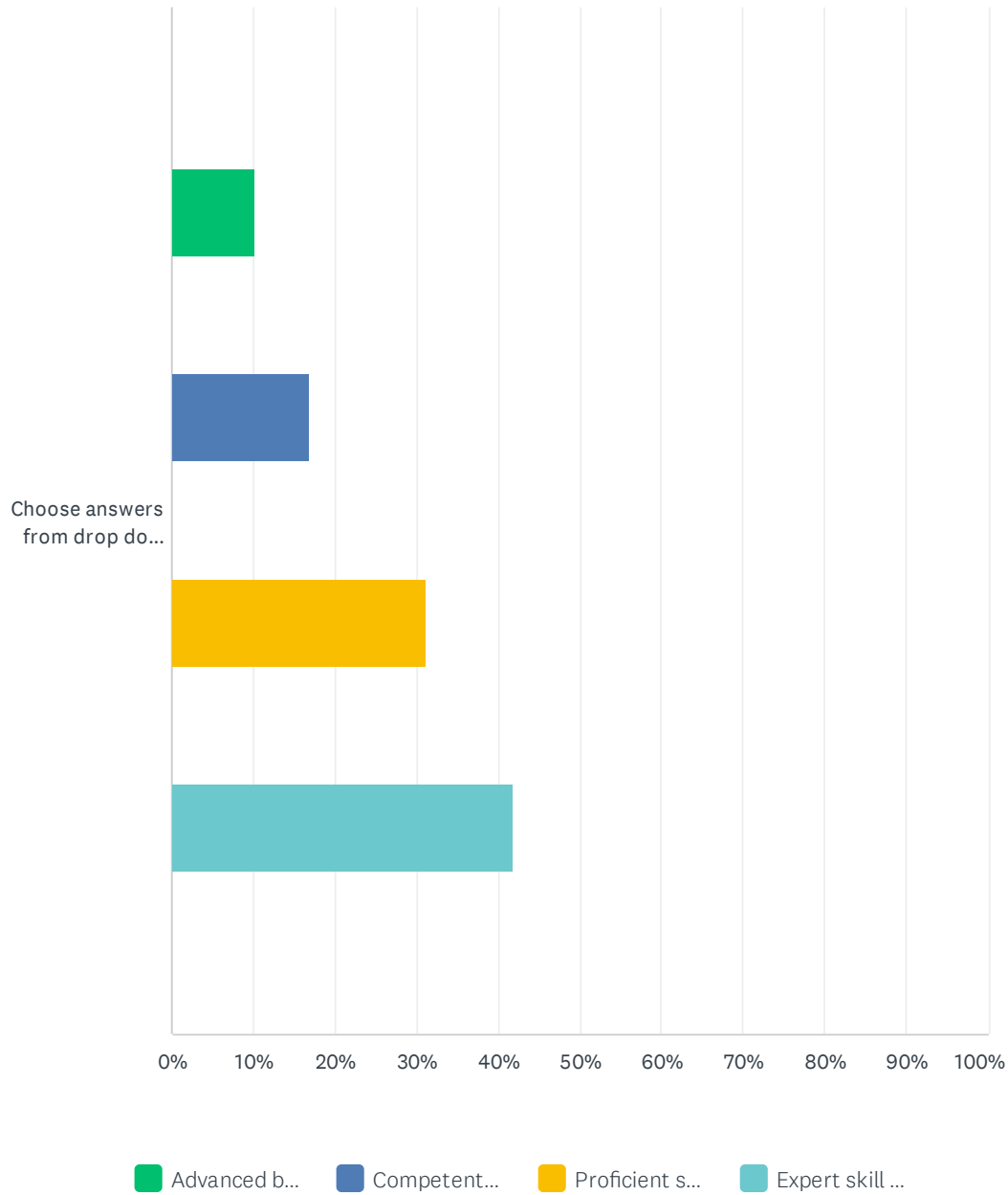
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.43% 1	0.85% 2	19.66% 46	79.06% 185	234

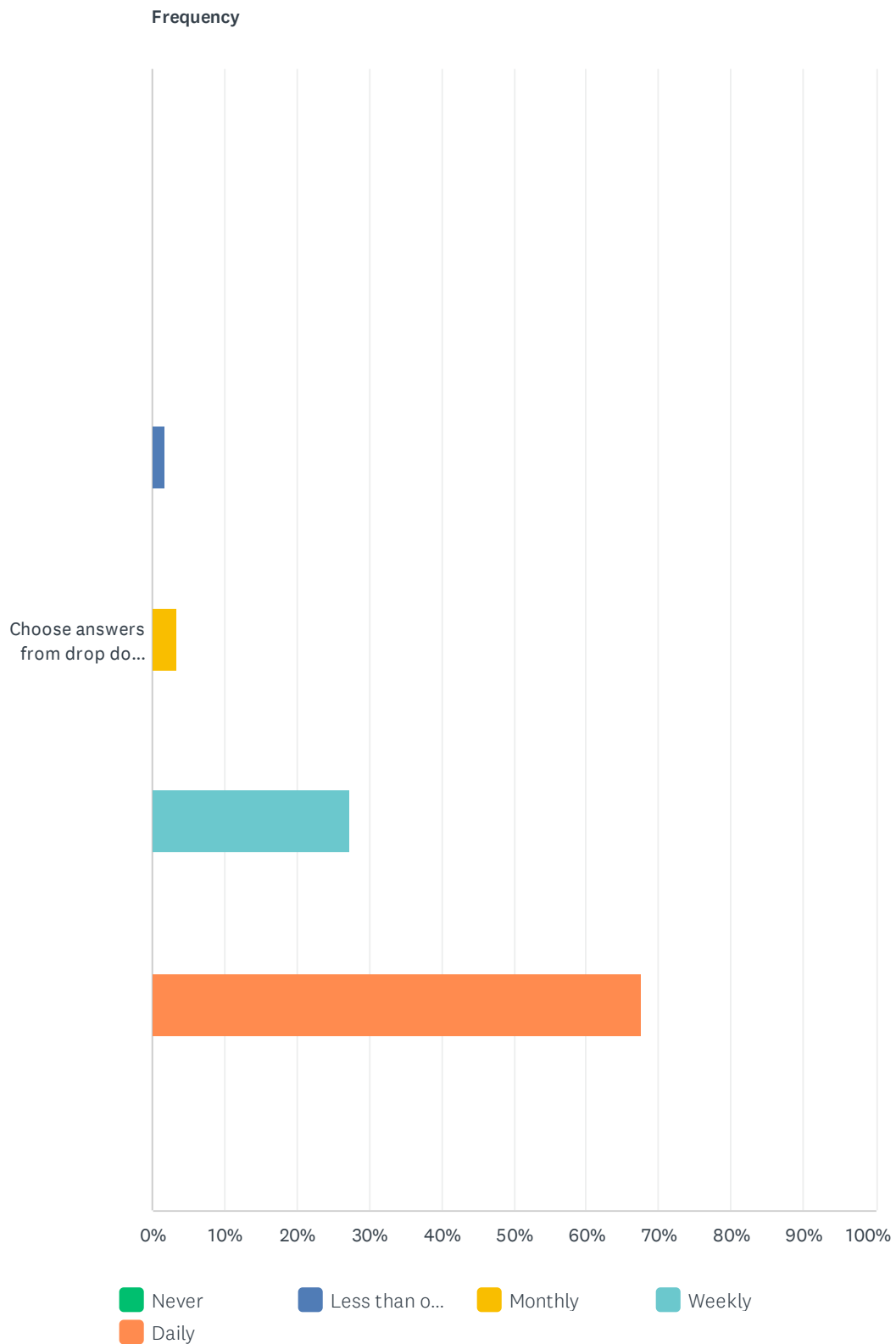
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	2.63% 6	24.56% 56	72.81% 166	228

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	10.22% 23	16.89% 38	31.11% 70	41.78% 94	225

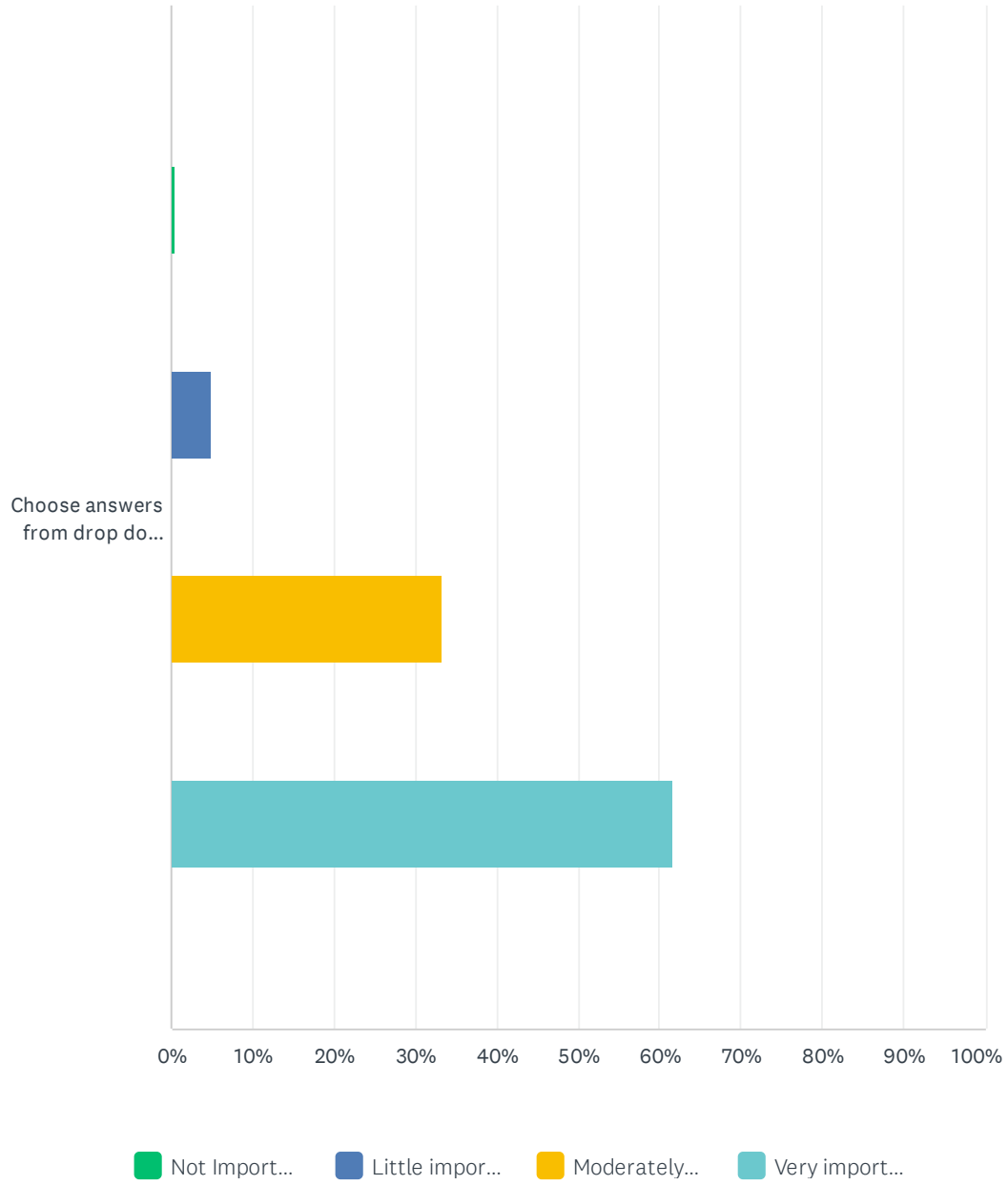
Q123 3.5.3 Education/training of activities of daily living (e.g., hygiene, stair climbing, sleeping postures).

Answered: 235 Skipped: 975



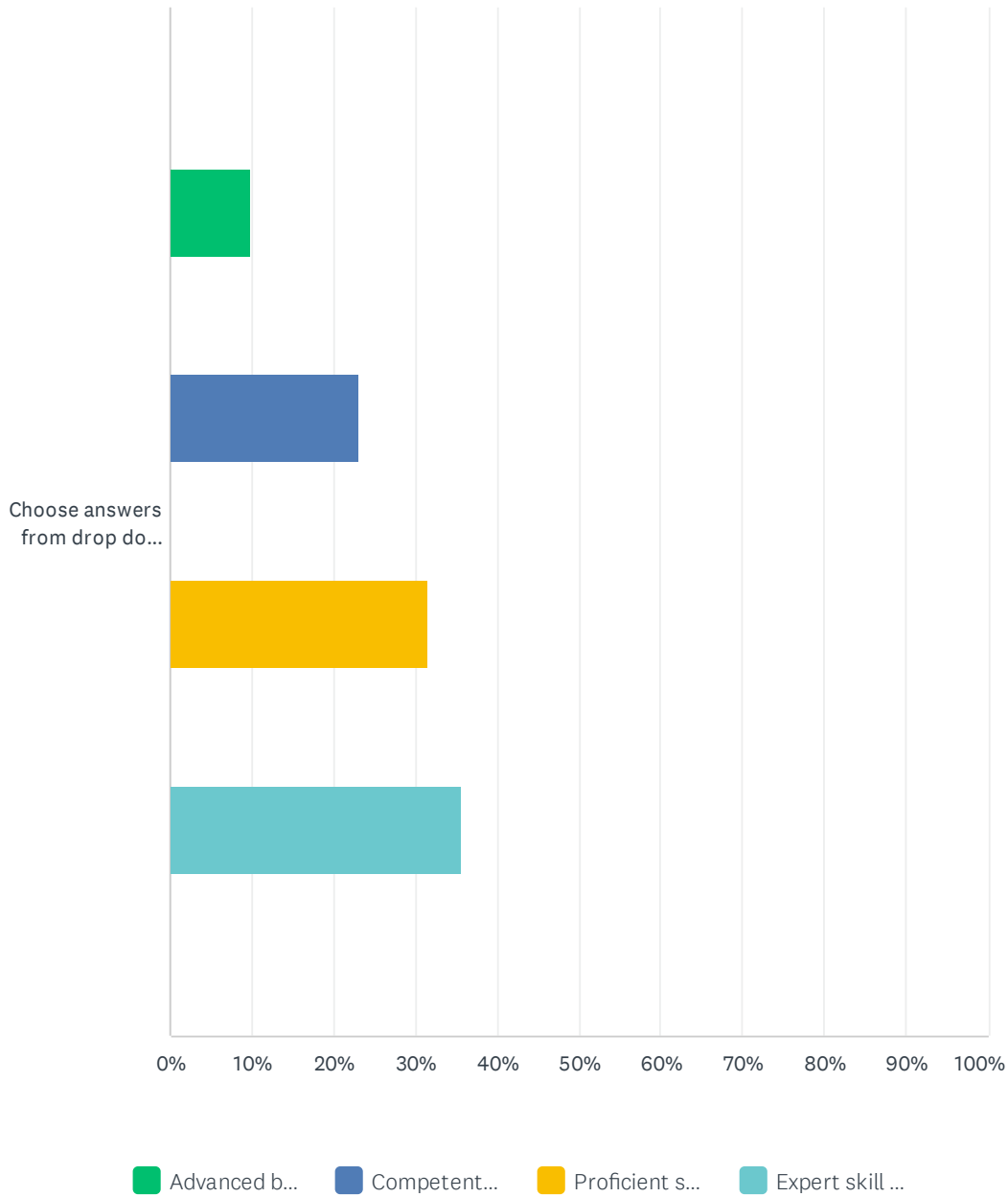
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.70% 4	3.40% 8	27.23% 64	67.66% 159	235

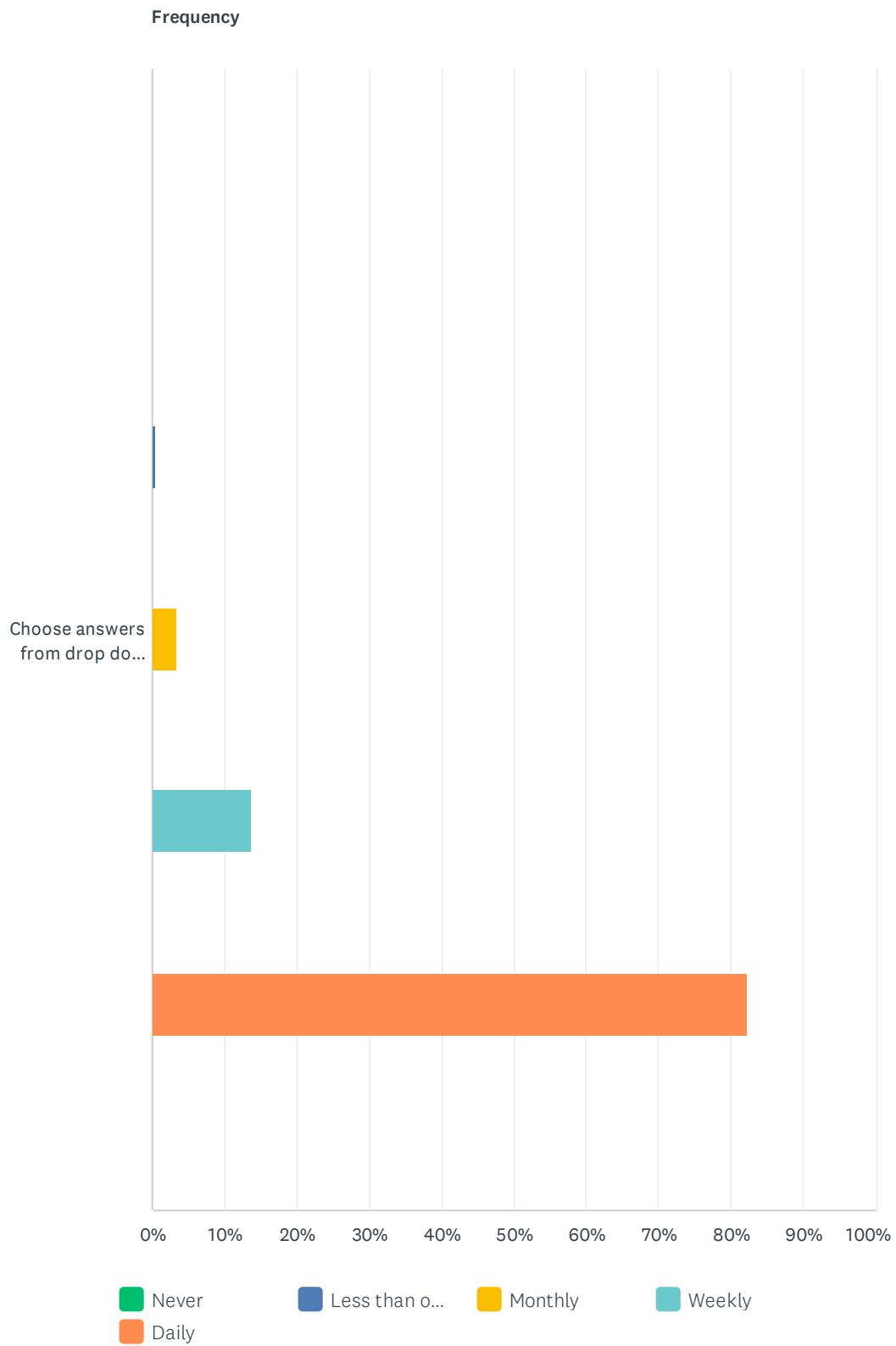
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.44% 1	4.80% 11	33.19% 76	61.57% 141	229

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.78% 22	23.11% 52	31.56% 71	35.56% 80	225

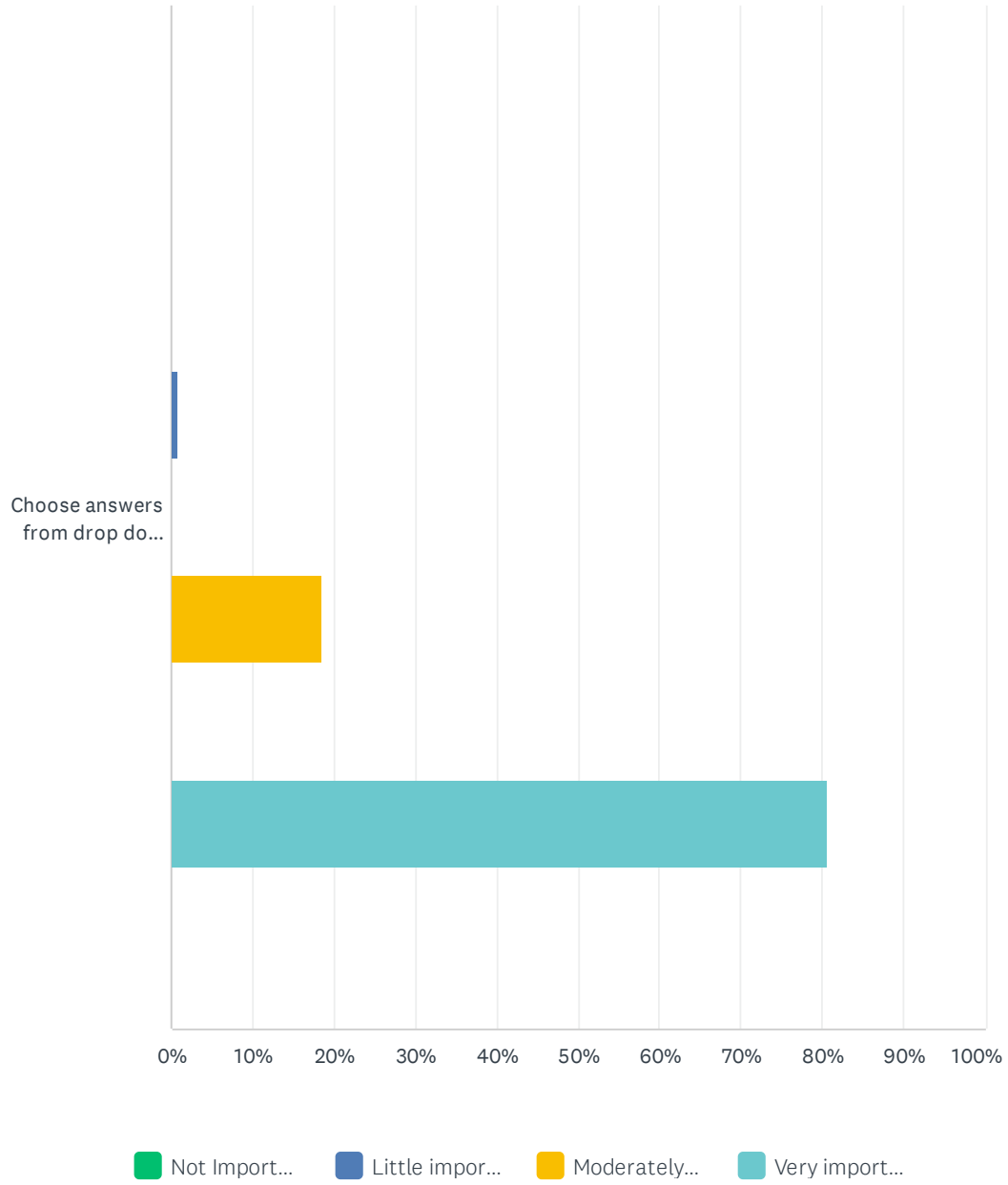
Q124 3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility, and self-management within plan of care.

Answered: 233 Skipped: 977



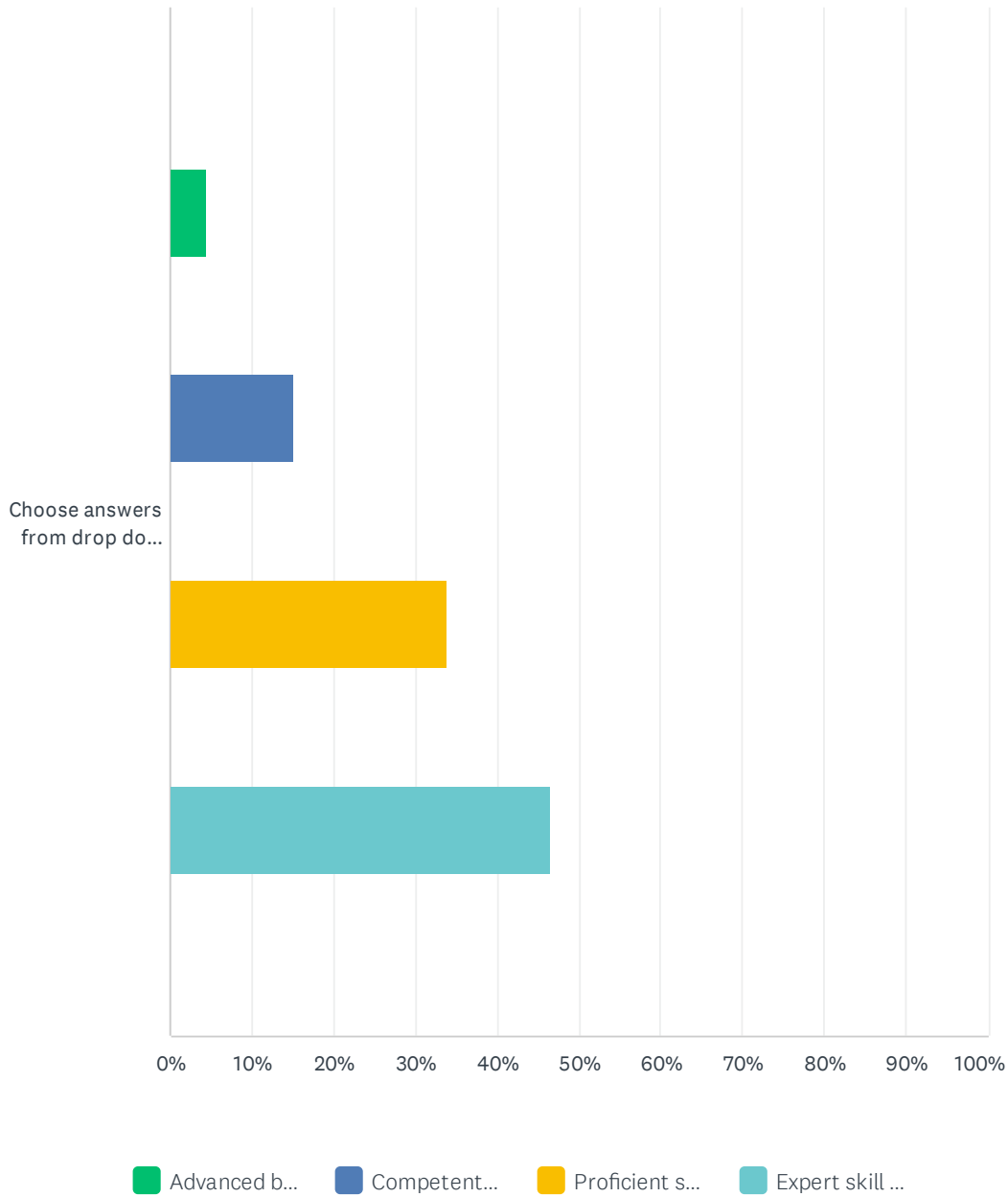
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.43% 1	3.43% 8	13.73% 32	82.40% 192	233

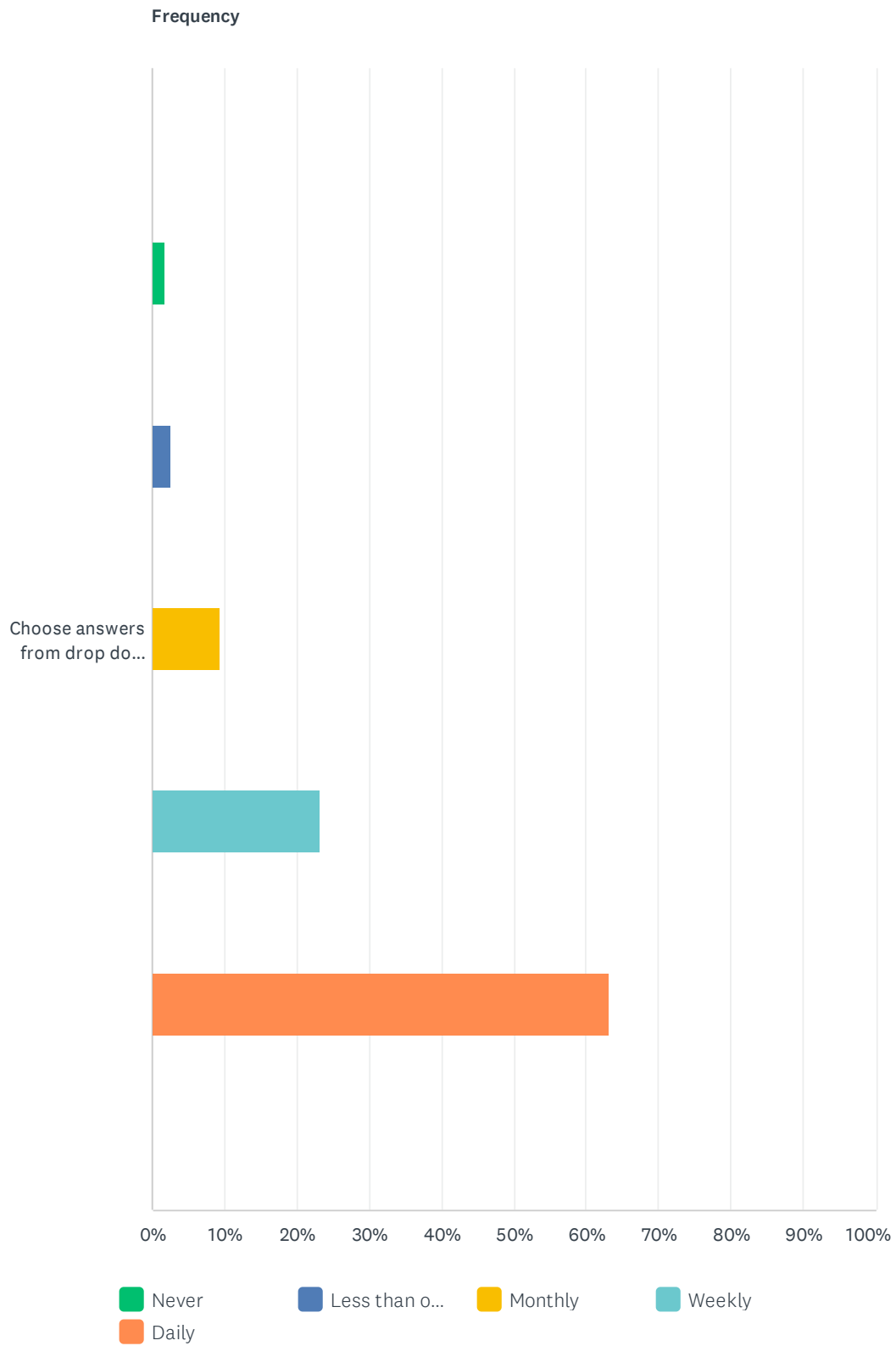
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.88% 2	18.50% 42	80.62% 183	227

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.46% 10	15.18% 34	33.93% 76	46.43% 104	224

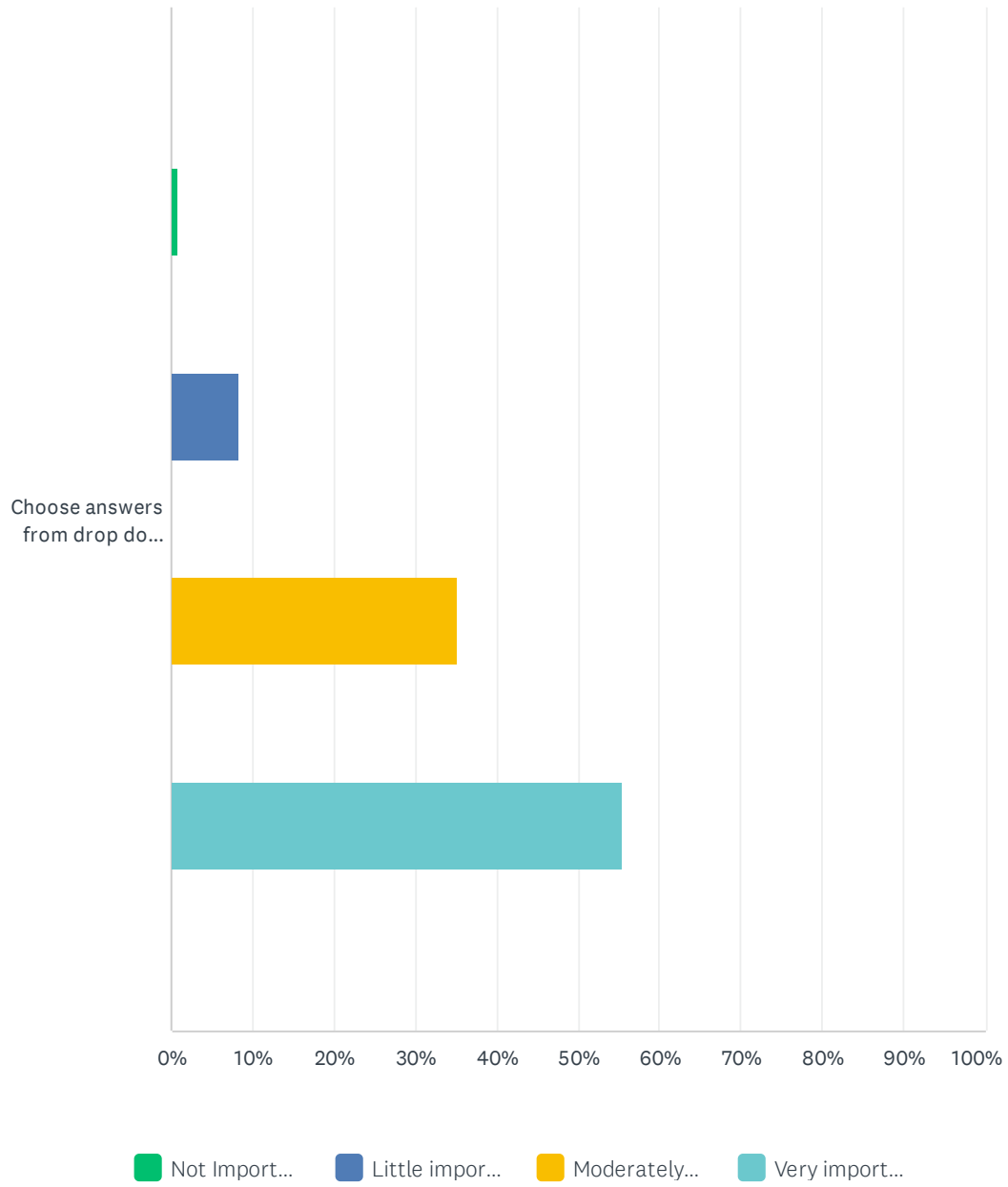
Q125 3.5.4.2 Using the biopsychosocial/biomedical models.

Answered: 233 Skipped: 977



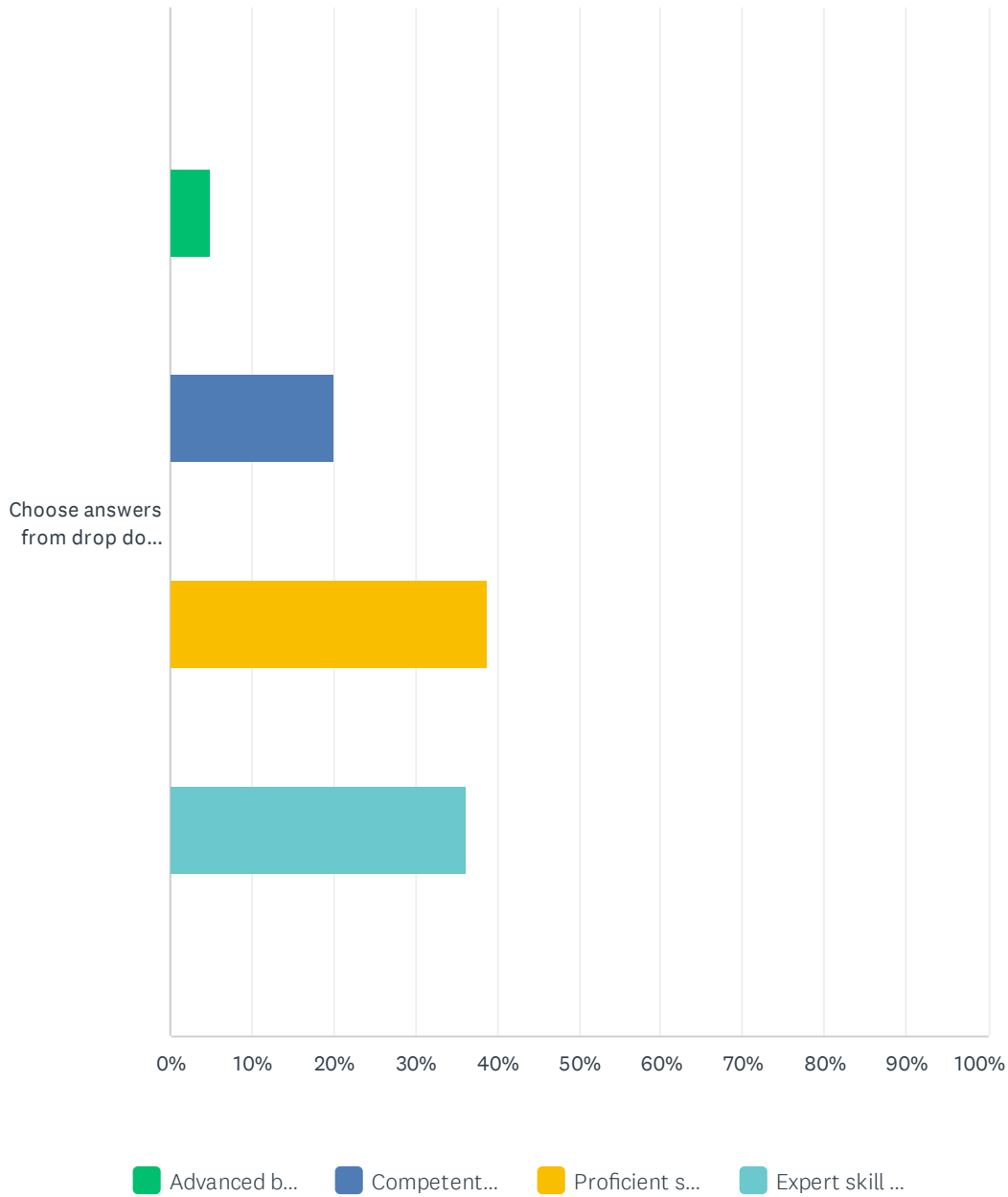
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.72% 4	2.58% 6	9.44% 22	23.18% 54	63.09% 147	233

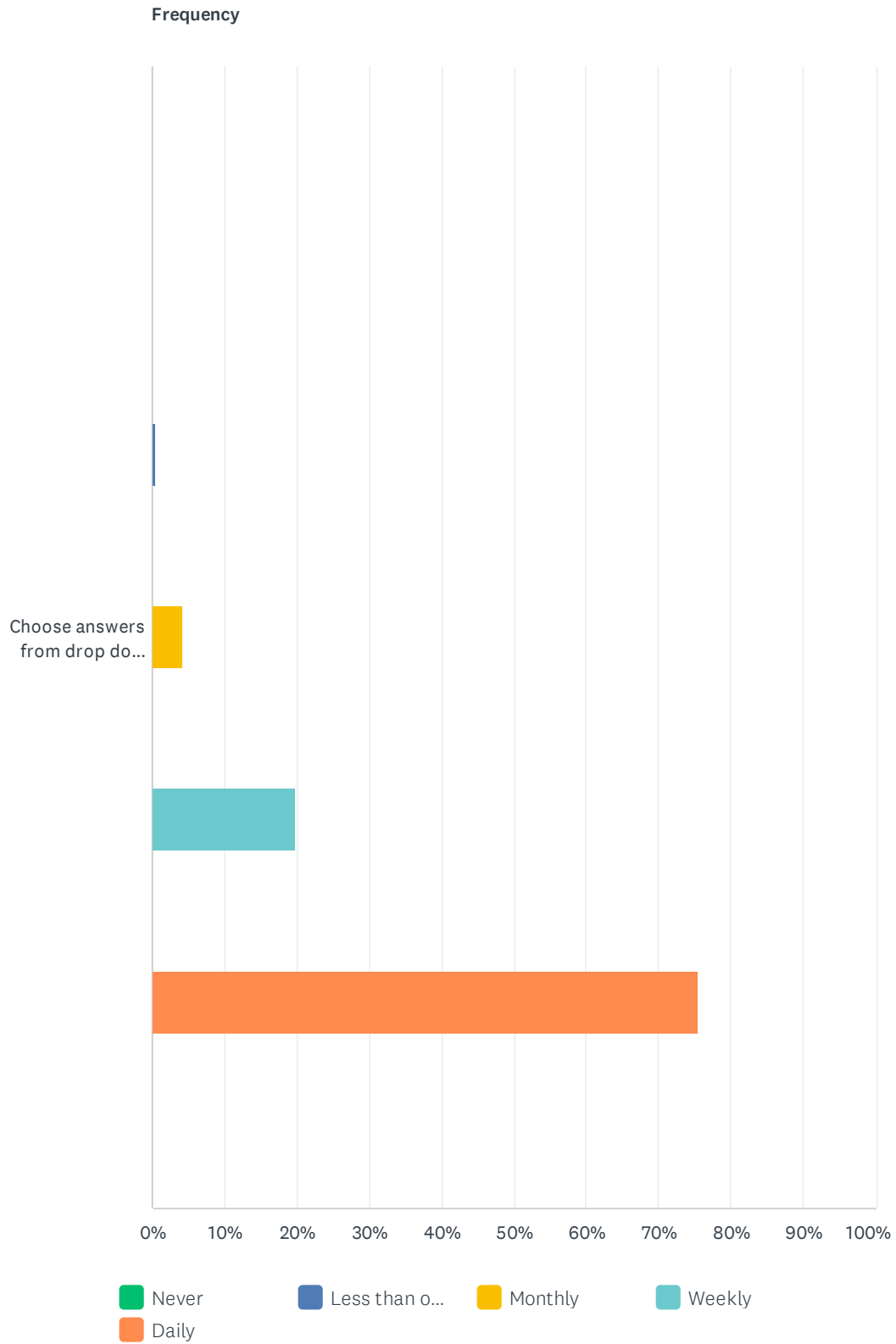
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.88% 2	8.37% 19	35.24% 80	55.51% 126	227

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.91% 11	20.09% 45	38.84% 87	36.16% 81	224

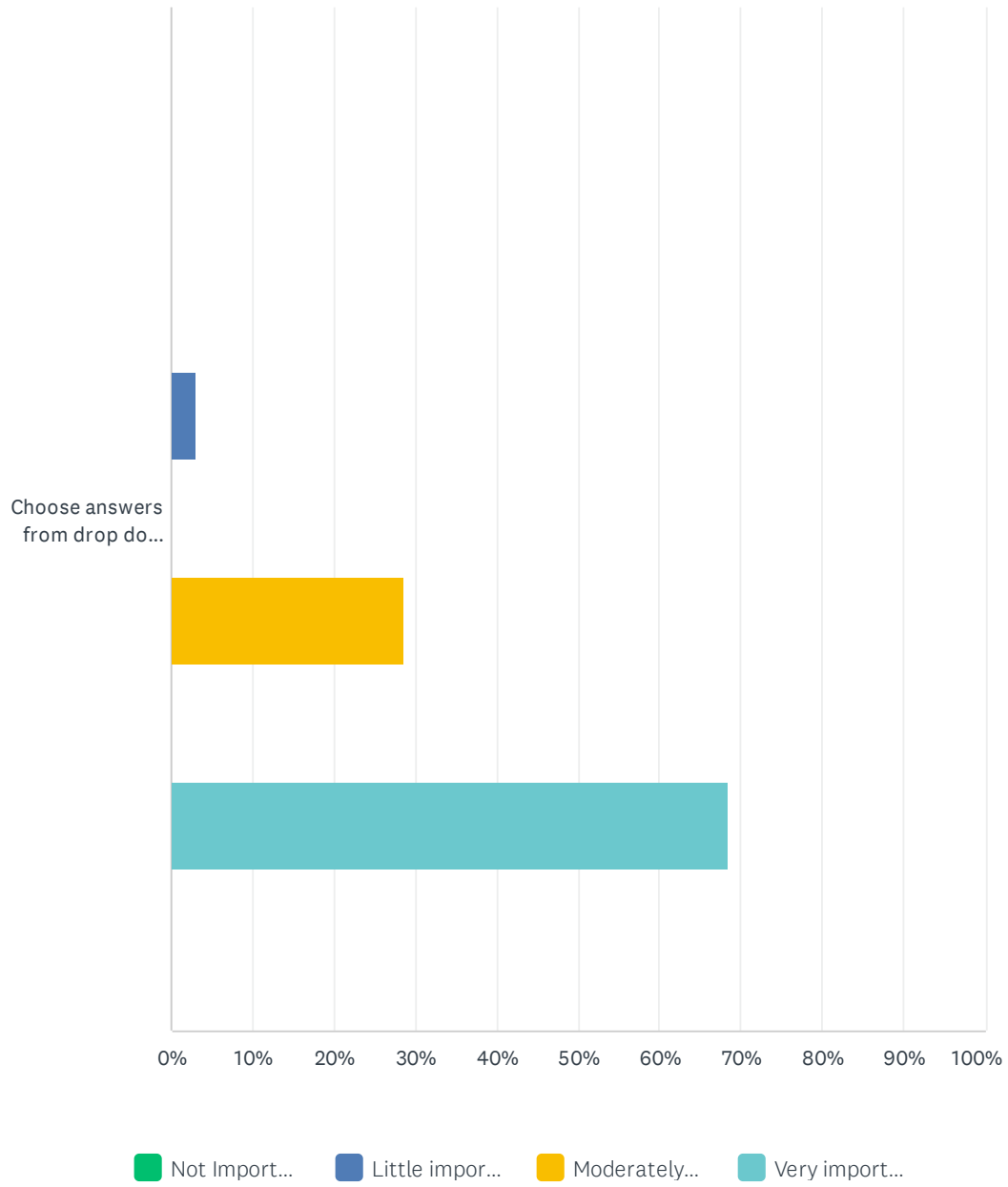
Q126 3.5.4.3 Addressing pain physiology and dose response.

Answered: 234 Skipped: 976



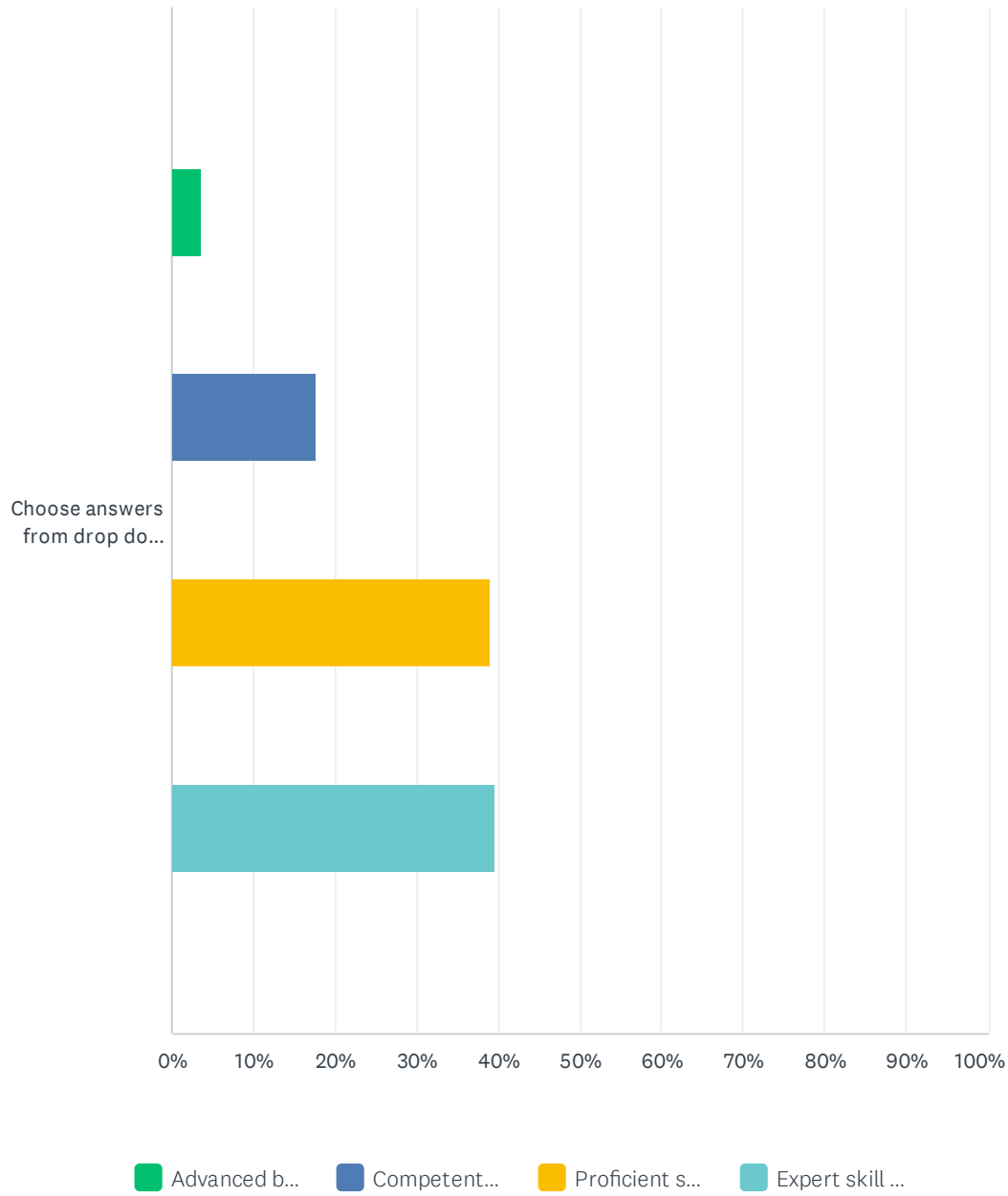
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.43% 1	4.29% 10	19.74% 46	75.54% 176	233

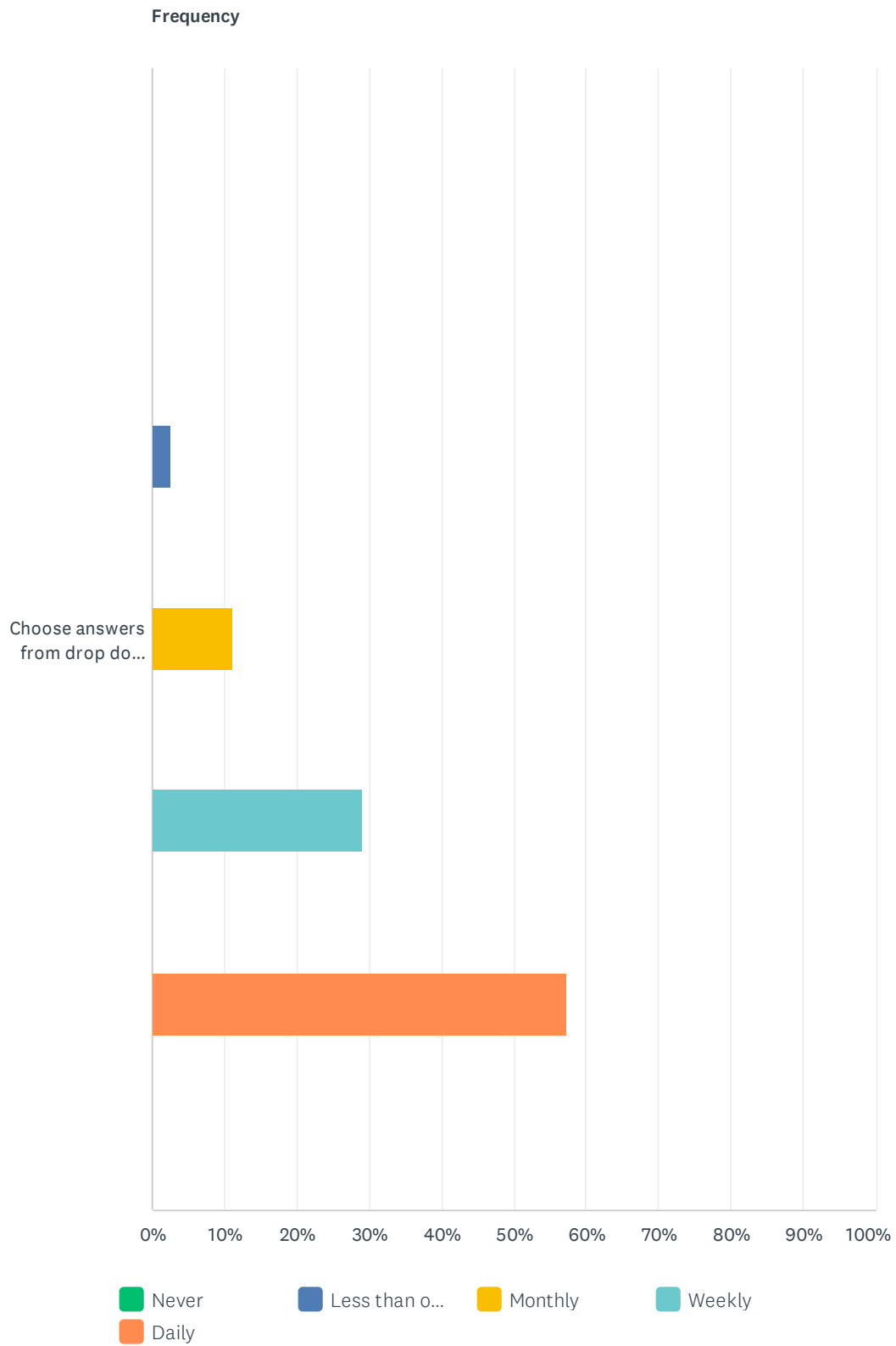
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.07% 7	28.51% 65	68.42% 156	228

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.56% 8	17.78% 40	39.11% 88	39.56% 89	225

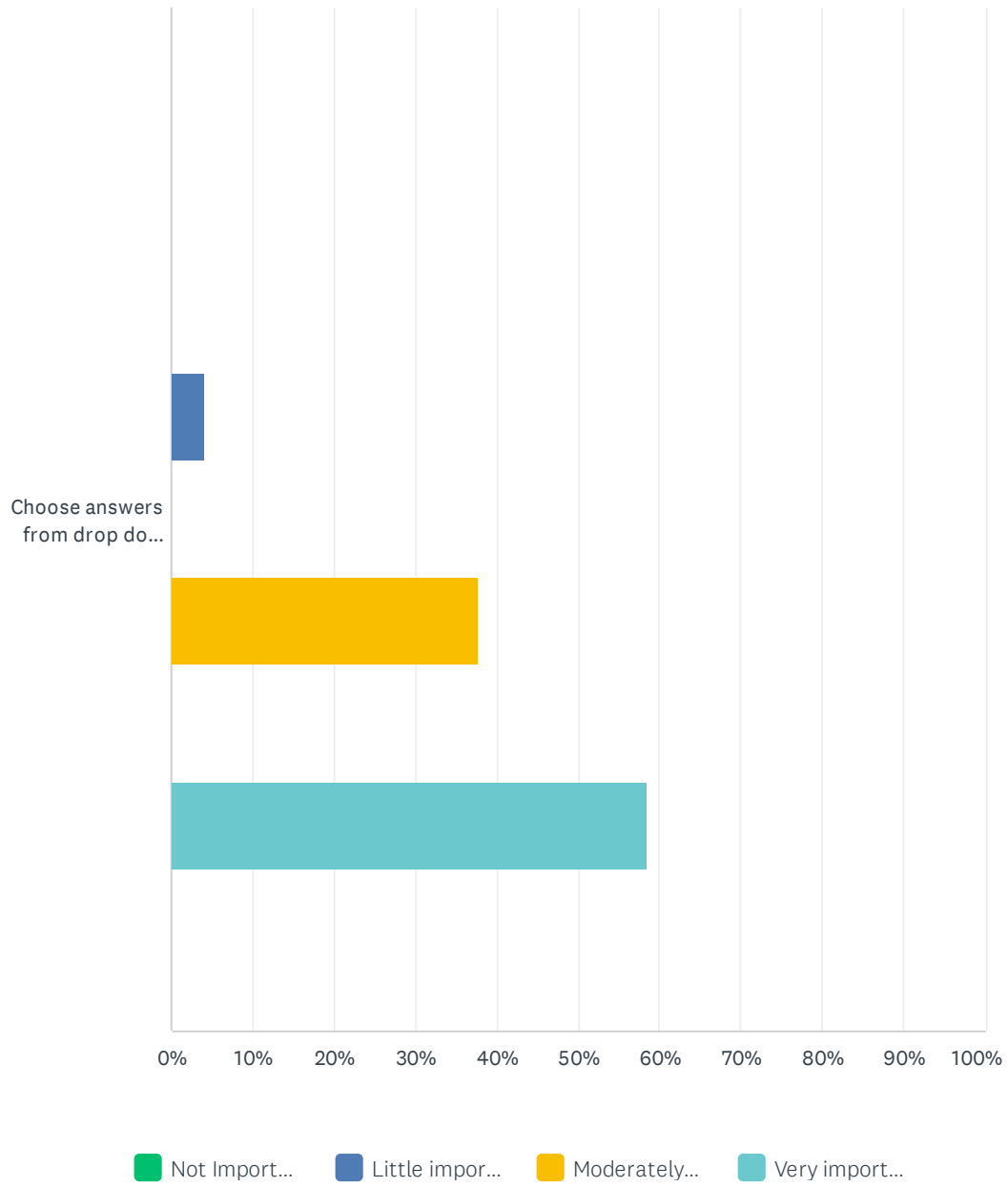
Q127 3.5.4.4 Addressing prevention and wellness.

Answered: 234 Skipped: 976



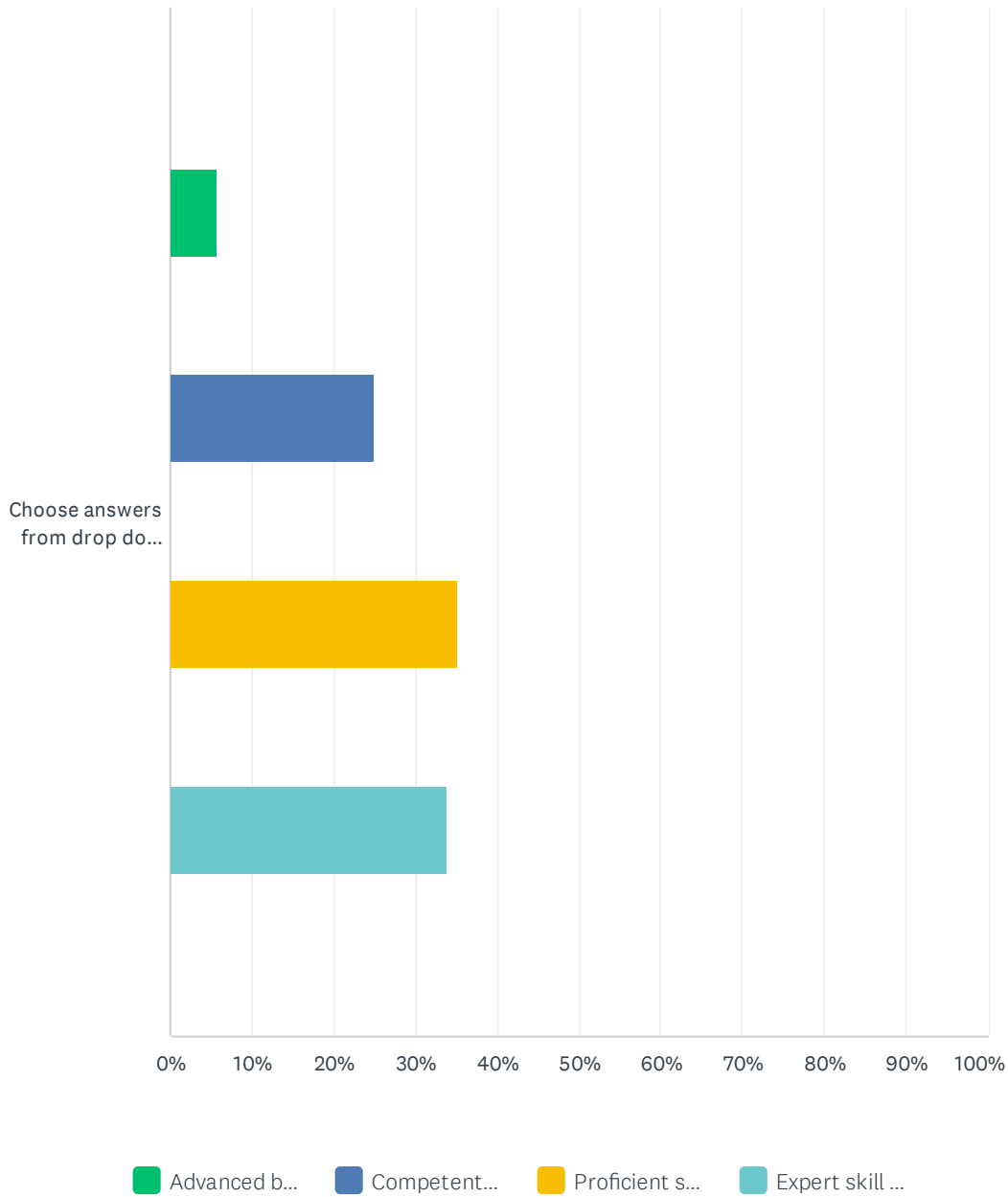
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	2.56% 6	11.11% 26	29.06% 68	57.26% 134	234

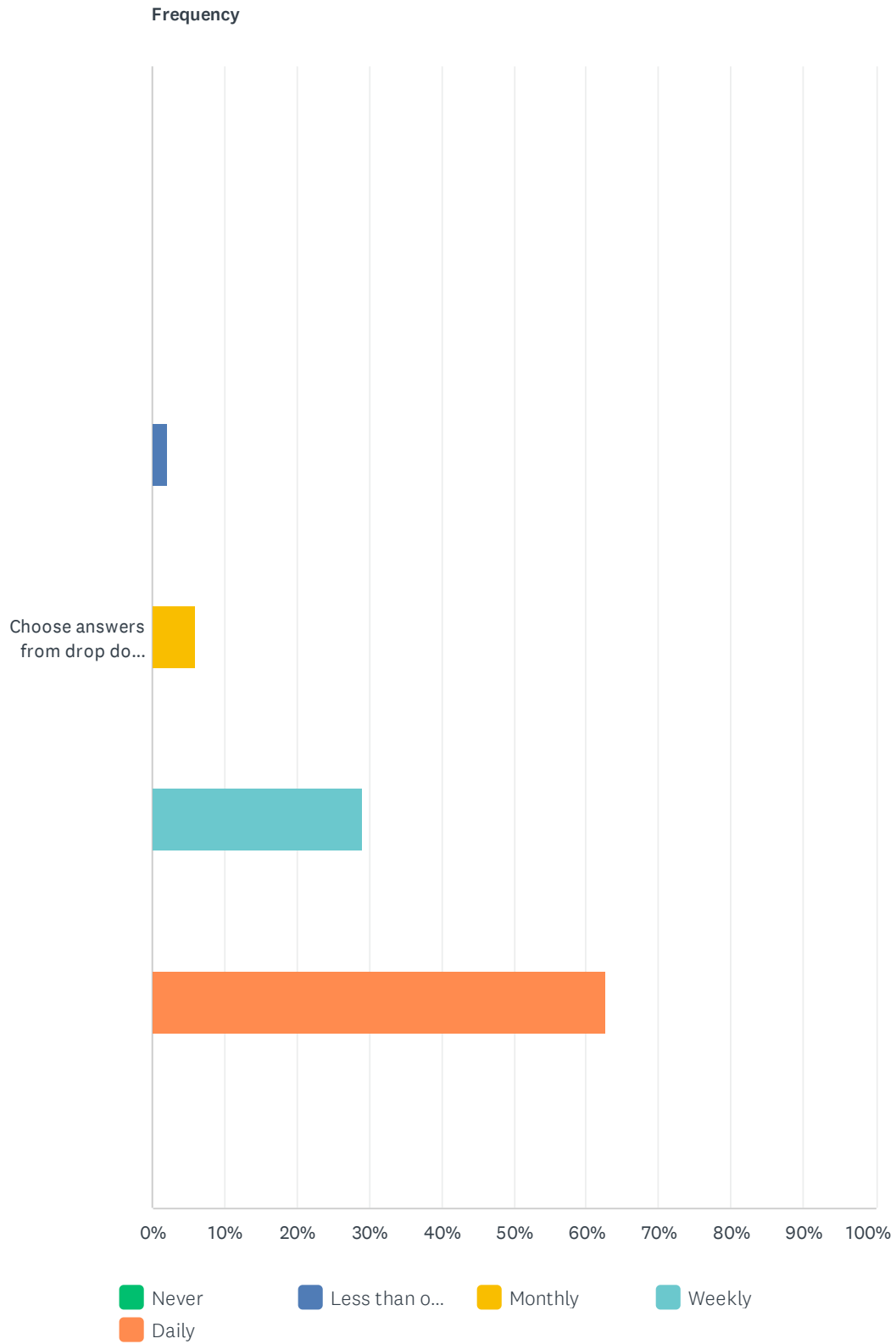
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.95% 9	37.72% 86	58.33% 133	228

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.80% 13	25.00% 56	35.27% 79	33.93% 76	224

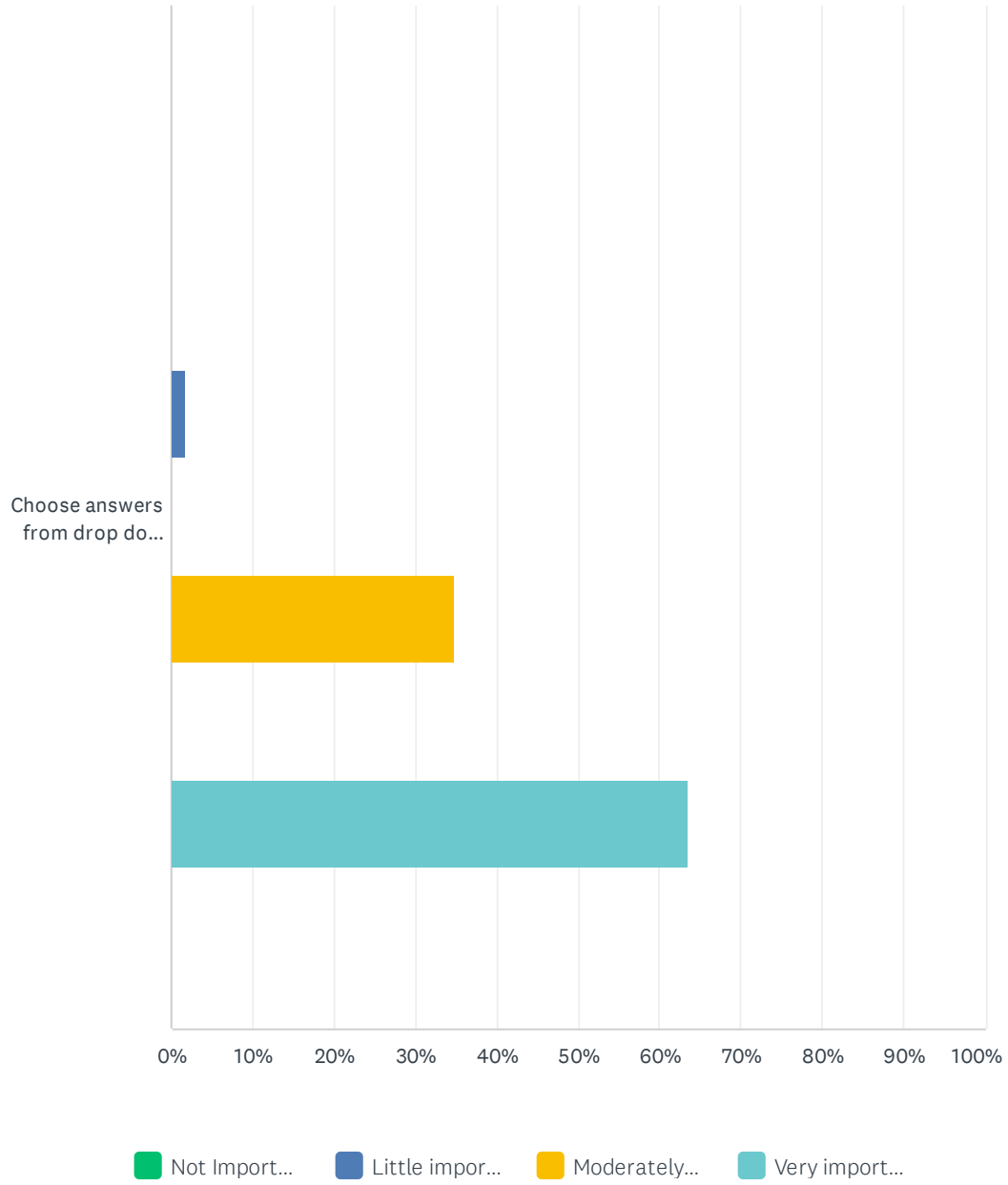
Q128 3.5.5 Injury prevention and wellness promotion (e.g., task adaptation, behavior modification, body mechanics).

Answered: 232 Skipped: 978



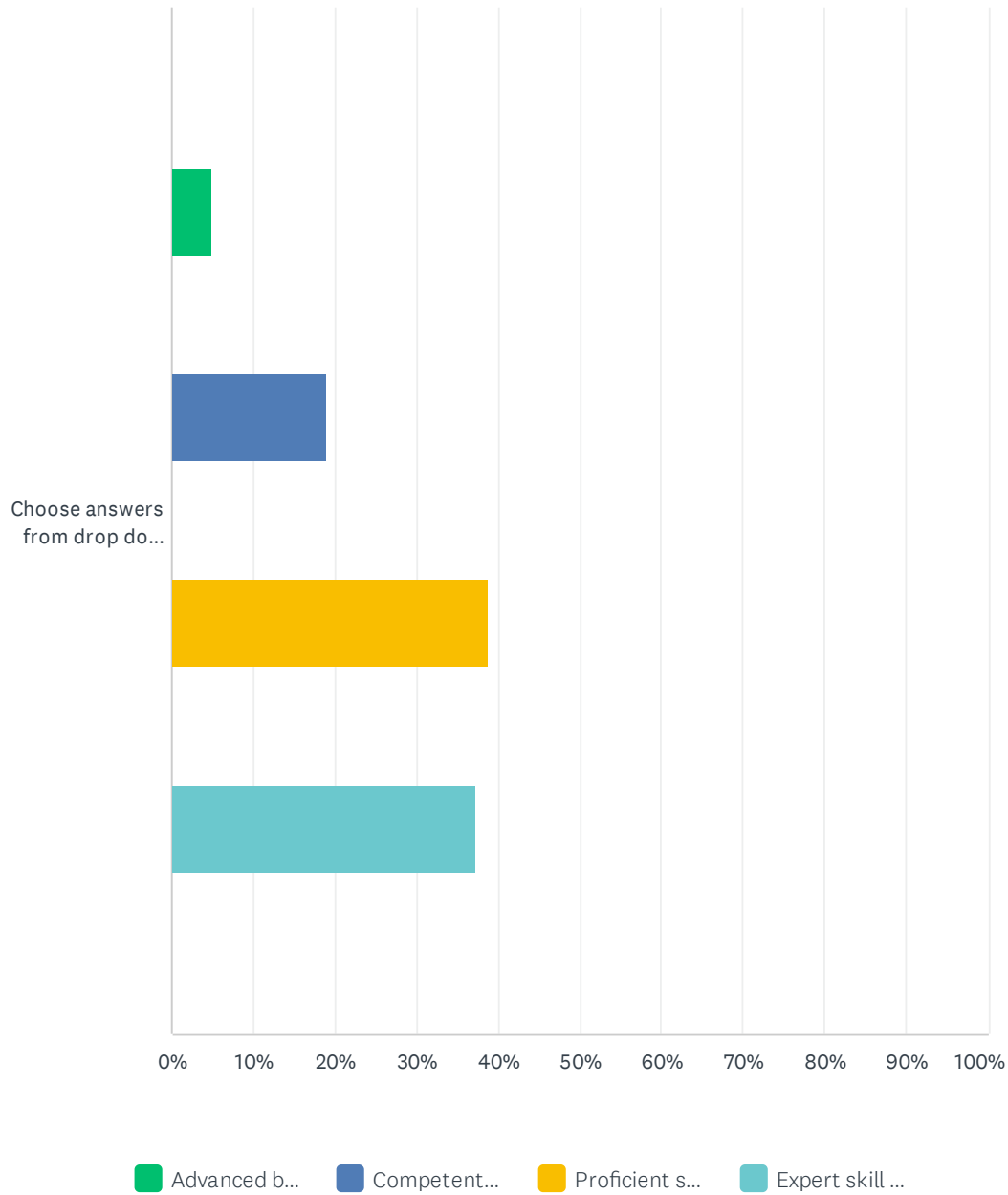
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	2.16% 5	6.06% 14	29.00% 67	62.77% 145	231

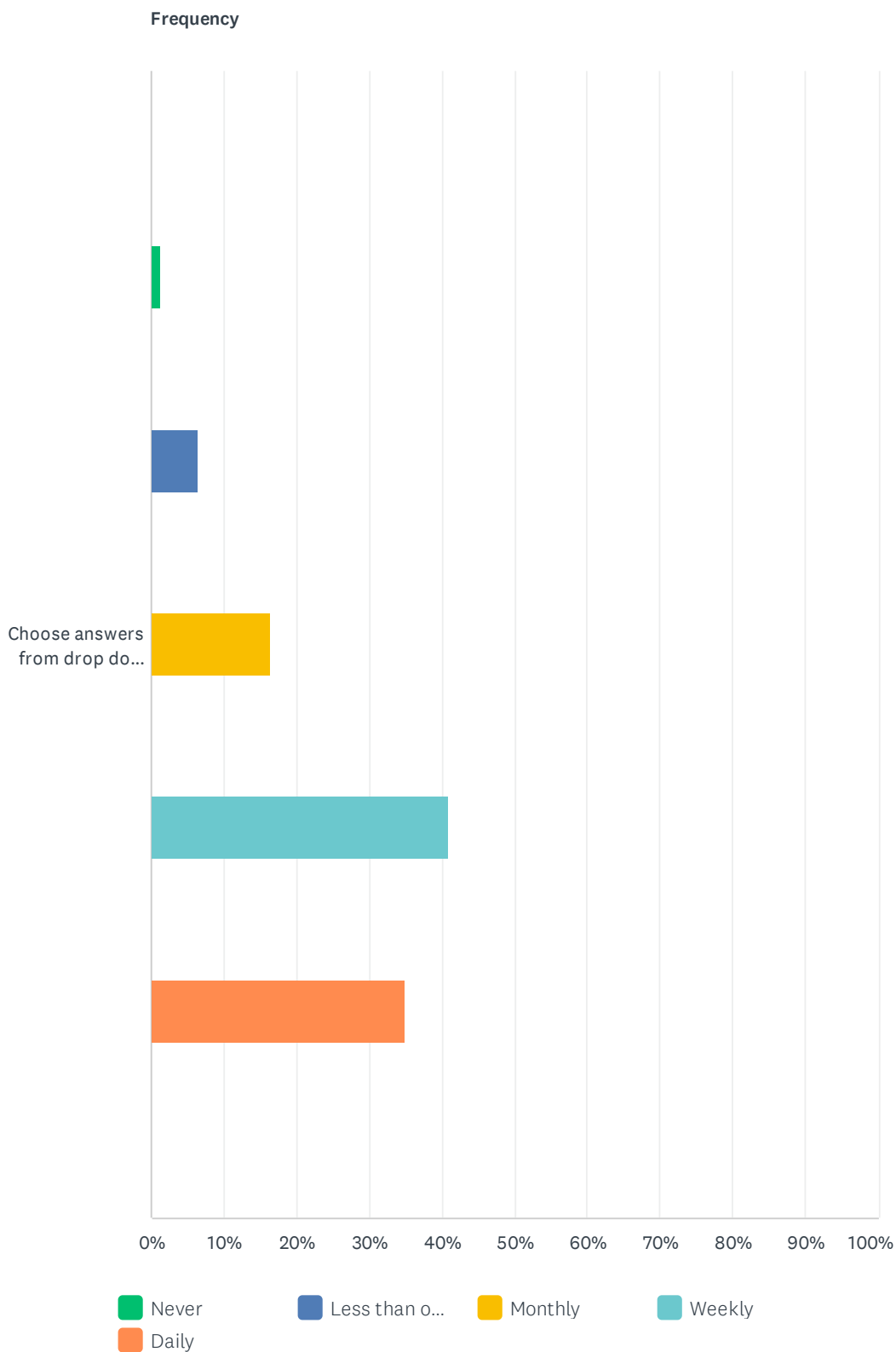
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.78% 4	34.67% 78	63.56% 143	225

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.95% 11	18.92% 42	38.74% 86	37.39% 83	222

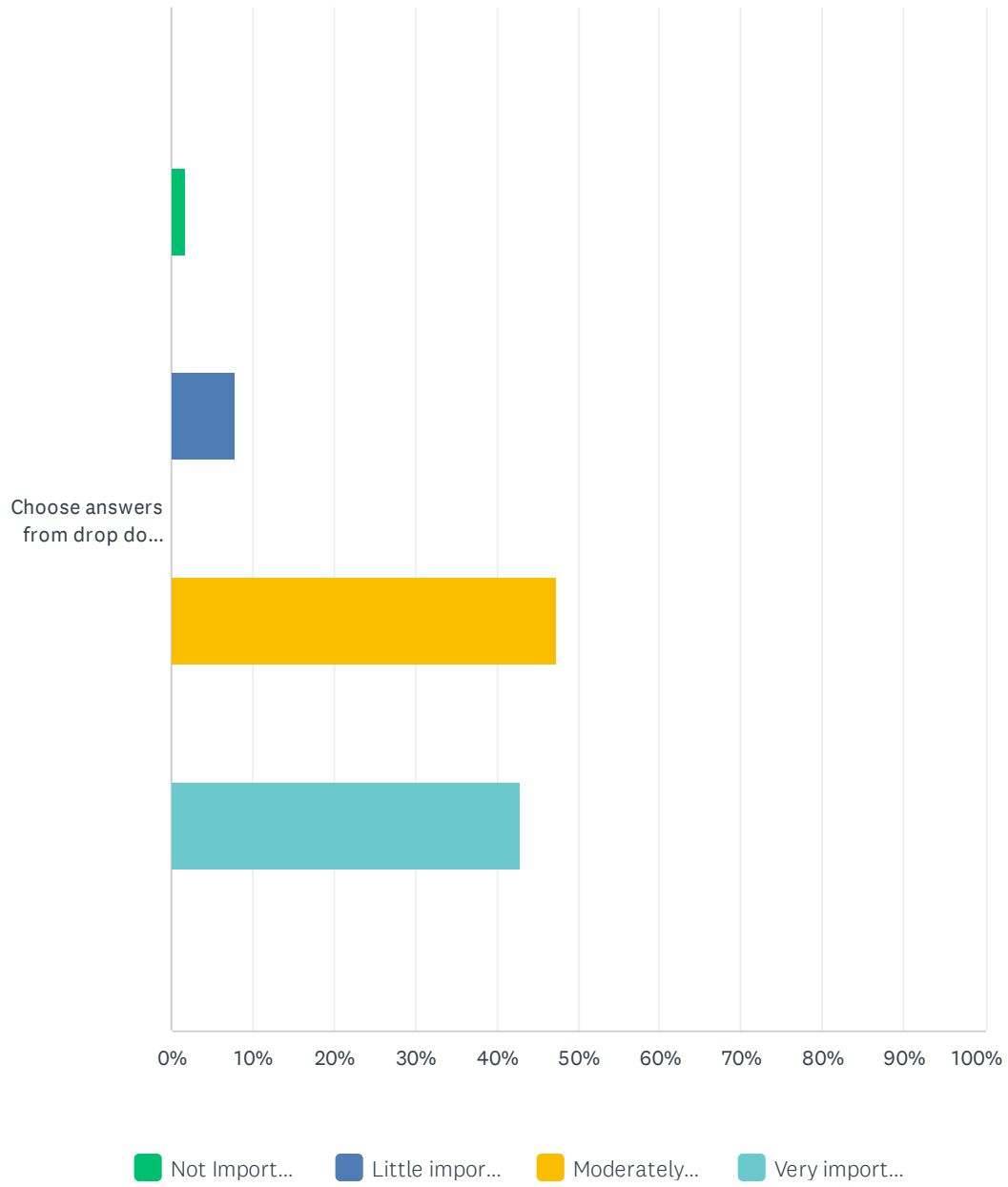
Q129 3.5.6 Sleep hygiene education (e.g., sleep schedules, technology usage, sleep habits, relationship between sleep and medication usage).

Answered: 232 Skipped: 978



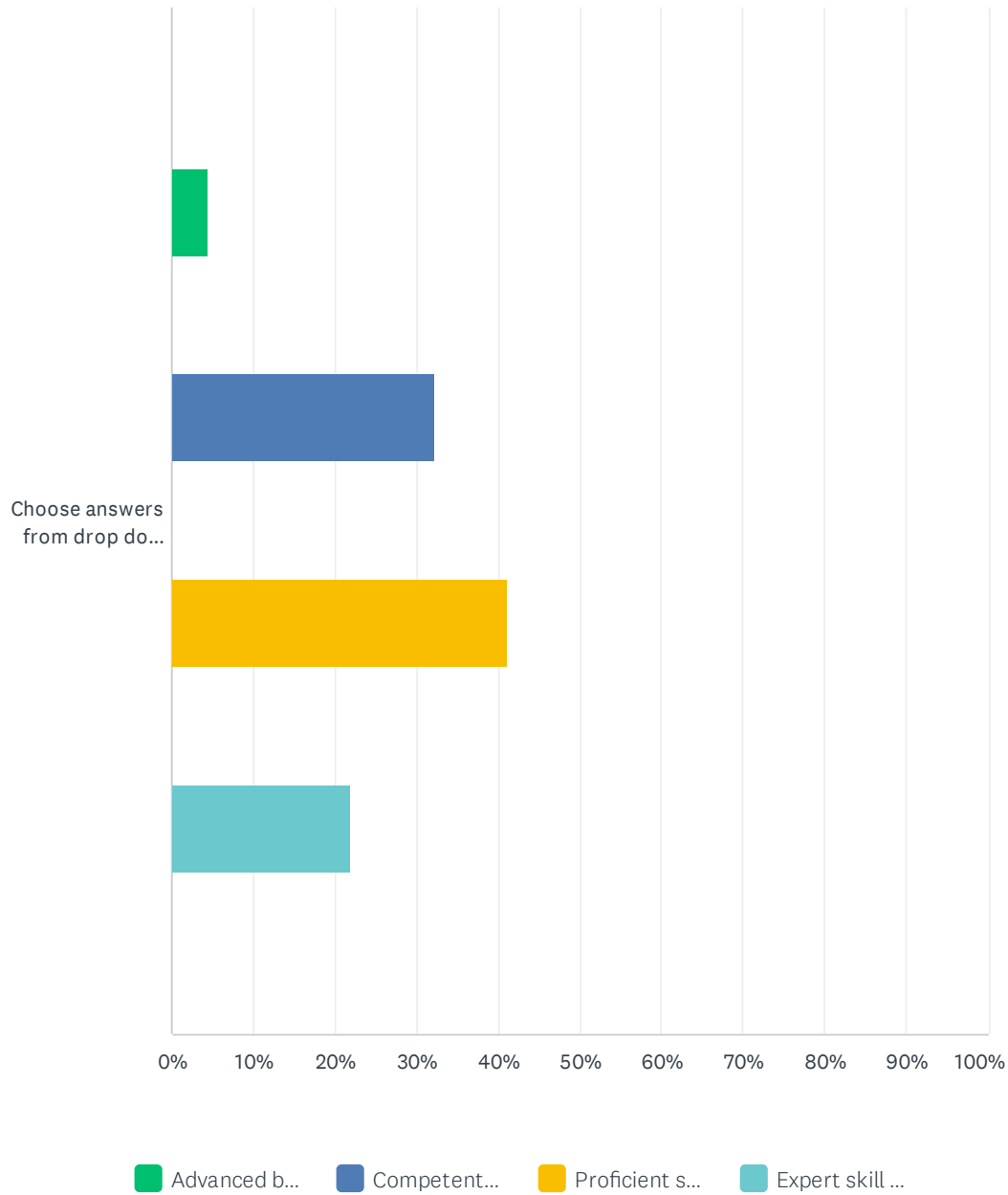
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.29% 3	6.47% 15	16.38% 38	40.95% 95	34.91% 81	232

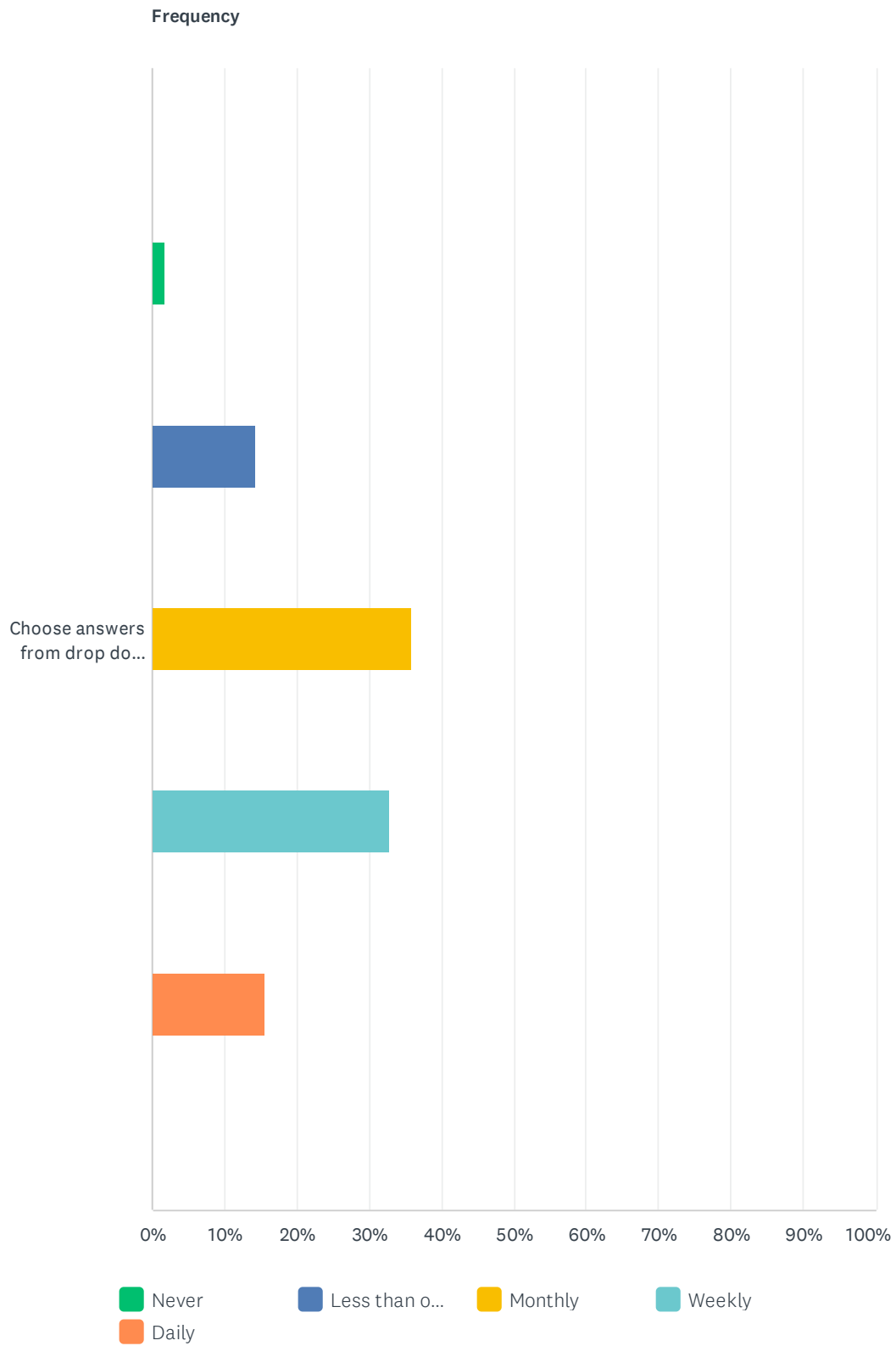
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.77% 4	7.96% 18	47.35% 107	42.92% 97	226

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.48% 10	32.29% 72	41.26% 92	21.97% 49	223

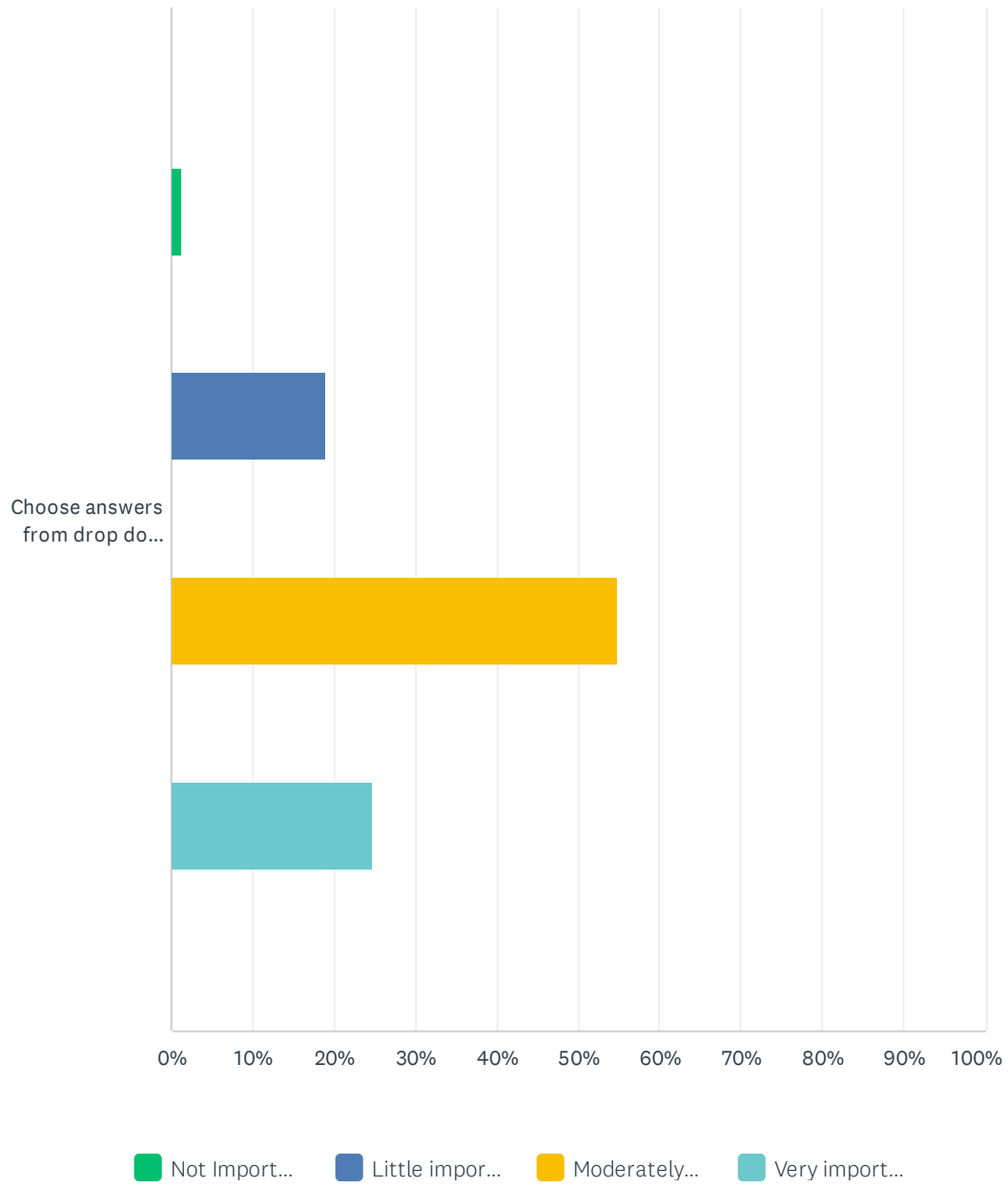
Q130 3.5.7 Nutritional education.

Answered: 232 Skipped: 978



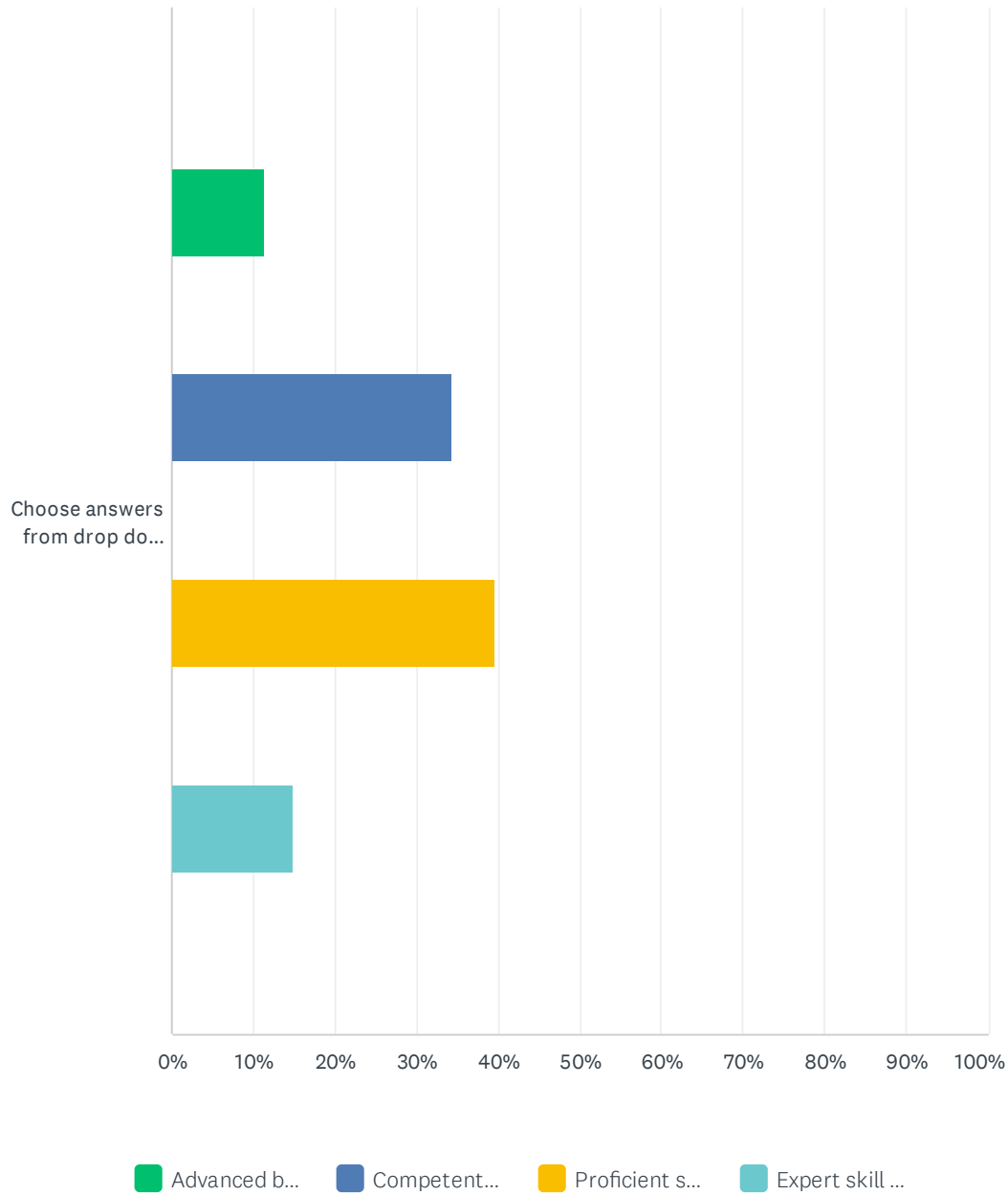
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.72% 4	14.22% 33	35.78% 83	32.76% 76	15.52% 36	232

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.33% 3	19.03% 43	54.87% 124	24.78% 56	226

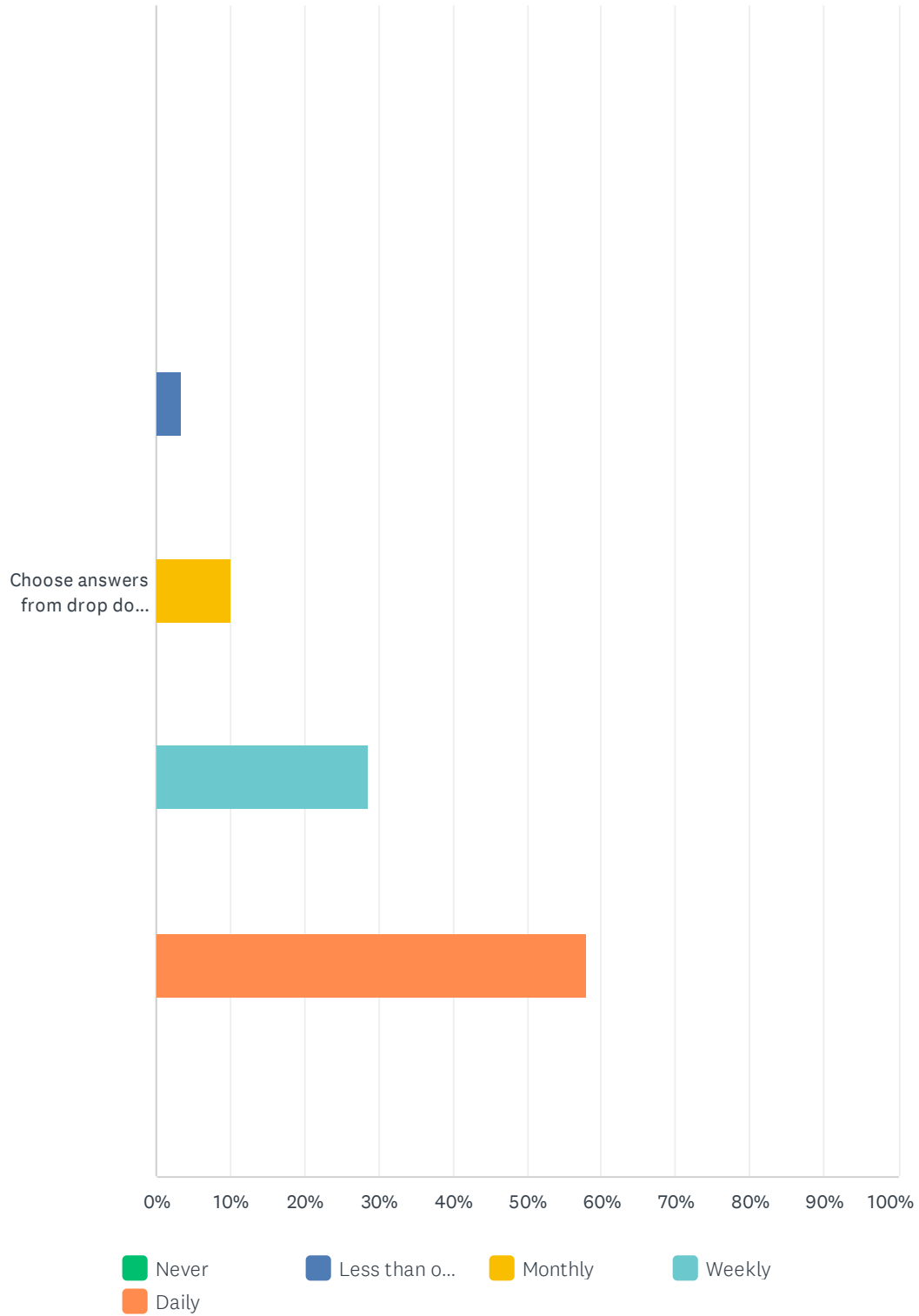
Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.26% 25	34.23% 76	39.64% 88	14.86% 33	222

Q131 3.5.8 Pain neuroscience education.

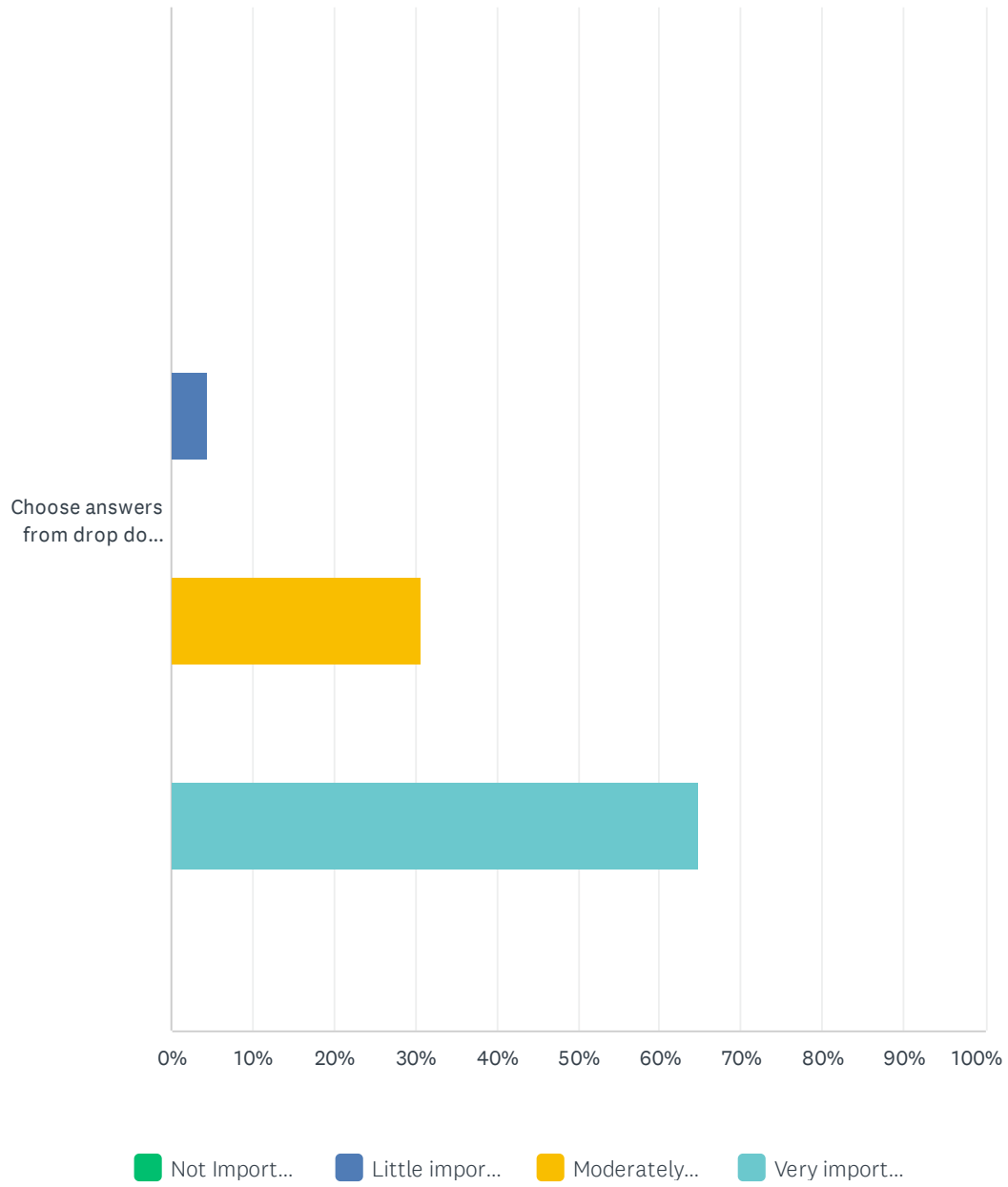
Answered: 232 Skipped: 978

Frequency



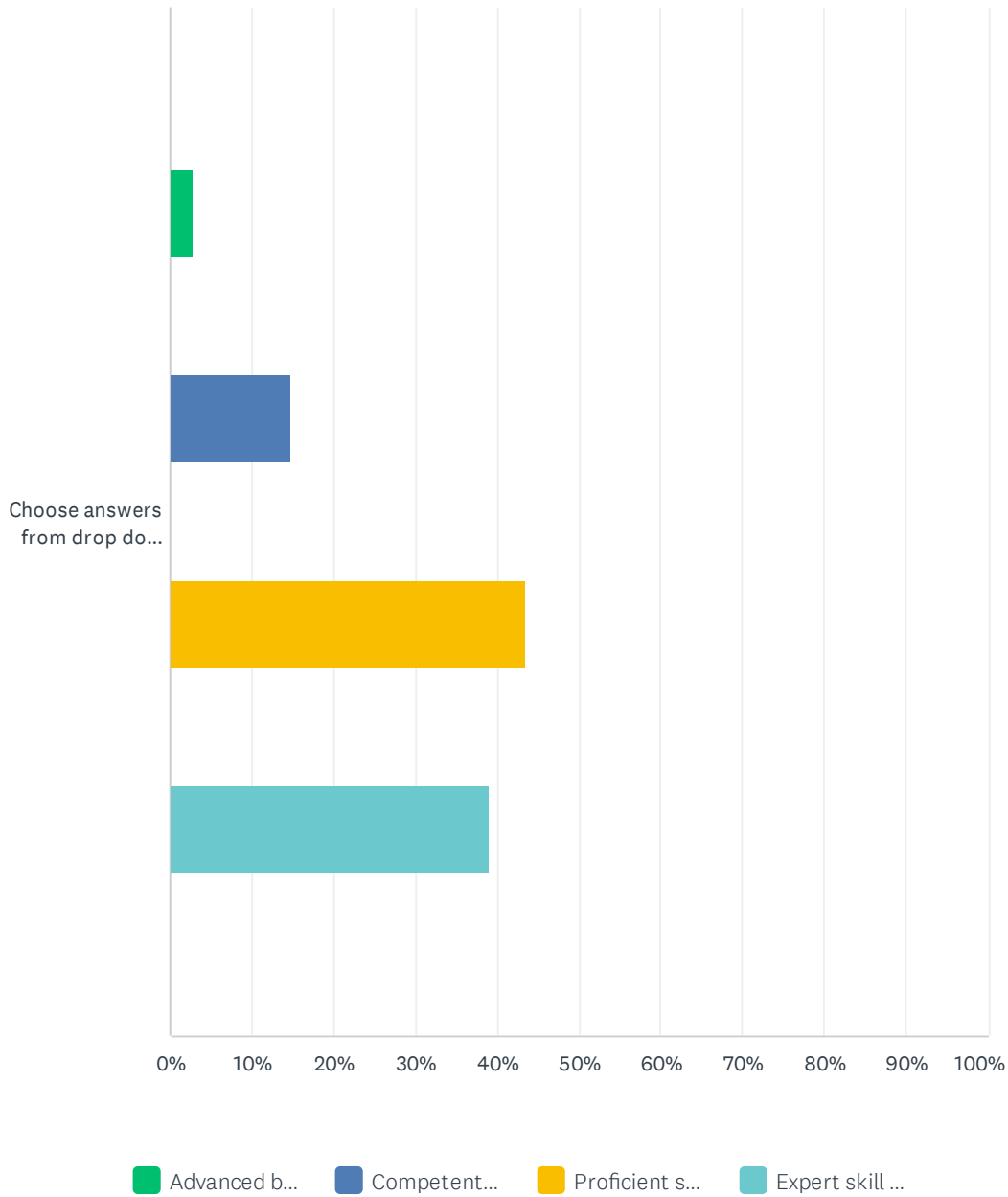
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	3.46% 8	9.96% 23	28.57% 66	58.01% 134	231

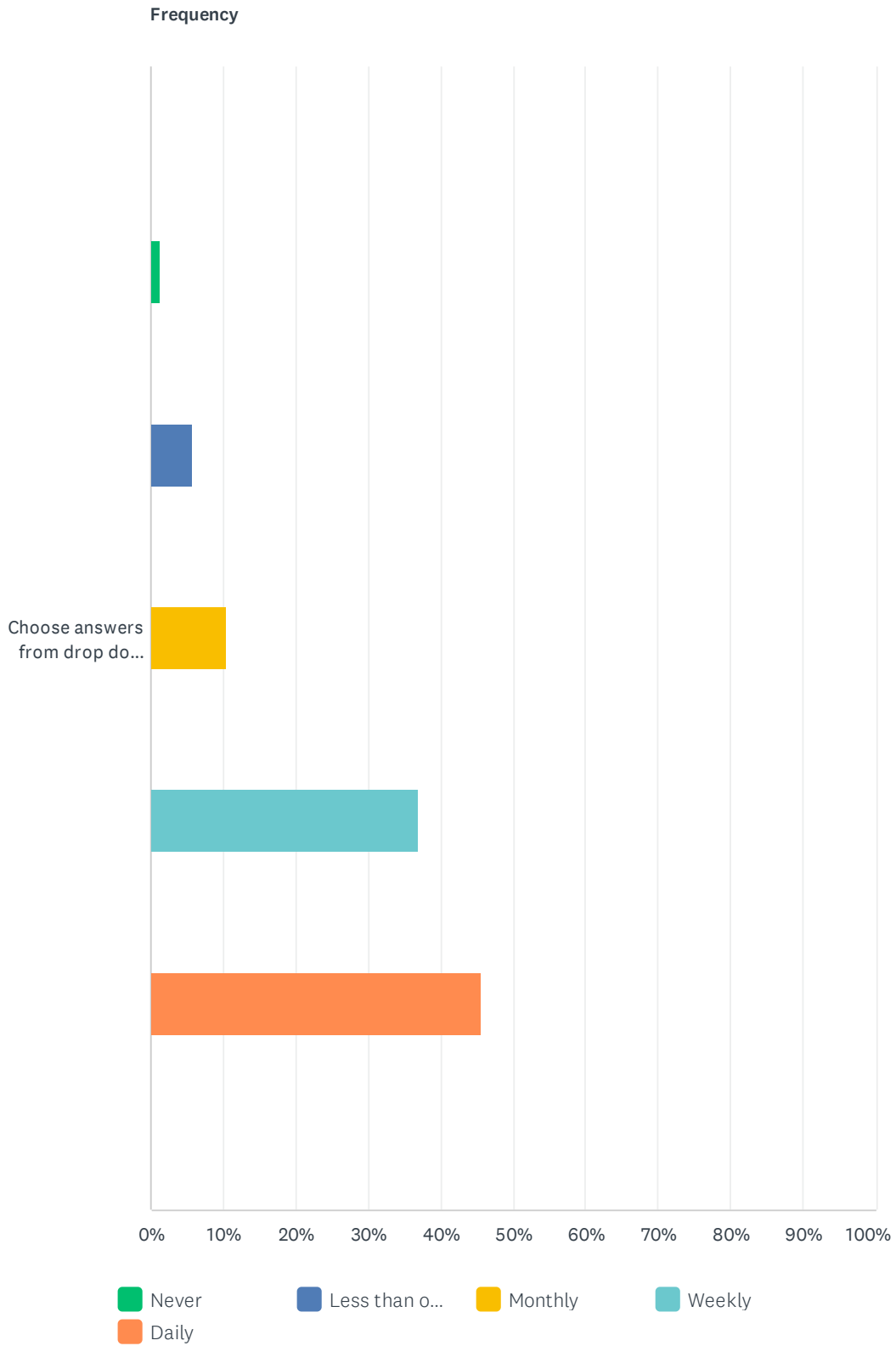
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	4.44% 10	30.67% 69	64.89% 146	225

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.69% 6	14.80% 33	43.50% 97	39.01% 87	223

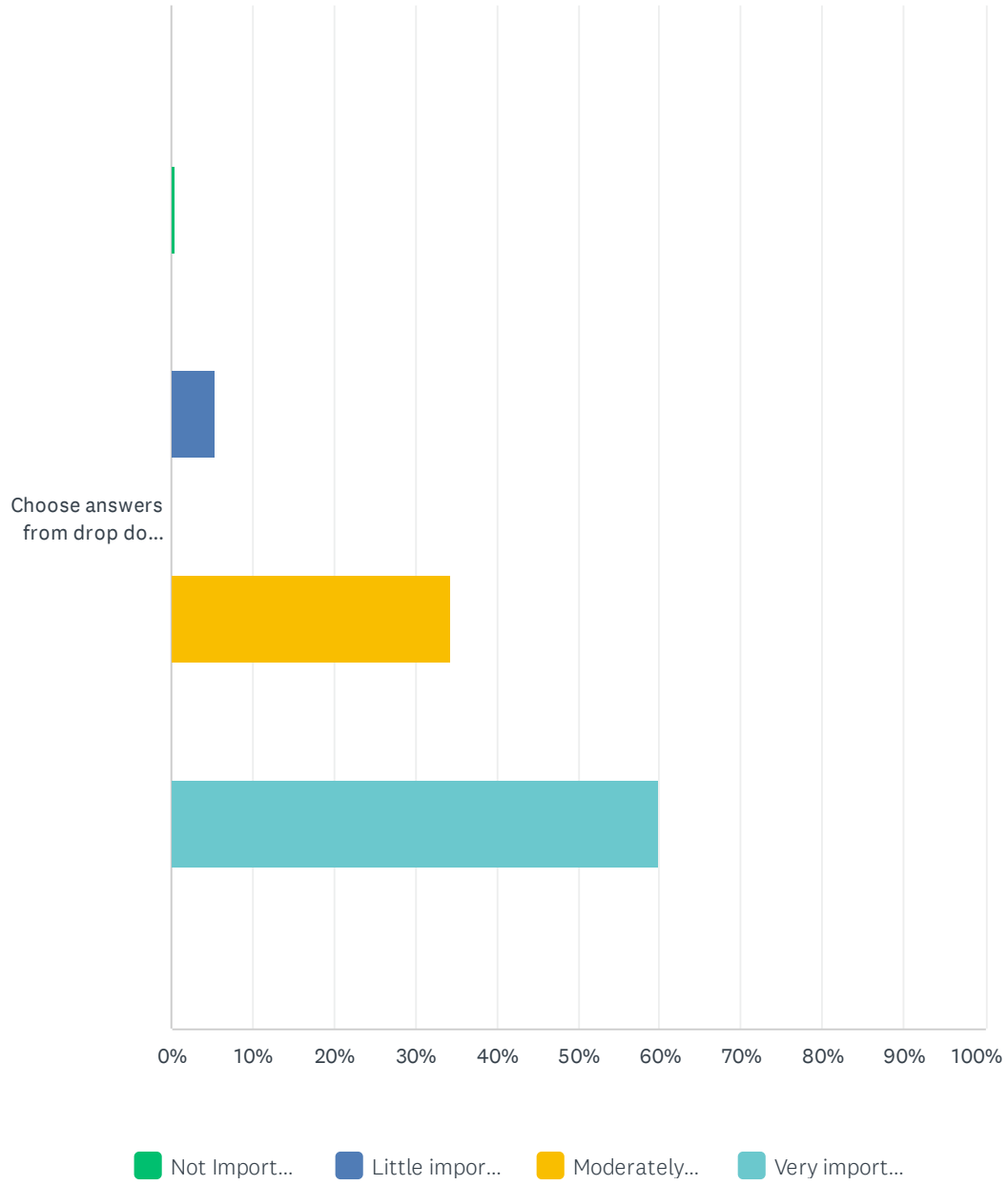
Q132 3.5.9 Graded exposure.

Answered: 230 Skipped: 980



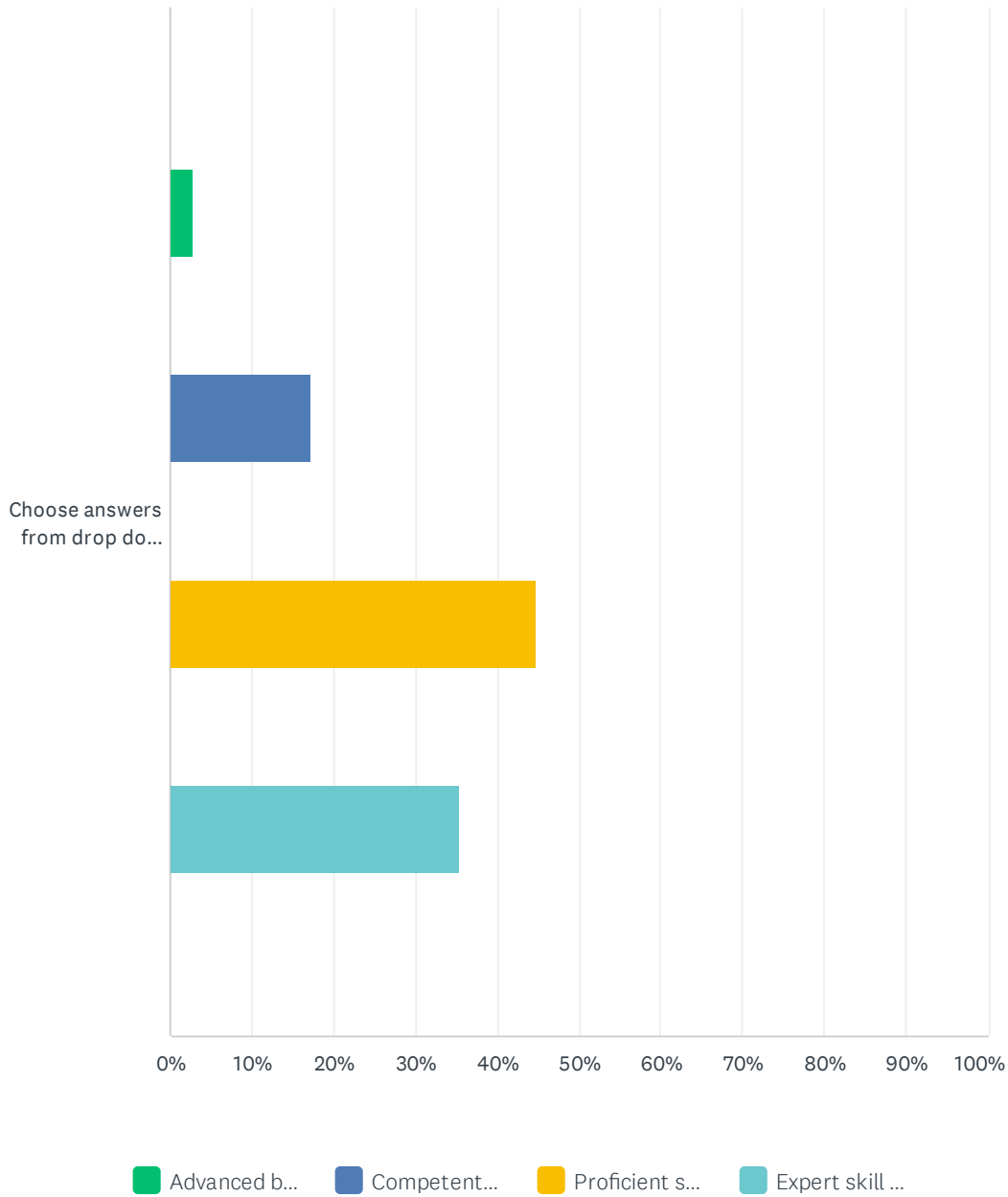
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.30% 3	5.65% 13	10.43% 24	36.96% 85	45.65% 105	230

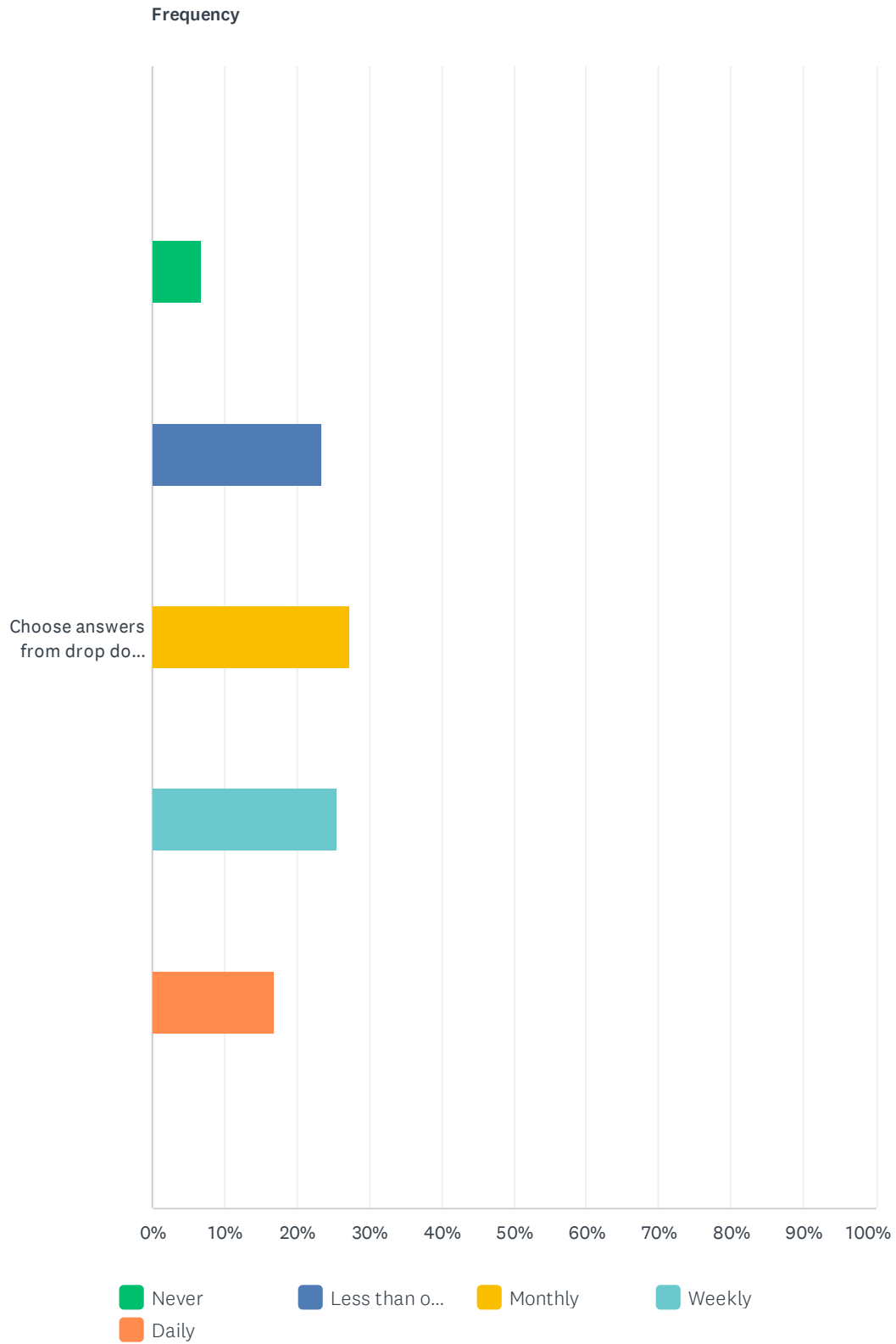
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.45% 1	5.36% 12	34.38% 77	59.82% 134	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.71% 6	17.19% 38	44.80% 99	35.29% 78	221

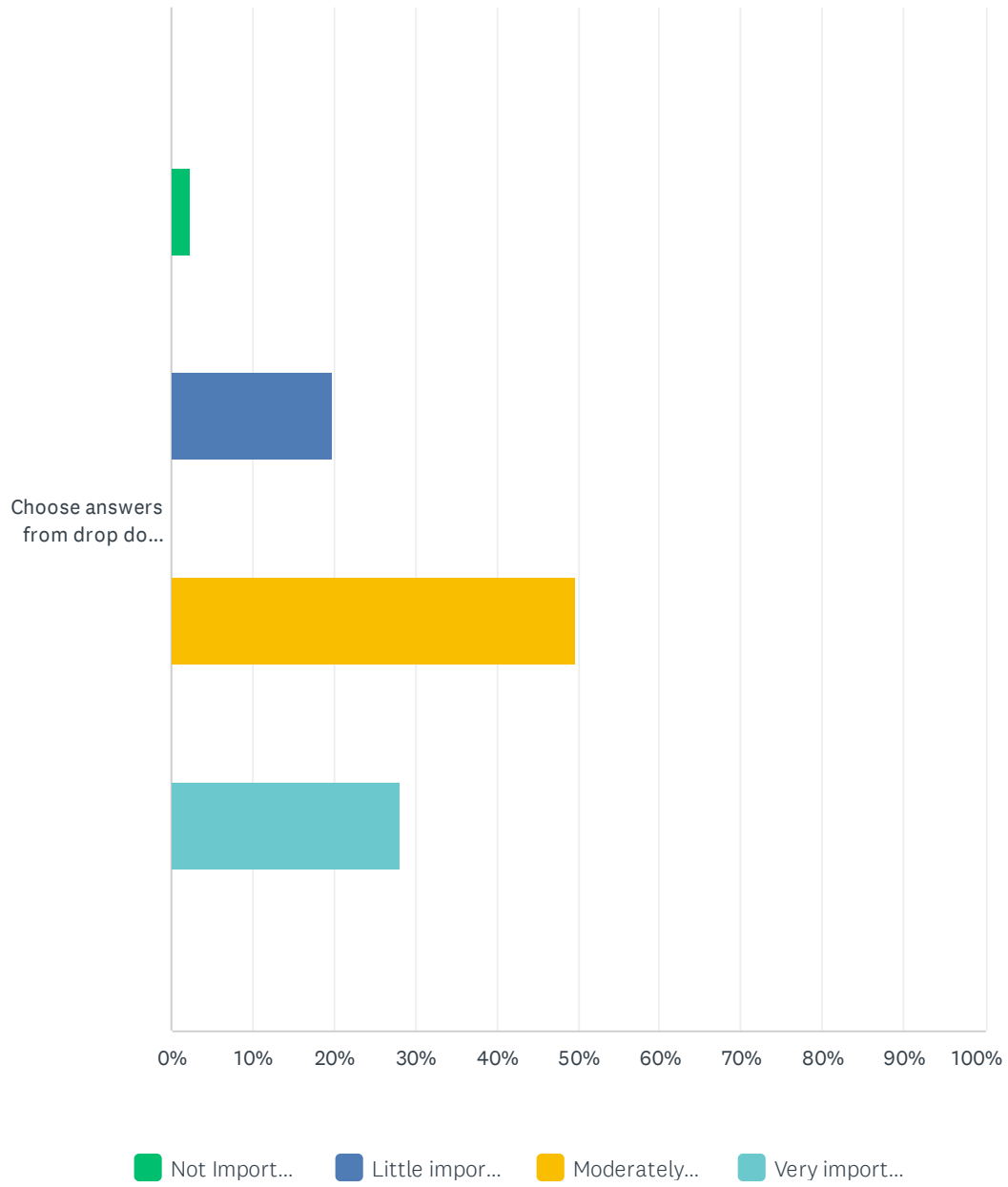
Q133 3.5.10 Graded motor imagery.

Answered: 231 Skipped: 979



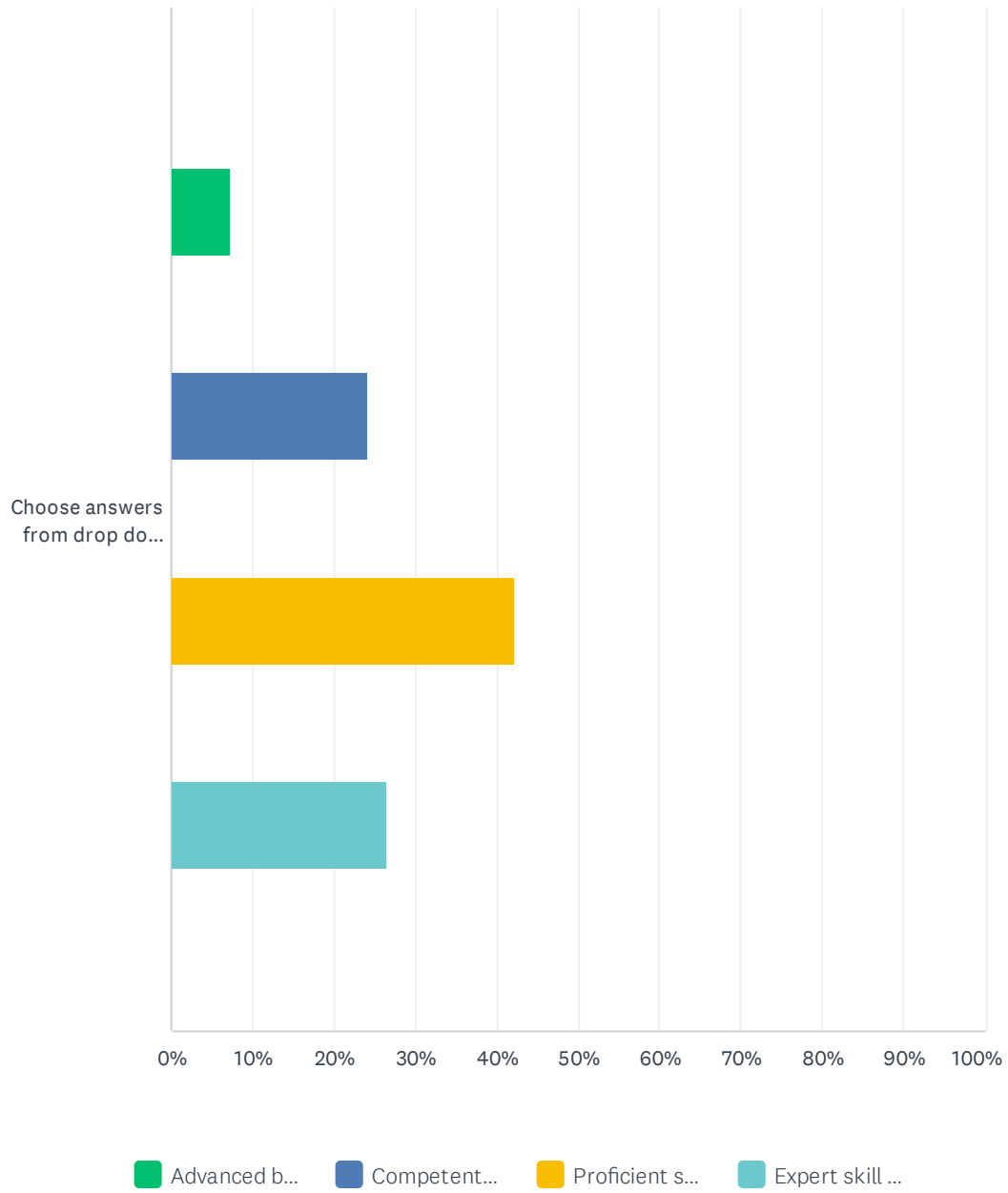
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	6.93% 16	23.38% 54	27.27% 63	25.54% 59	16.88% 39	231

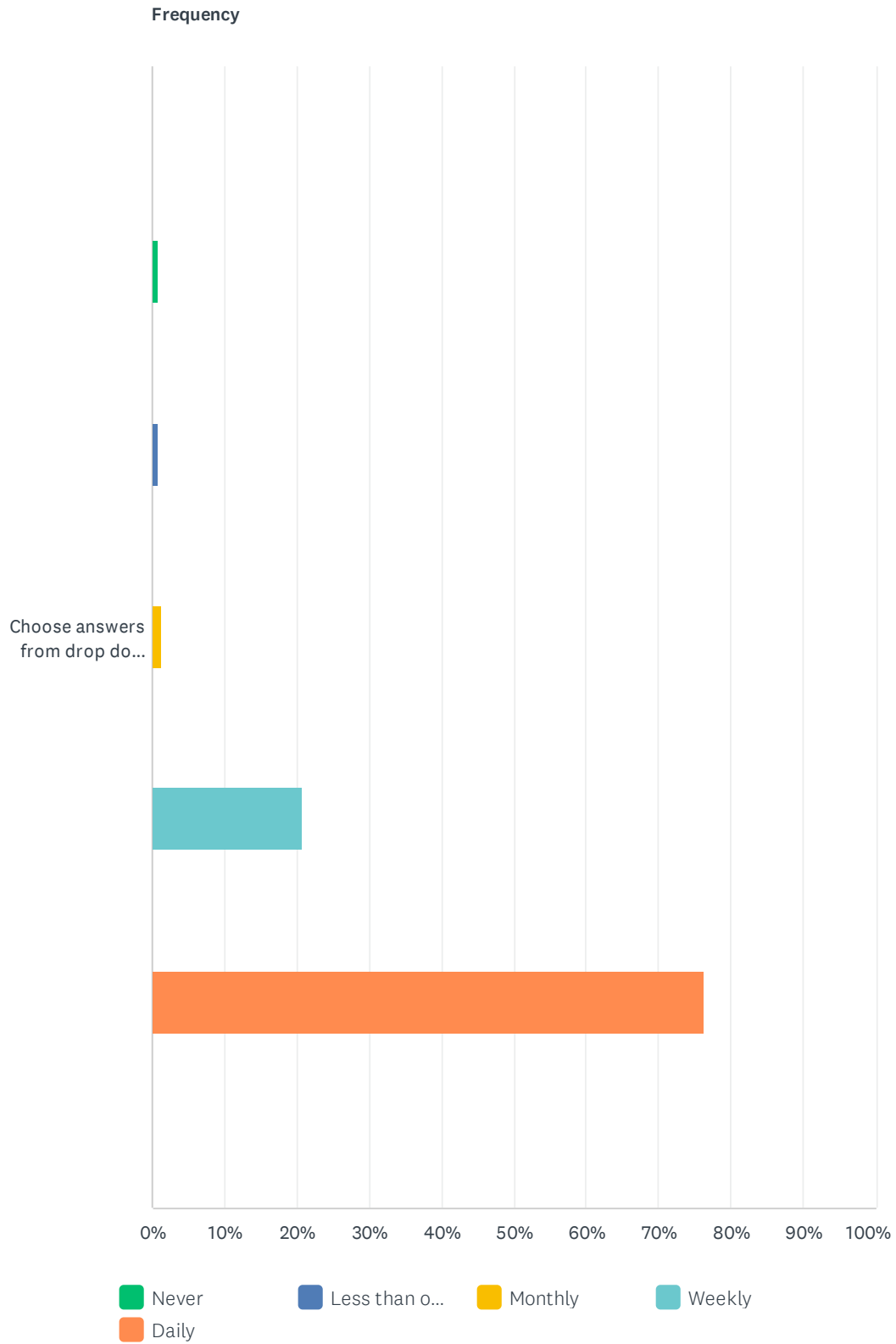
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.24% 5	19.73% 44	49.78% 111	28.25% 63	223

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.27% 16	24.09% 53	42.27% 93	26.36% 58	220

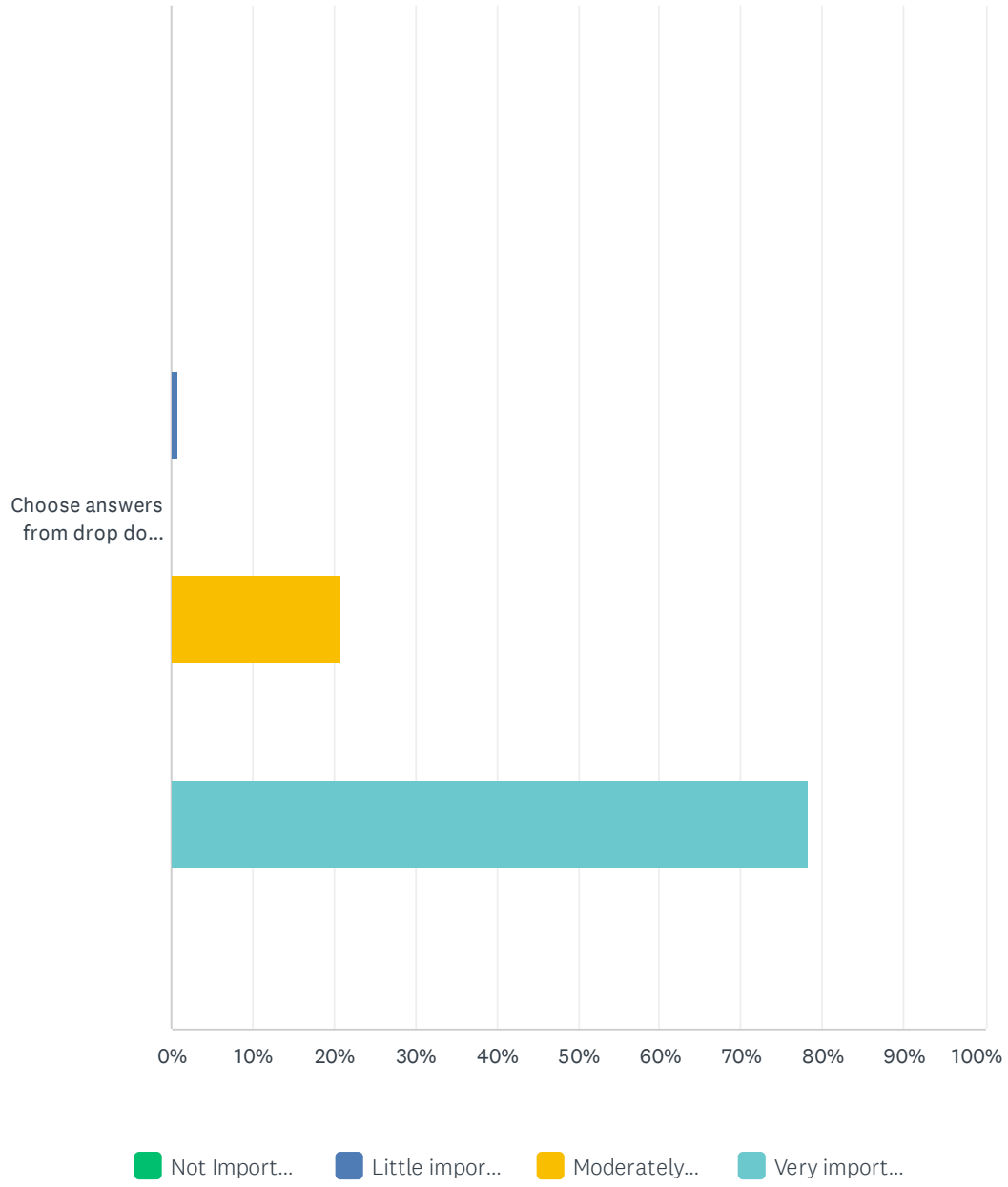
Q134 3.5.4.11 Graded activity/exercise.

Answered: 232 Skipped: 978



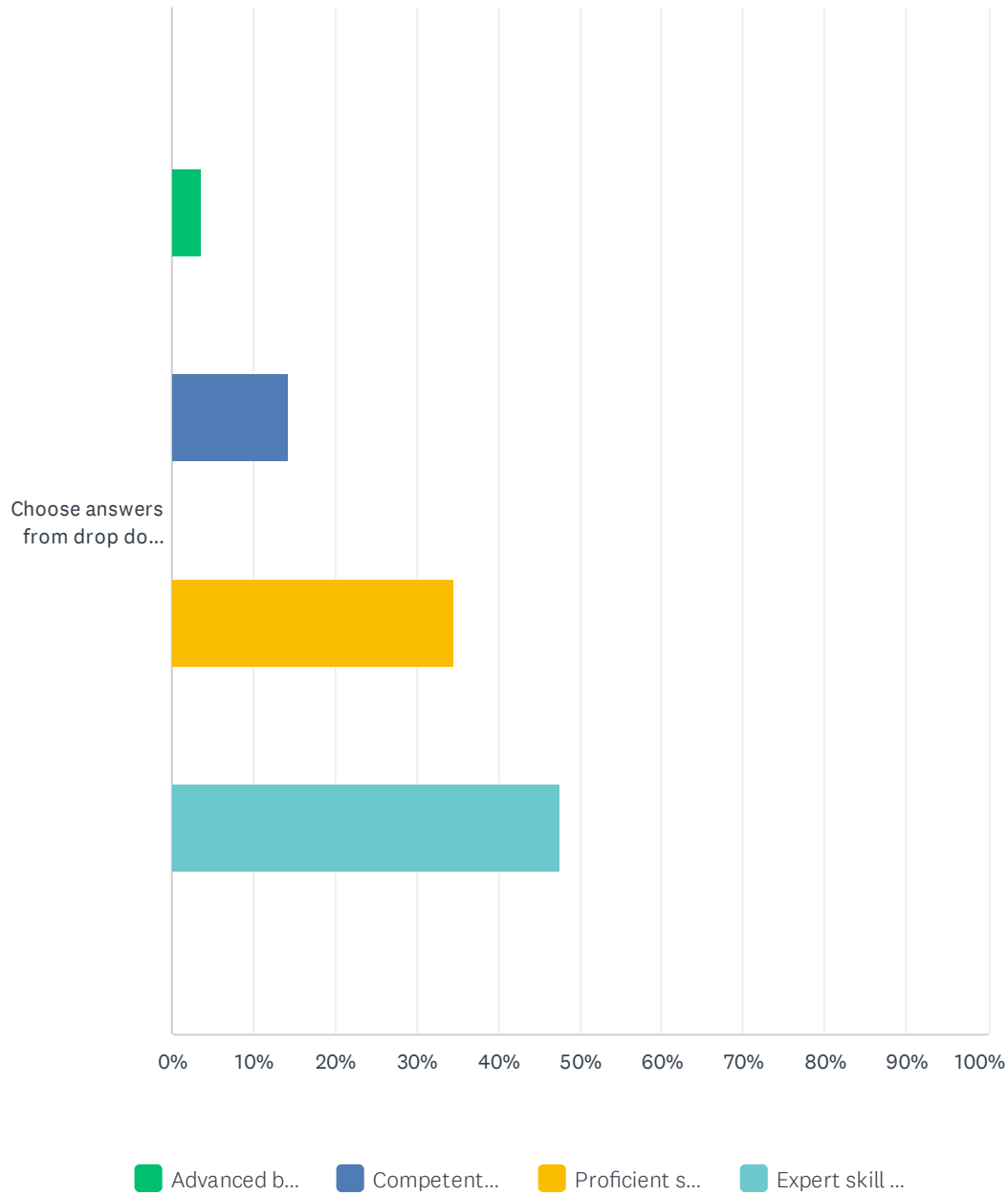
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.86% 2	0.86% 2	1.29% 3	20.69% 48	76.29% 177	232

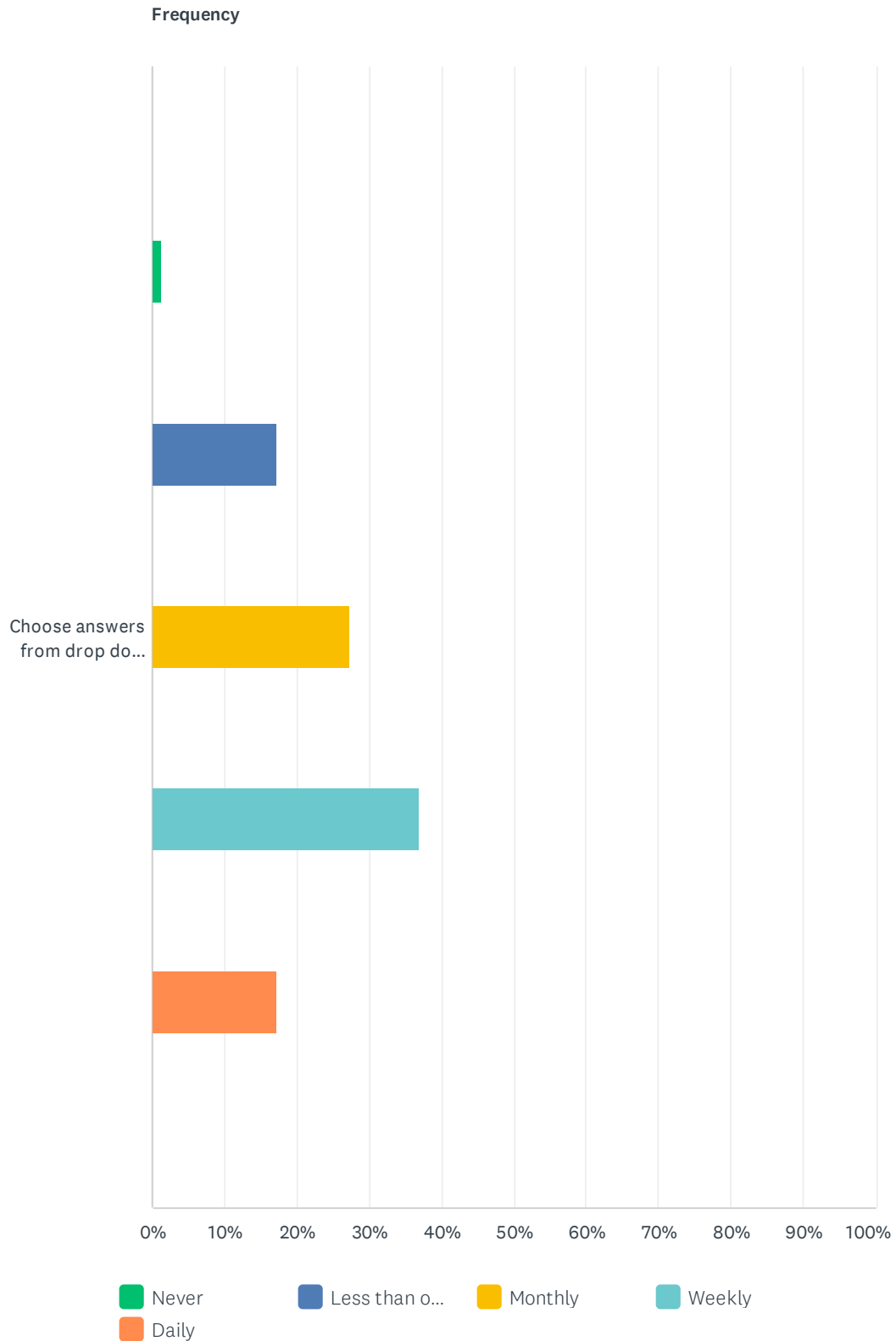
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.88% 2	20.80% 47	78.32% 177	226

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.59% 8	14.35% 32	34.53% 77	47.53% 106	223

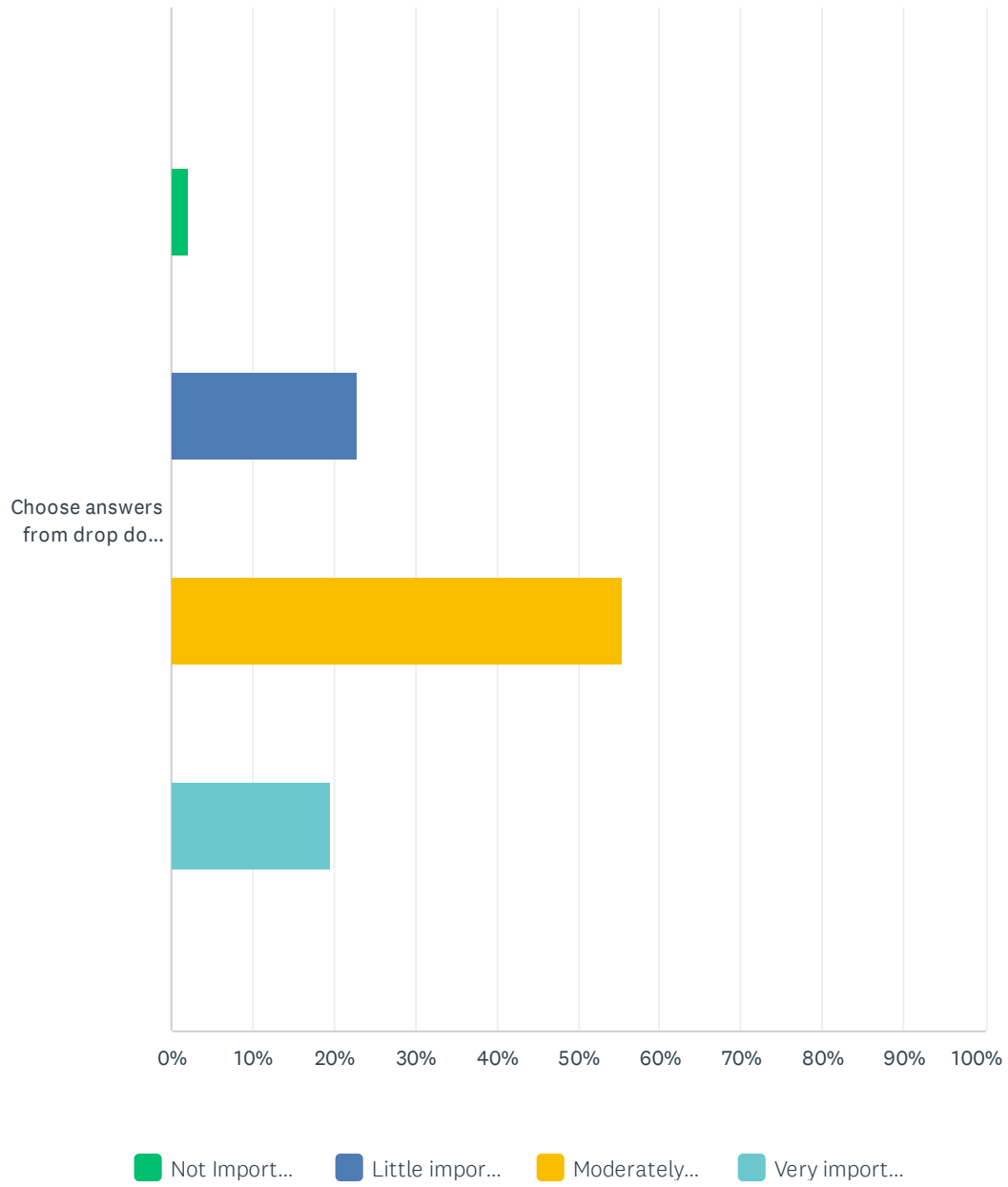
Q135 3.5.4.12 Protective, adaptive or supportive device or equipment (e.g., orthotics, taping).

Answered: 231 Skipped: 979



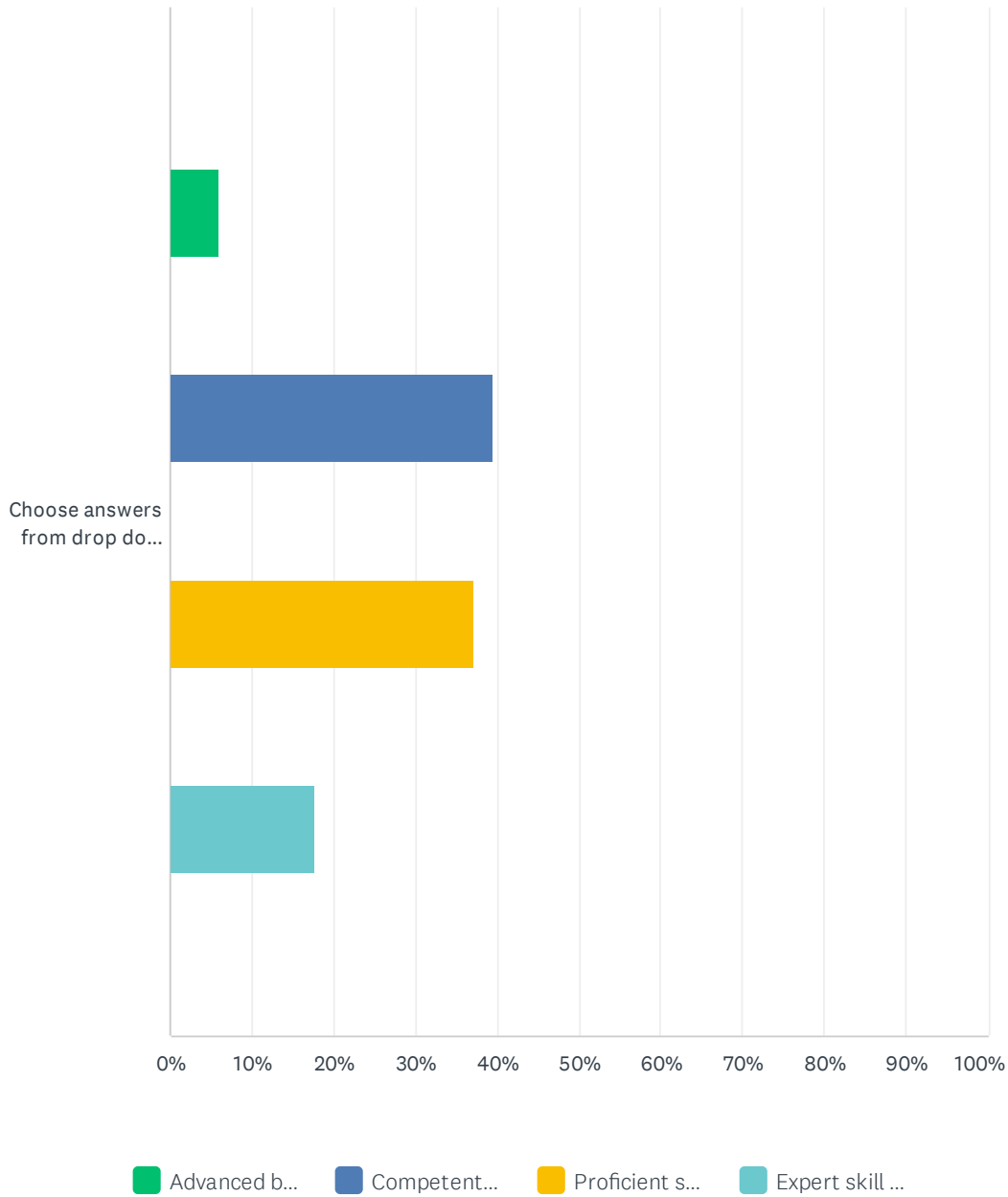
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.30% 3	17.32% 40	27.27% 63	36.80% 85	17.32% 40	231

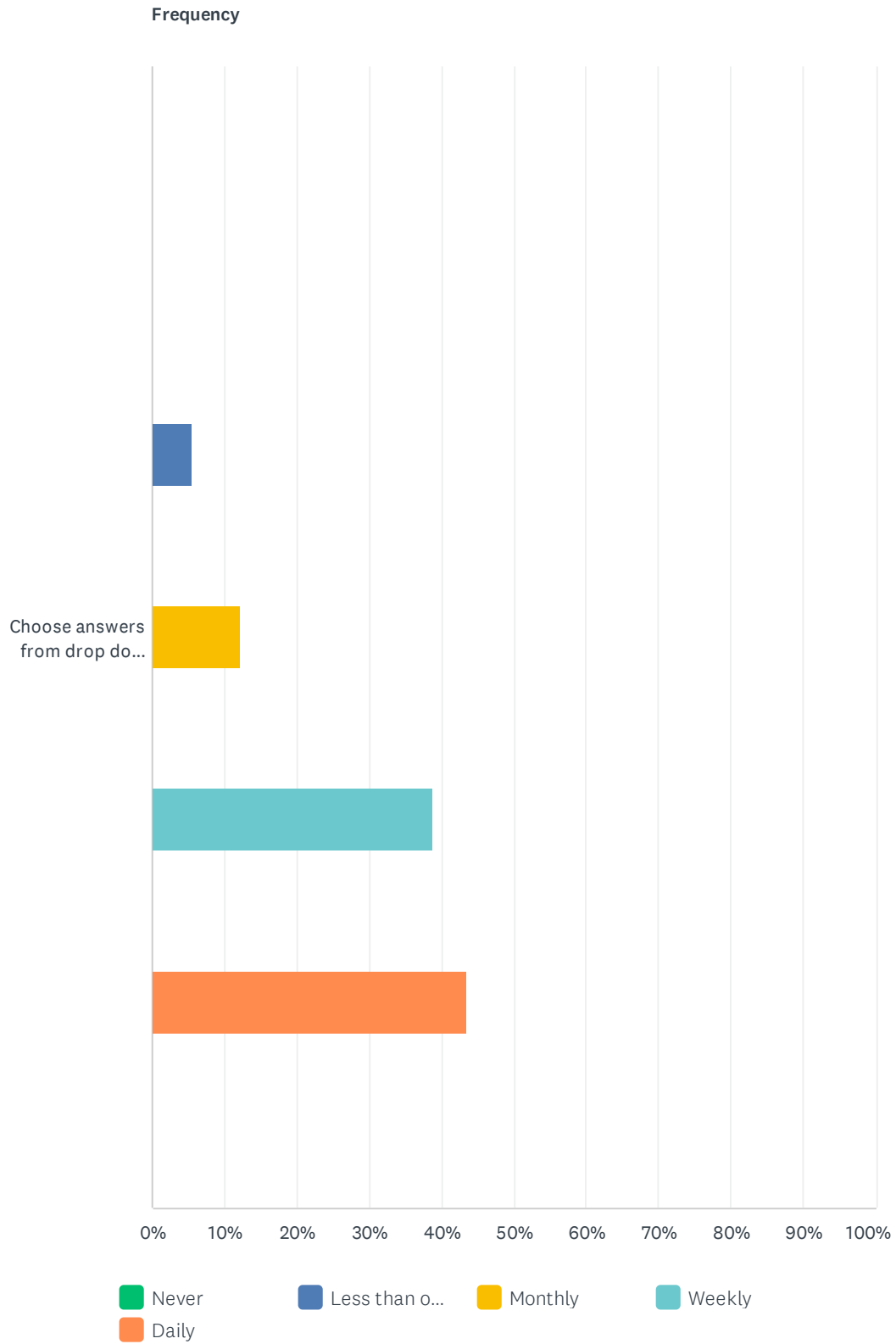
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.23% 5	22.77% 51	55.36% 124	19.64% 44	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.88% 13	39.37% 87	37.10% 82	17.65% 39	221

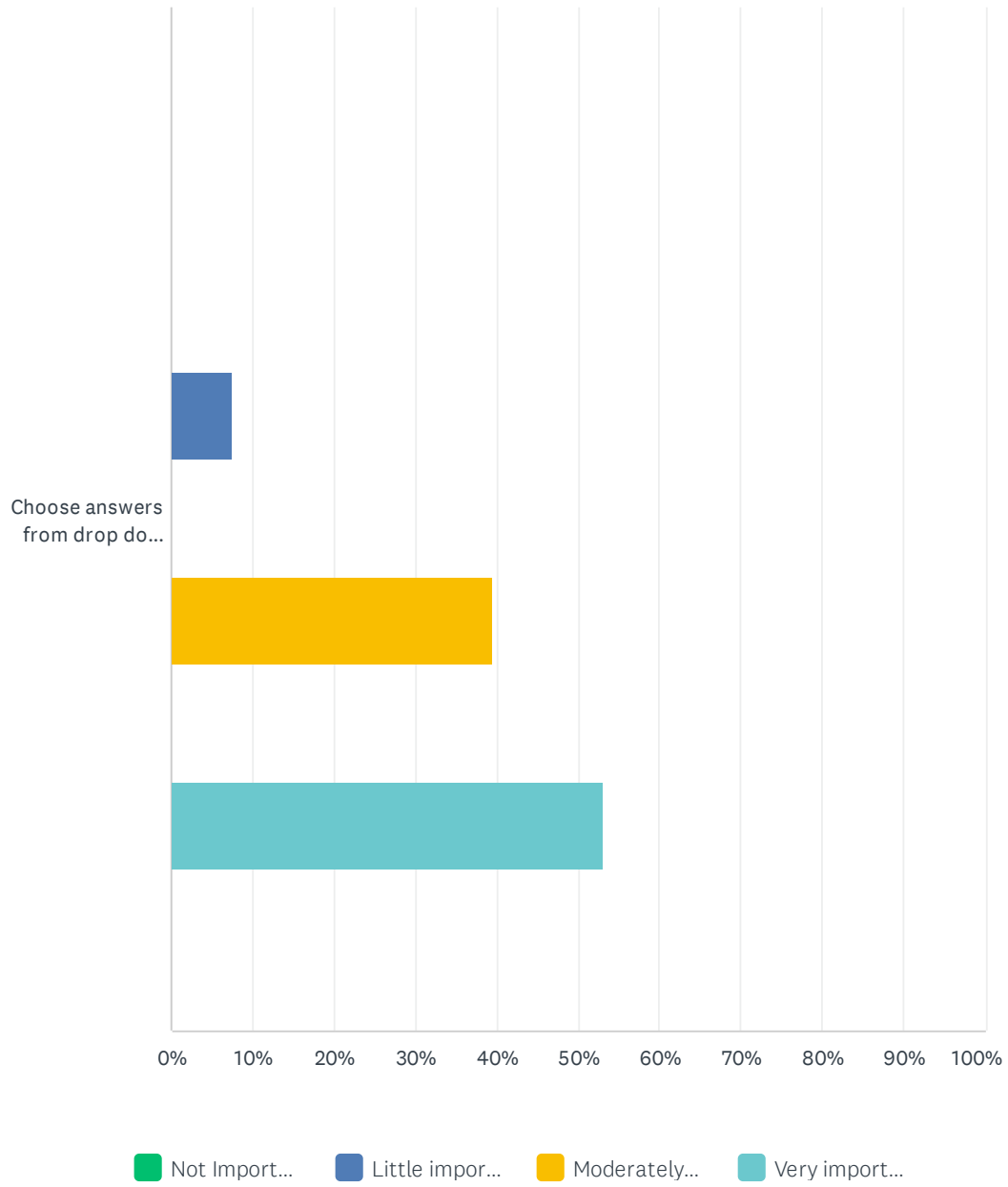
Q136 3.5.4.13 Neural mobilization (e.g., nerve gliding).

Answered: 232 Skipped: 978



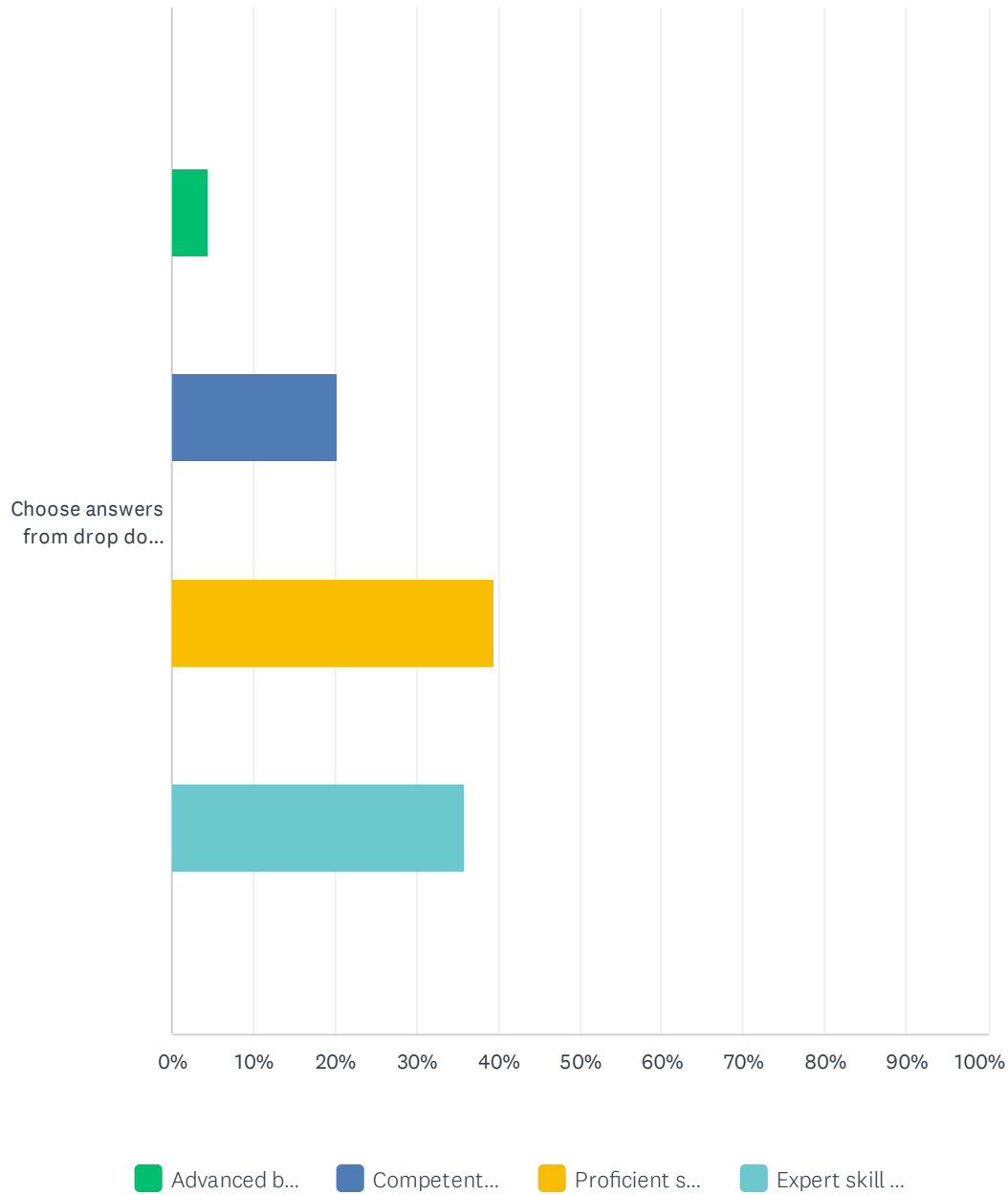
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	5.60% 13	12.07% 28	38.79% 90	43.53% 101	232

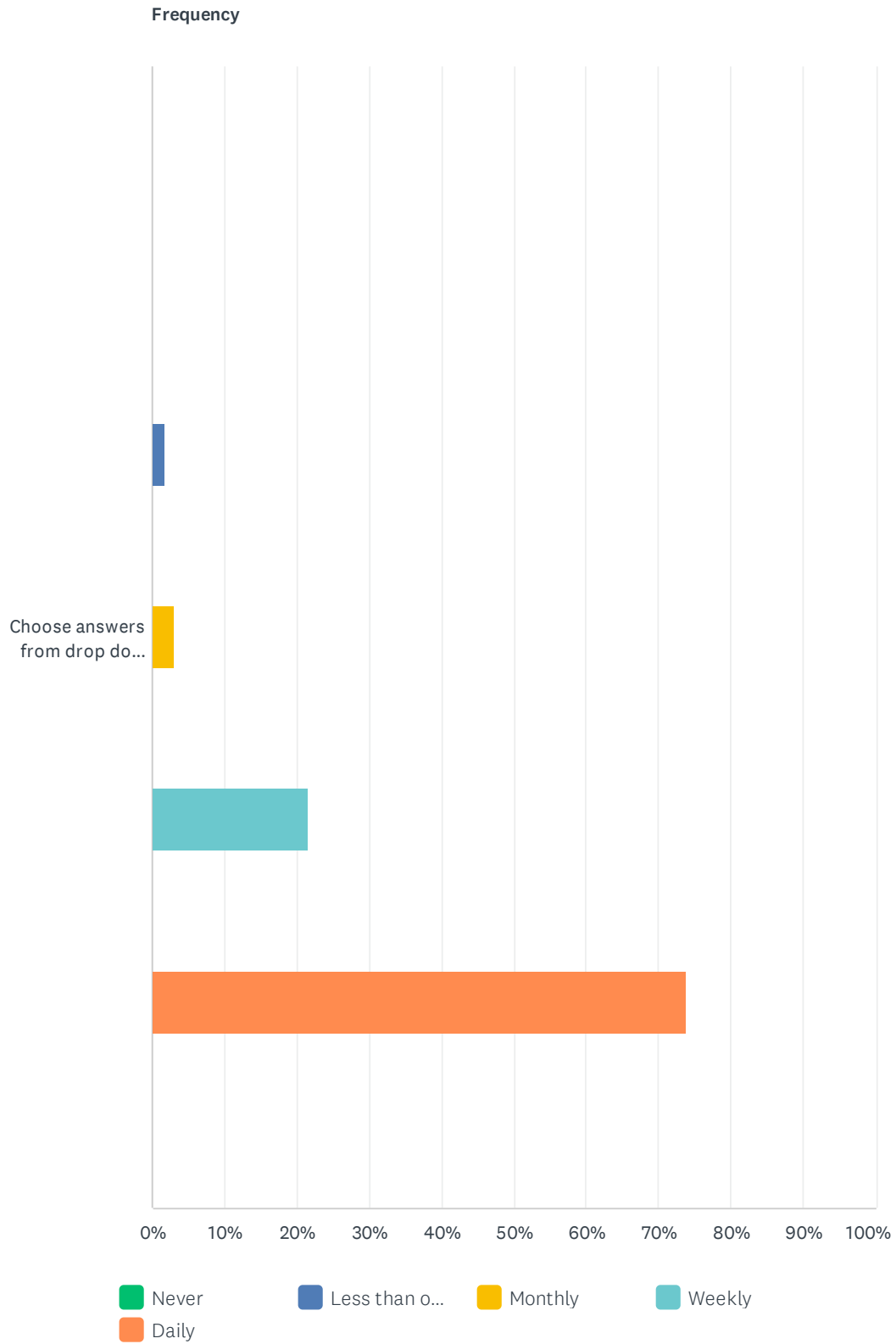
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	7.52% 17	39.38% 89	53.10% 120	226

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.48% 10	20.18% 45	39.46% 88	35.87% 80	223

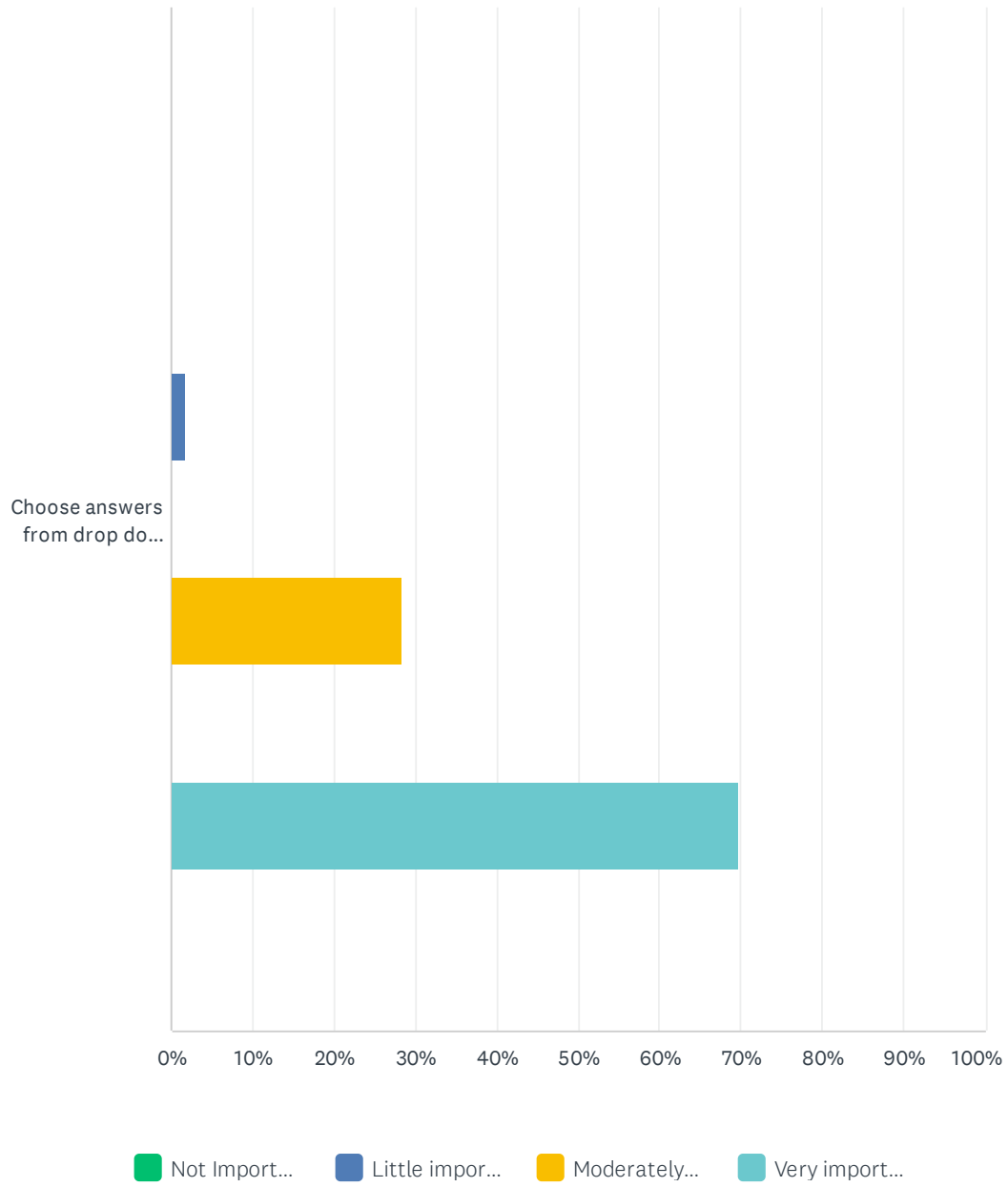
Q137 3.5.14 Non-thrust mobilization/manipulation.

Answered: 232 Skipped: 978



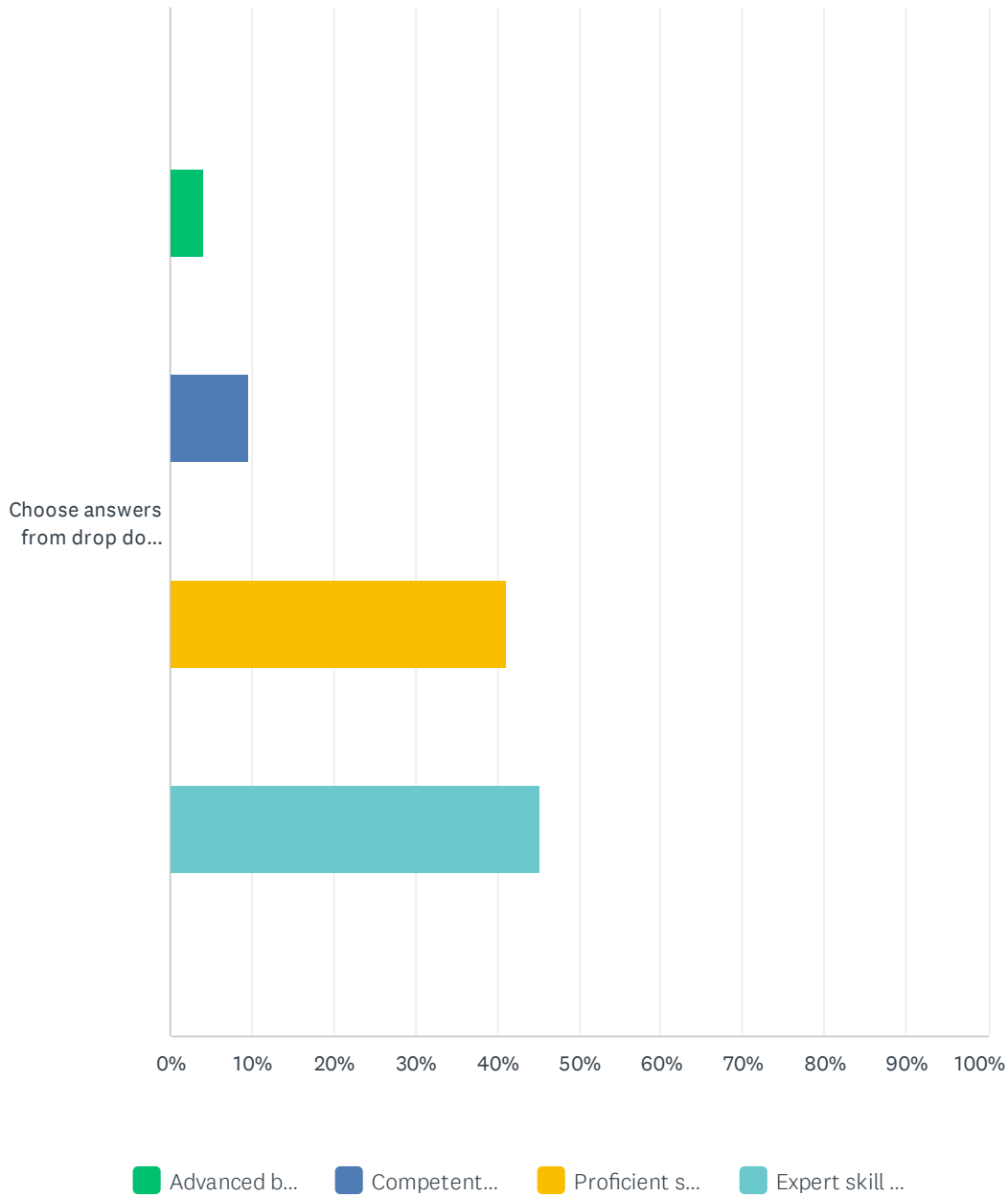
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.72% 4	3.02% 7	21.55% 50	73.71% 171	232

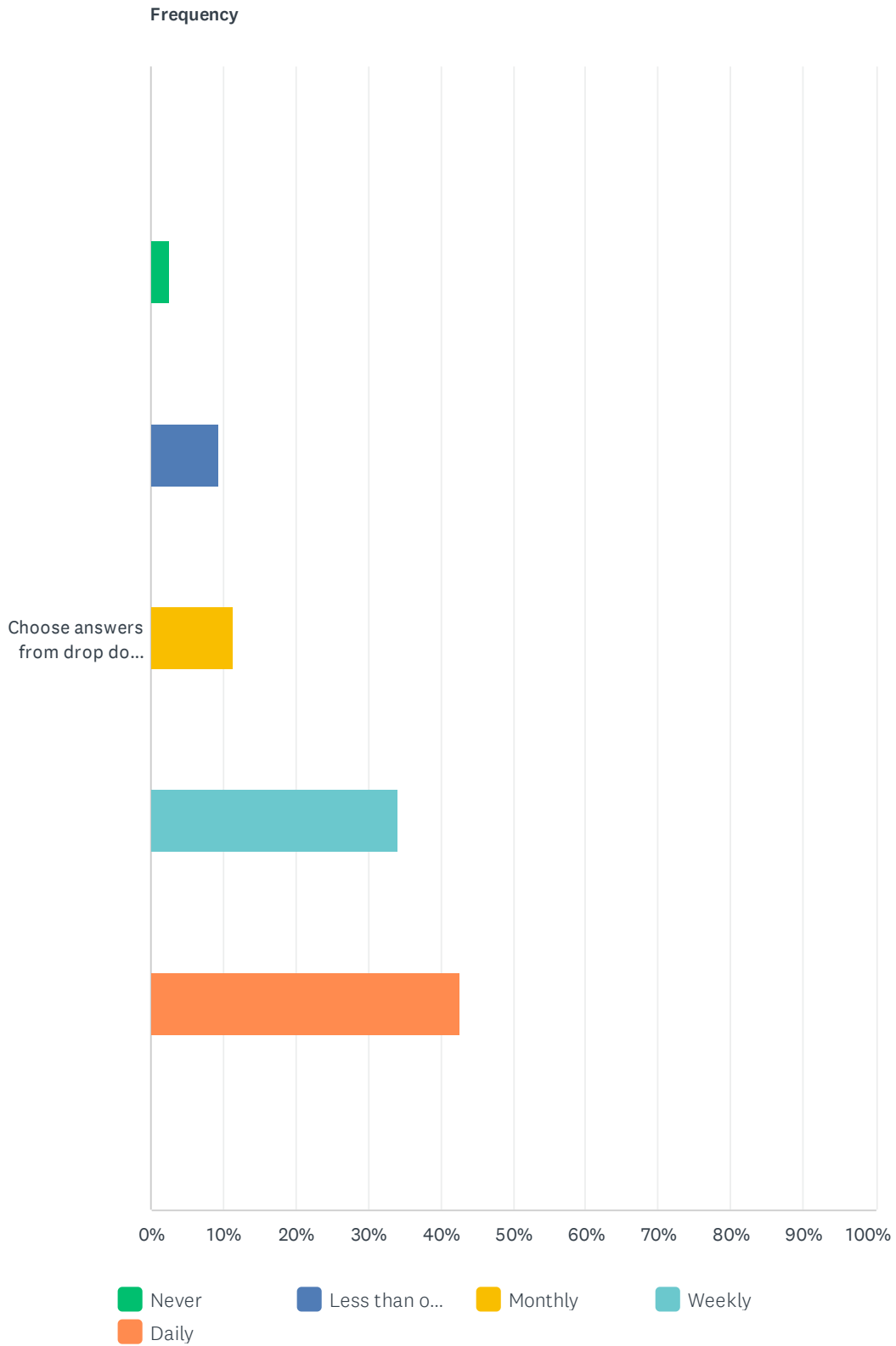
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.78% 4	28.44% 64	69.78% 157	225

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.07% 9	9.50% 21	41.18% 91	45.25% 100	221

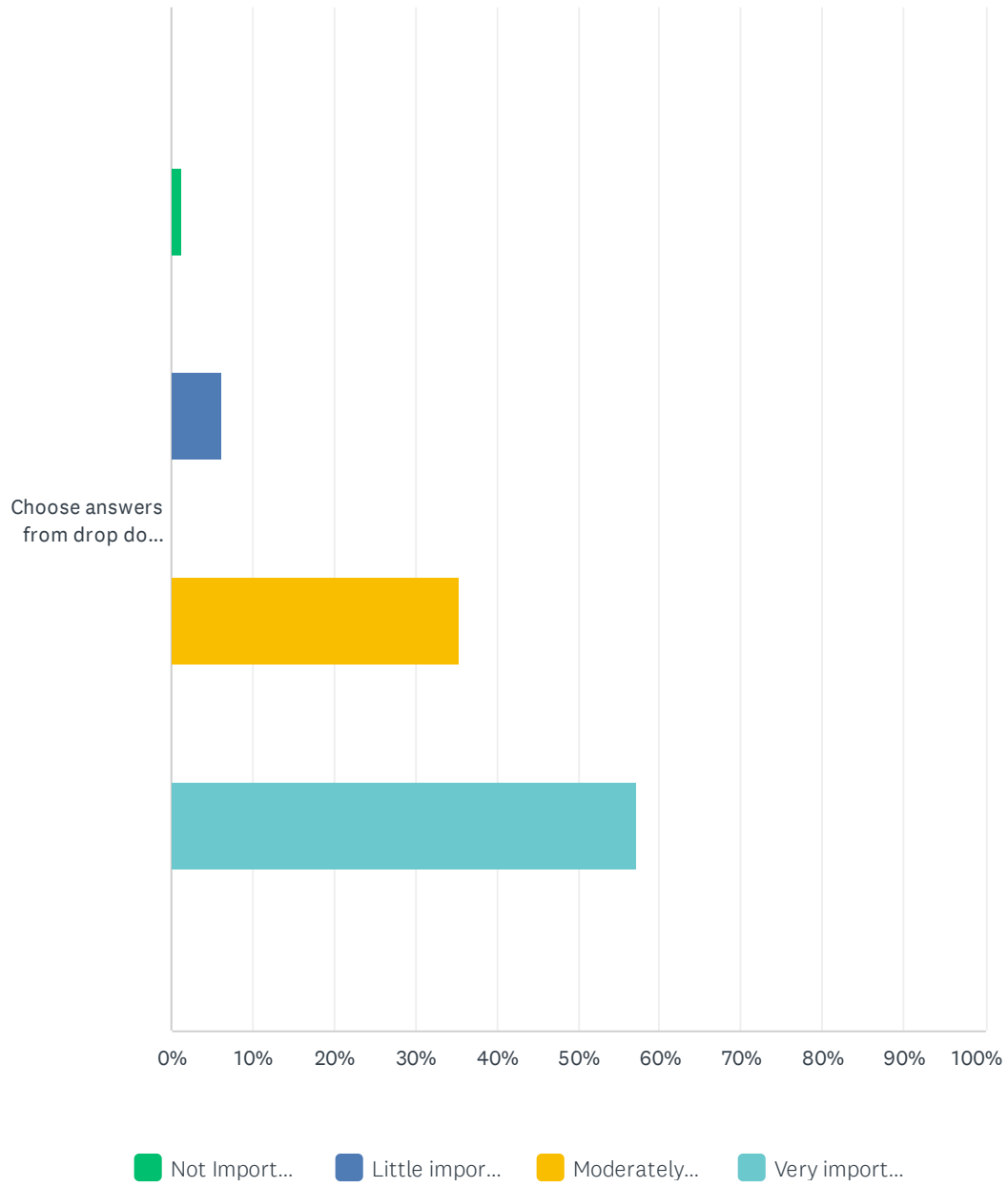
Q138 3.5.15 Thrust mobilization/manipulation.

Answered: 232 Skipped: 978



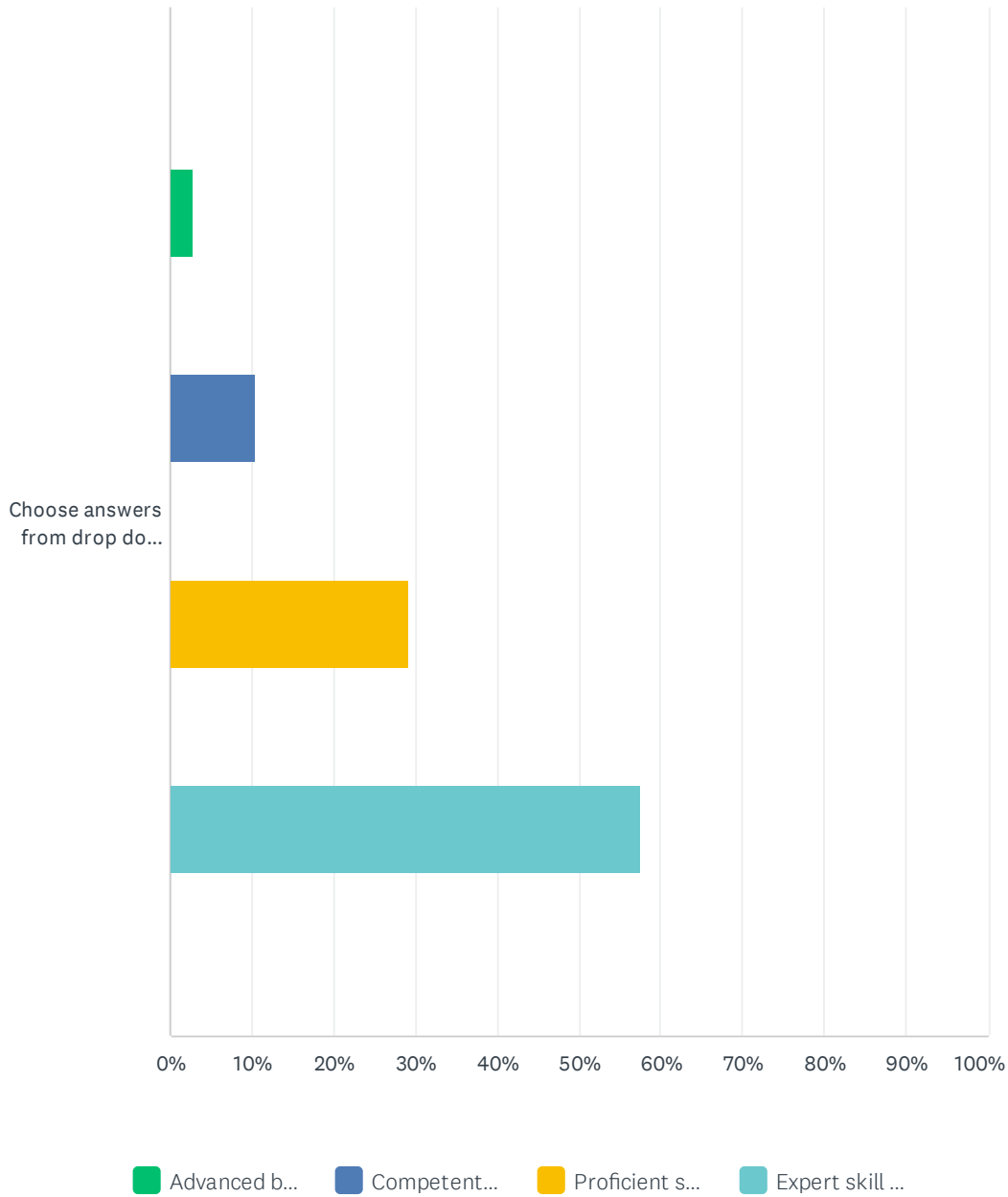
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	2.59% 6	9.48% 22	11.21% 26	34.05% 79	42.67% 99	232

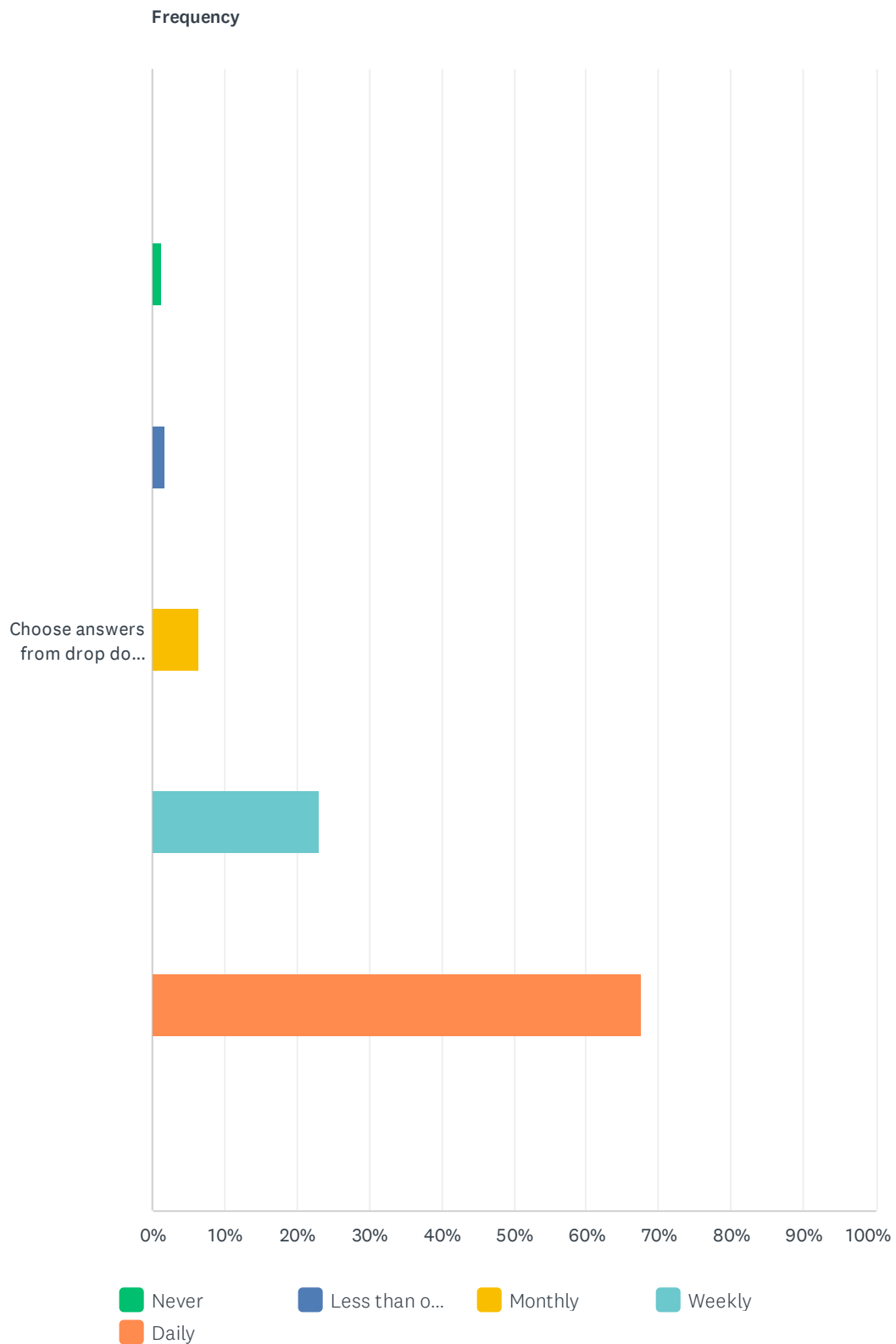
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.33% 3	6.19% 14	35.40% 80	57.08% 129	226

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.70% 6	10.36% 23	29.28% 65	57.66% 128	222

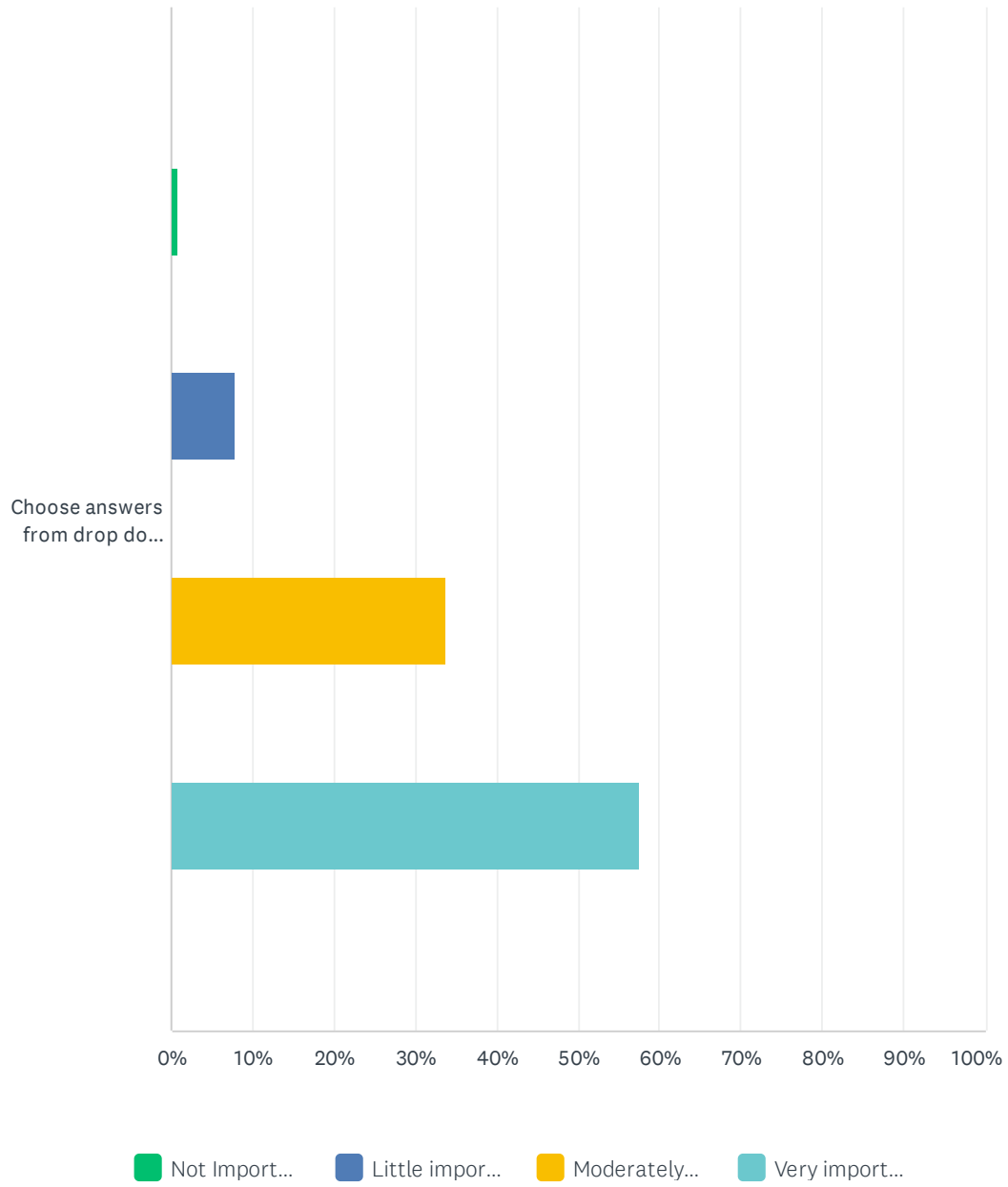
Q139 3.5.16 Soft tissue mobilization (e.g., connective tissue, deep friction, cross friction massage, instrument-assisted).

Answered: 232 Skipped: 978



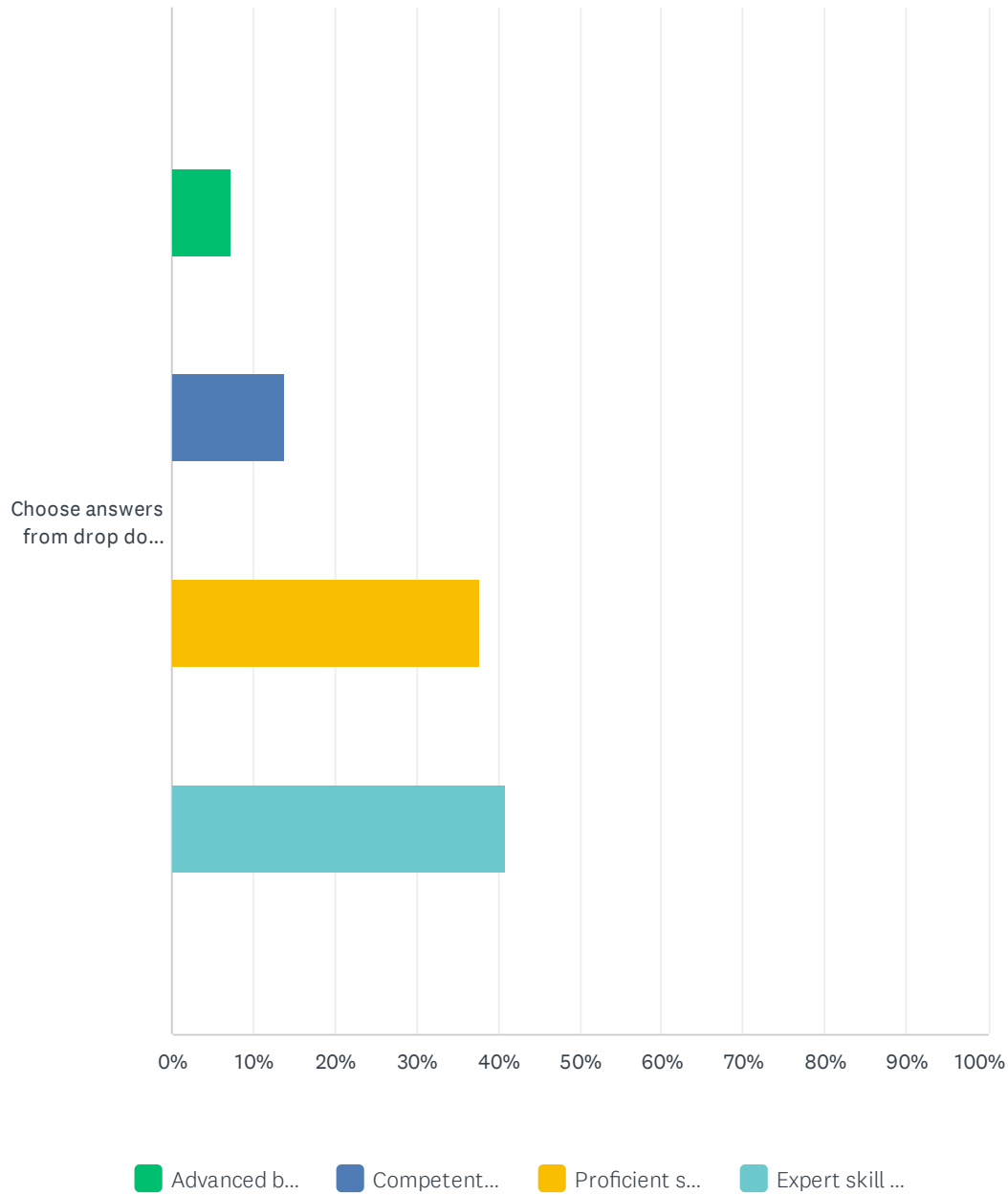
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.30% 3	1.73% 4	6.49% 15	22.94% 53	67.53% 156	231

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.88% 2	7.96% 18	33.63% 76	57.52% 130	226

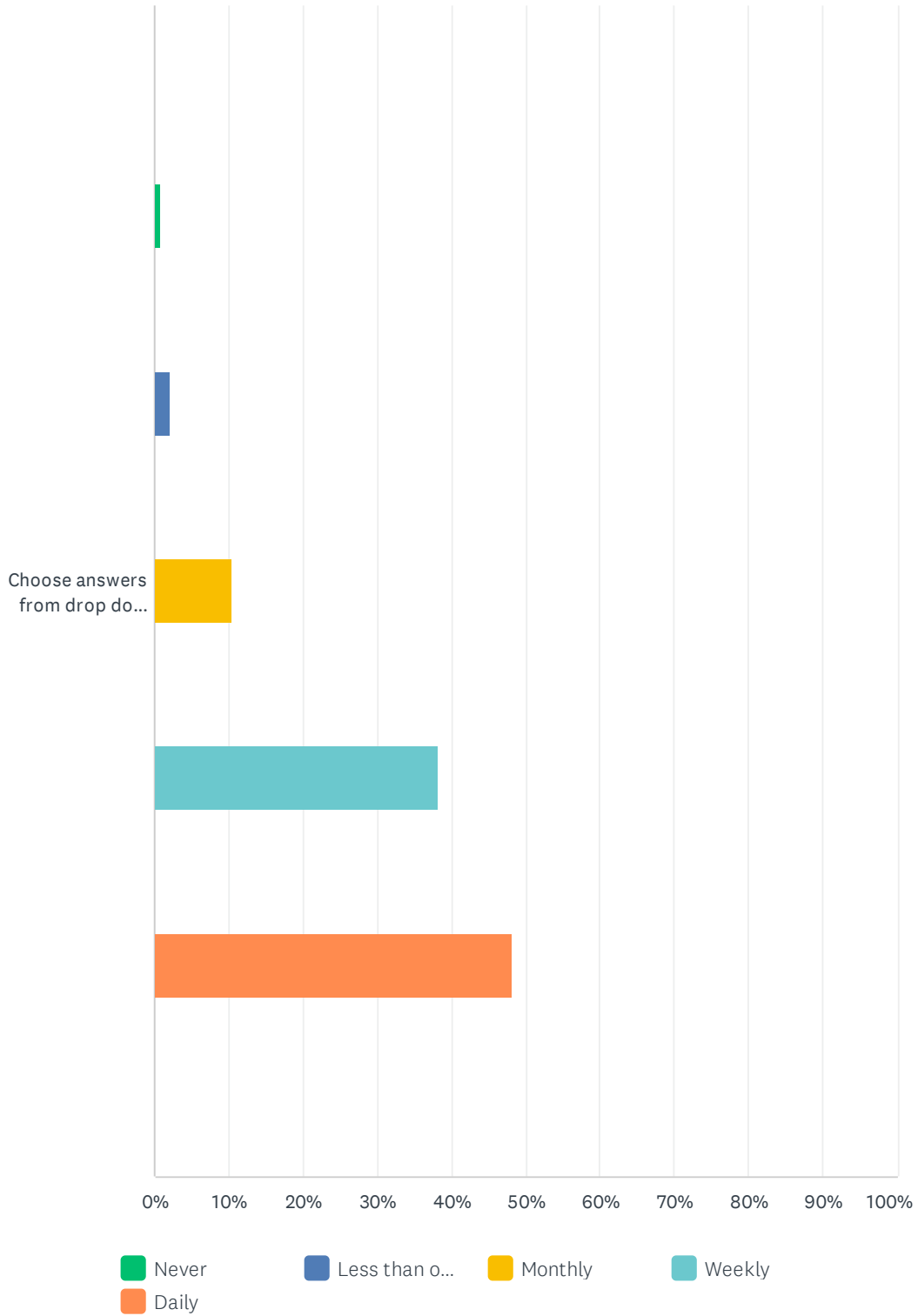
Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.21% 16	13.96% 31	37.84% 84	40.99% 91	222

Q140 3.5.17 Mobilization with movement.

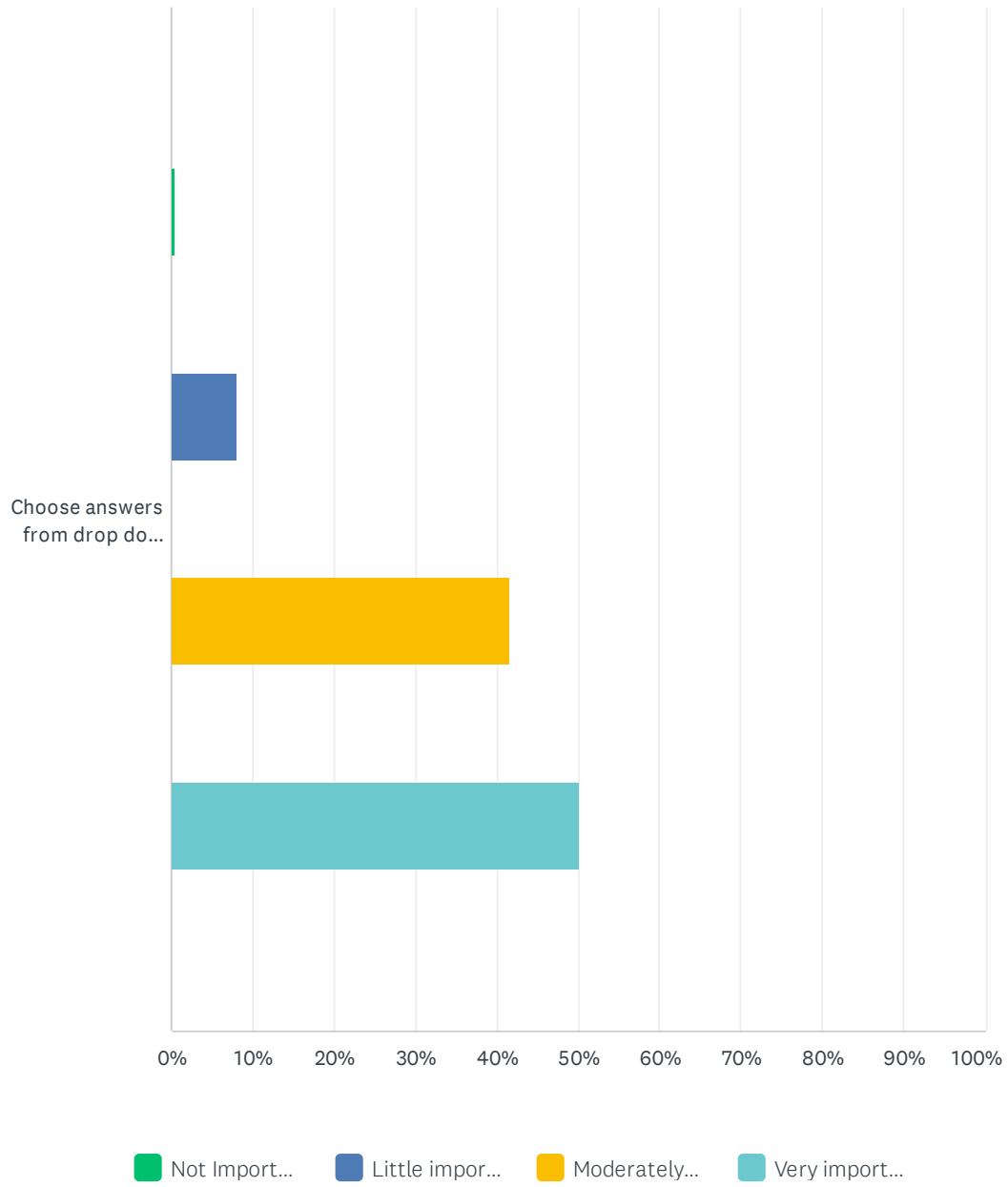
Answered: 230 Skipped: 980

Frequency



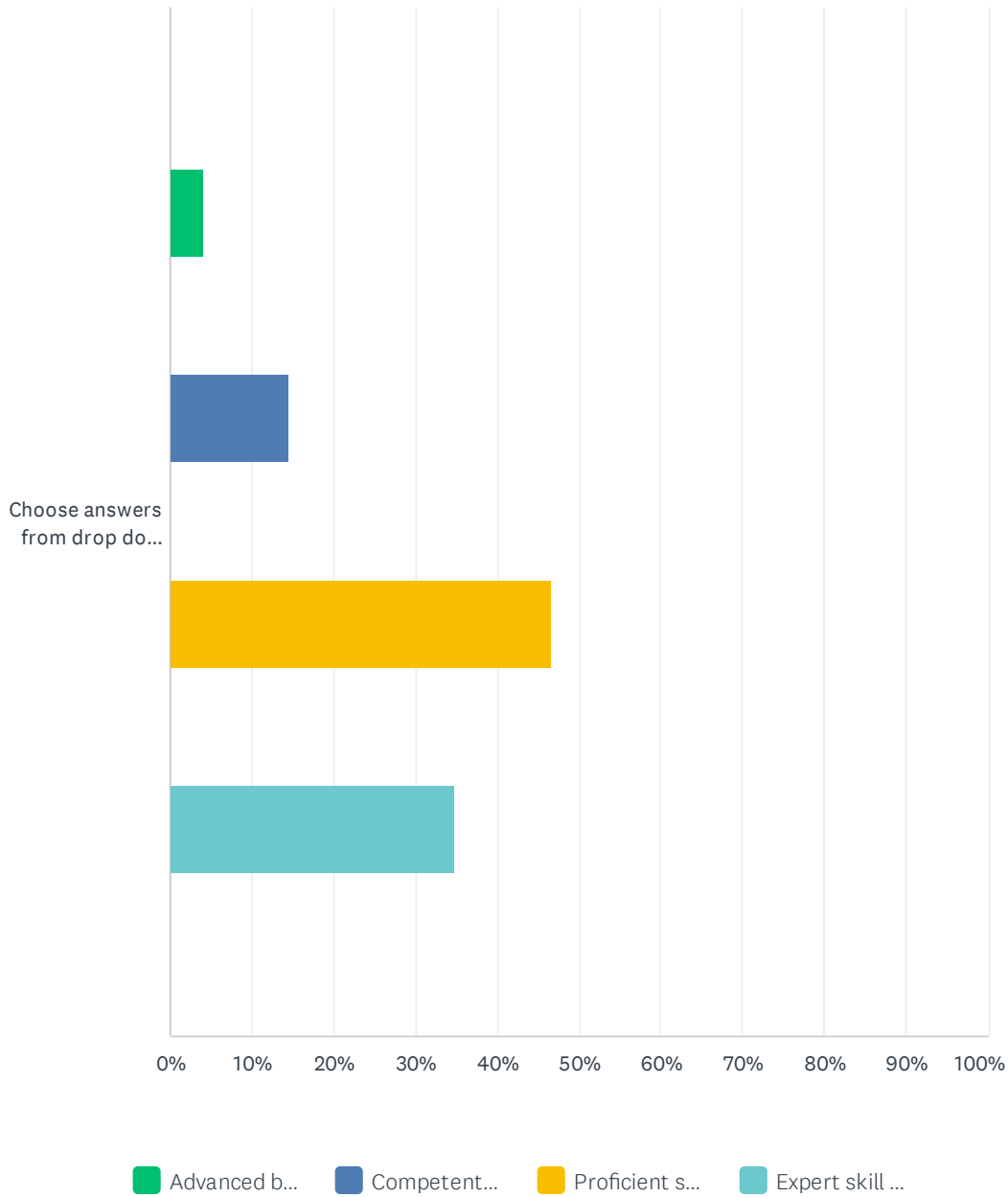
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.87% 2	2.17% 5	10.43% 24	38.26% 88	48.26% 111	230

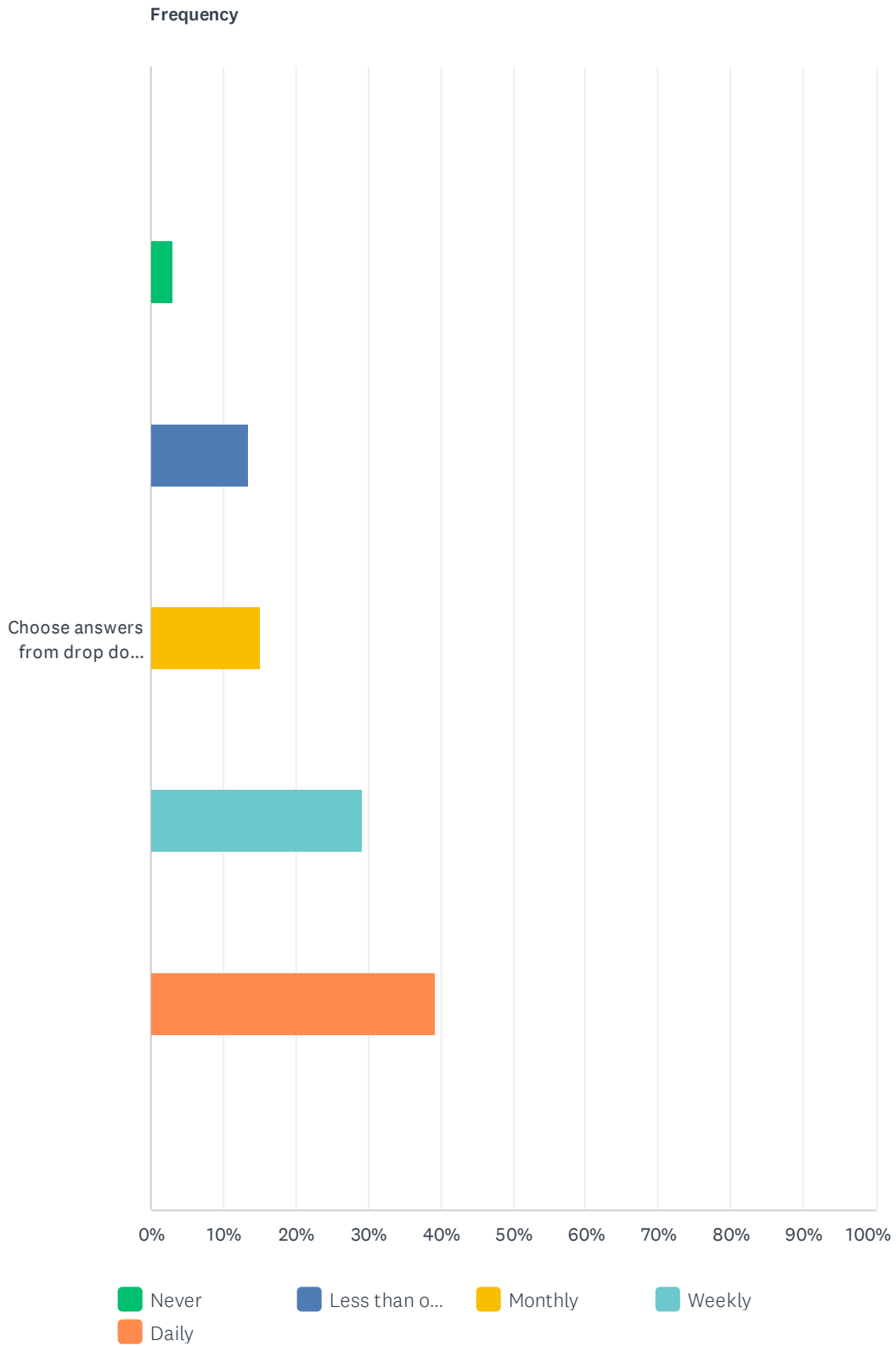
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.45% 1	8.04% 18	41.52% 93	50.00% 112	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.07% 9	14.48% 32	46.61% 103	34.84% 77	221

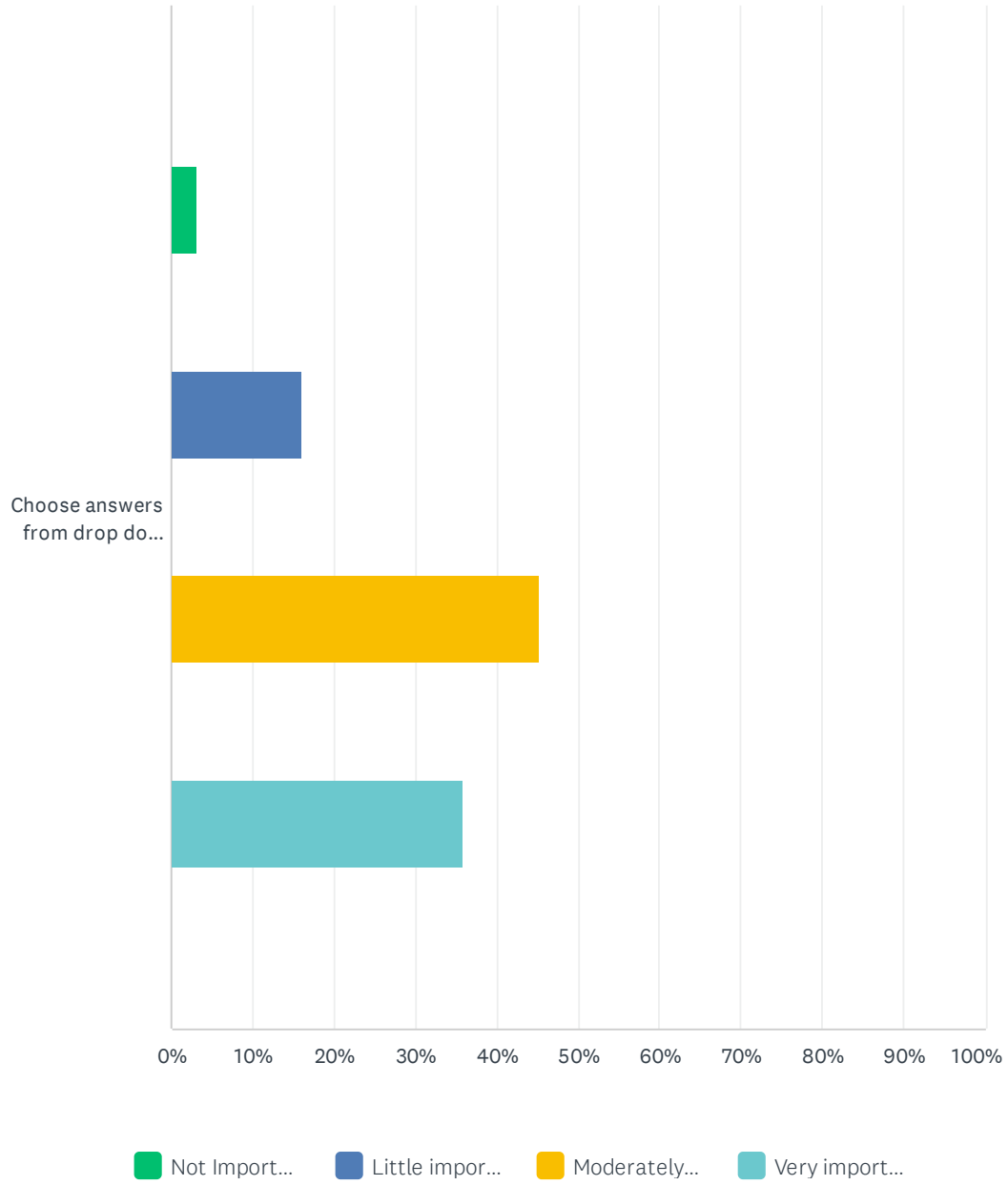
Q141 3.5.18 Muscle energy techniques.

Answered: 232 Skipped: 978



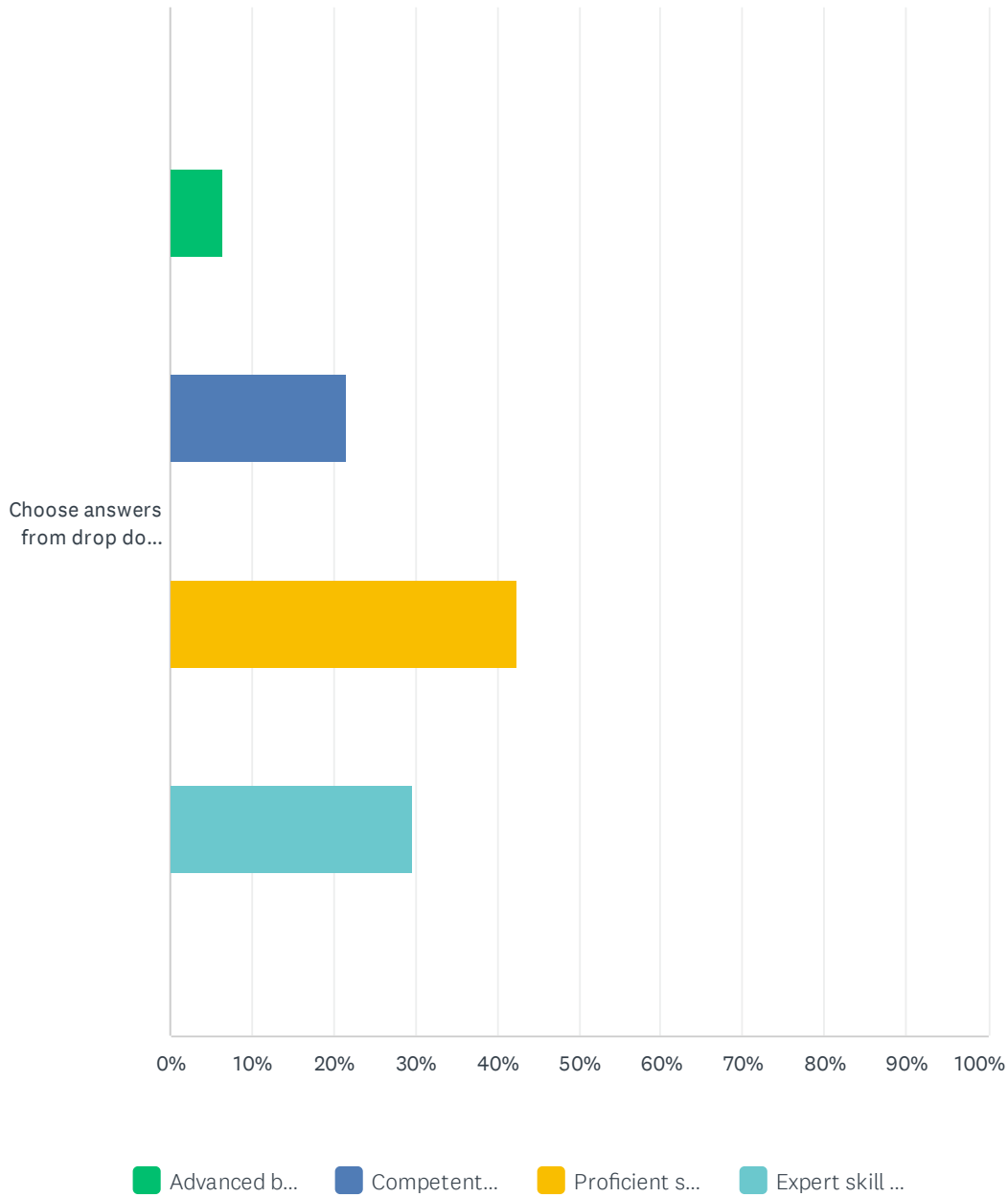
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.02% 7	13.36% 31	15.09% 35	29.31% 68	39.22% 91	232

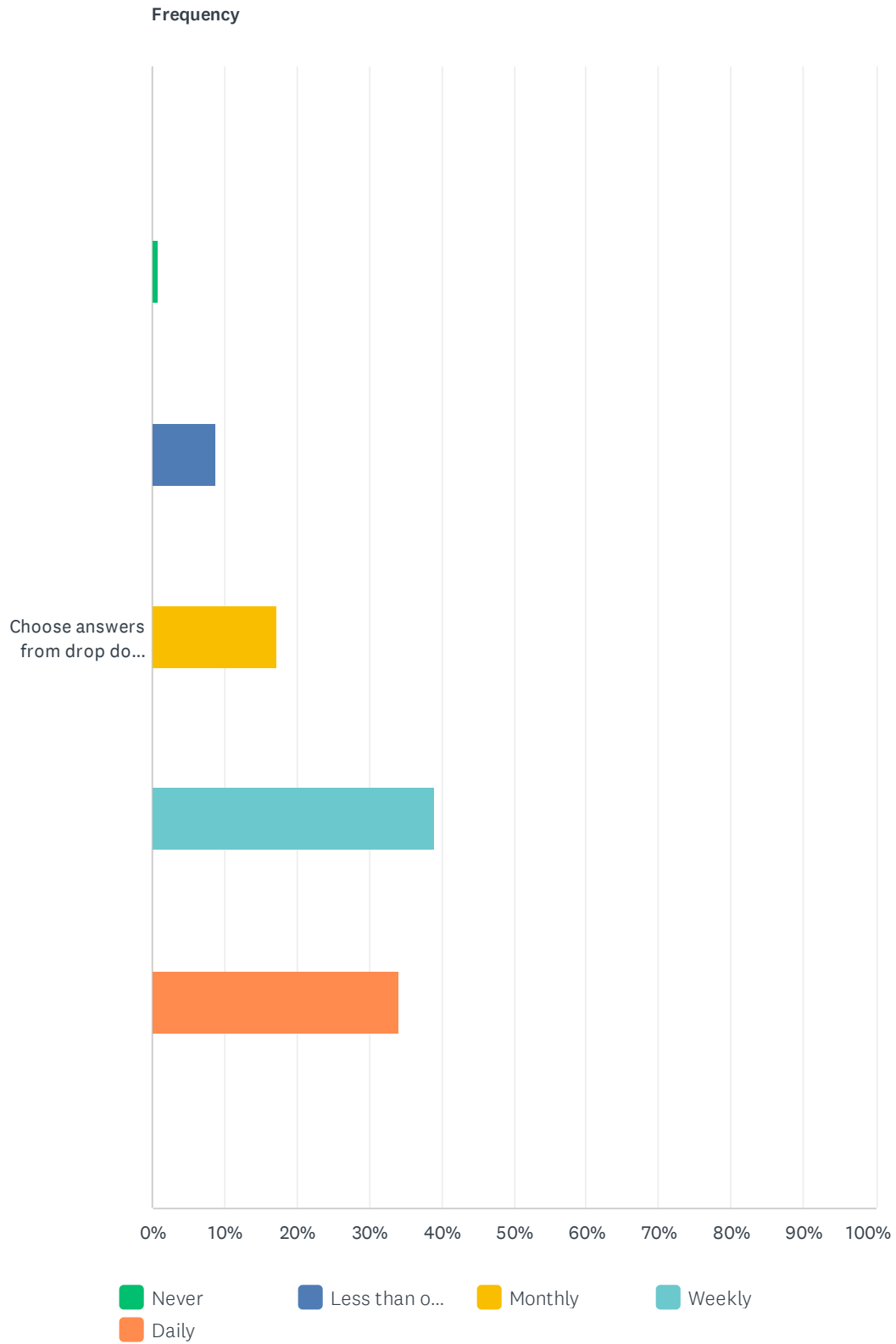
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	3.10% 7	15.93% 36	45.13% 102	35.84% 81	226

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.31% 14	21.62% 48	42.34% 94	29.73% 66	222

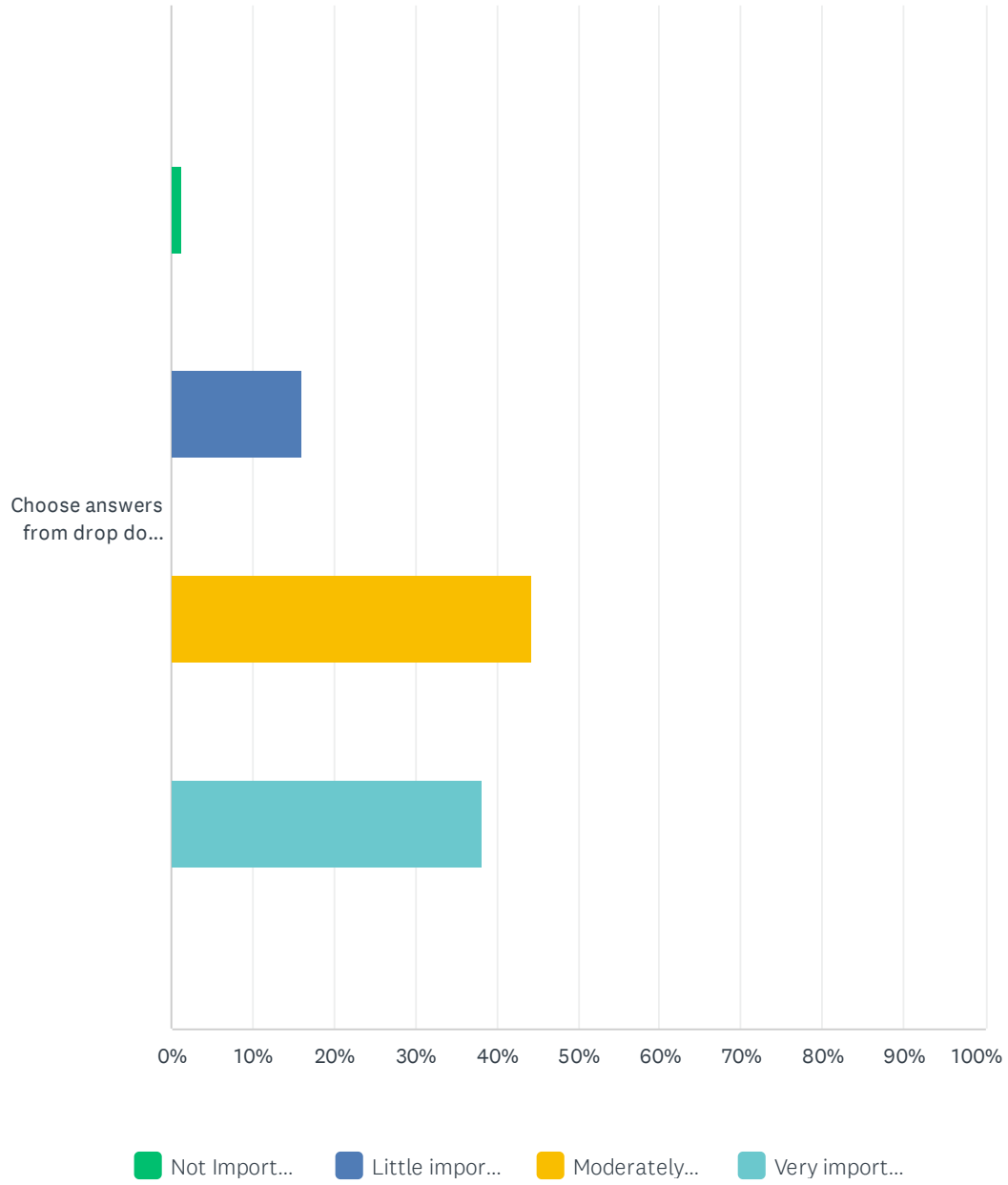
Q142 3.5.19 Traction/distraction.

Answered: 231 Skipped: 979



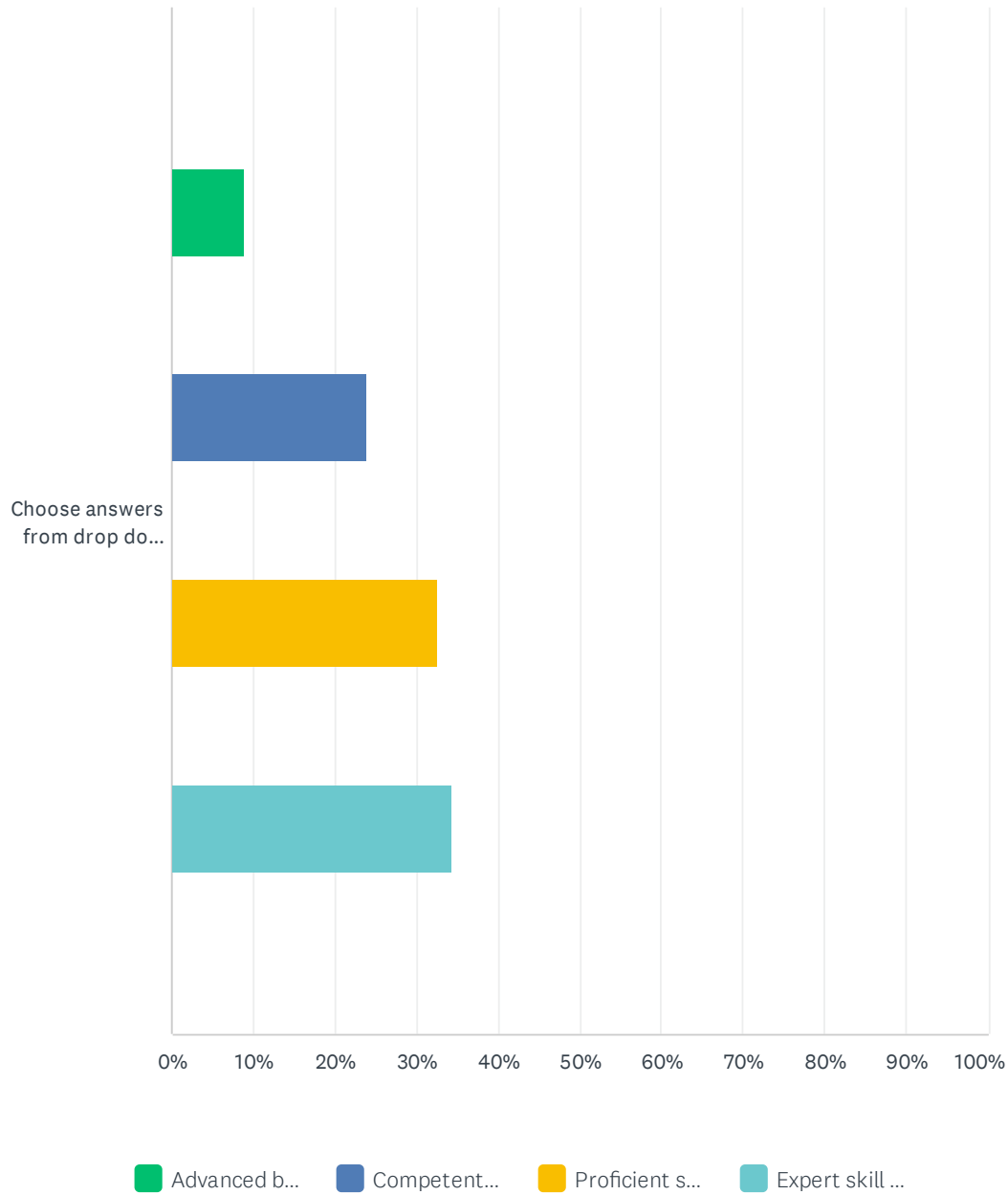
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.87% 2	8.66% 20	17.32% 40	38.96% 90	34.20% 79	231

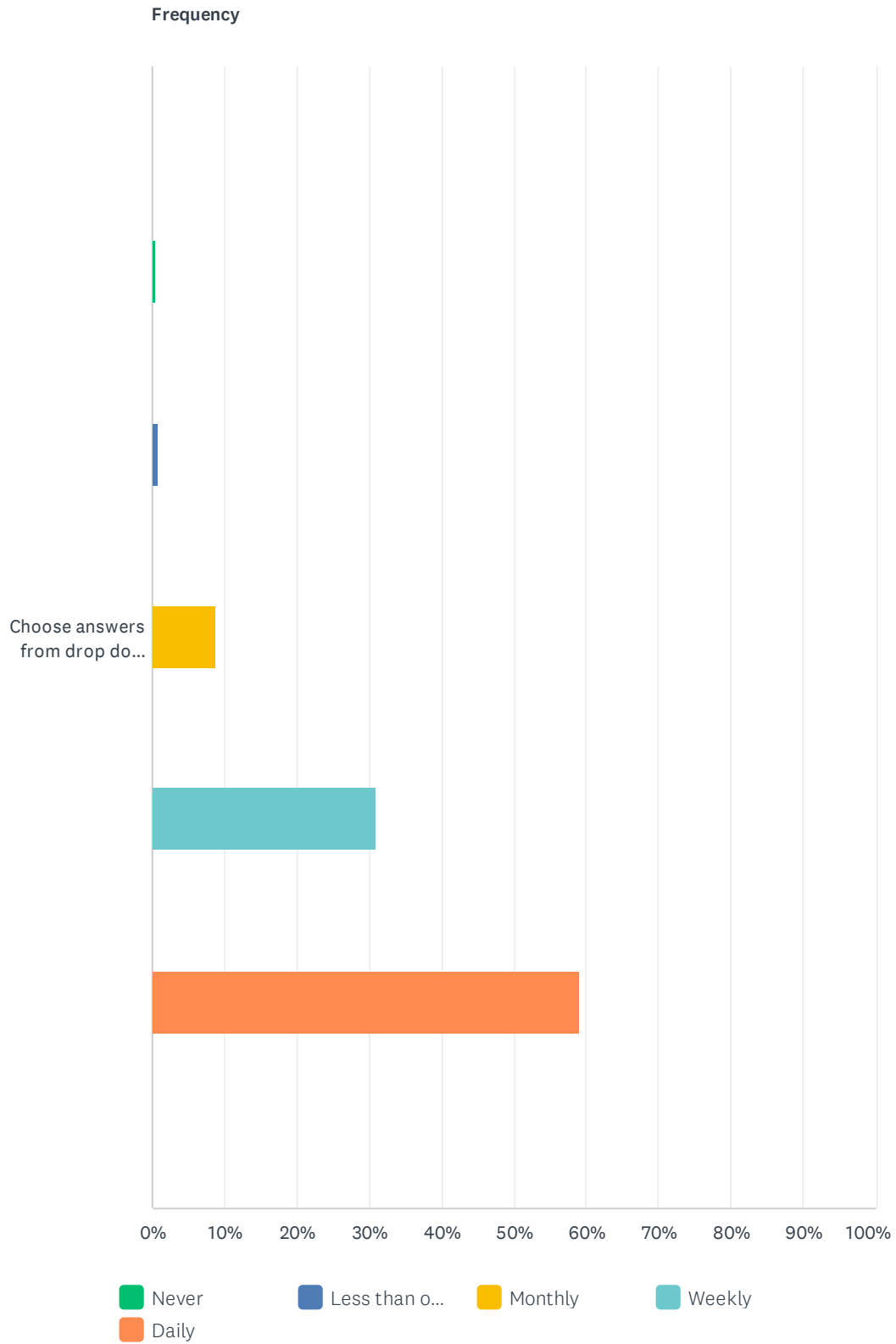
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.33% 3	16.00% 36	44.44% 100	38.22% 86	225

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.05% 20	23.98% 53	32.58% 72	34.39% 76	221

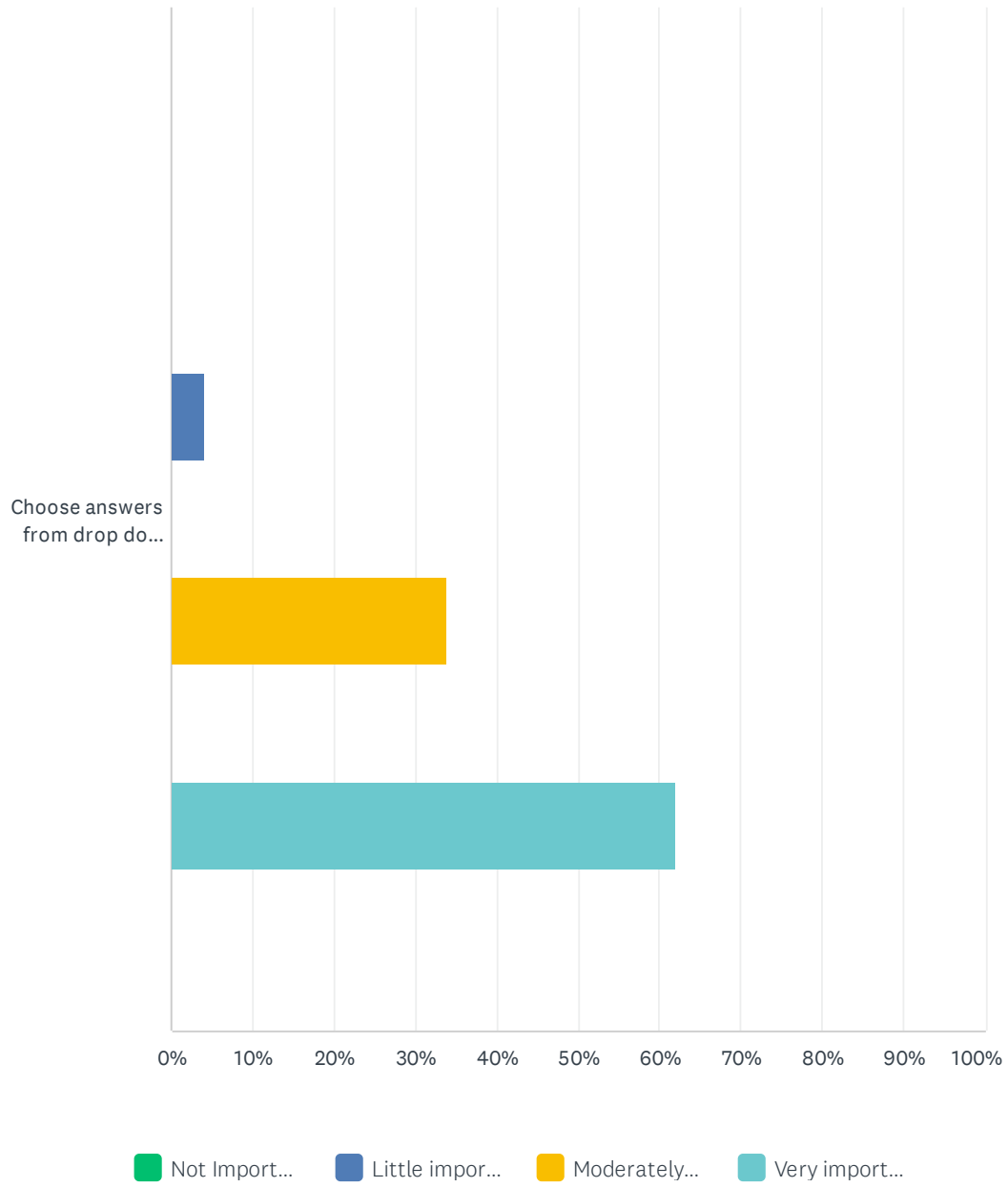
Q143 3.5.4.20 Directional preference exercises/activities.

Answered: 230 Skipped: 980



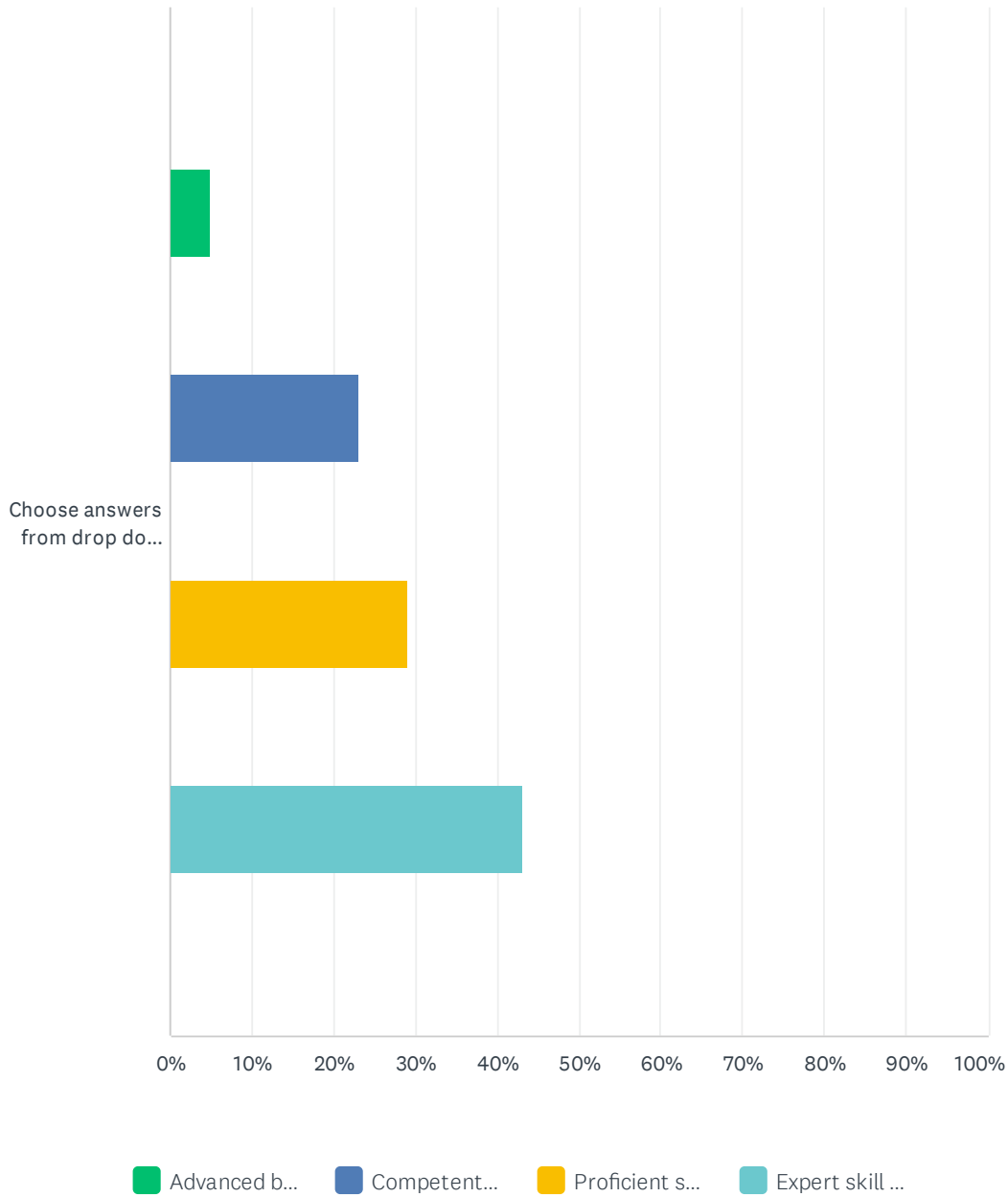
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.43% 1	0.87% 2	8.70% 20	30.87% 71	59.13% 136	230

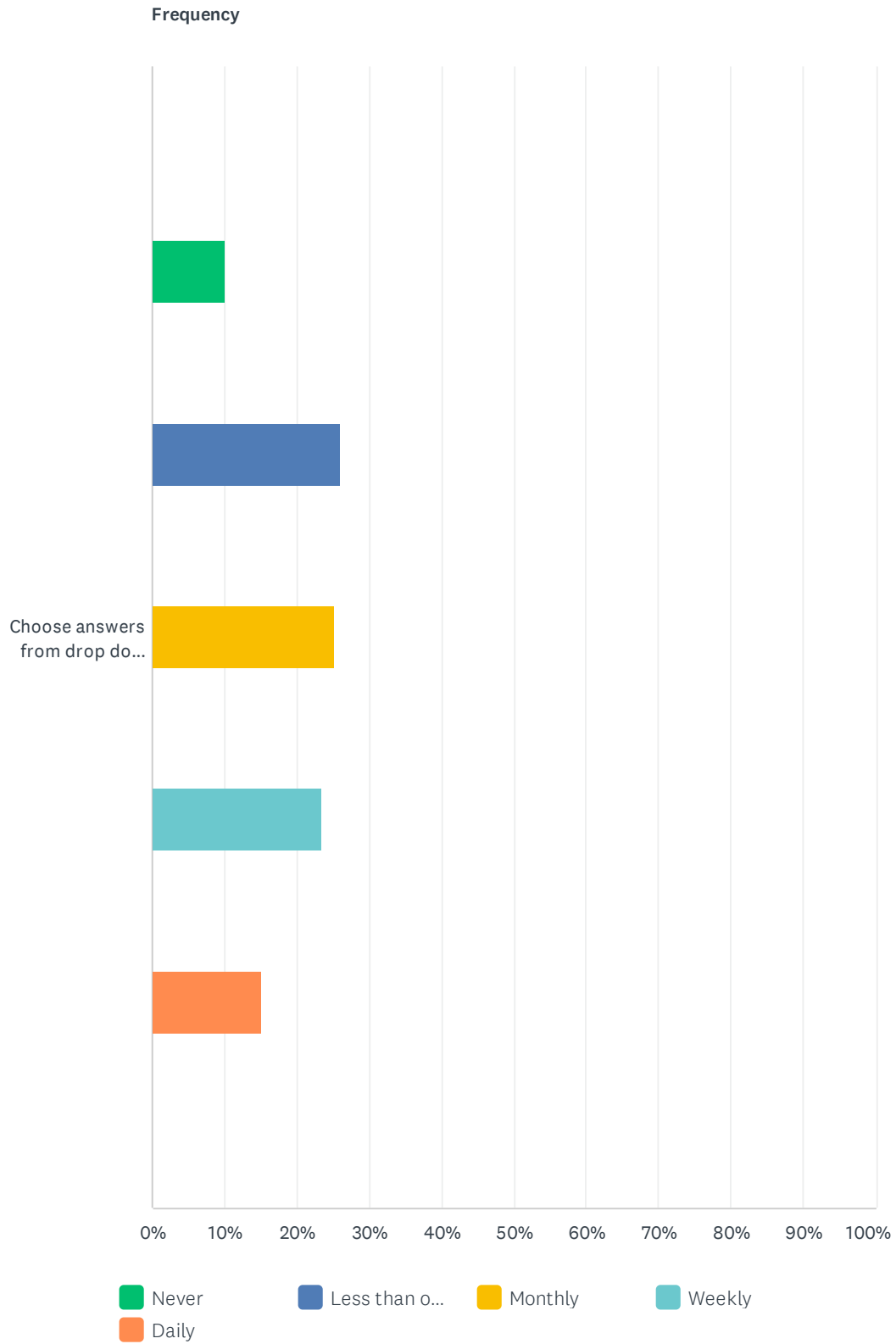
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	4.02% 9	33.93% 76	62.05% 139	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.98% 11	23.08% 51	28.96% 64	42.99% 95	221

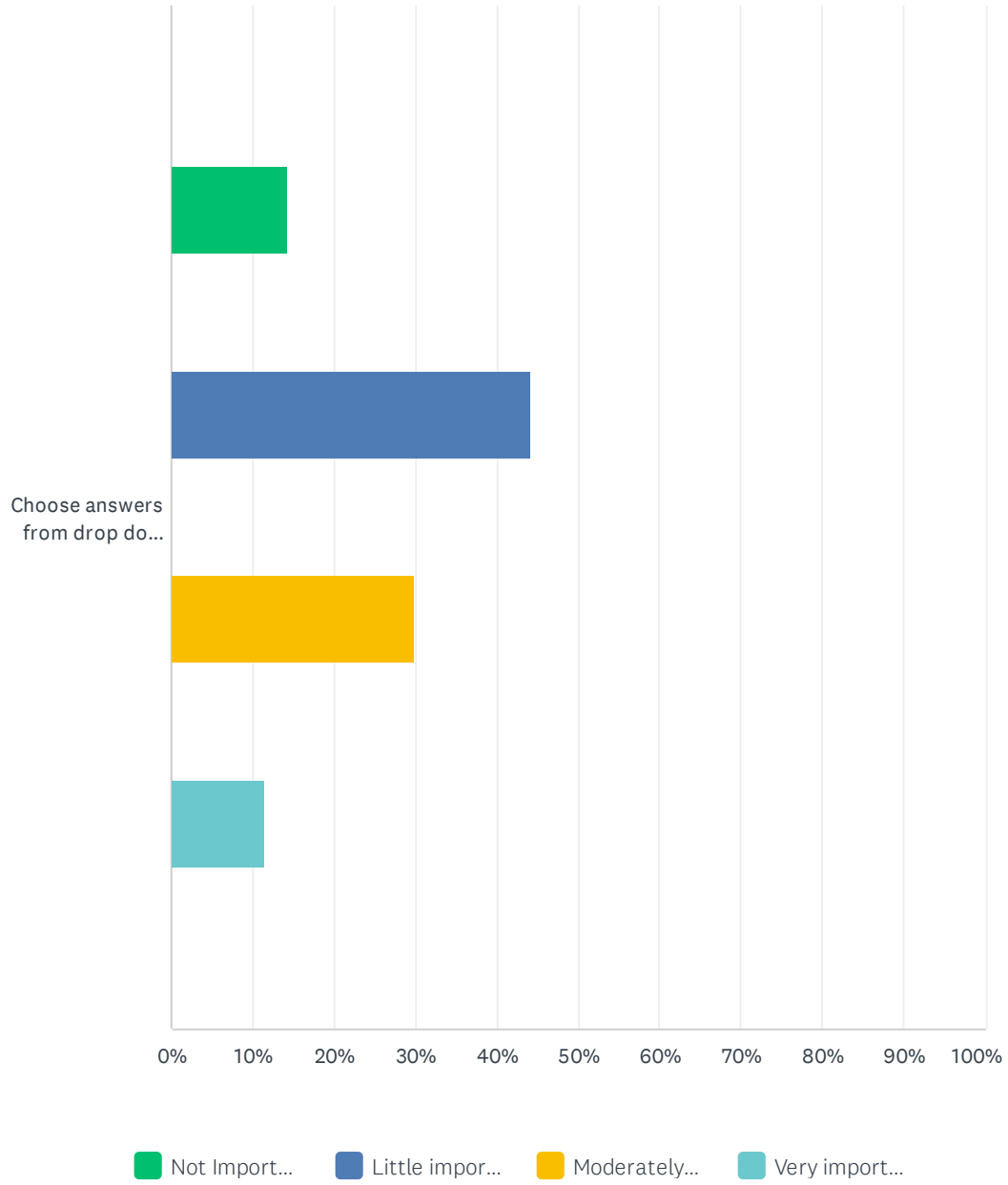
Q144 3.5.4.21 Electro-therapeutic modalities (e.g., TENS, NMES).

Answered: 230 Skipped: 980



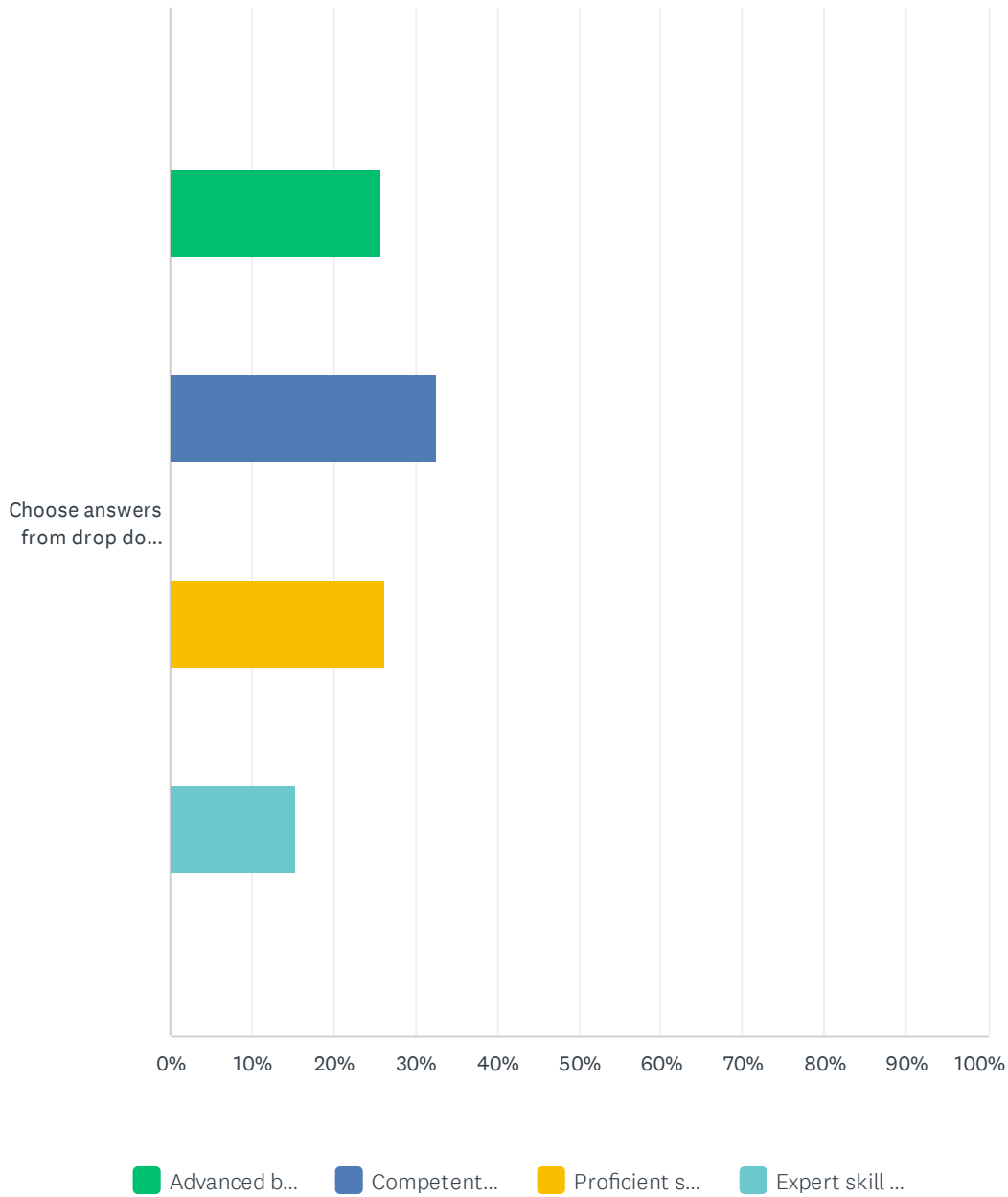
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	10.00% 23	26.09% 60	25.22% 58	23.48% 54	15.22% 35	230

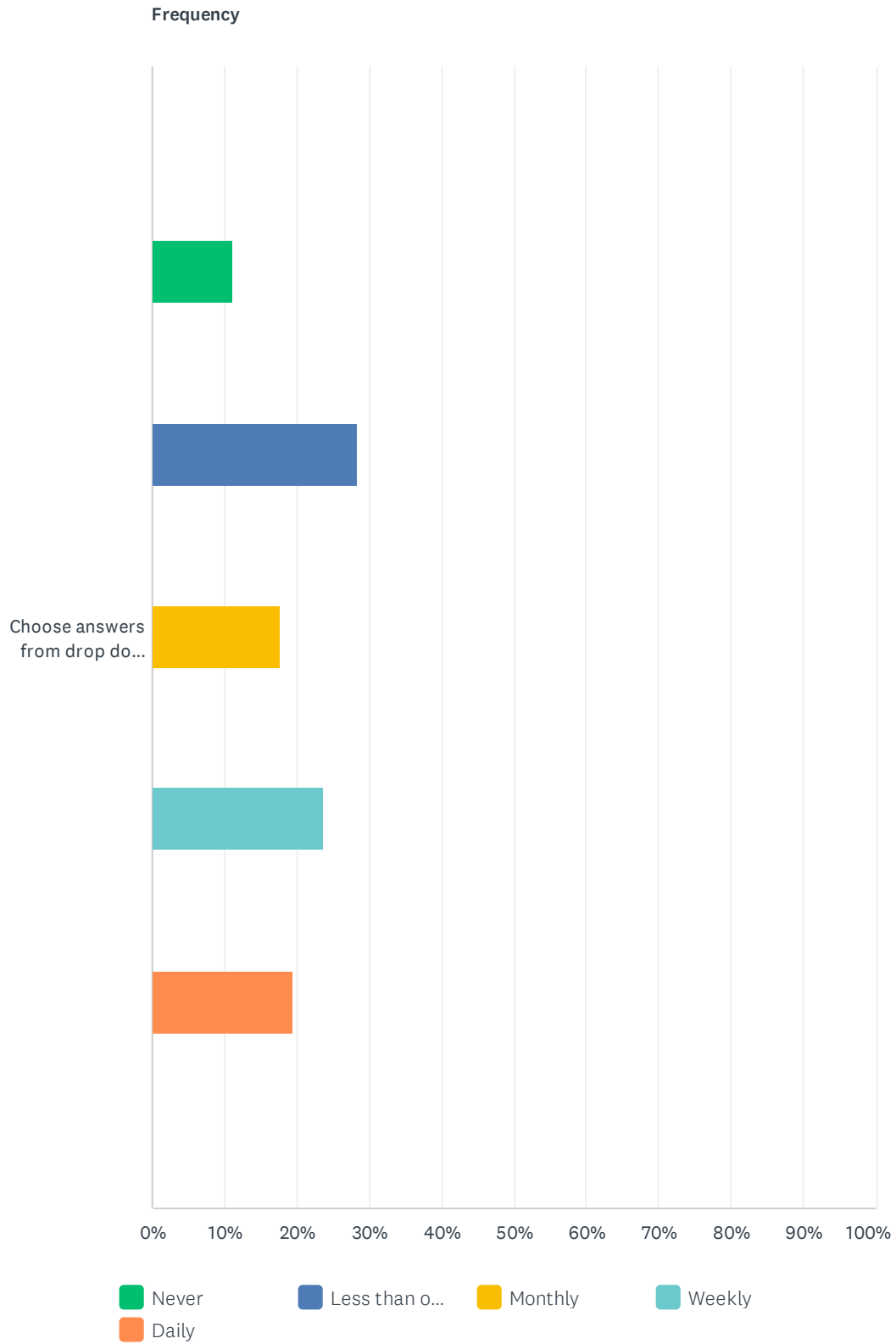
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	14.29% 32	44.20% 99	29.91% 67	11.61% 26	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	25.79% 57	32.58% 72	26.24% 58	15.38% 34	221

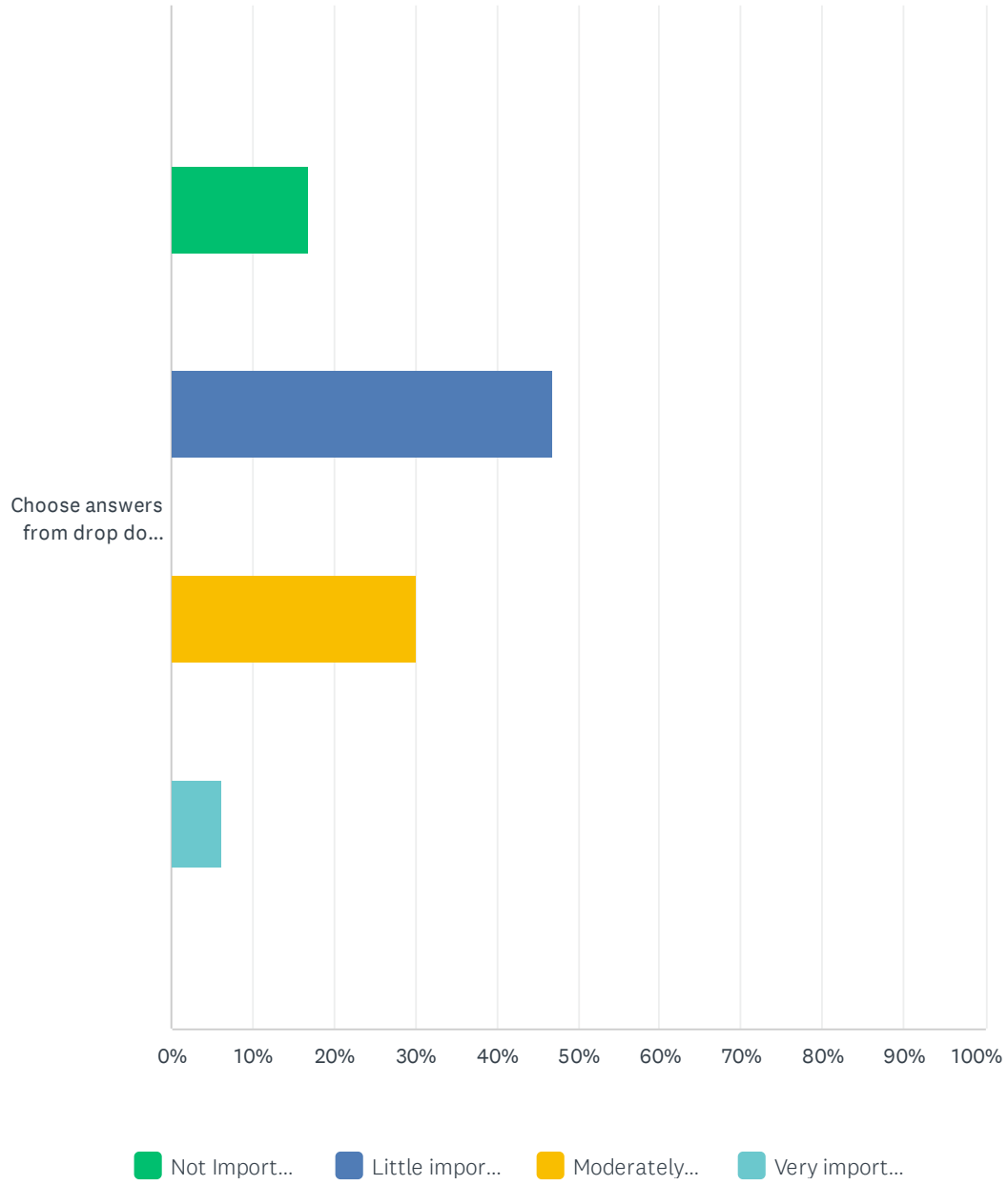
Q145 3.5.4.22 Thermo-therapeutic modalities (e.g., heat, ice, ultrasound).

Answered: 233 Skipped: 977



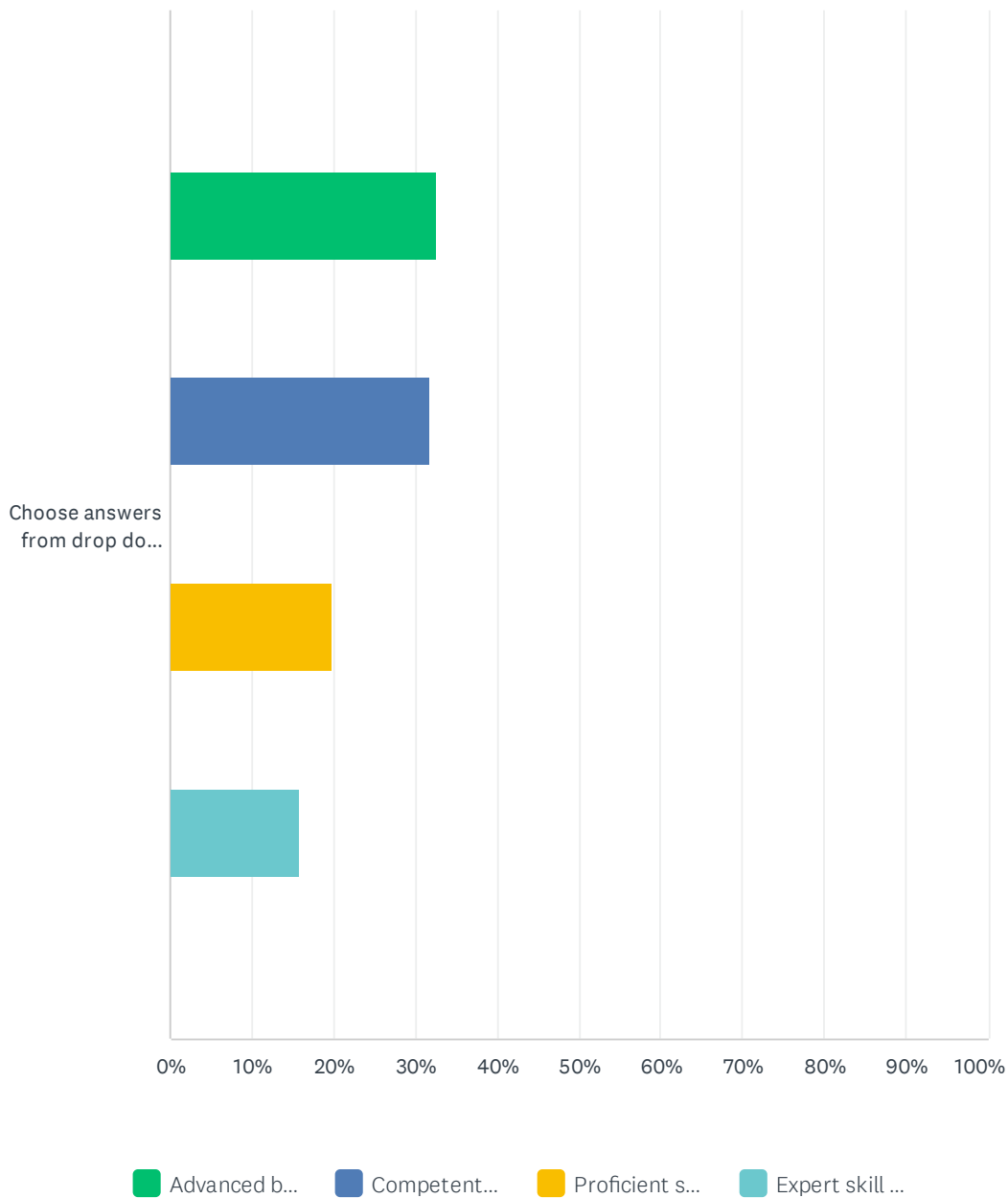
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	11.16% 26	28.33% 66	17.60% 41	23.61% 55	19.31% 45	233

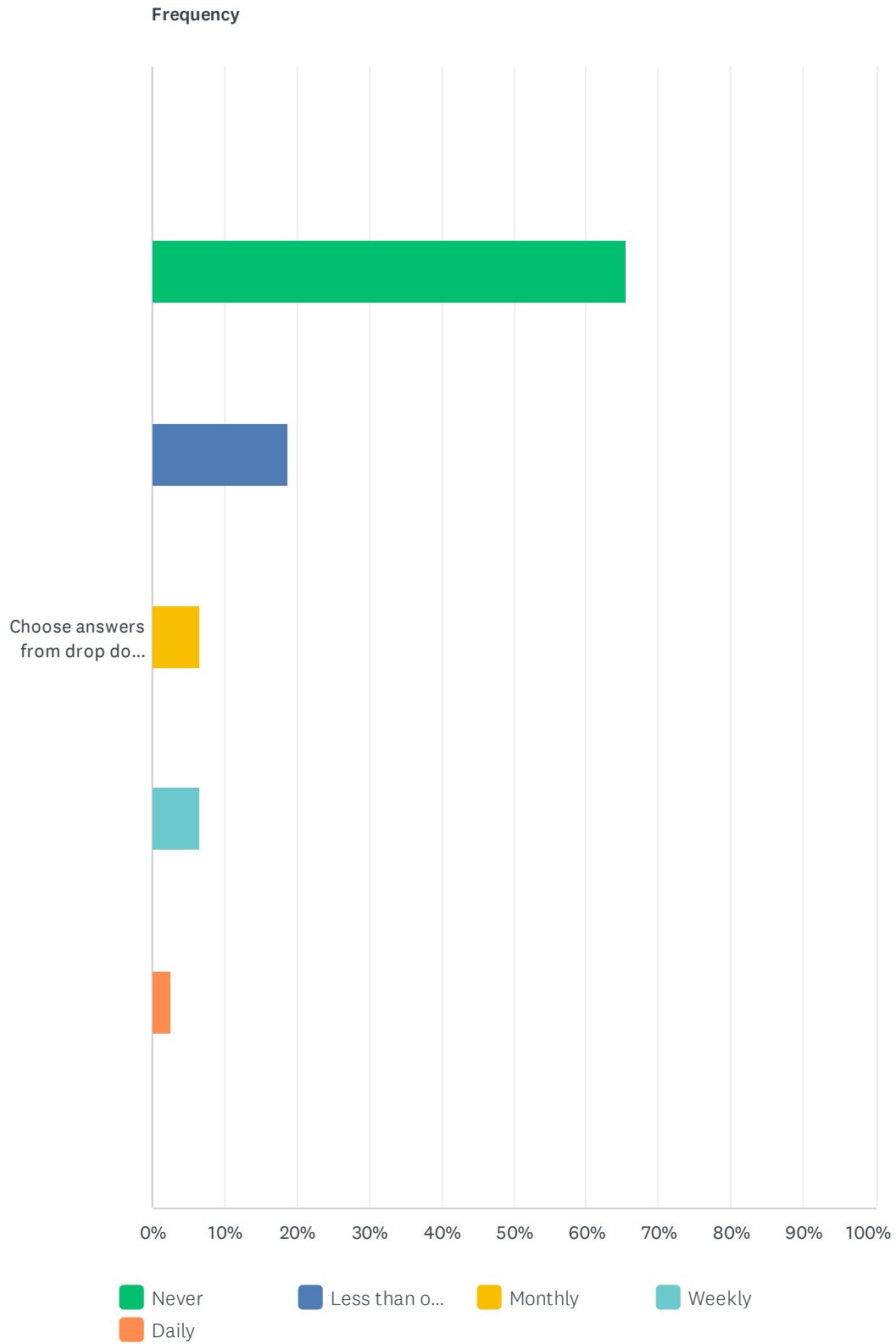
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	16.81% 38	46.90% 106	30.09% 68	6.19% 14	226

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	32.58% 72	31.67% 70	19.91% 44	15.84% 35	221

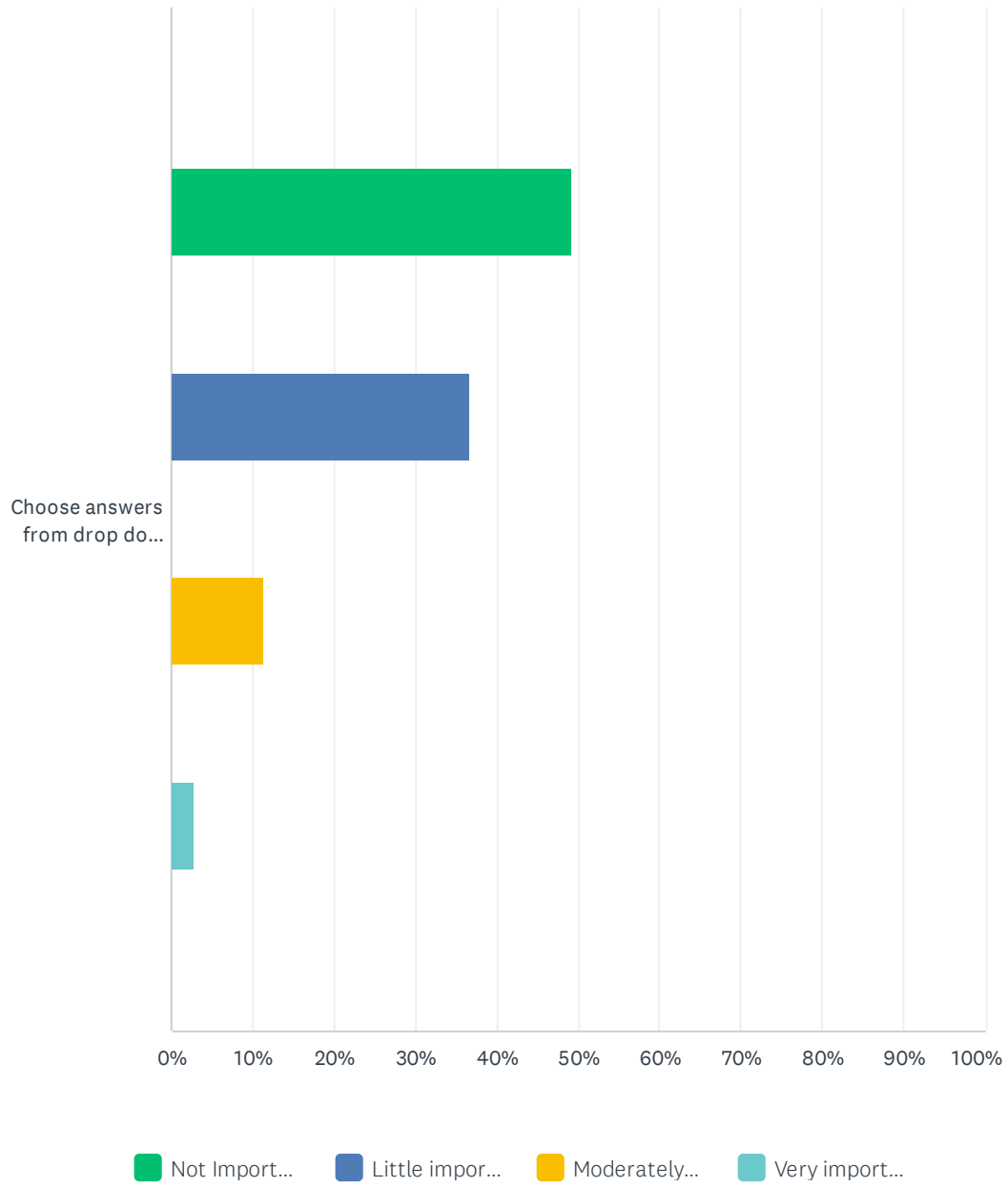
Q146 3.5.23 Photo-therapeutic modalities (e.g., laser).

Answered: 229 Skipped: 981



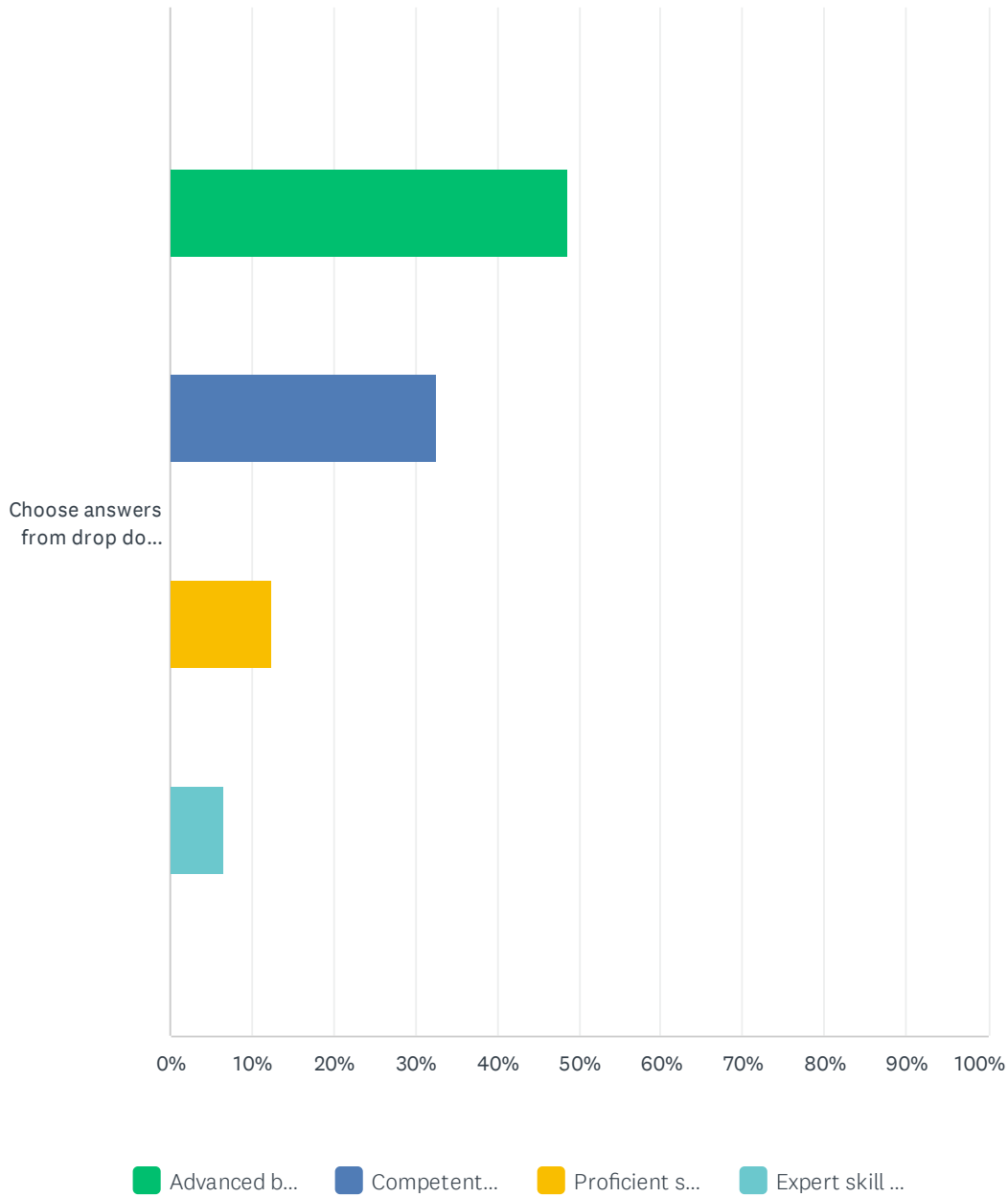
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	65.50% 150	18.78% 43	6.55% 15	6.55% 15	2.62% 6	229

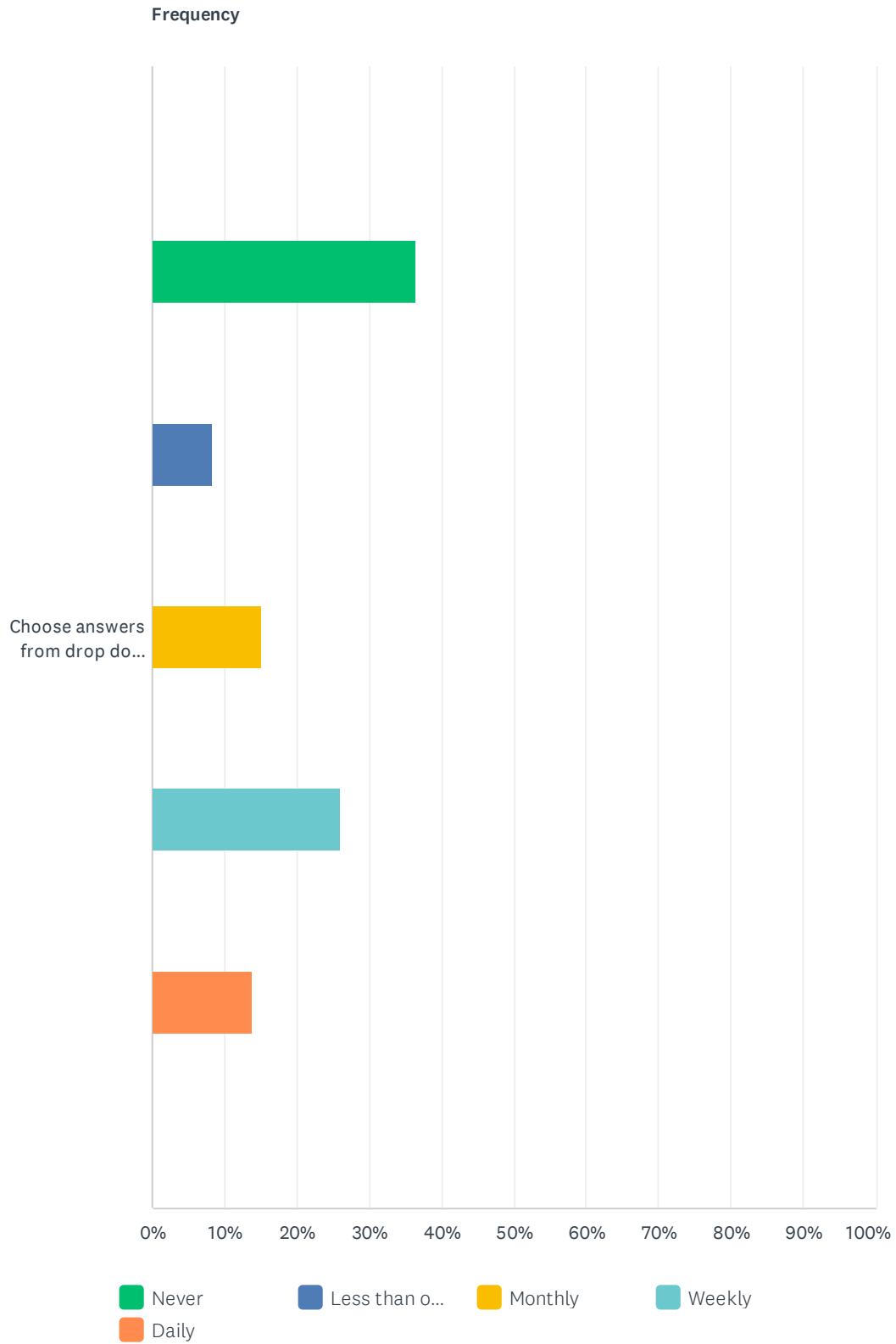
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	49.32% 109	36.65% 81	11.31% 25	2.71% 6	221

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	48.58% 103	32.55% 69	12.26% 26	6.60% 14	212

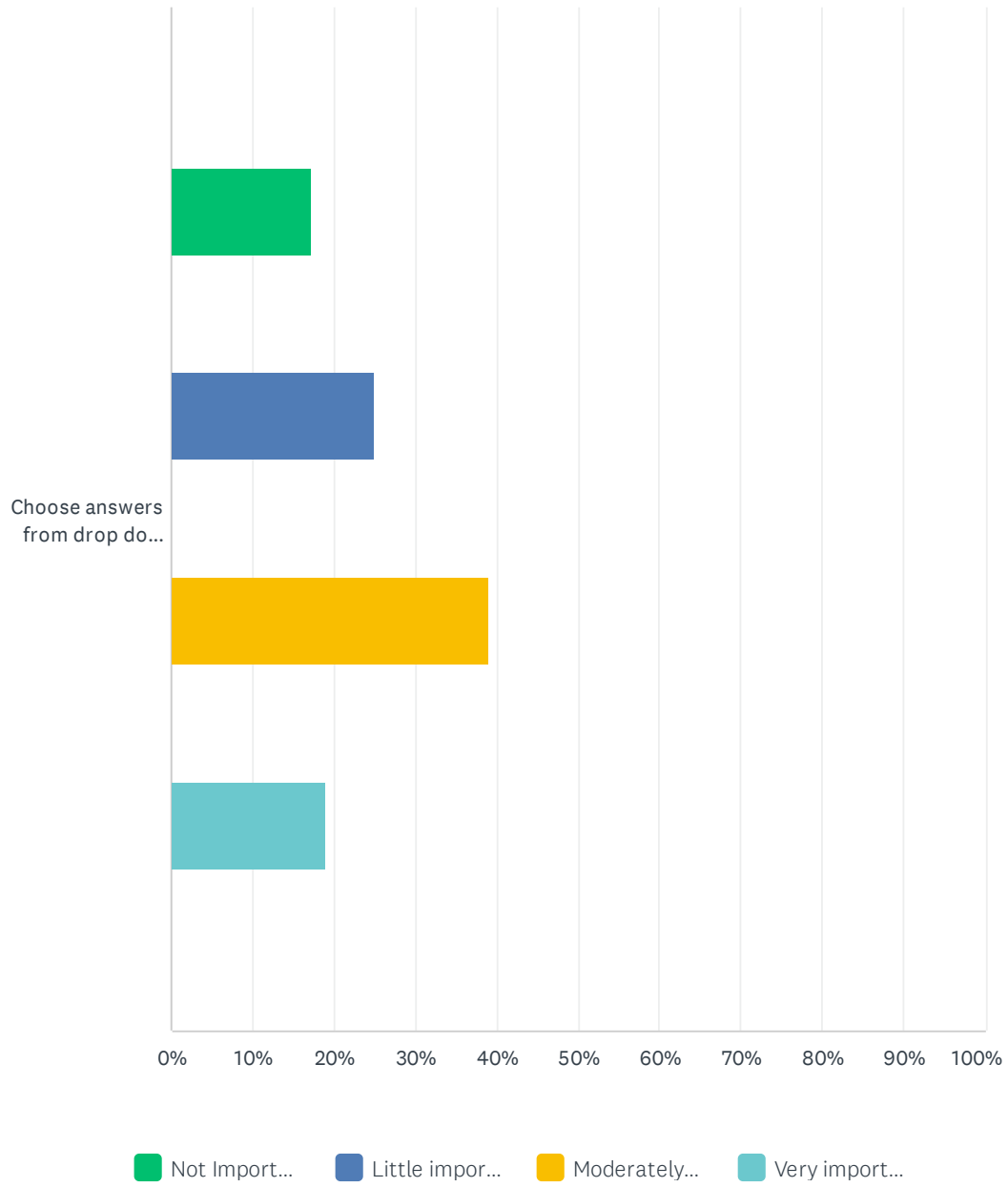
Q147 3.5.24 Dry needling.

Answered: 230 Skipped: 980



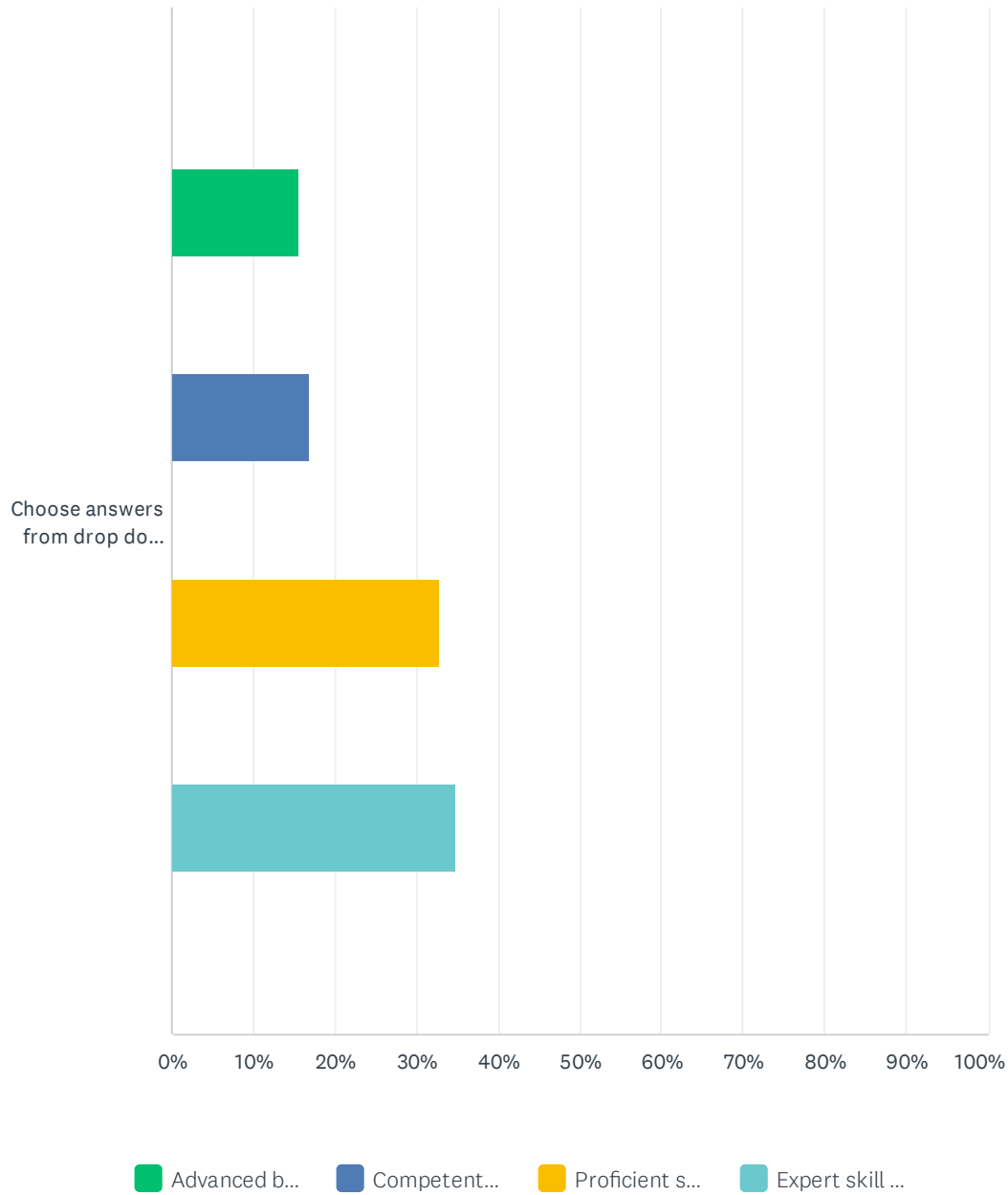
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	36.52% 84	8.26% 19	15.22% 35	26.09% 60	13.91% 32	230

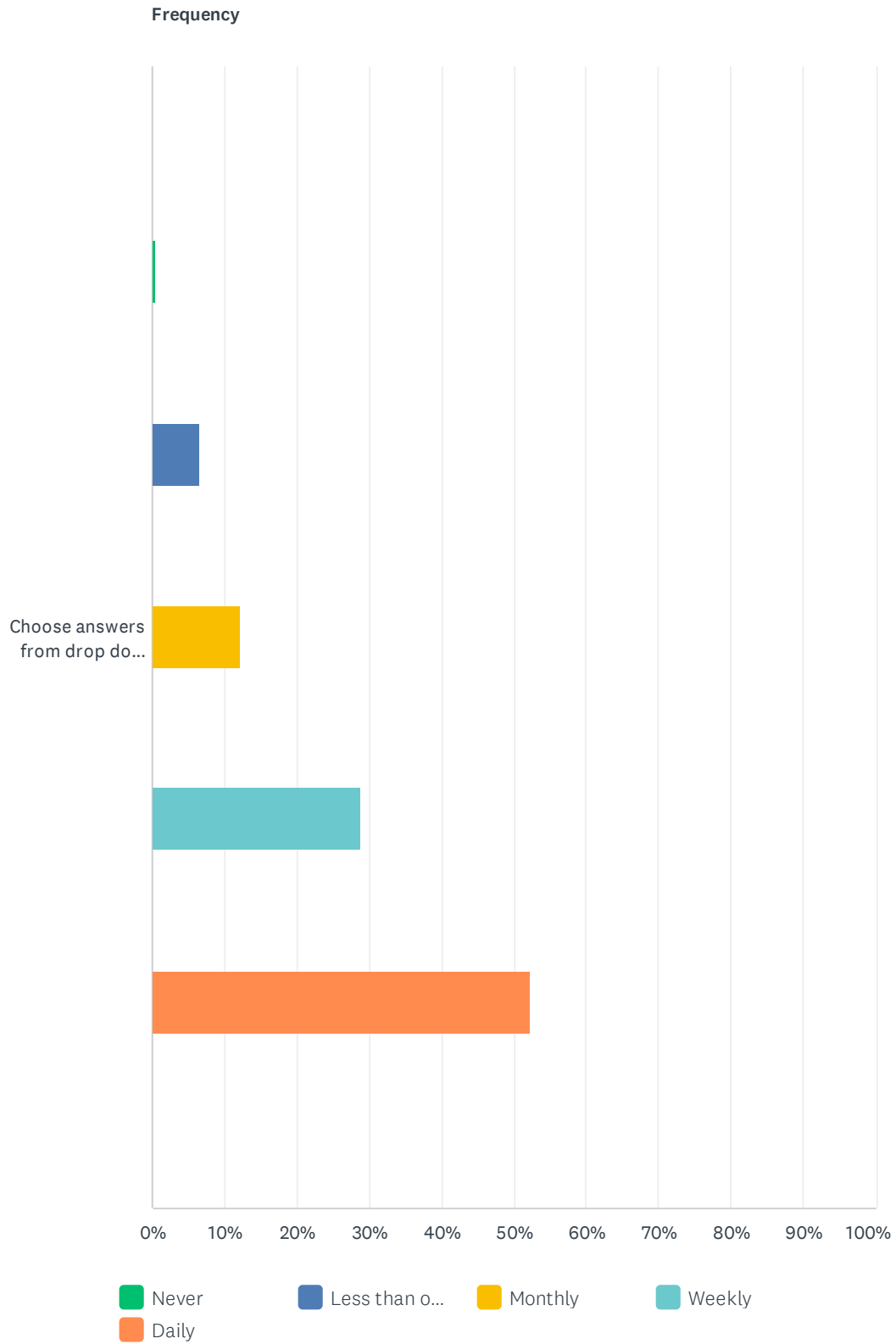
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	17.19% 38	24.89% 55	38.91% 86	19.00% 42	221

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	15.49% 33	16.90% 36	32.86% 70	34.74% 74	213

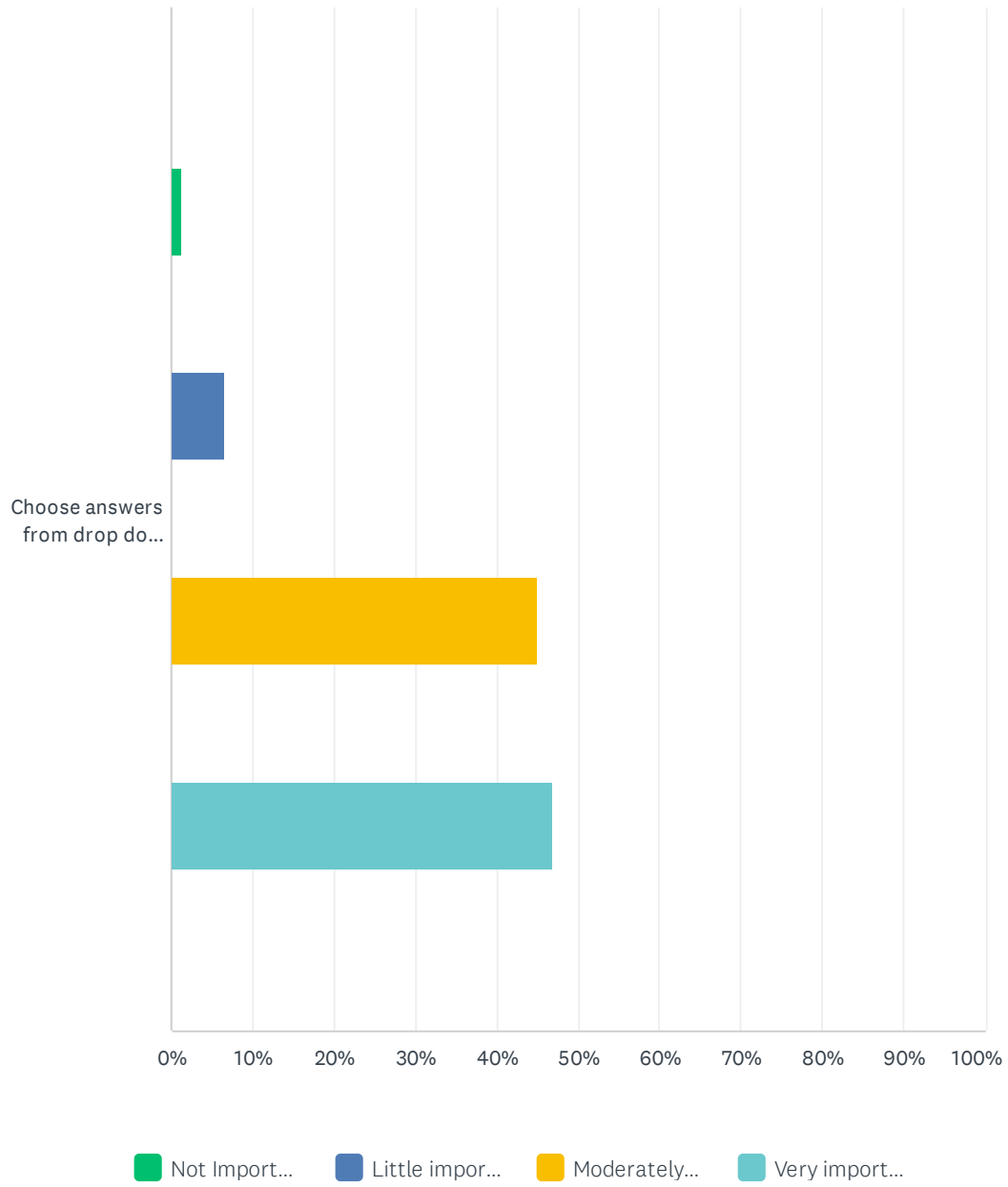
Q148 3.5.25 Aerobic capacity and endurance exercises.

Answered: 230 Skipped: 980



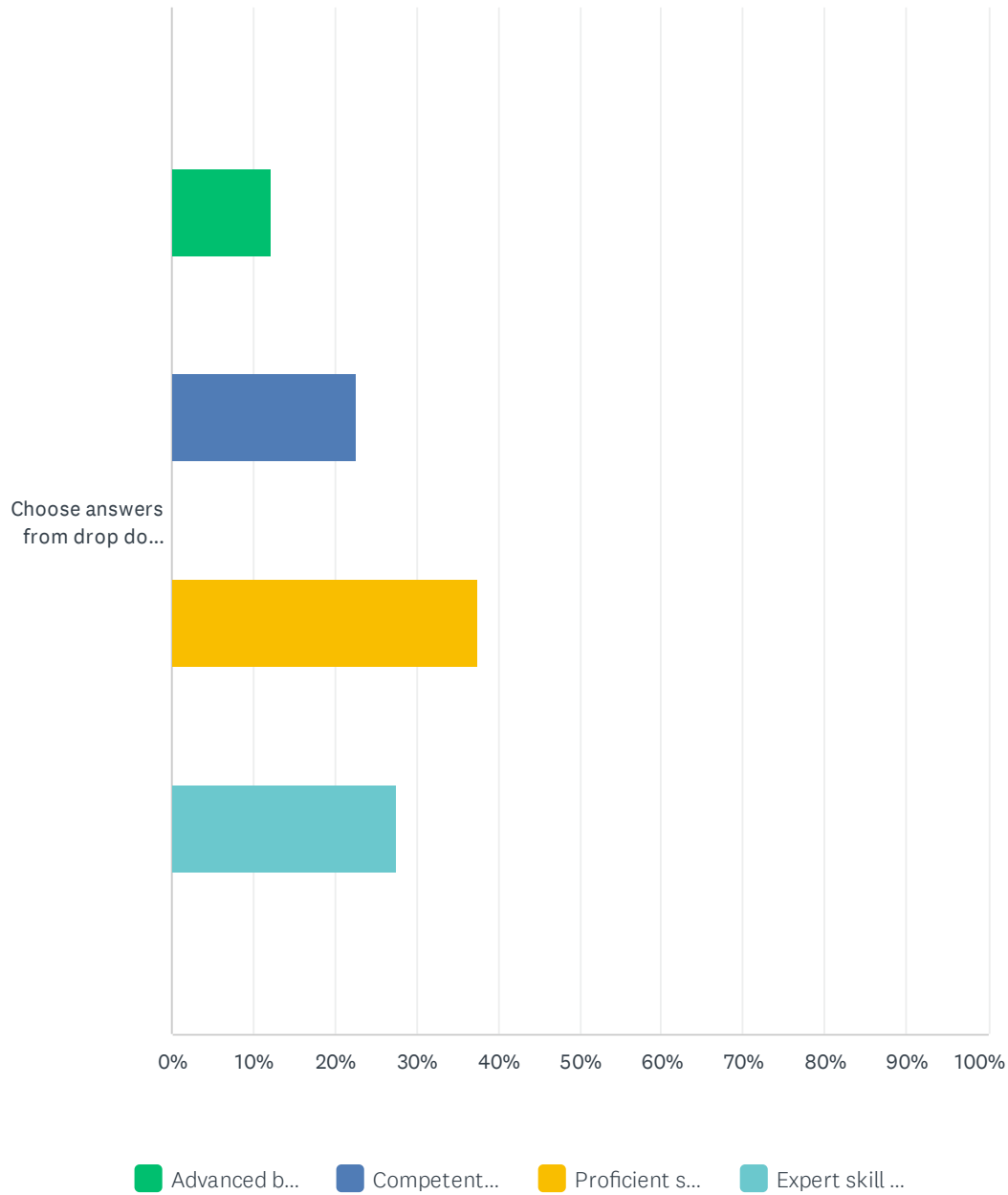
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.43% 1	6.52% 15	12.17% 28	28.70% 66	52.17% 120	230

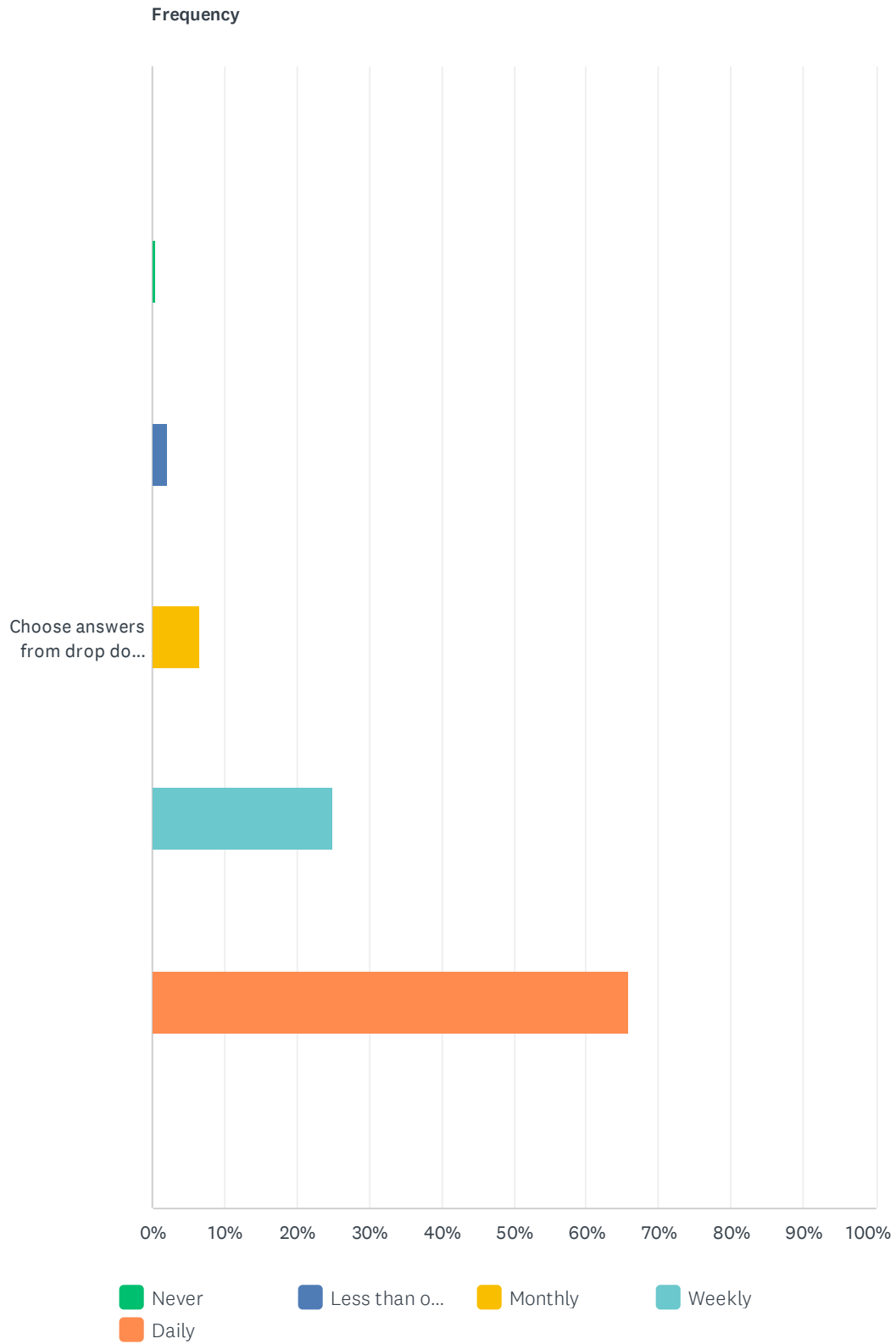
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.34% 3	6.70% 15	45.09% 101	46.88% 105	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.22% 27	22.62% 50	37.56% 83	27.60% 61	221

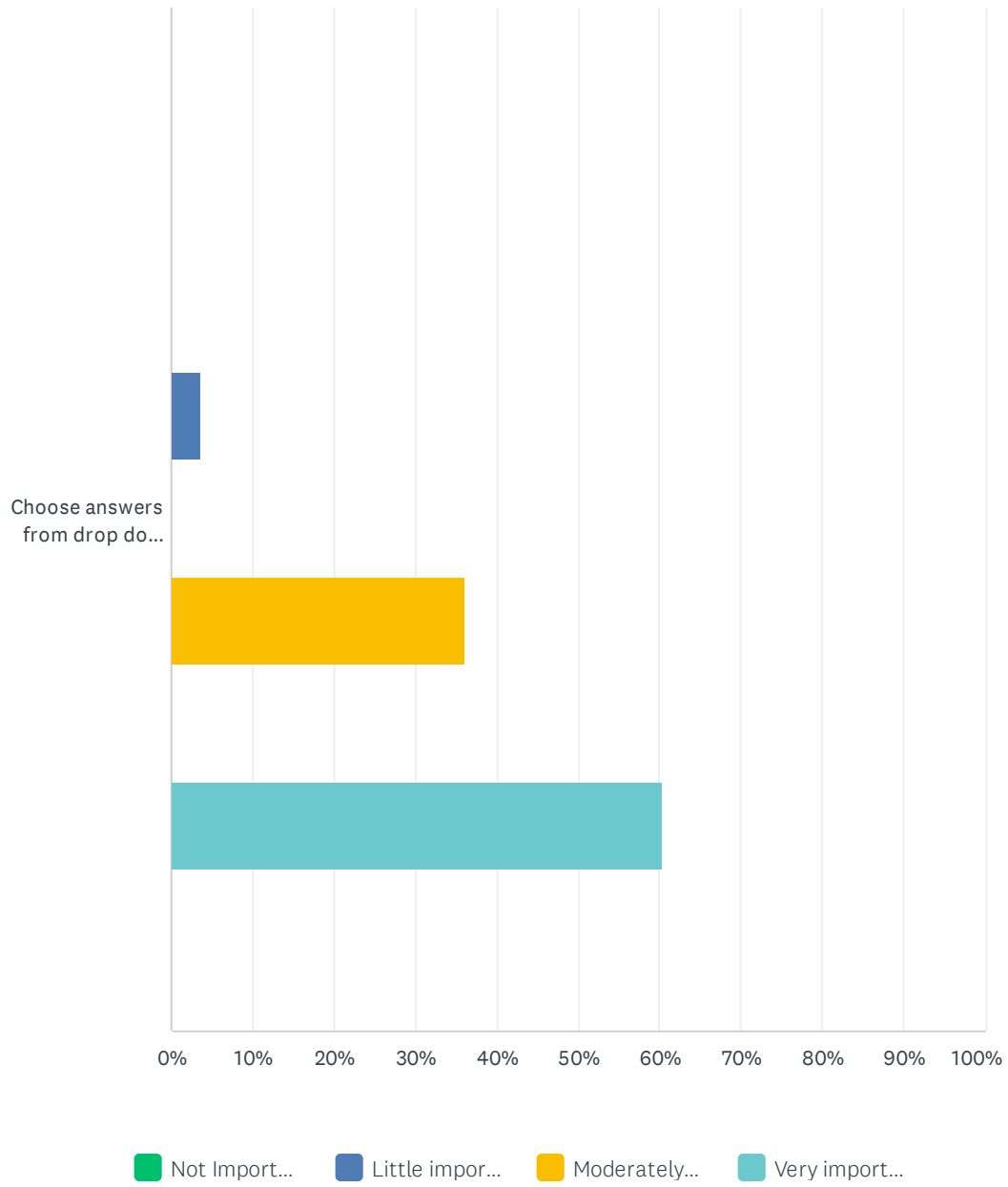
Q149 3.5.26 Motor coordination.

Answered: 229 Skipped: 981



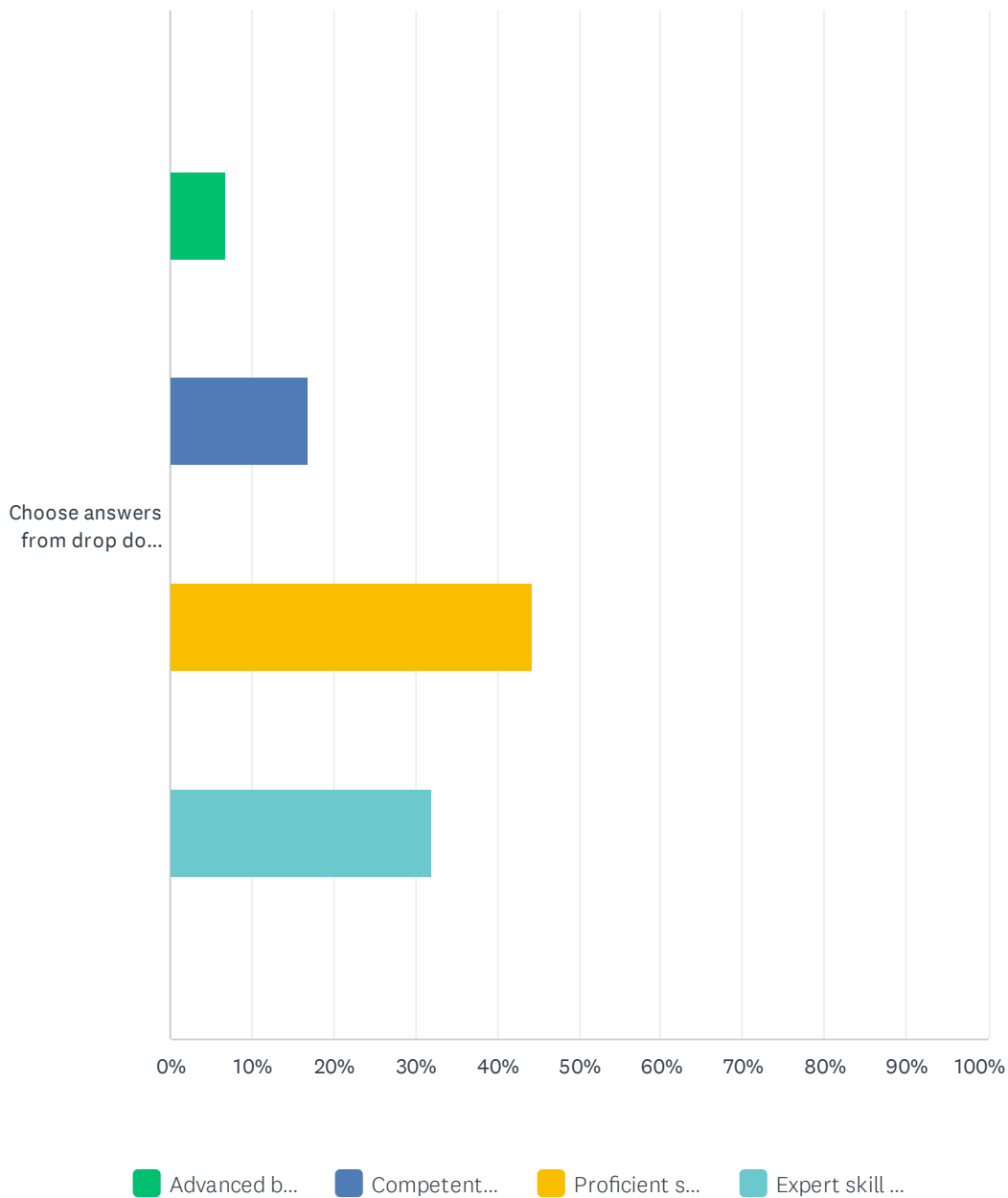
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.44% 1	2.18% 5	6.55% 15	24.89% 57	65.94% 151	229

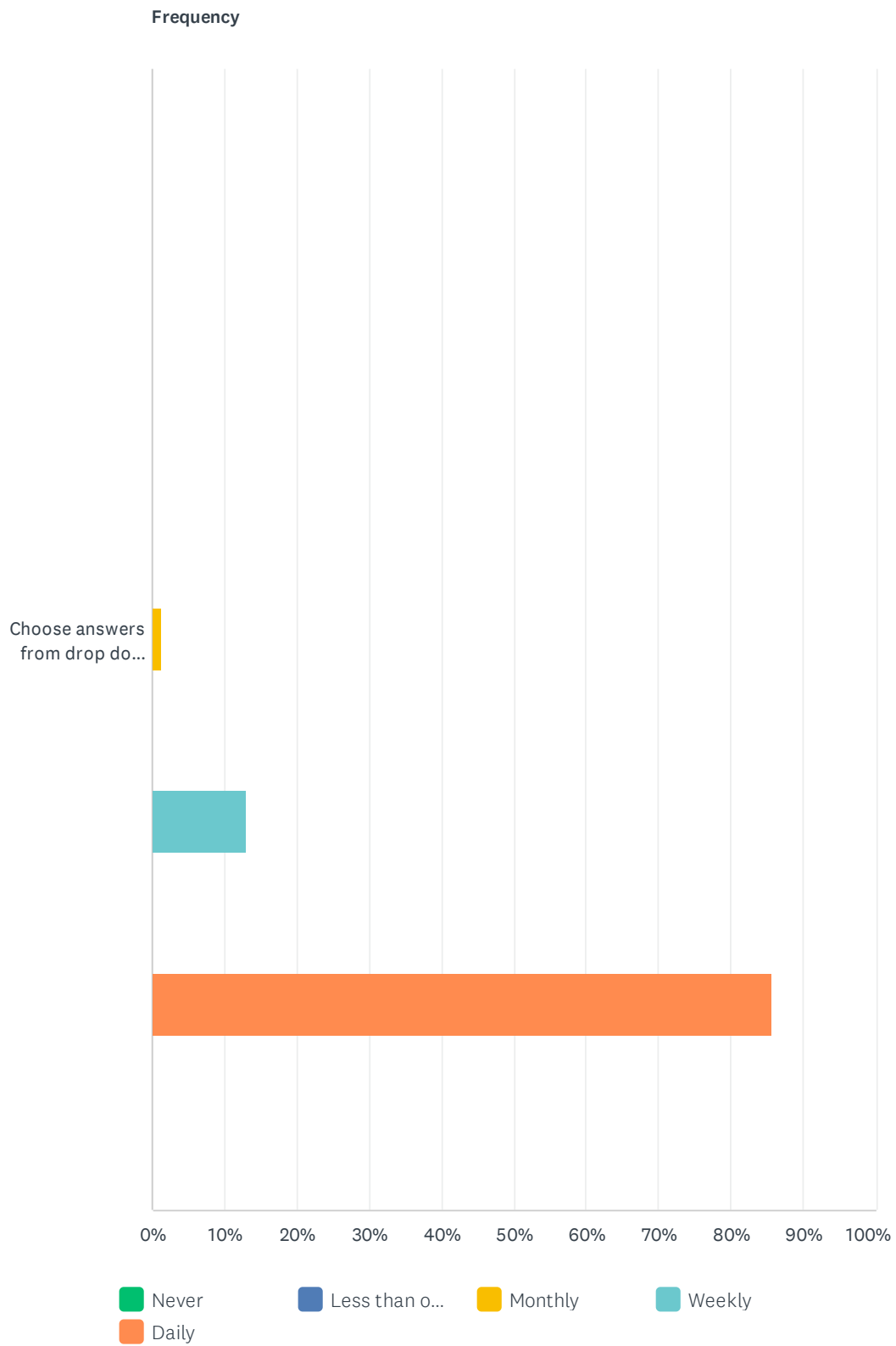
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.60% 8	36.04% 80	60.36% 134	222

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.85% 15	16.89% 37	44.29% 97	31.96% 70	219

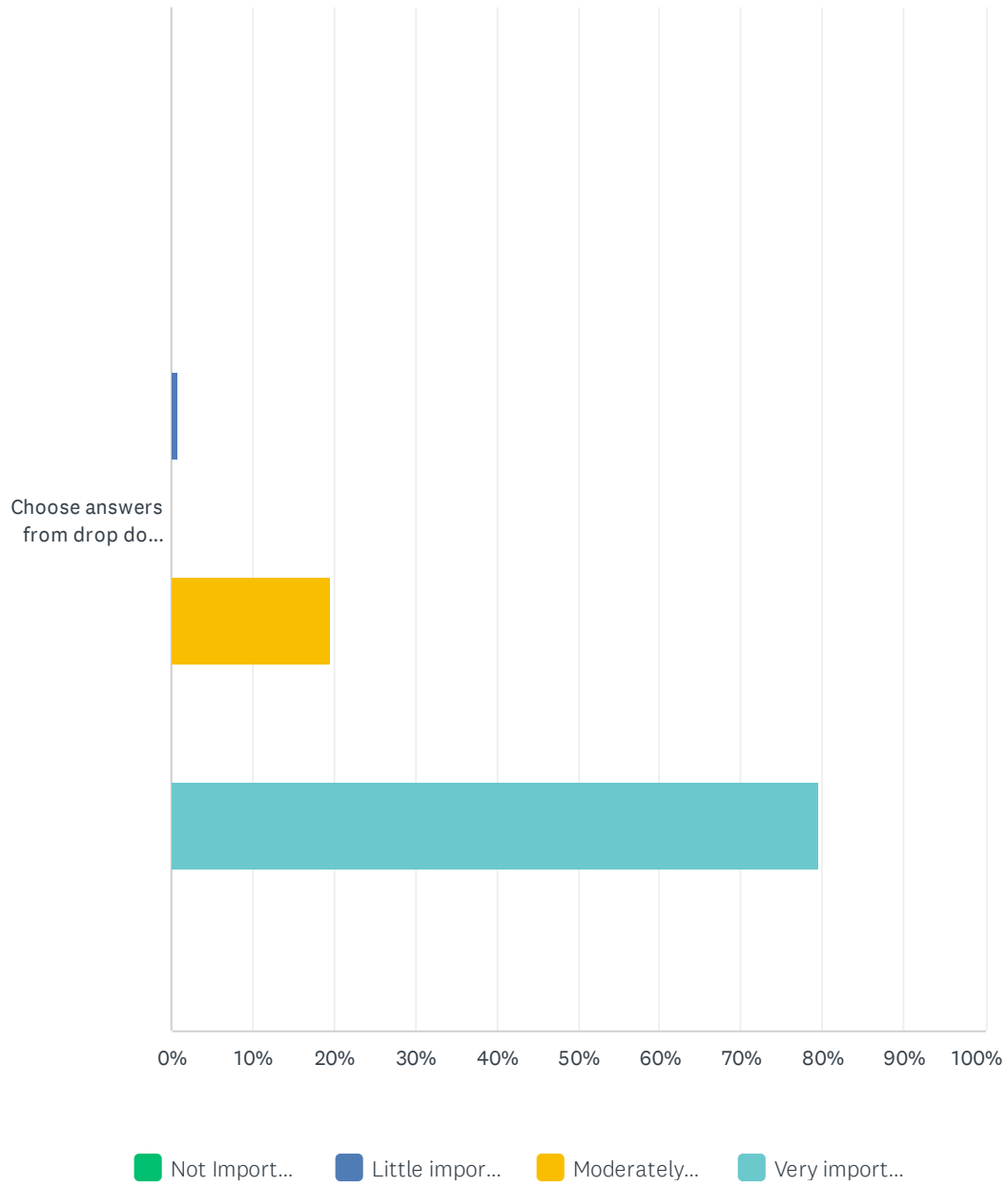
Q150 3.5.27 Muscle performance exercises (e.g., strength, muscle endurance).

Answered: 230 Skipped: 980



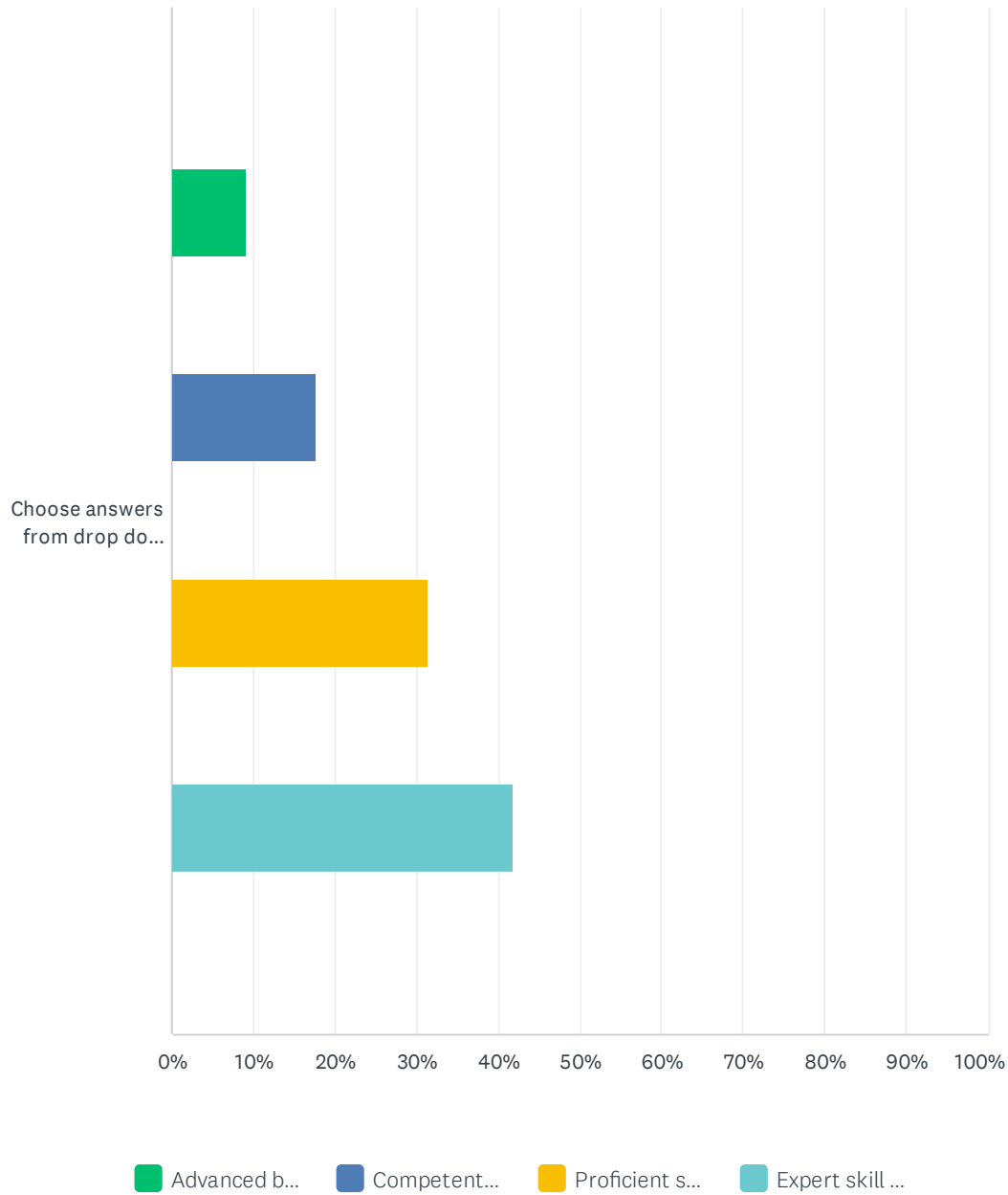
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	1.30% 3	13.04% 30	85.65% 197	230

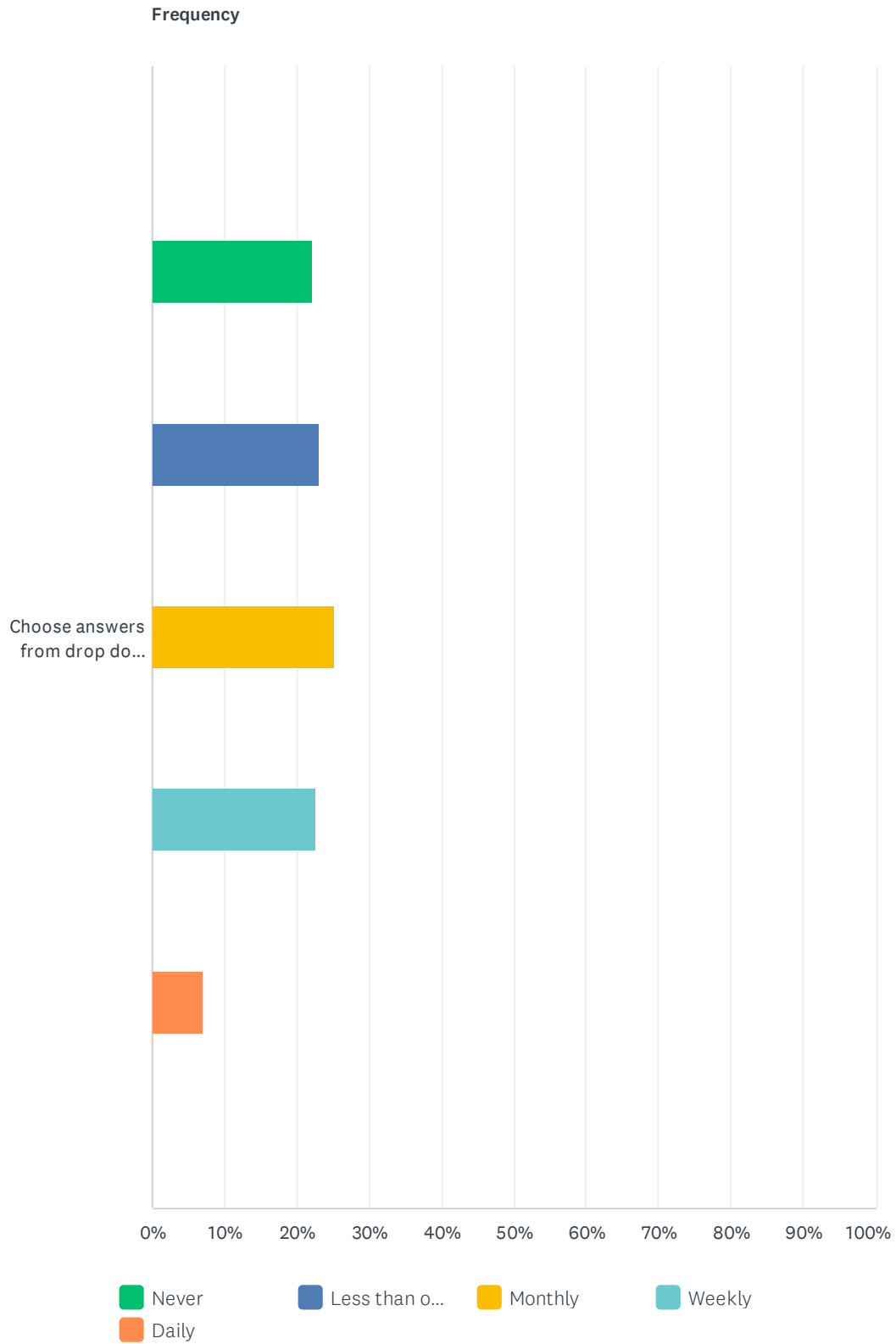
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.89% 2	19.64% 44	79.46% 178	224

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.09% 20	17.73% 39	31.36% 69	41.82% 92	220

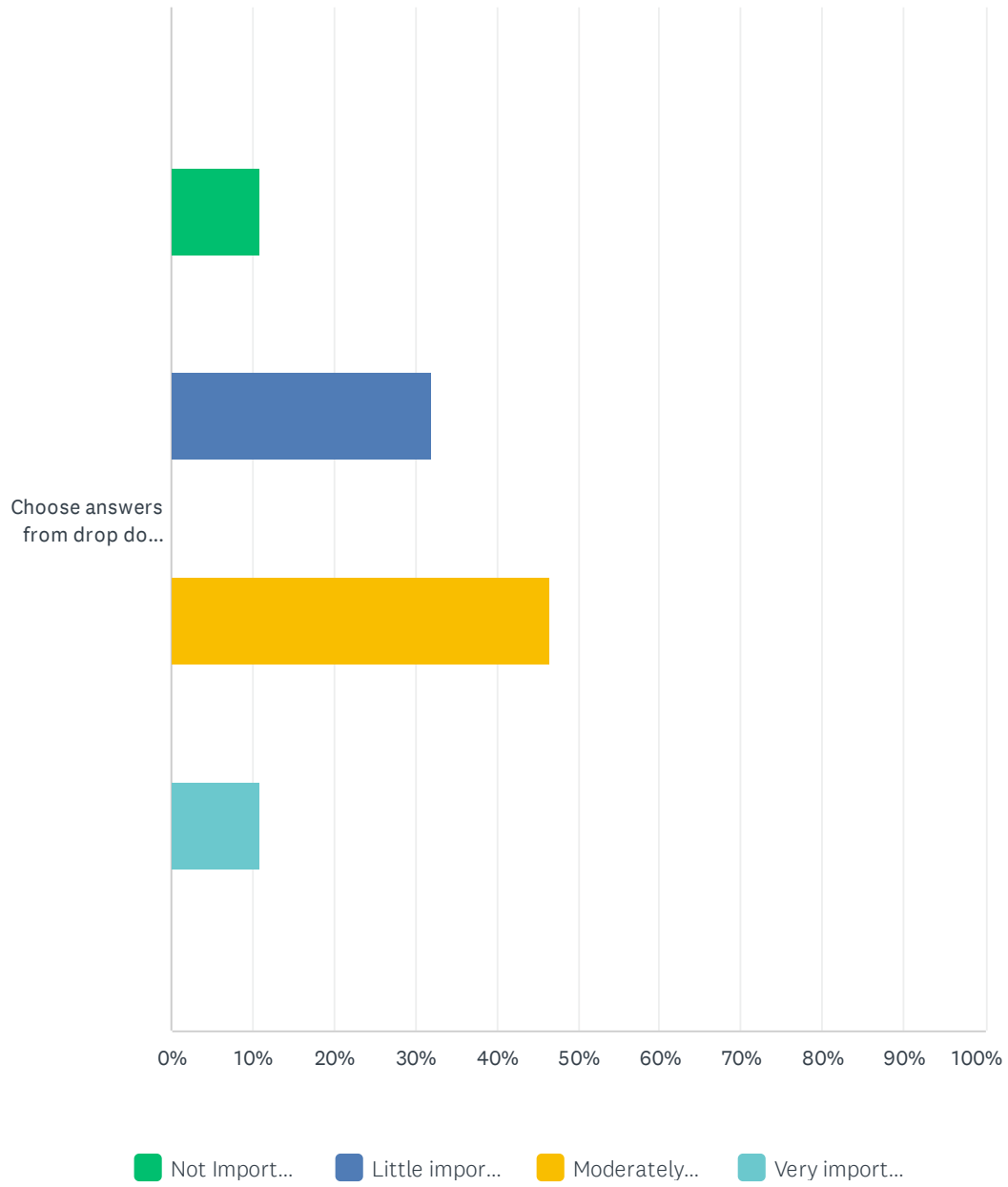
Q151 3.5.28.1 Meditation.

Answered: 230 Skipped: 980



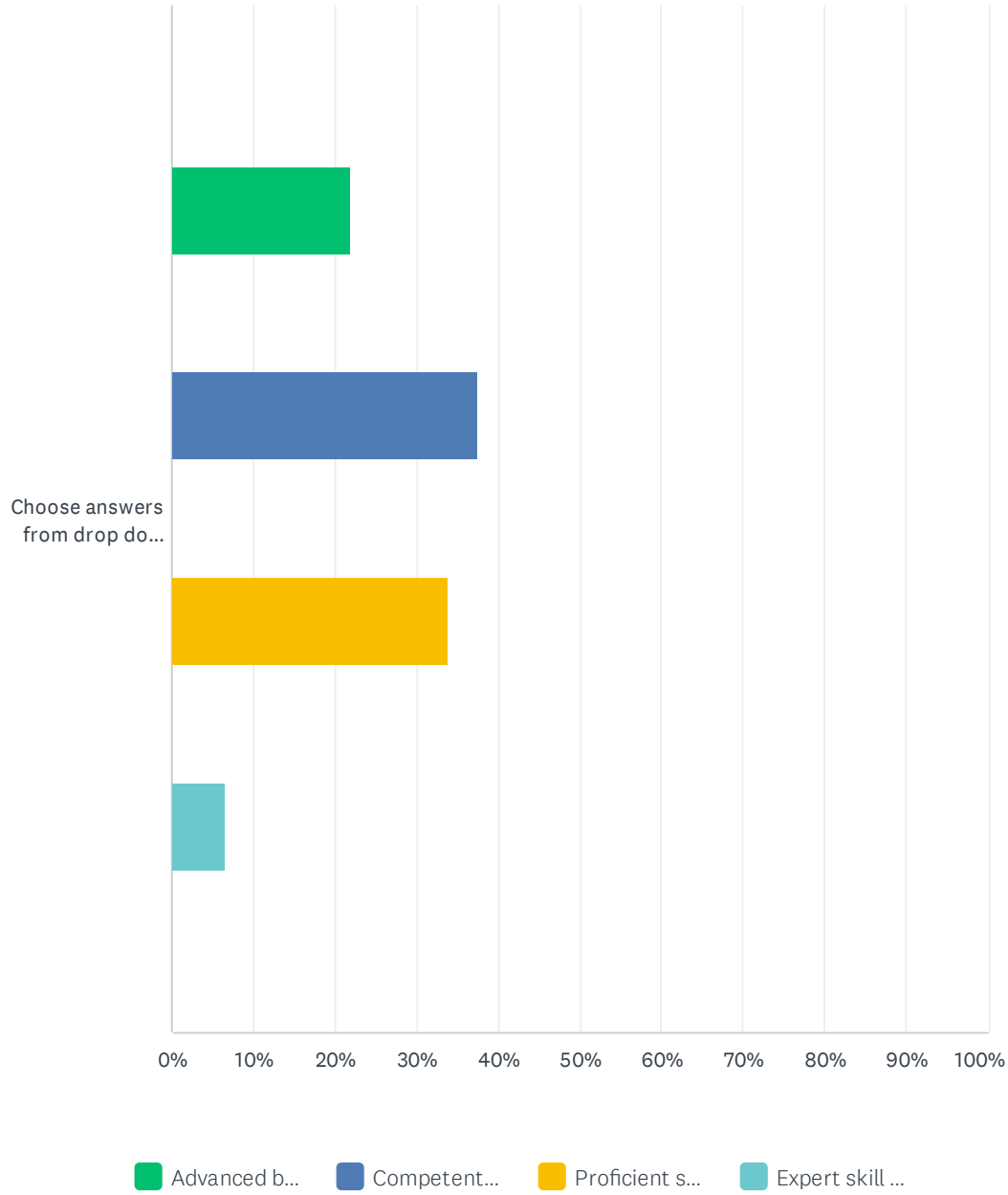
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	22.17% 51	23.04% 53	25.22% 58	22.61% 52	6.96% 16	230

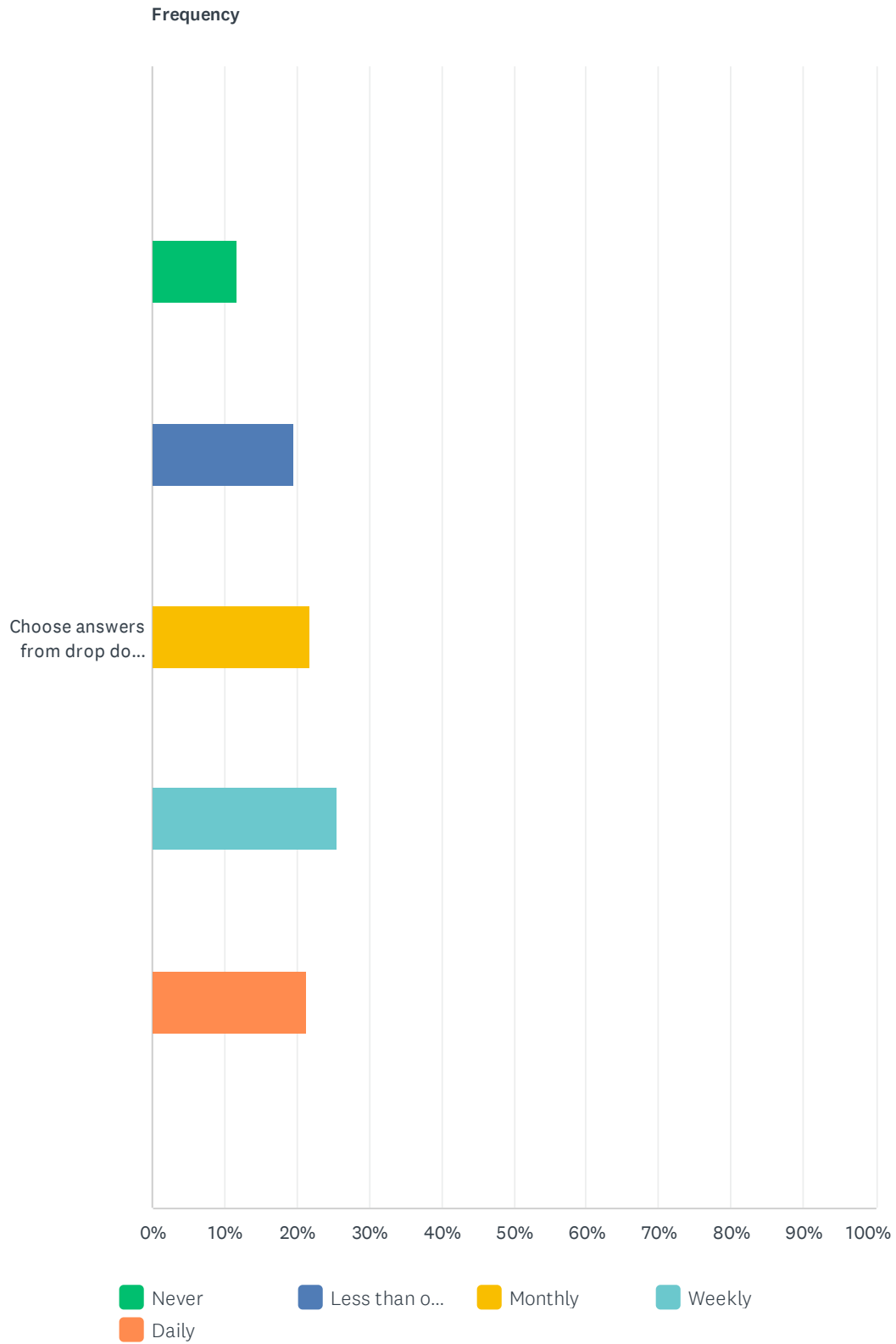
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	10.81% 24	31.98% 71	46.40% 103	10.81% 24	222

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	22.07% 47	37.56% 80	33.80% 72	6.57% 14	213

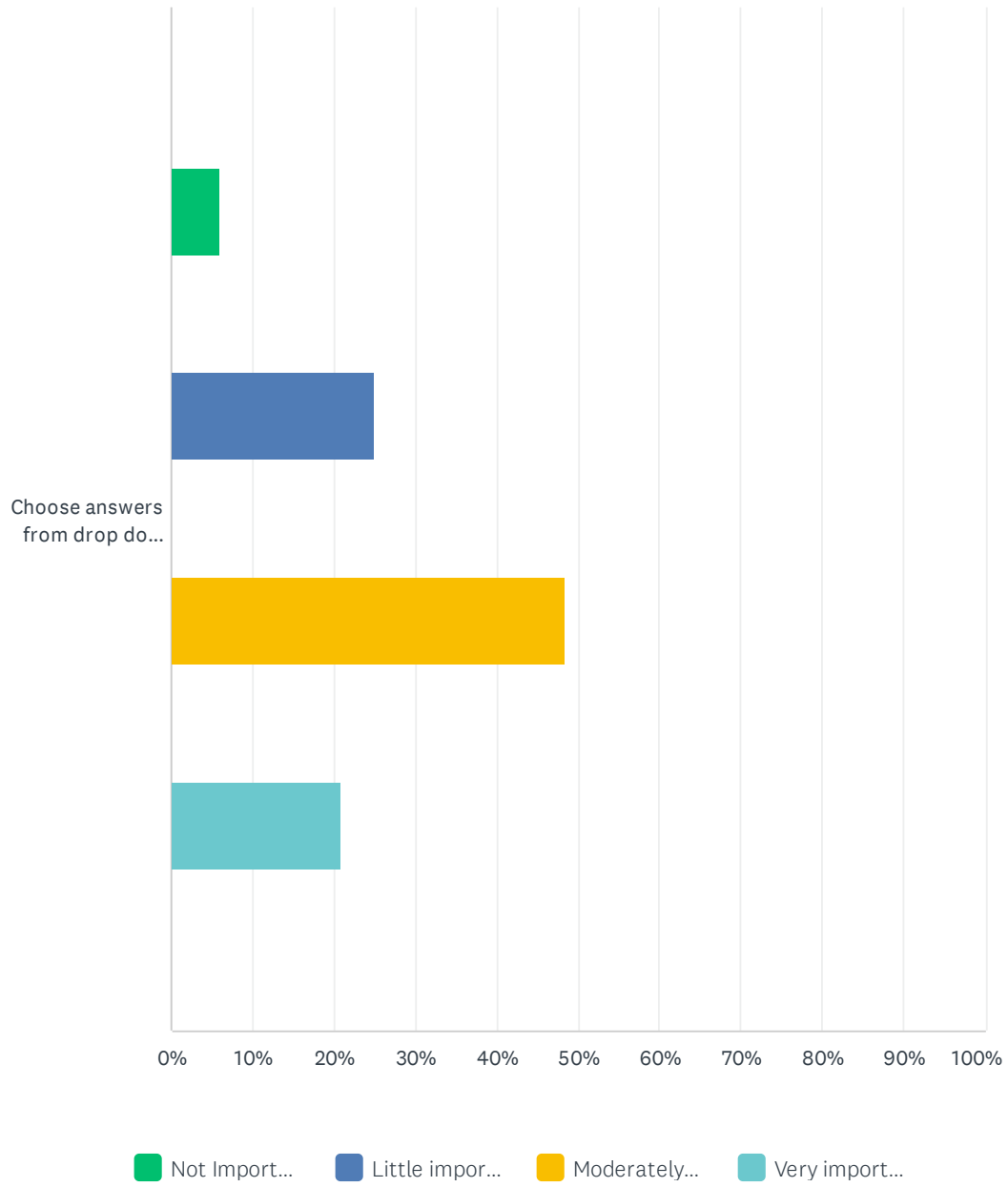
Q152 3.5.28.2 Mindfulness.

Answered: 230 Skipped: 980



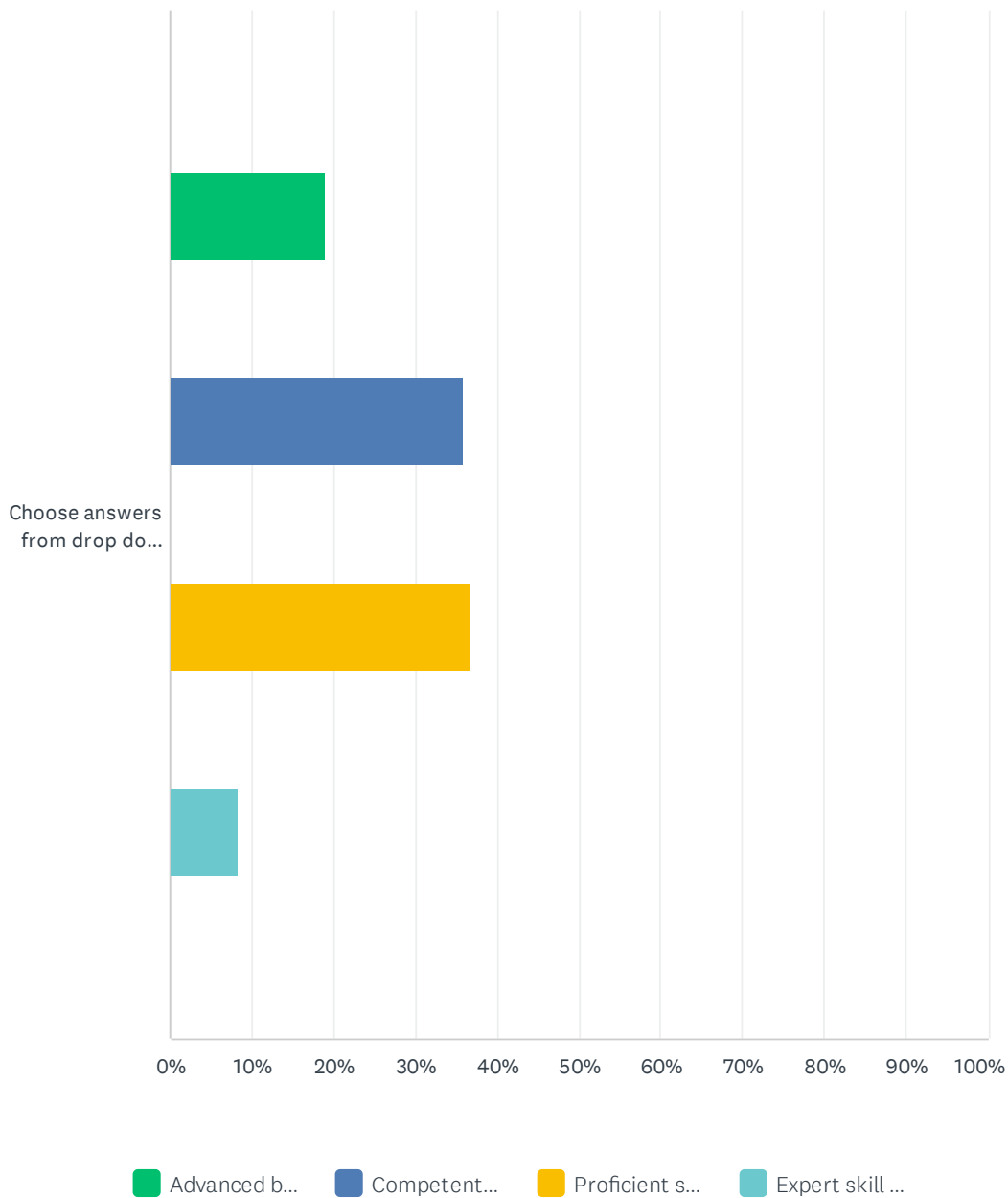
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	11.74% 27	19.57% 45	21.74% 50	25.65% 59	21.30% 49	230

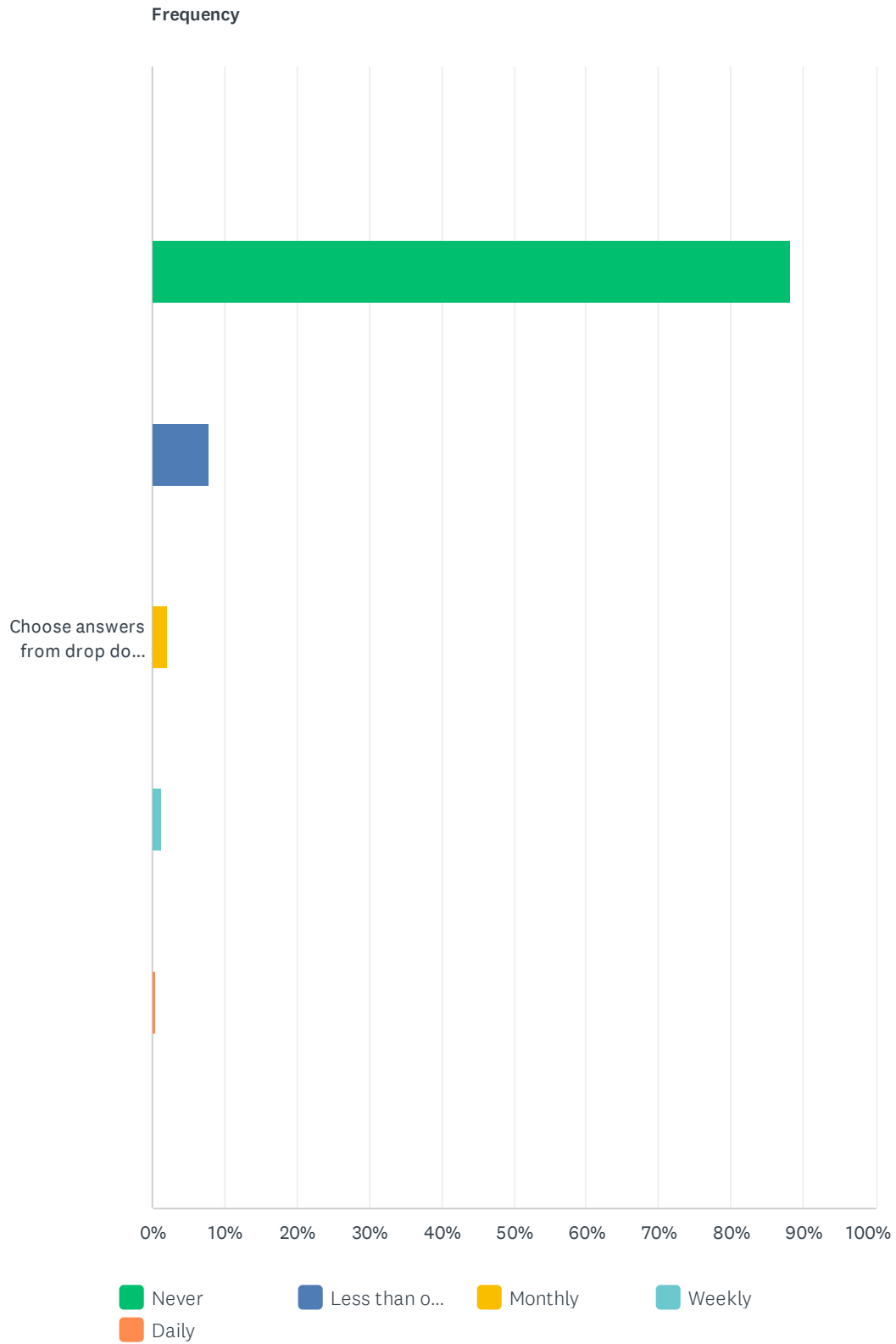
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	5.88% 13	24.89% 55	48.42% 107	20.81% 46	221

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	19.07% 41	35.81% 77	36.74% 79	8.37% 18	215

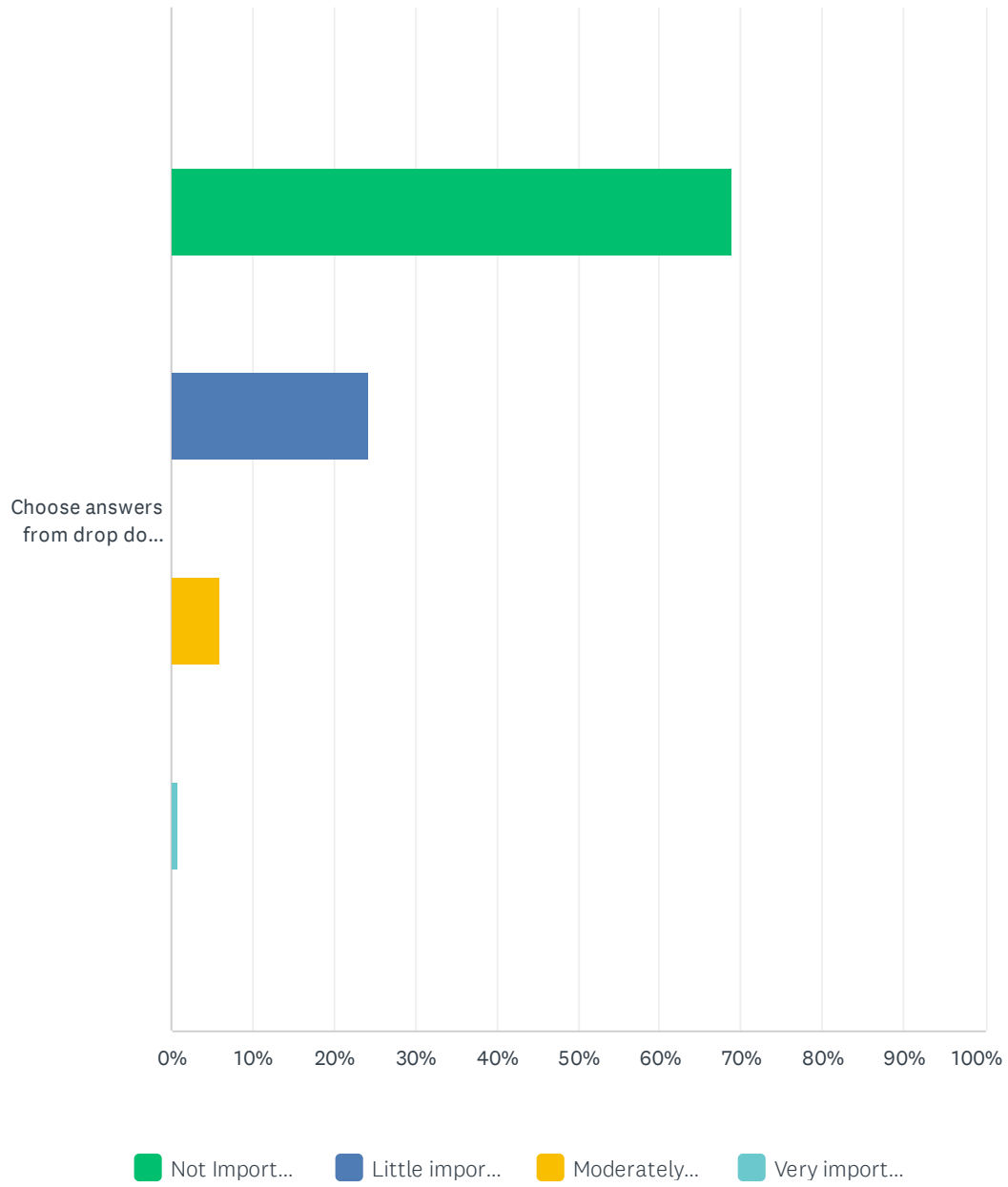
Q153 3.5.28.3 Hypnosis.

Answered: 229 Skipped: 981



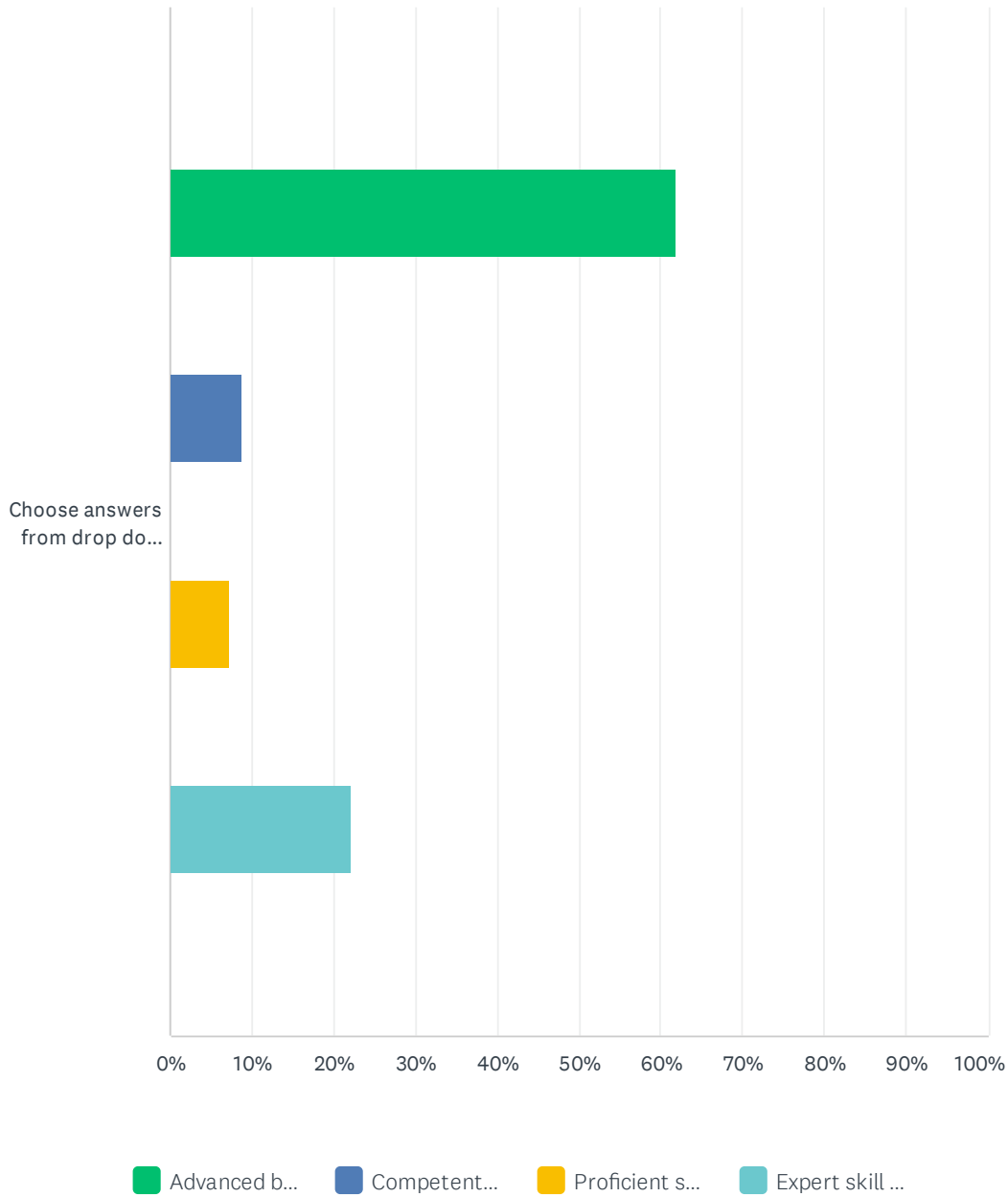
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	88.21% 202	7.86% 18	2.18% 5	1.31% 3	0.44% 1	229

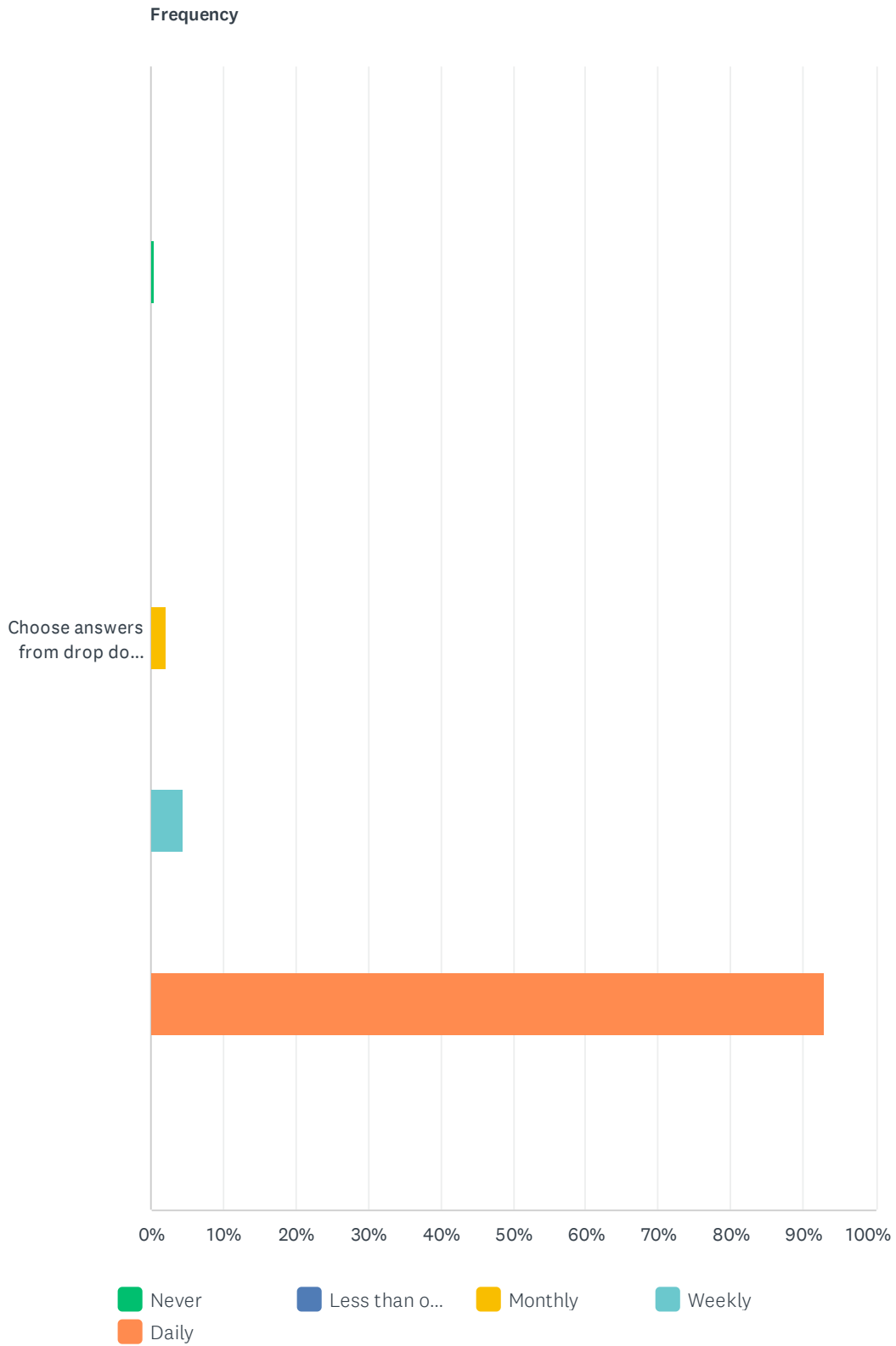
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	68.81% 150	24.31% 53	5.96% 13	0.92% 2	218

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	61.86% 120	8.76% 17	7.22% 14	22.16% 43	194

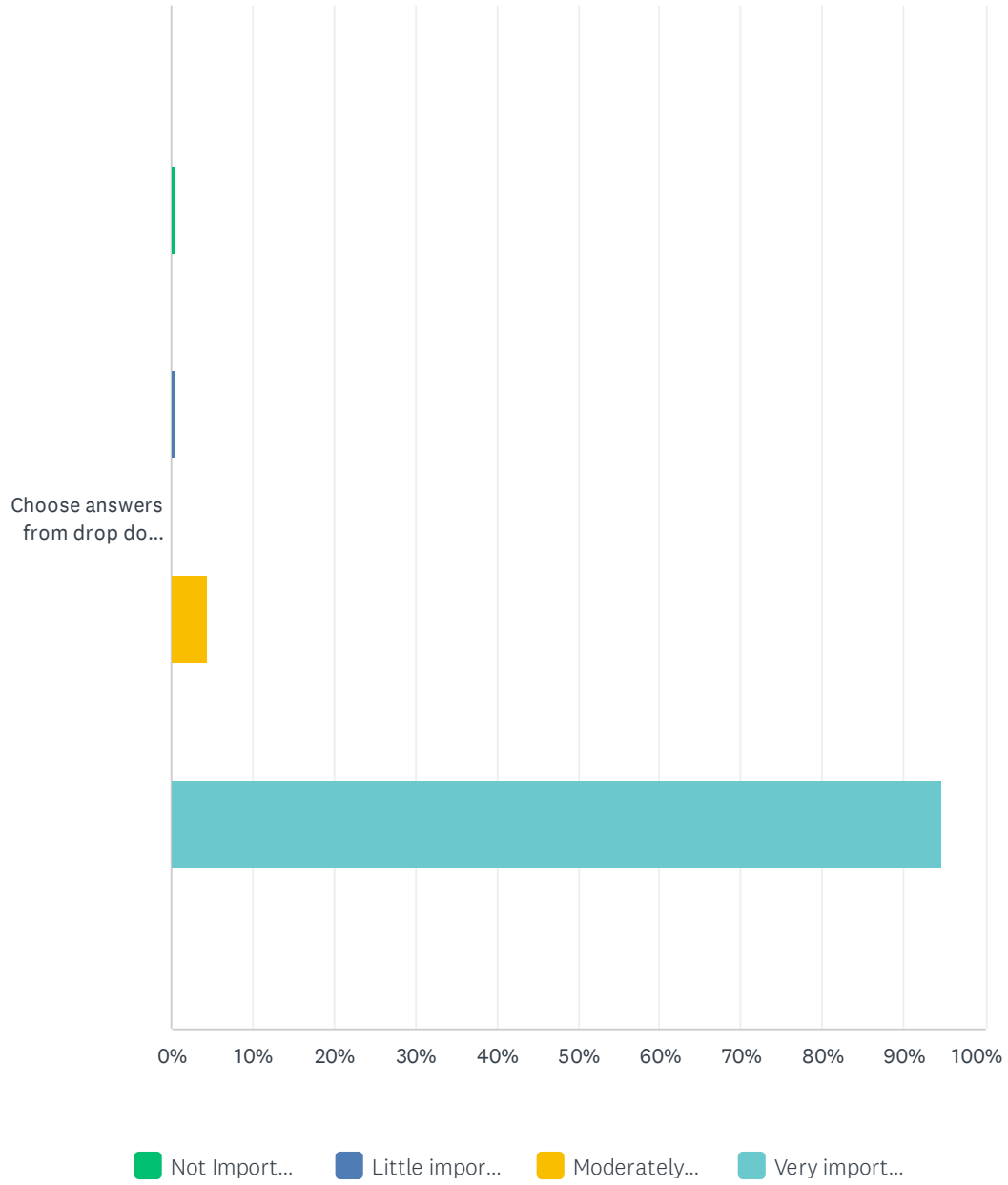
Q154 3.6.1 Assessing intervention response.

Answered: 227 Skipped: 983



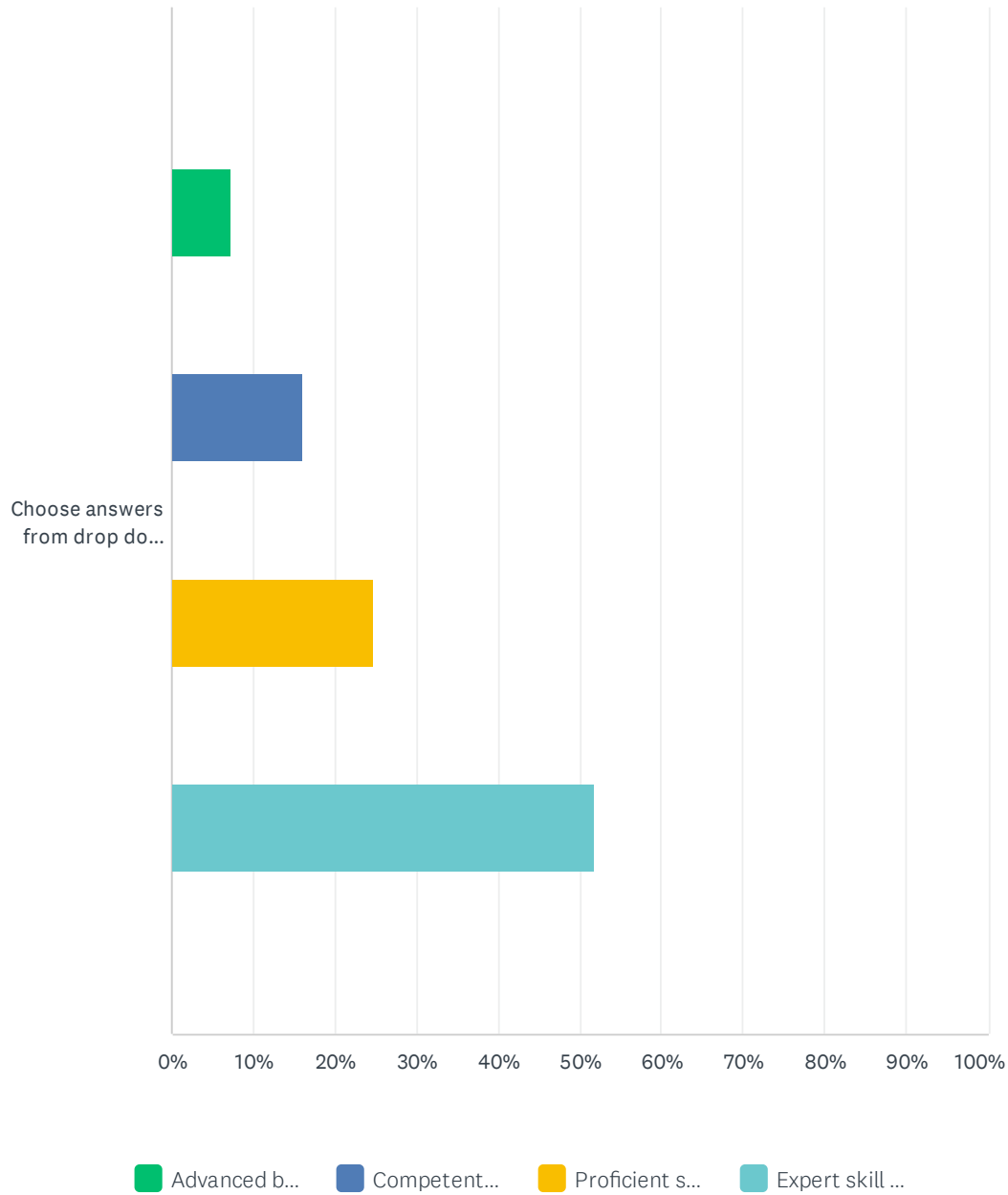
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.44% 1	0.00% 0	2.20% 5	4.41% 10	92.95% 211	227

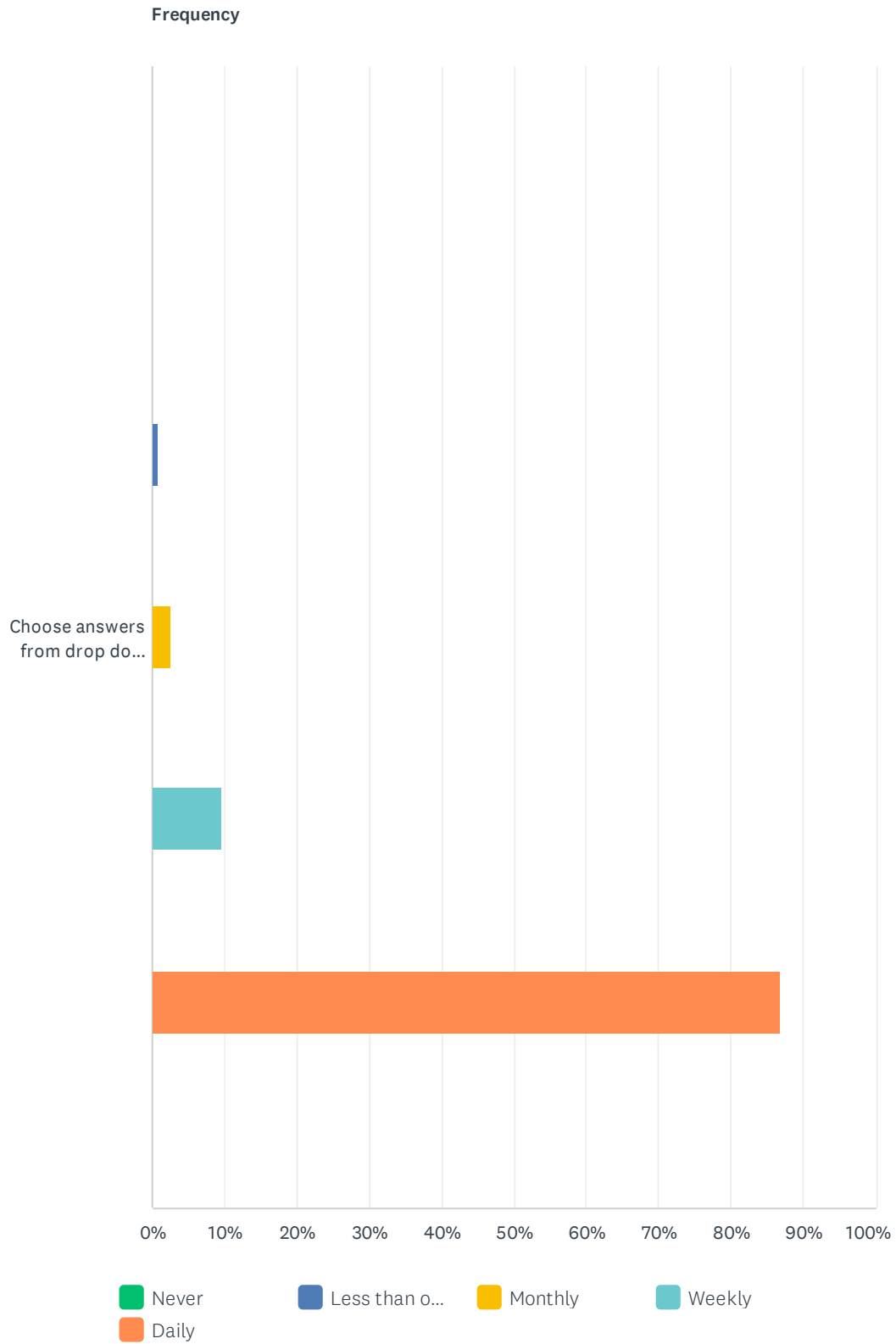
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.45% 1	0.45% 1	4.52% 10	94.57% 209	221

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.34% 16	16.06% 35	24.77% 54	51.83% 113	218

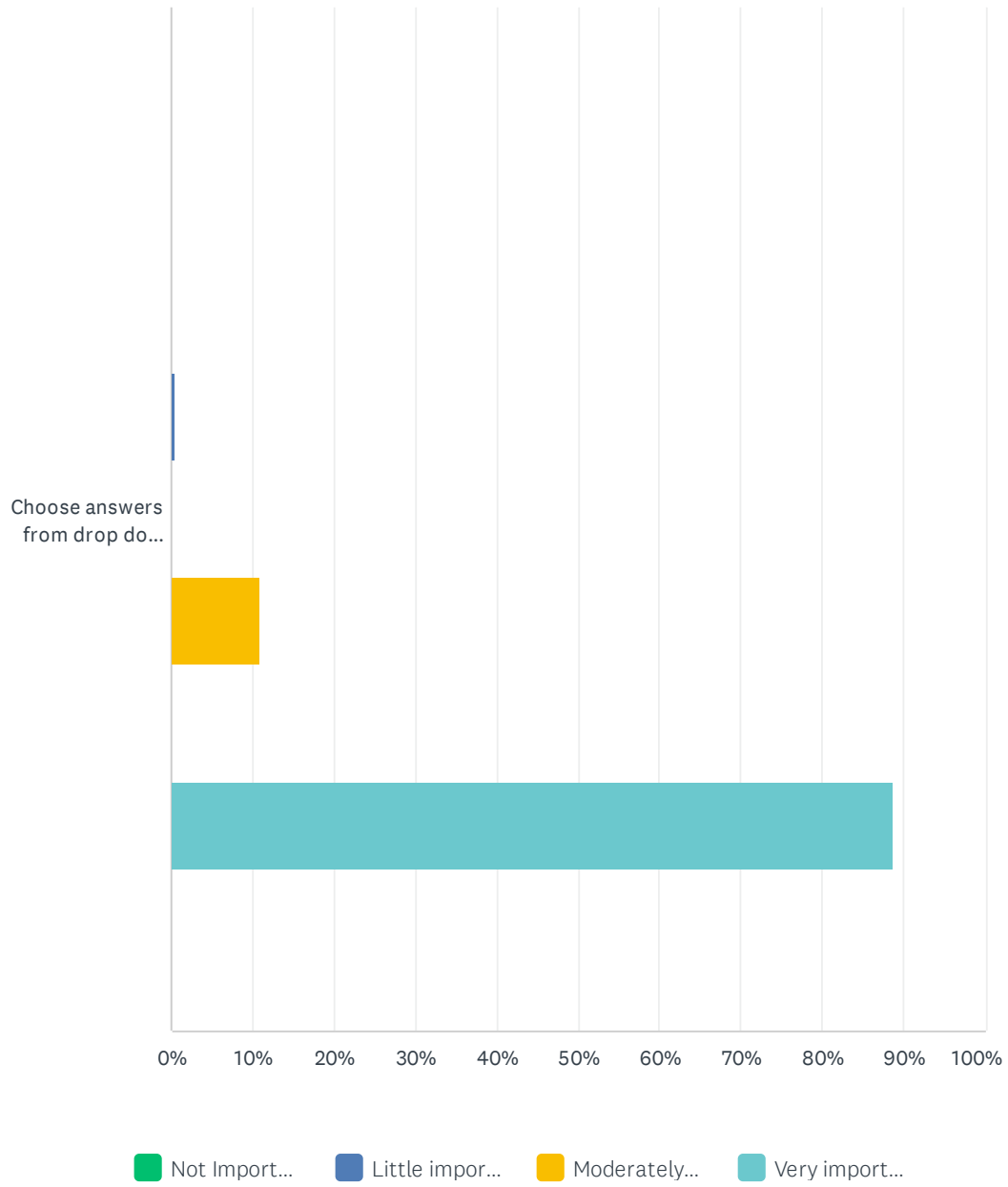
Q155 3.6.2 Analyzing significance of changes.

Answered: 227 Skipped: 983



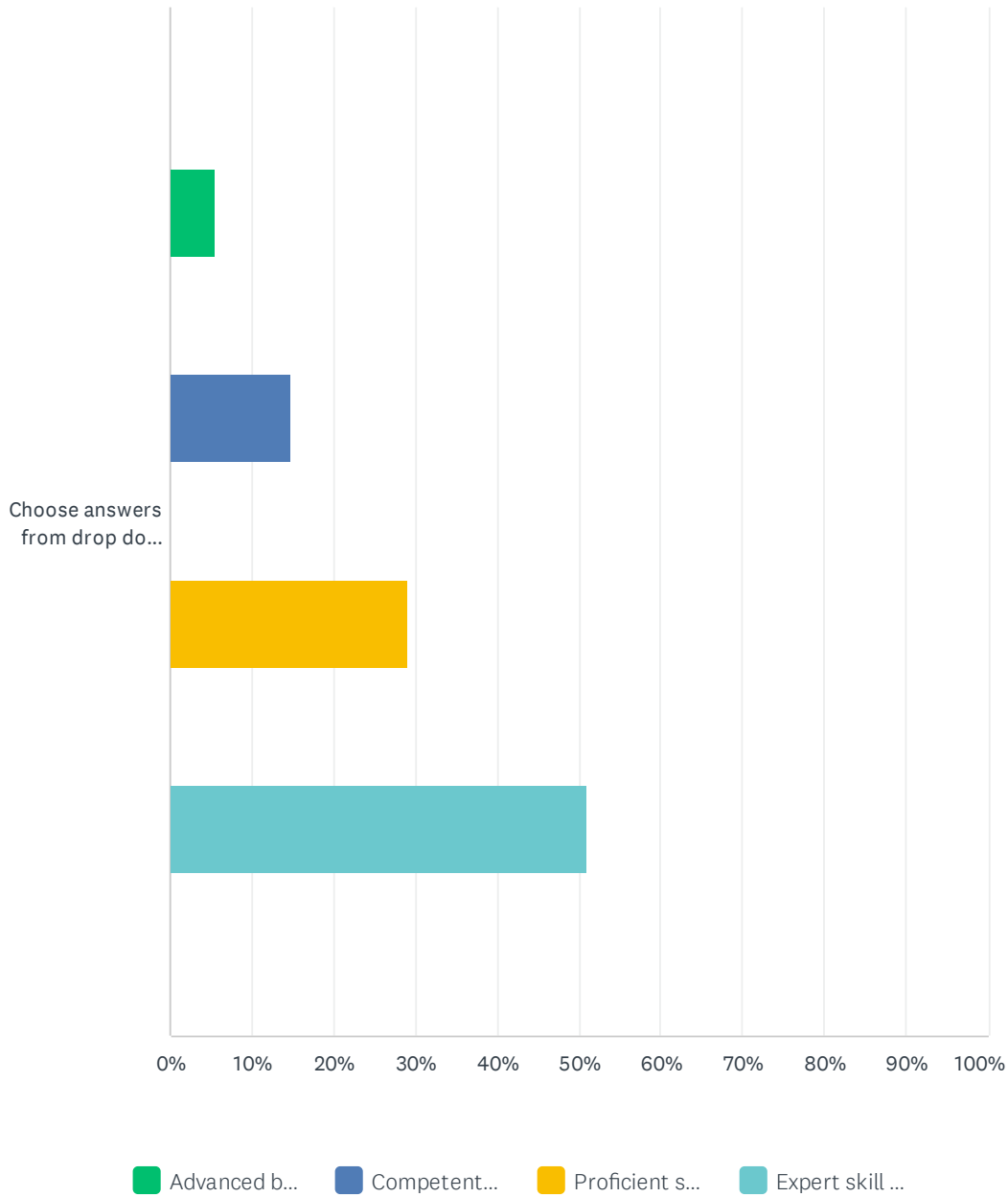
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.88% 2	2.64% 6	9.69% 22	86.78% 197	227

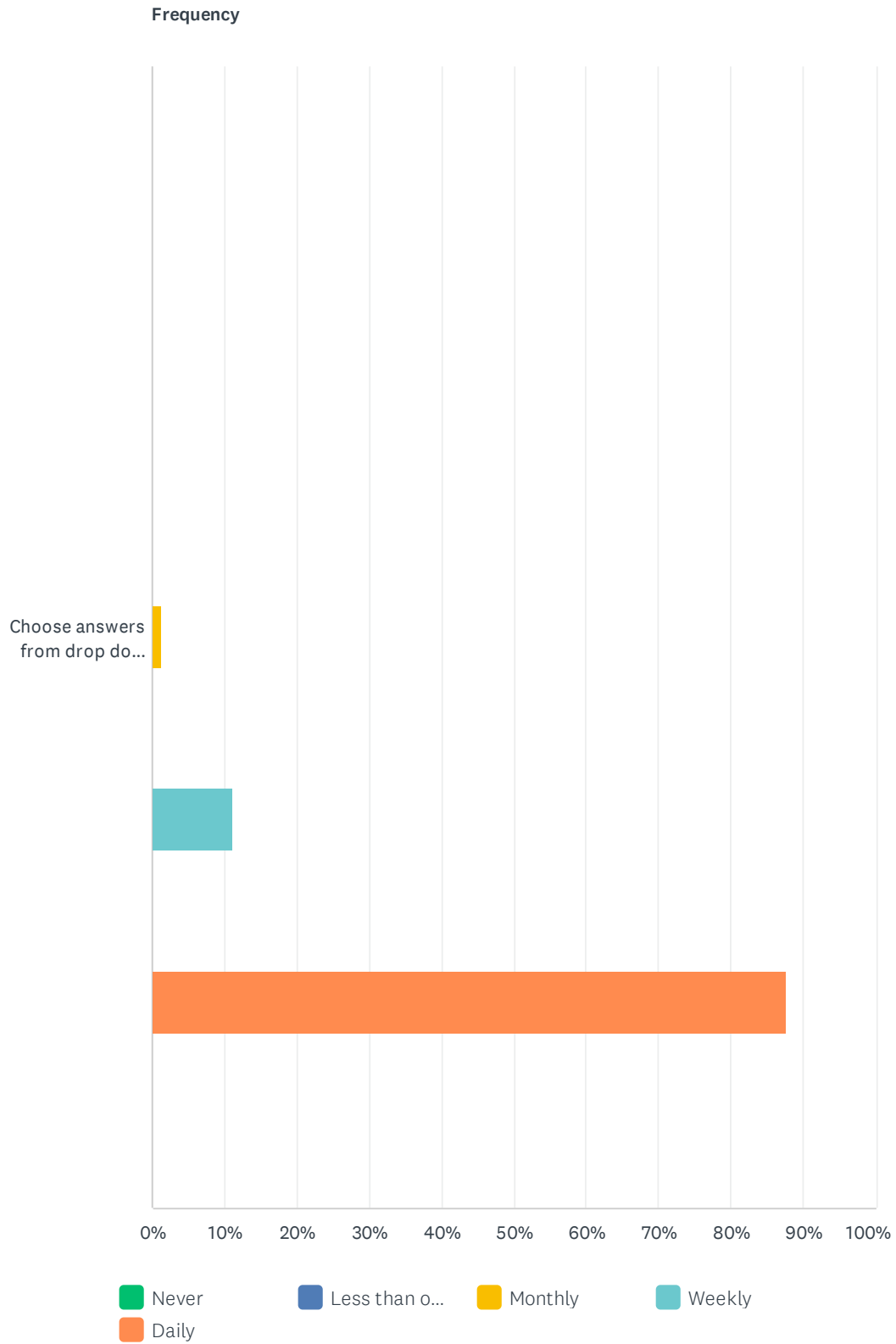
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.45% 1	10.86% 24	88.69% 196	221

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.50% 12	14.68% 32	28.90% 63	50.92% 111	218

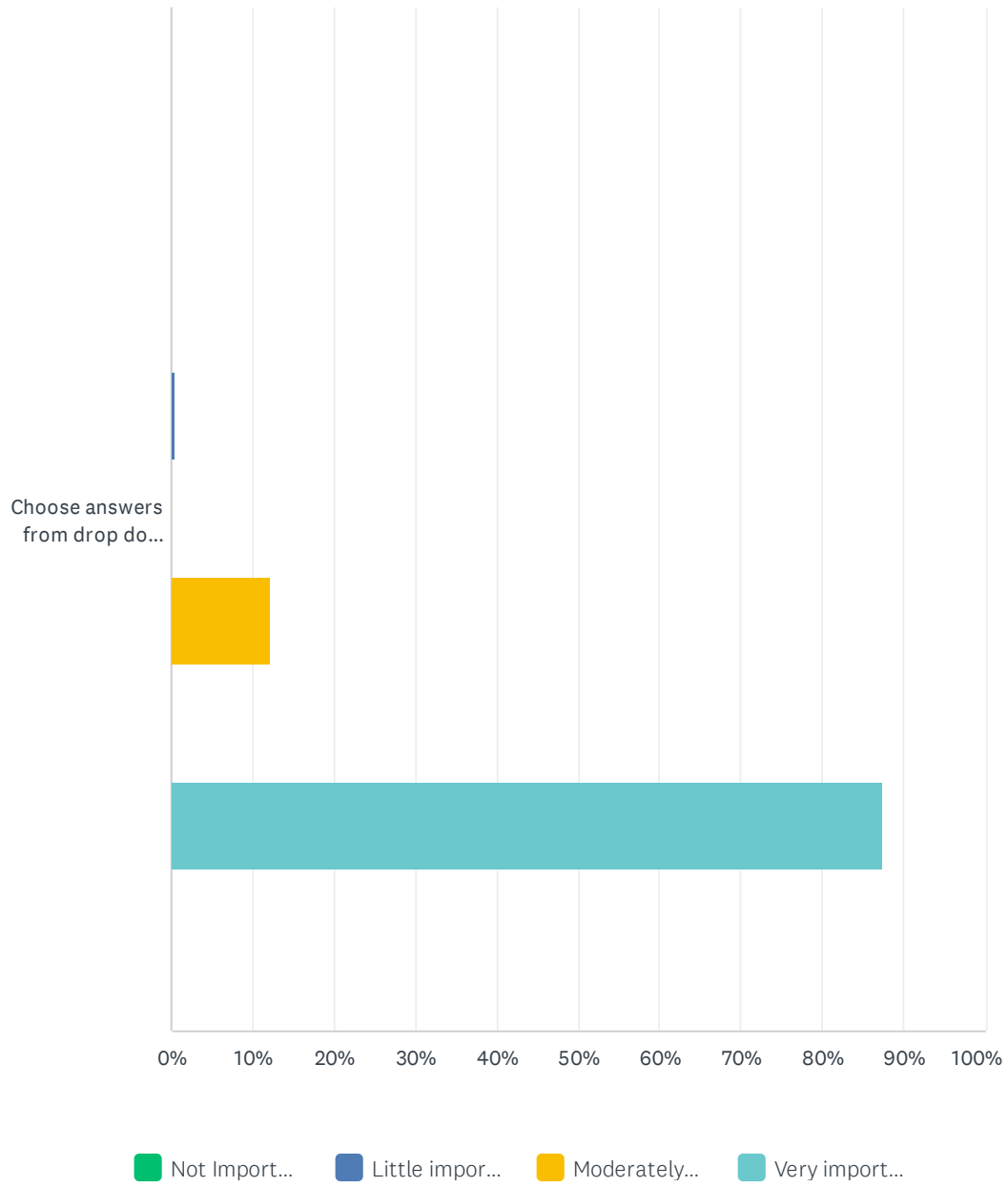
Q156 3.6.3 Assessing change.

Answered: 228 Skipped: 982



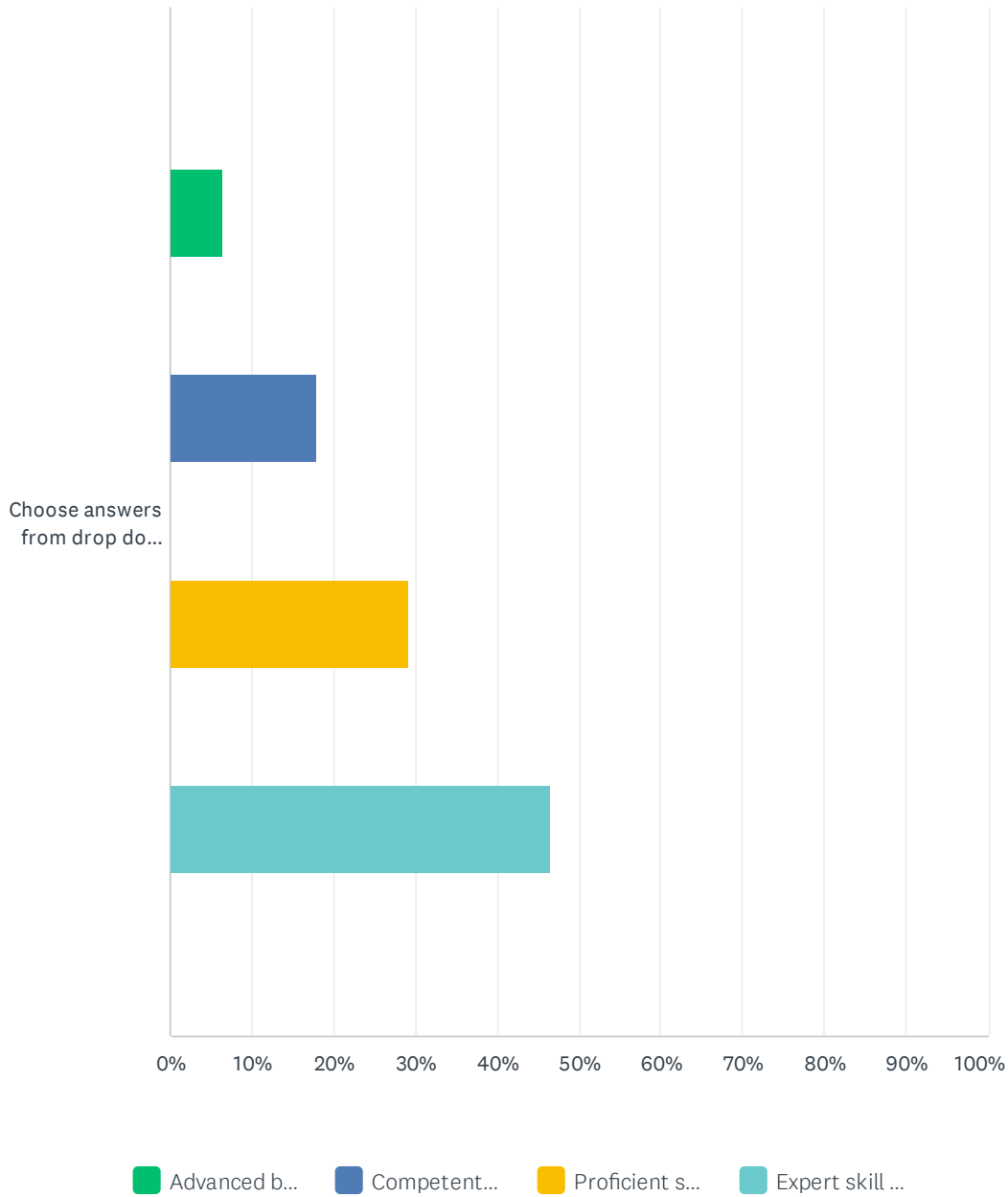
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	1.32% 3	11.01% 25	87.67% 199	227

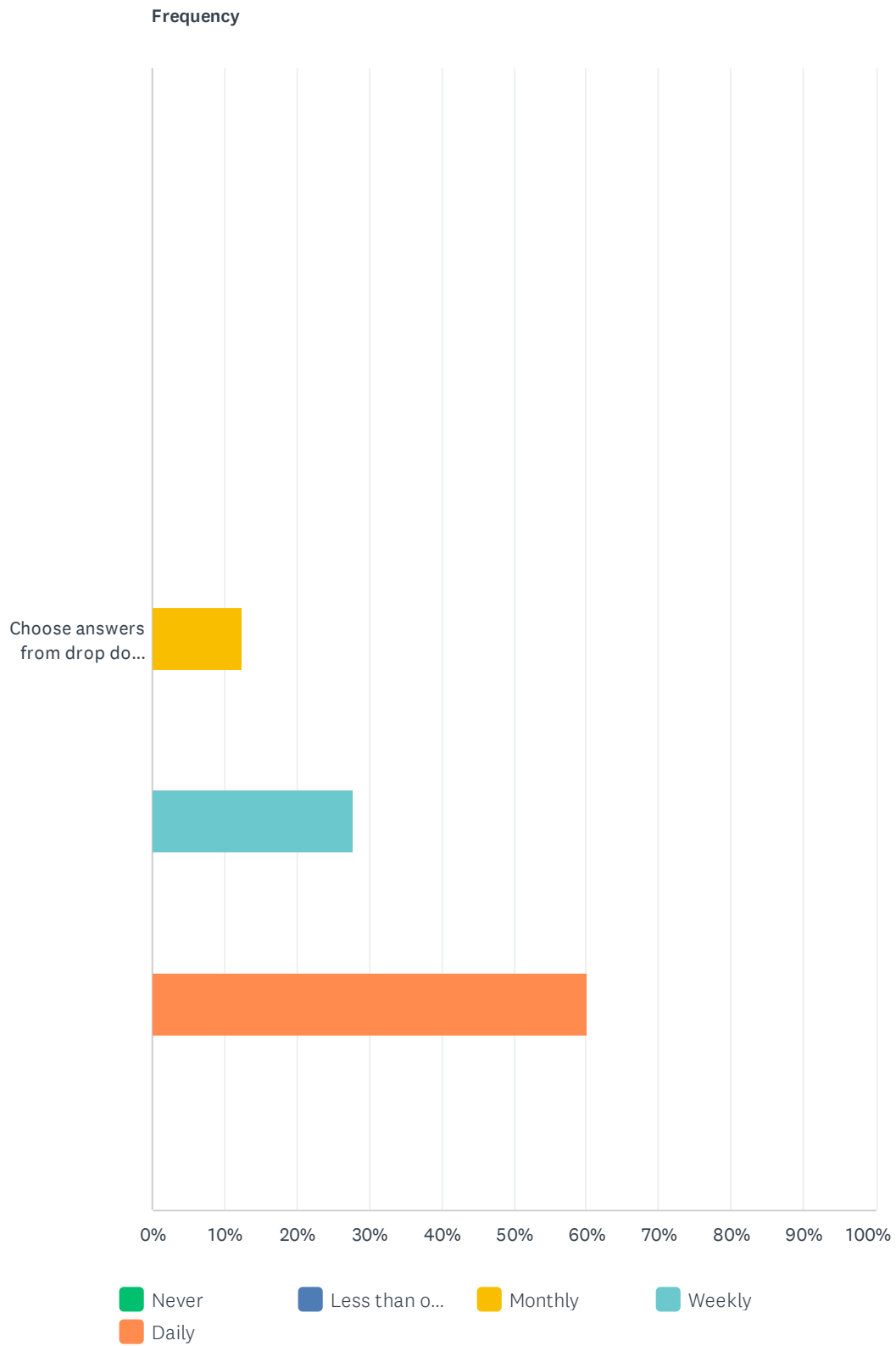
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.45% 1	12.16% 27	87.39% 194	222

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.39% 14	17.81% 39	29.22% 64	46.58% 102	219

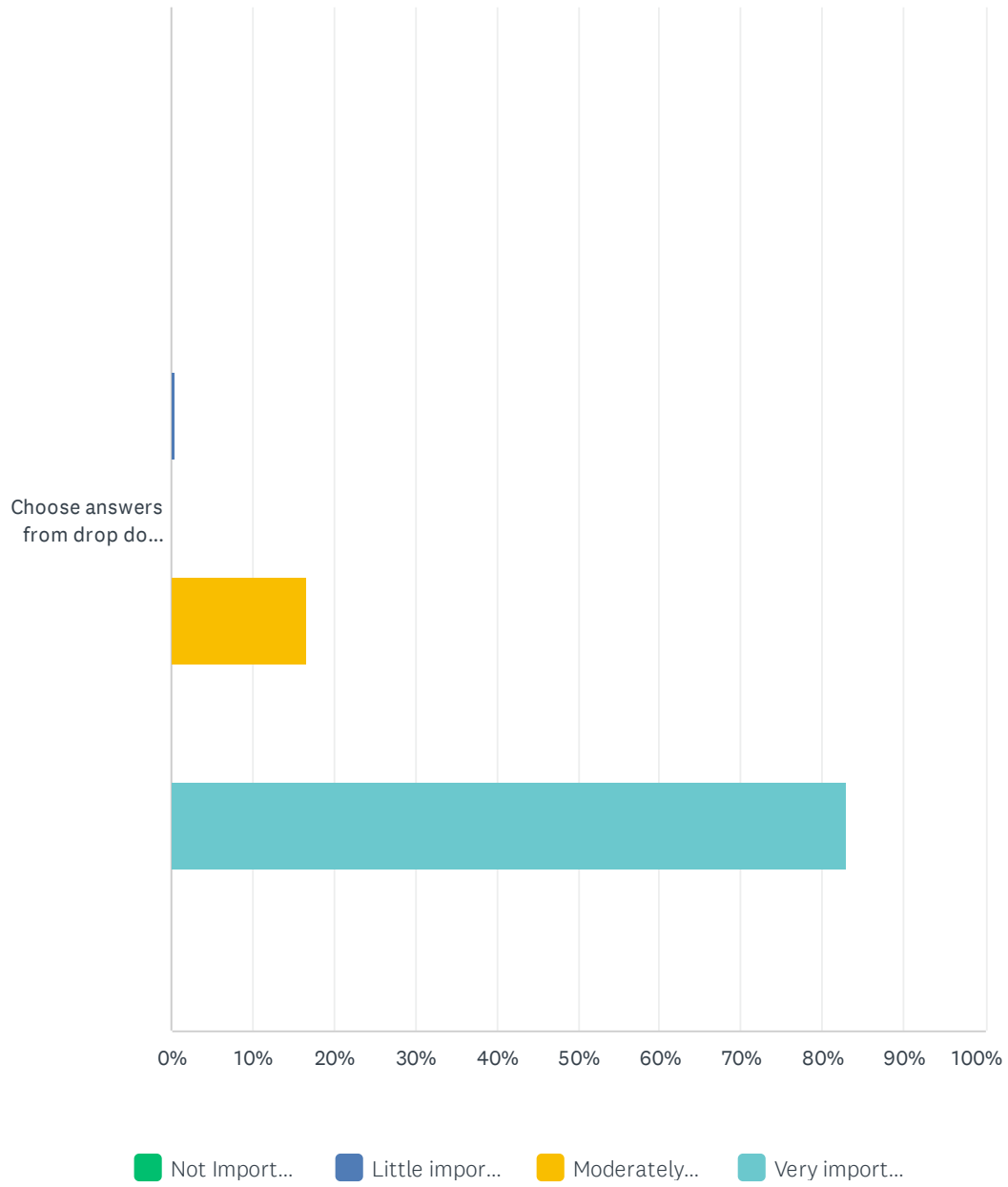
Q157 3.6.4 Re-examining/implementing a modified plan of care.

Answered: 228 Skipped: 982



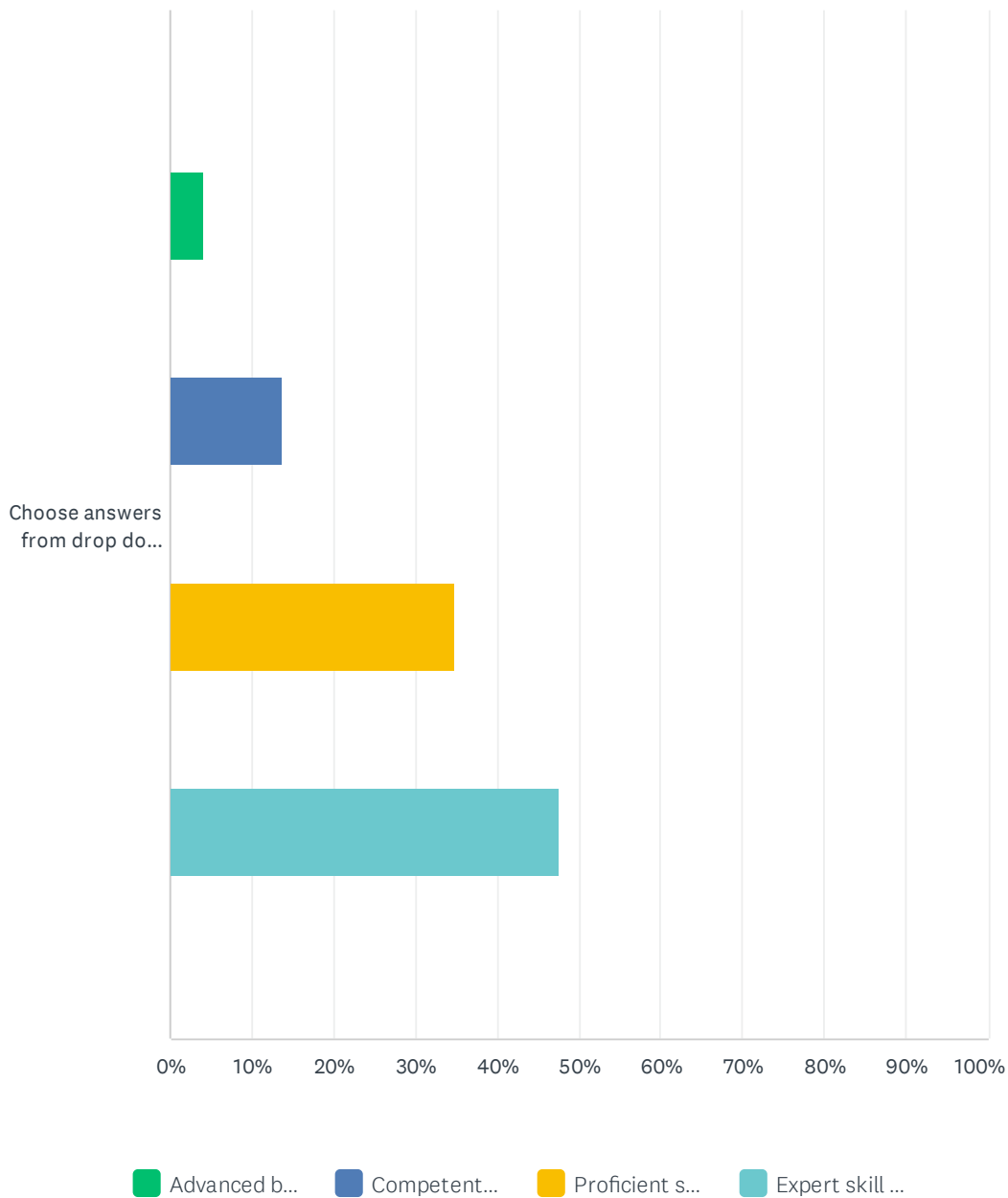
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	12.28% 28	27.63% 63	60.09% 137	228

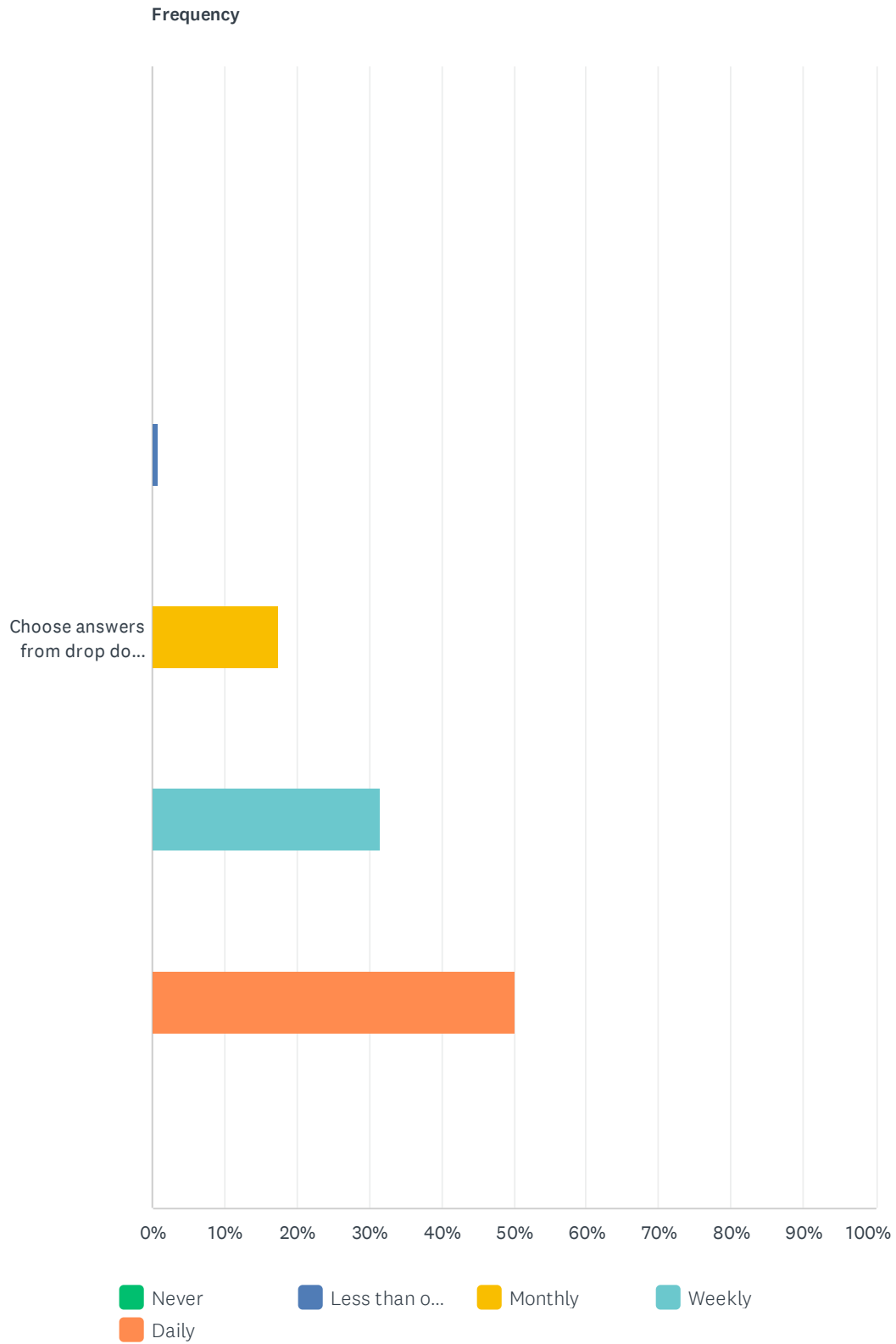
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.45% 1	16.67% 37	82.88% 184	222

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.11% 9	13.70% 30	34.70% 76	47.49% 104	219

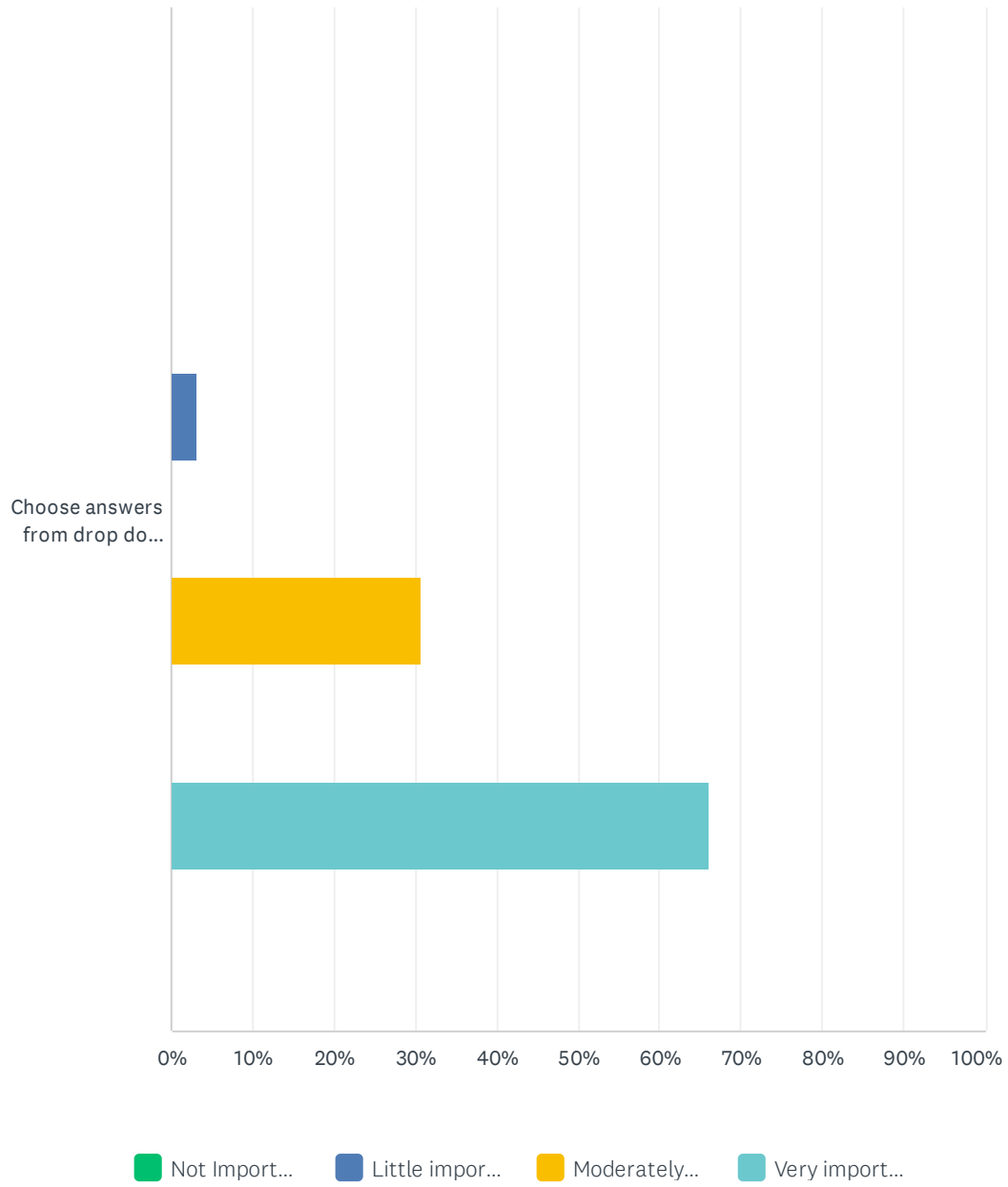
Q158 3.6.5 Confirming/modifying goals.

Answered: 228 Skipped: 982



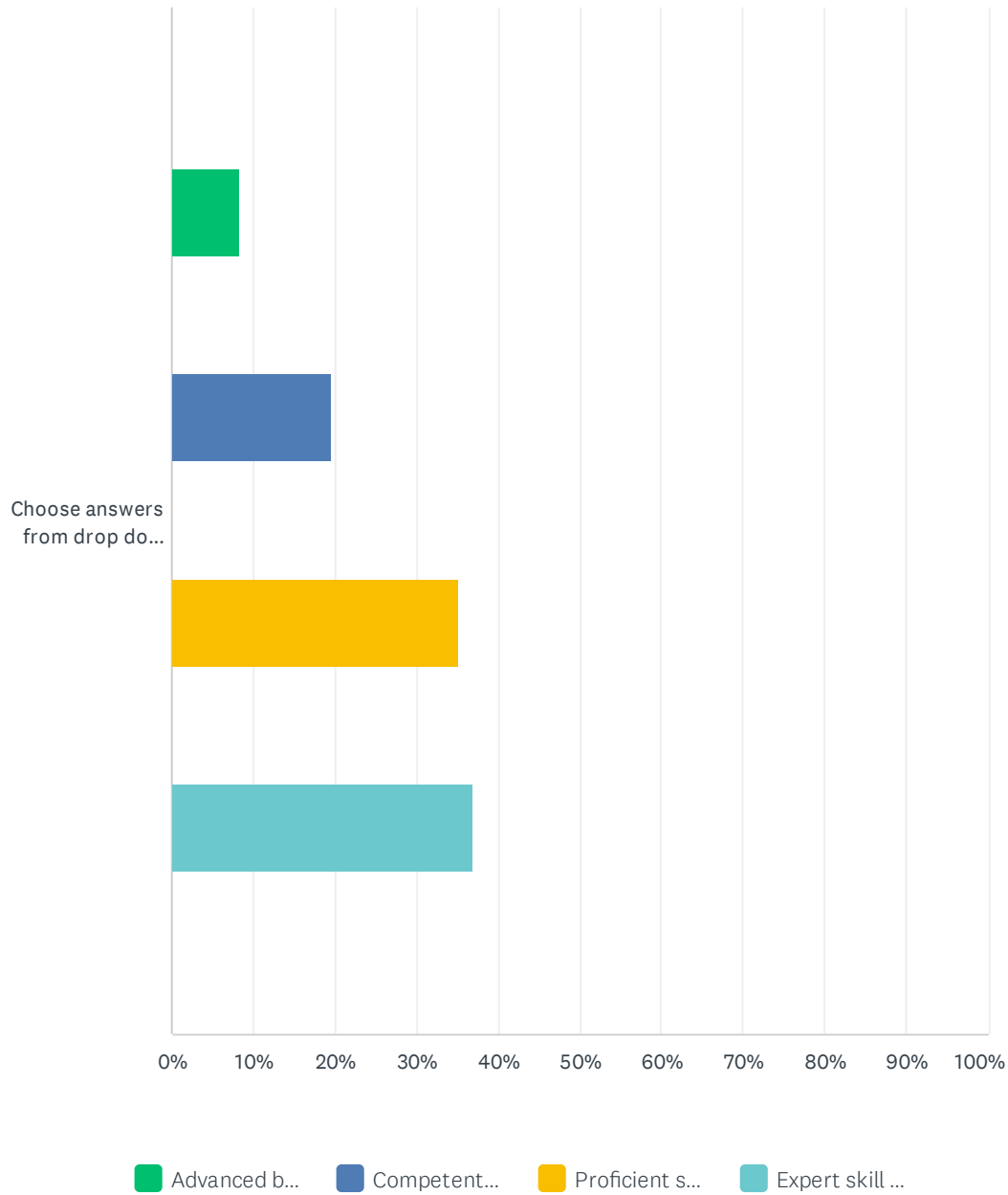
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.88% 2	17.54% 40	31.58% 72	50.00% 114	228

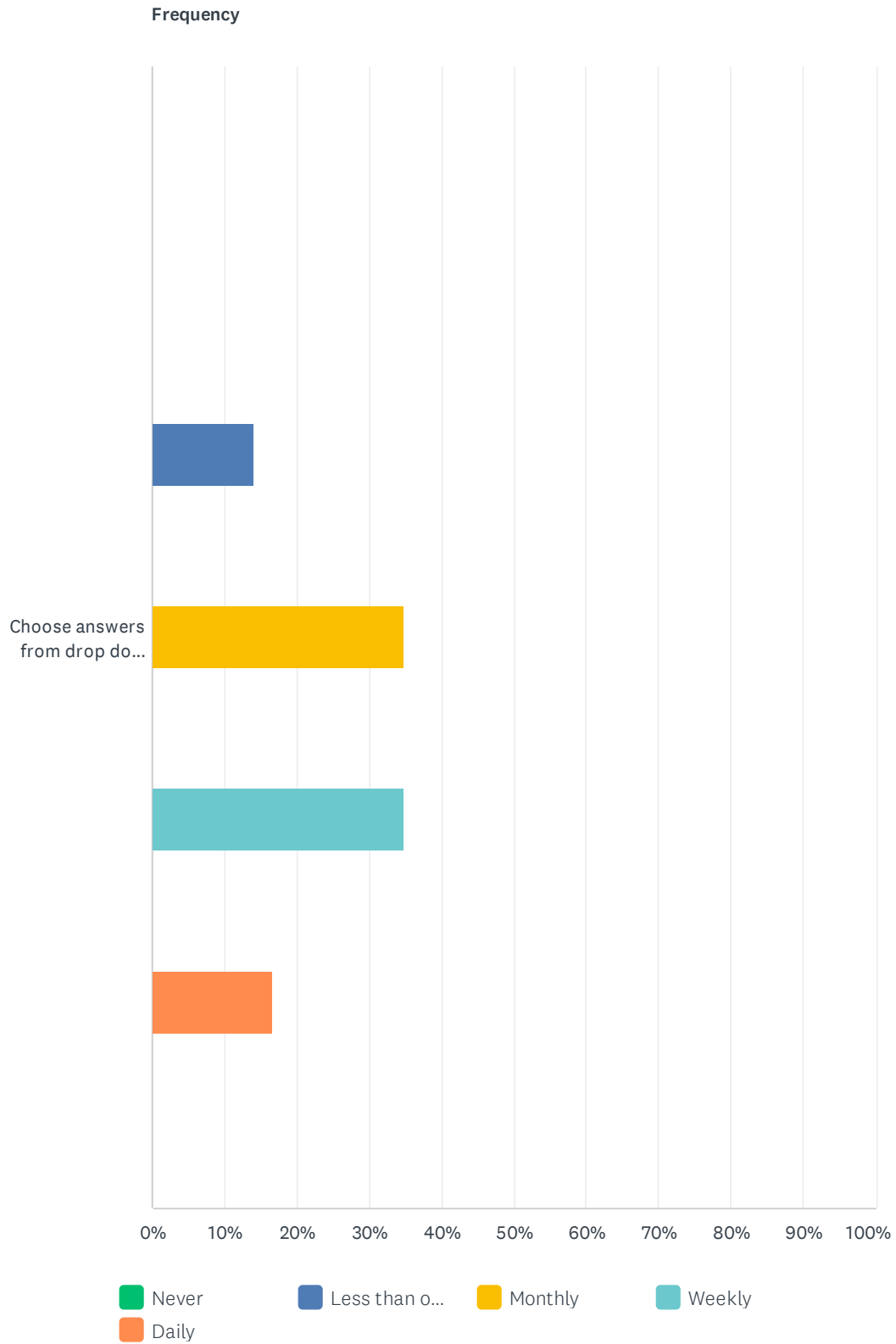
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.17% 7	30.77% 68	66.06% 146	221

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	8.22% 18	19.63% 43	35.16% 77	36.99% 81	219

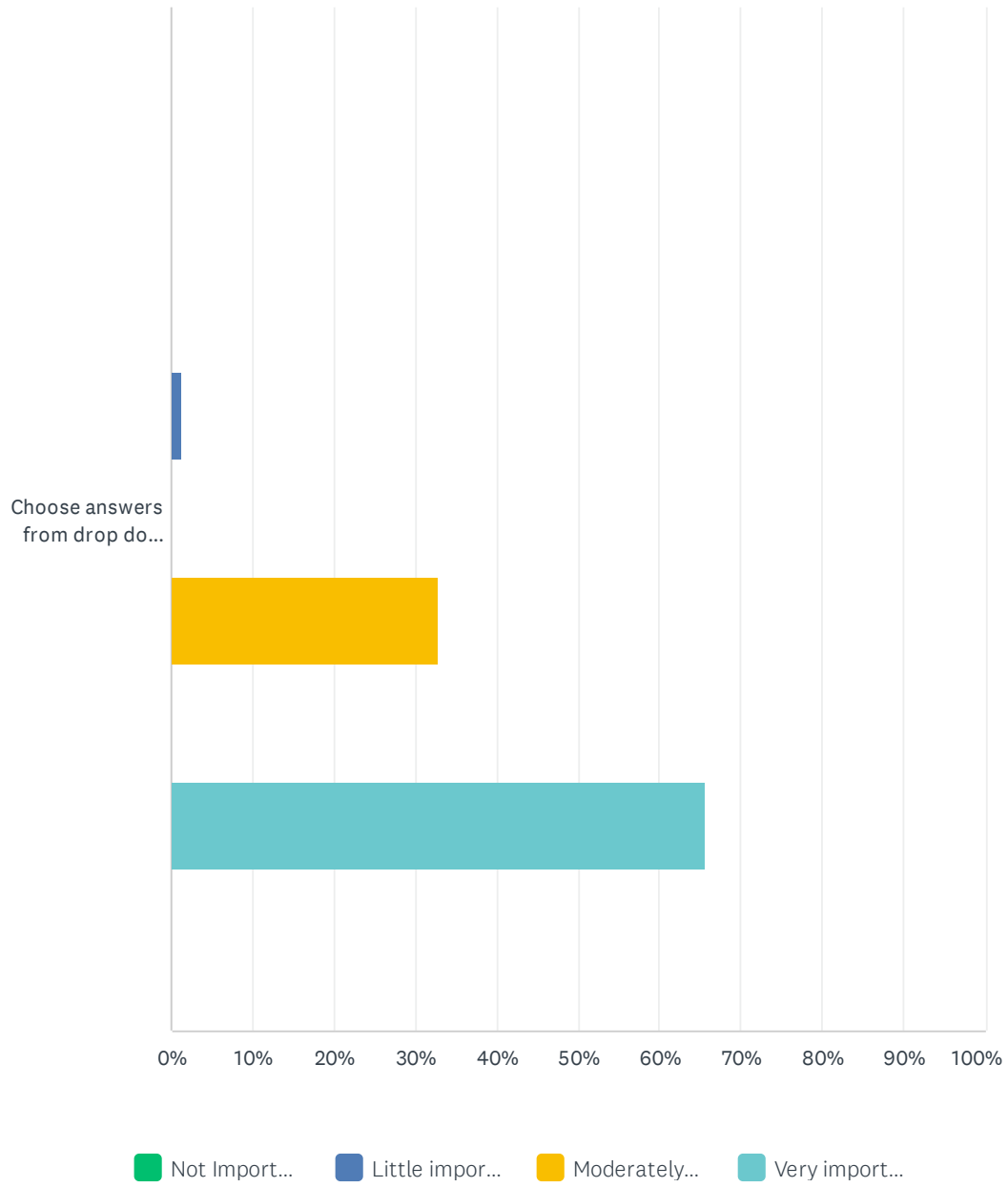
Q159 3.6.6 Making referrals to other providers as needed.

Answered: 228 Skipped: 982



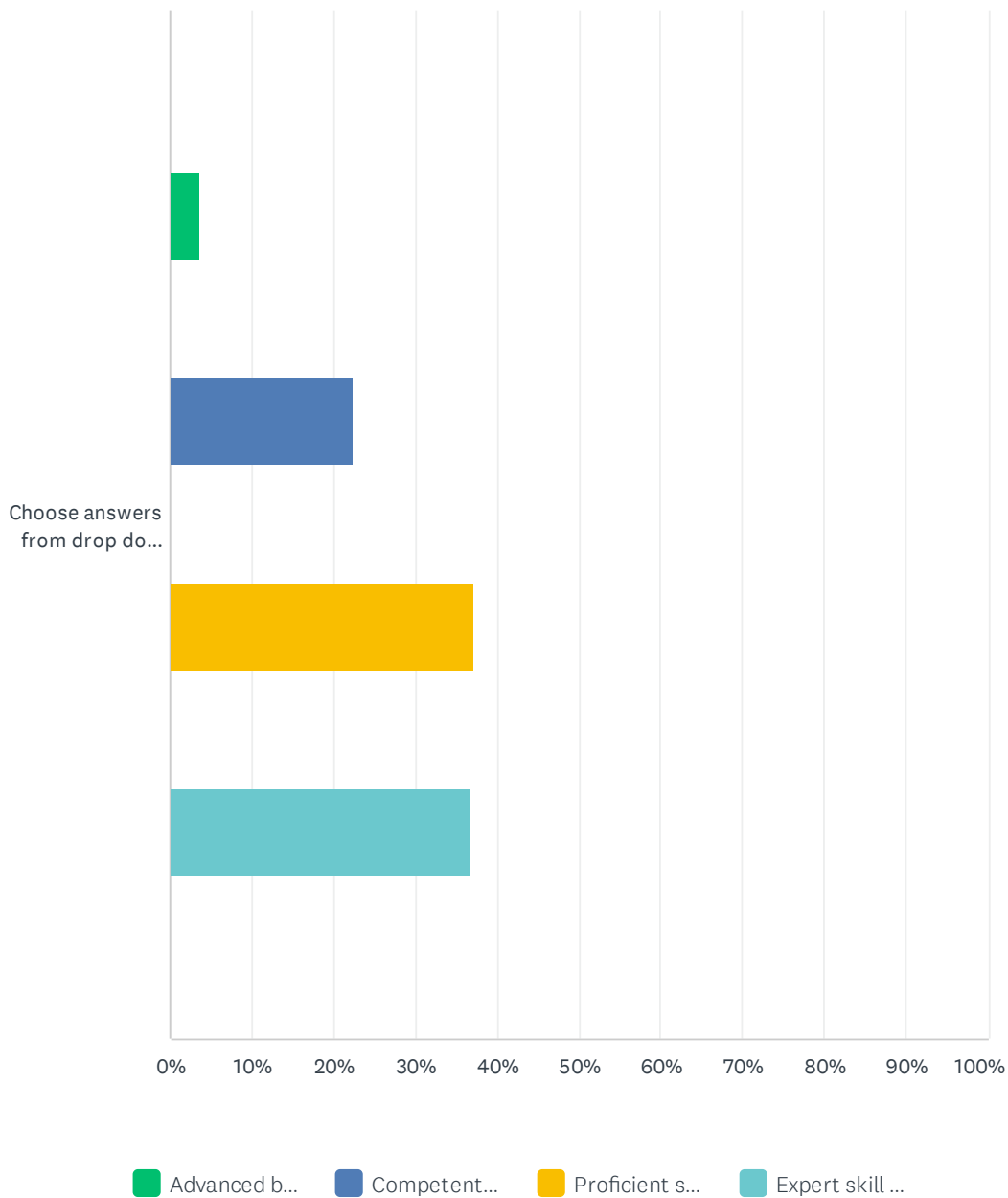
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	14.04% 32	34.65% 79	34.65% 79	16.67% 38	228

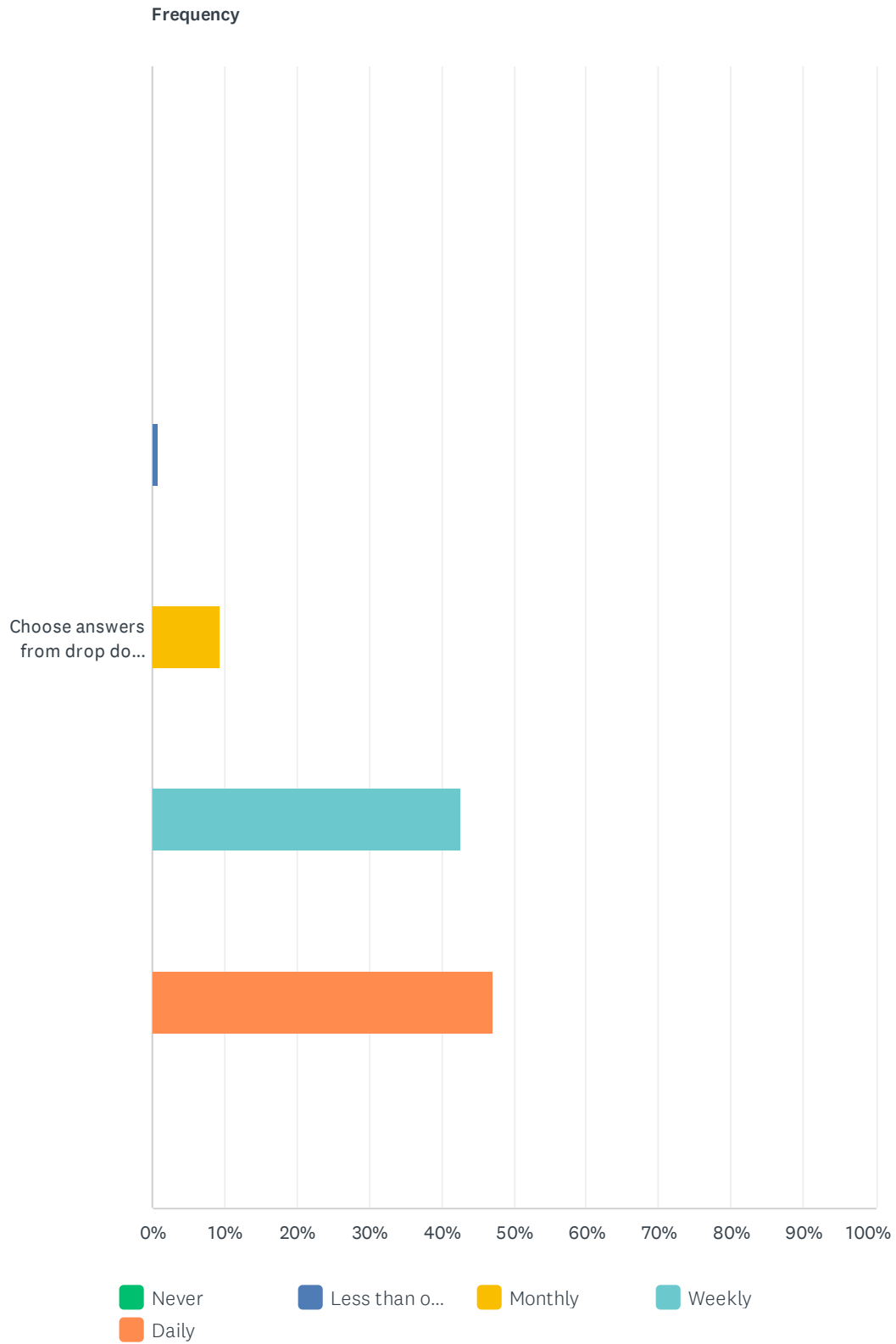
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.35% 3	32.88% 73	65.77% 146	222

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.67% 8	22.48% 49	37.16% 81	36.70% 80	218

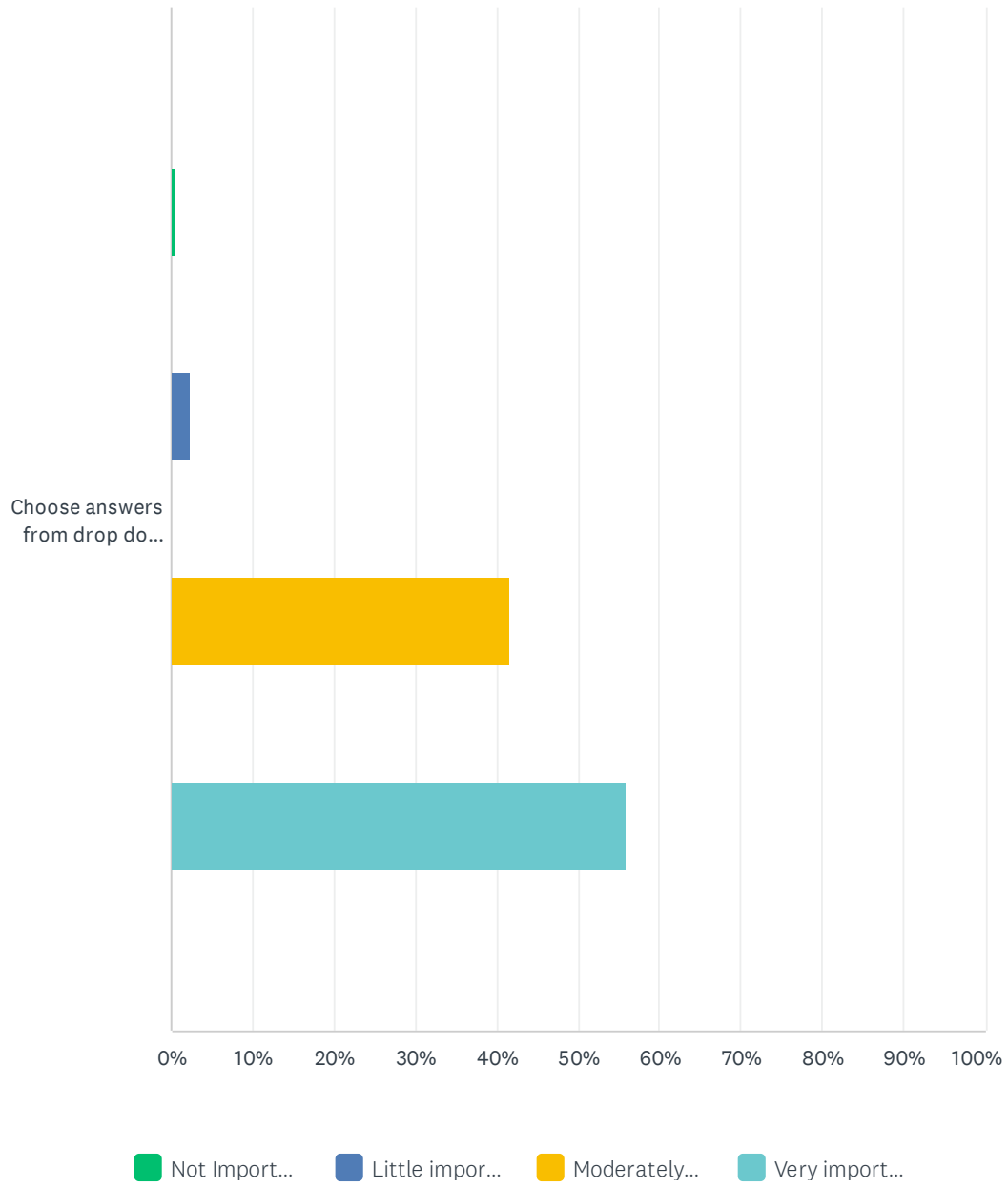
Q160 3.7.1 Assessing remediation of activity and participation limitations.

Answered: 223 Skipped: 987



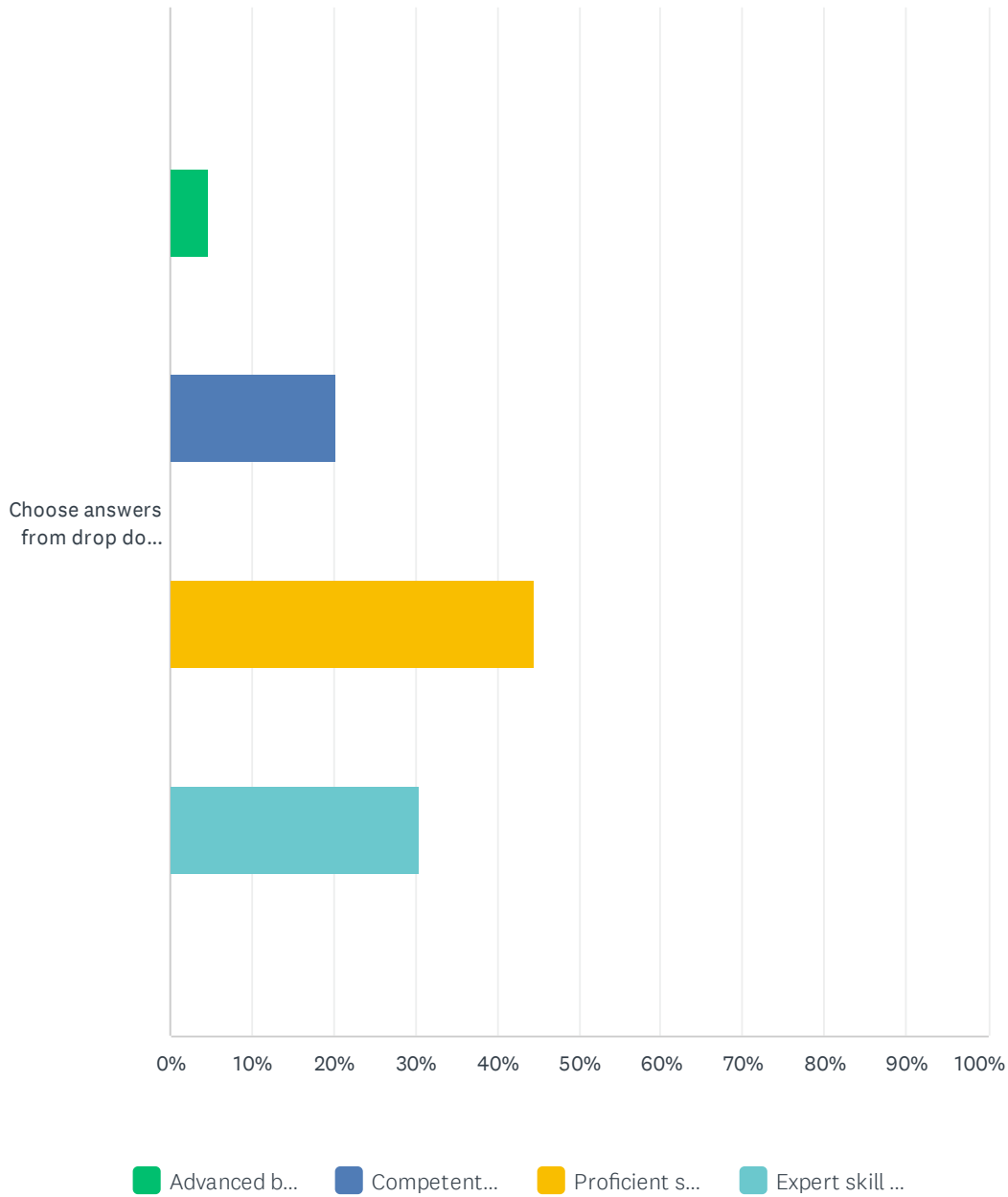
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.90% 2	9.42% 21	42.60% 95	47.09% 105	223

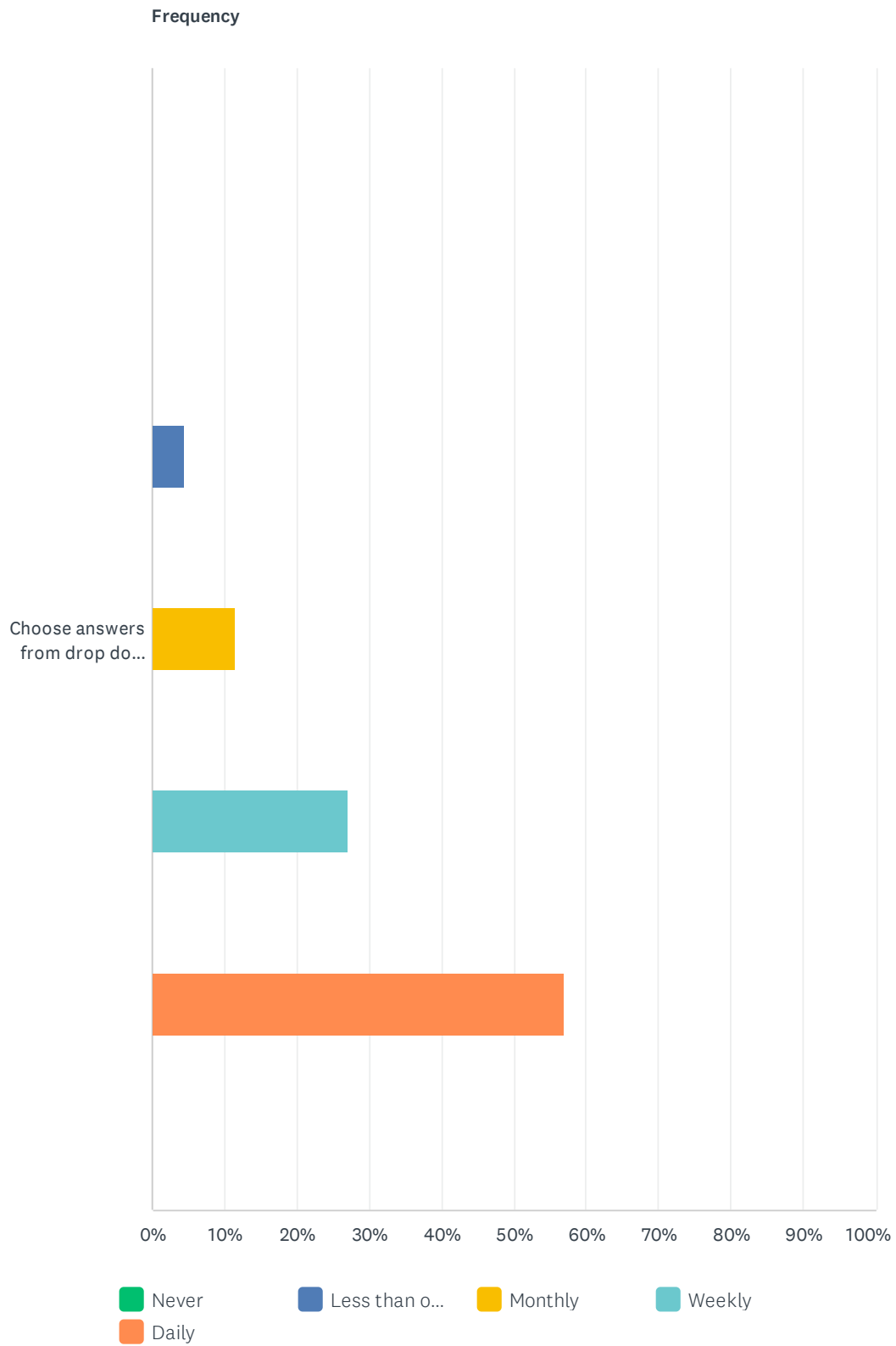
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	2.30% 5	41.47% 90	55.76% 121	217

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.69% 10	20.19% 43	44.60% 95	30.52% 65	213

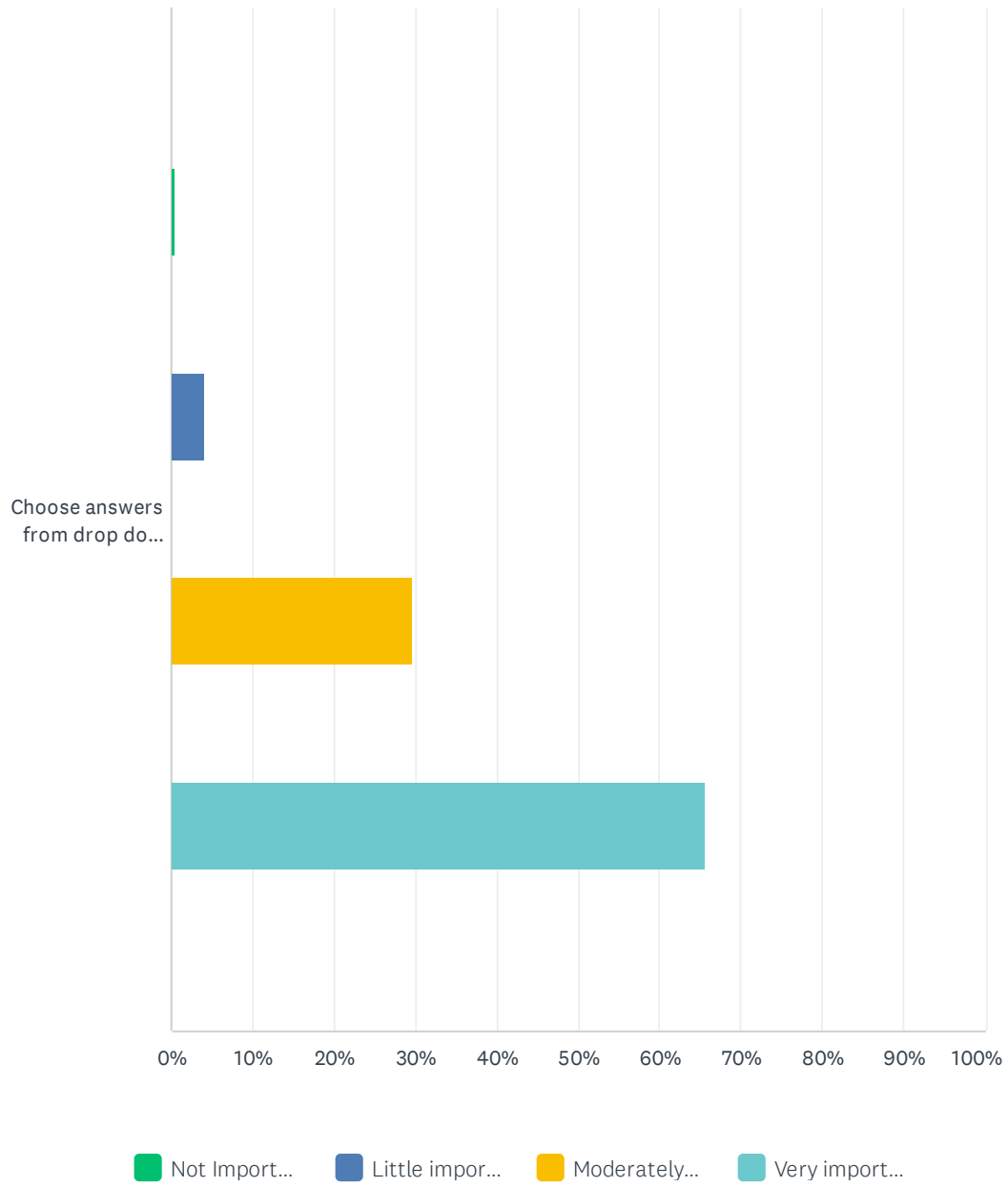
Q161 3.7.2 Assessing patient satisfaction.

Answered: 225 Skipped: 985



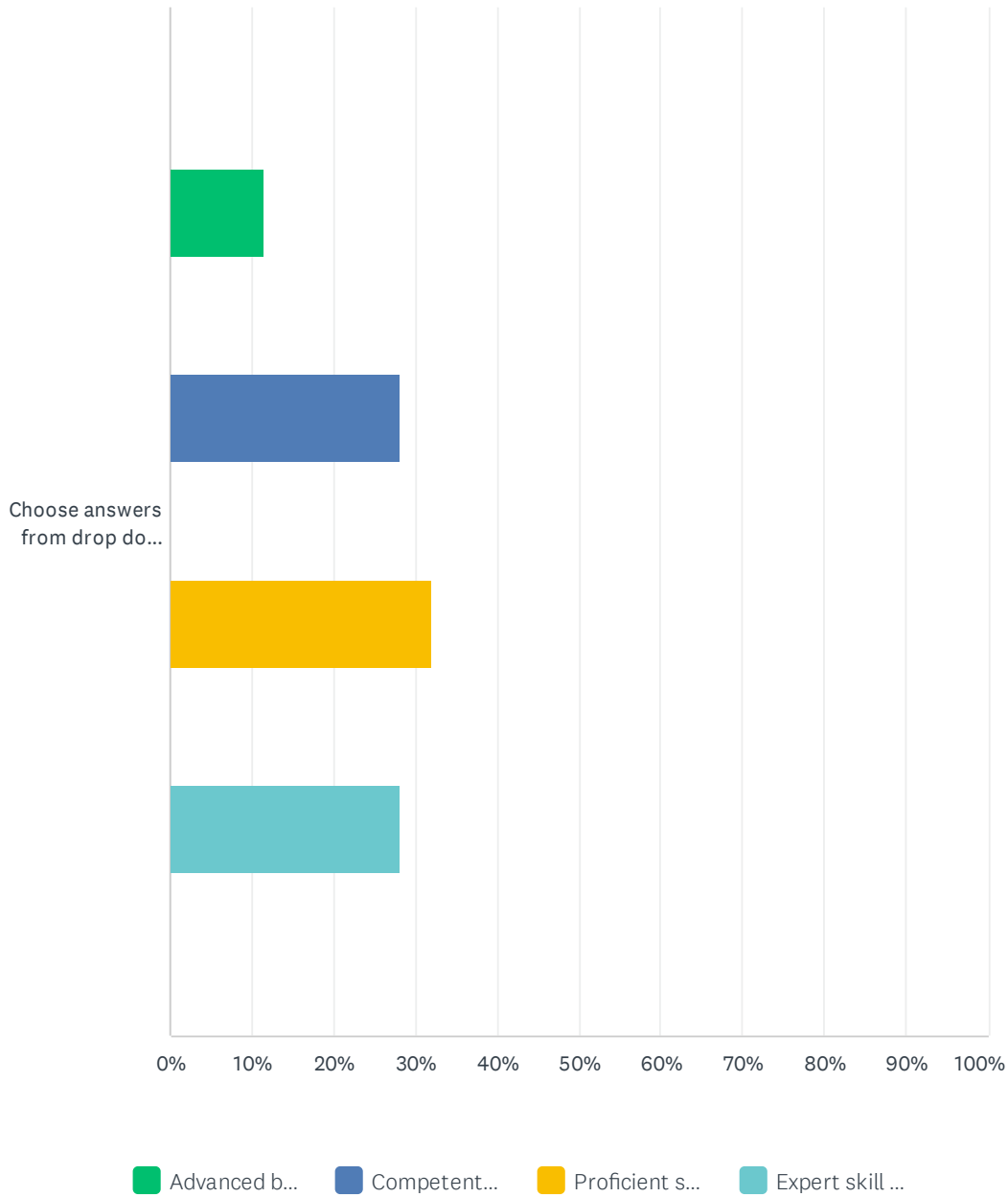
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	4.44% 10	11.56% 26	27.11% 61	56.89% 128	225

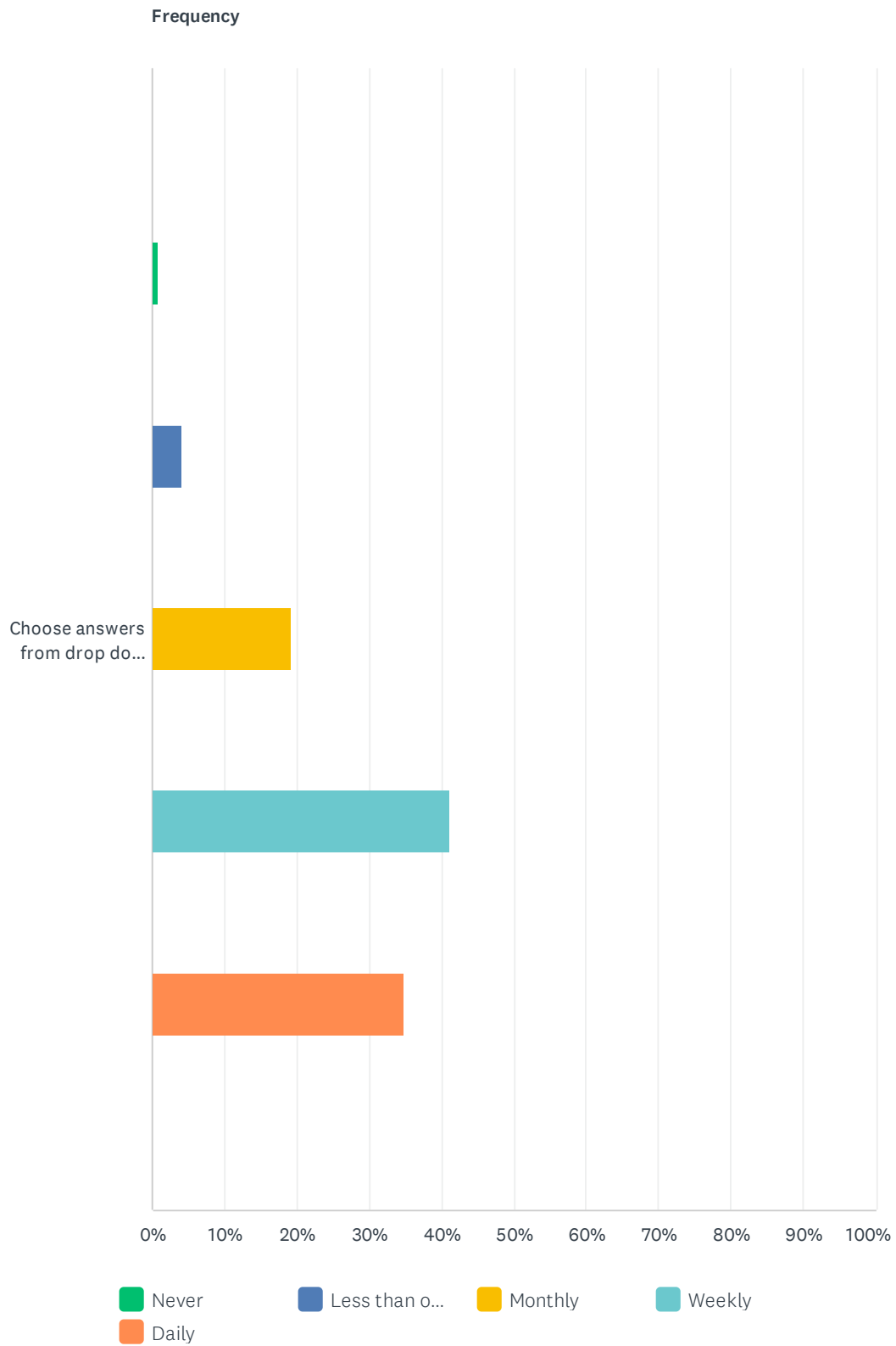
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	4.11% 9	29.68% 65	65.75% 144	219

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	11.57% 25	28.24% 61	31.94% 69	28.24% 61	216

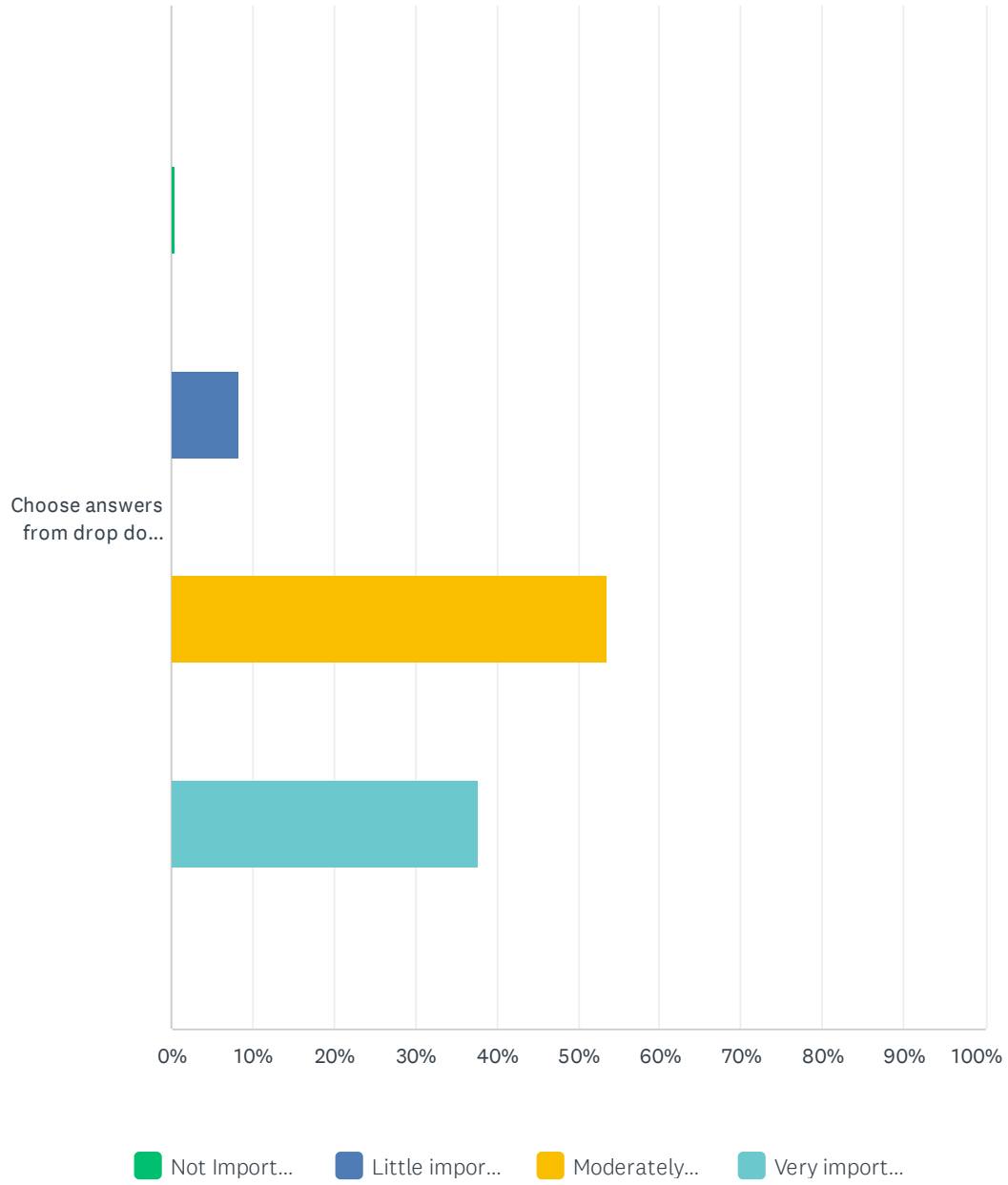
Q162 3.7.3 Assessing promotion of primary and secondary prevention.

Answered: 224 Skipped: 986



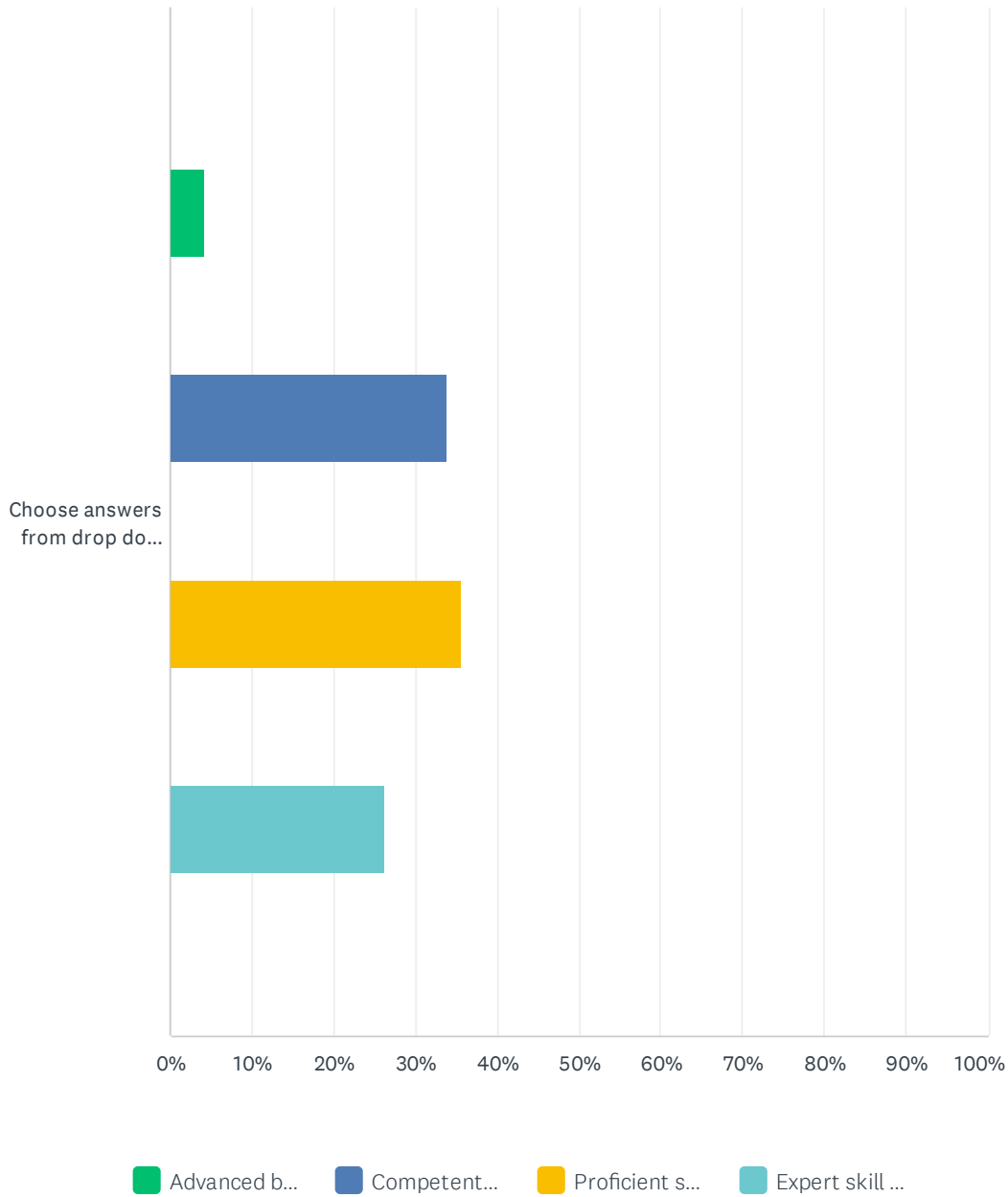
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.89% 2	4.02% 9	19.20% 43	41.07% 92	34.82% 78	224

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	8.29% 18	53.46% 116	37.79% 82	217

Spine Validation Practice Analysis Survey 2022

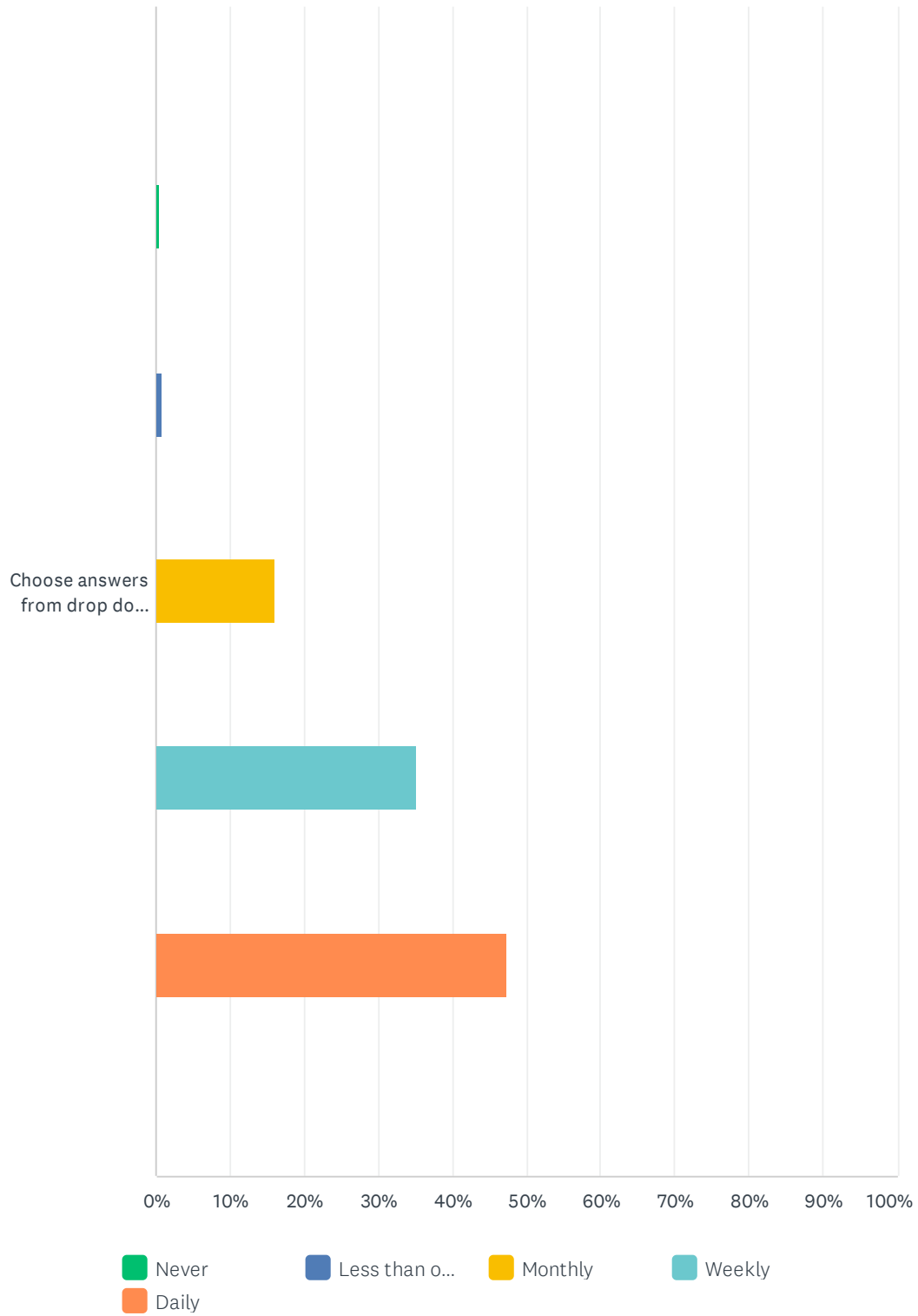
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.23% 9	33.80% 72	35.68% 76	26.29% 56	213

Q163 3.7.4 Assessing improvement of patient's/client's activities and participation based on best available evidence and patient/client-specific variables (i.e., benchmarking).

Answered: 224 Skipped: 986

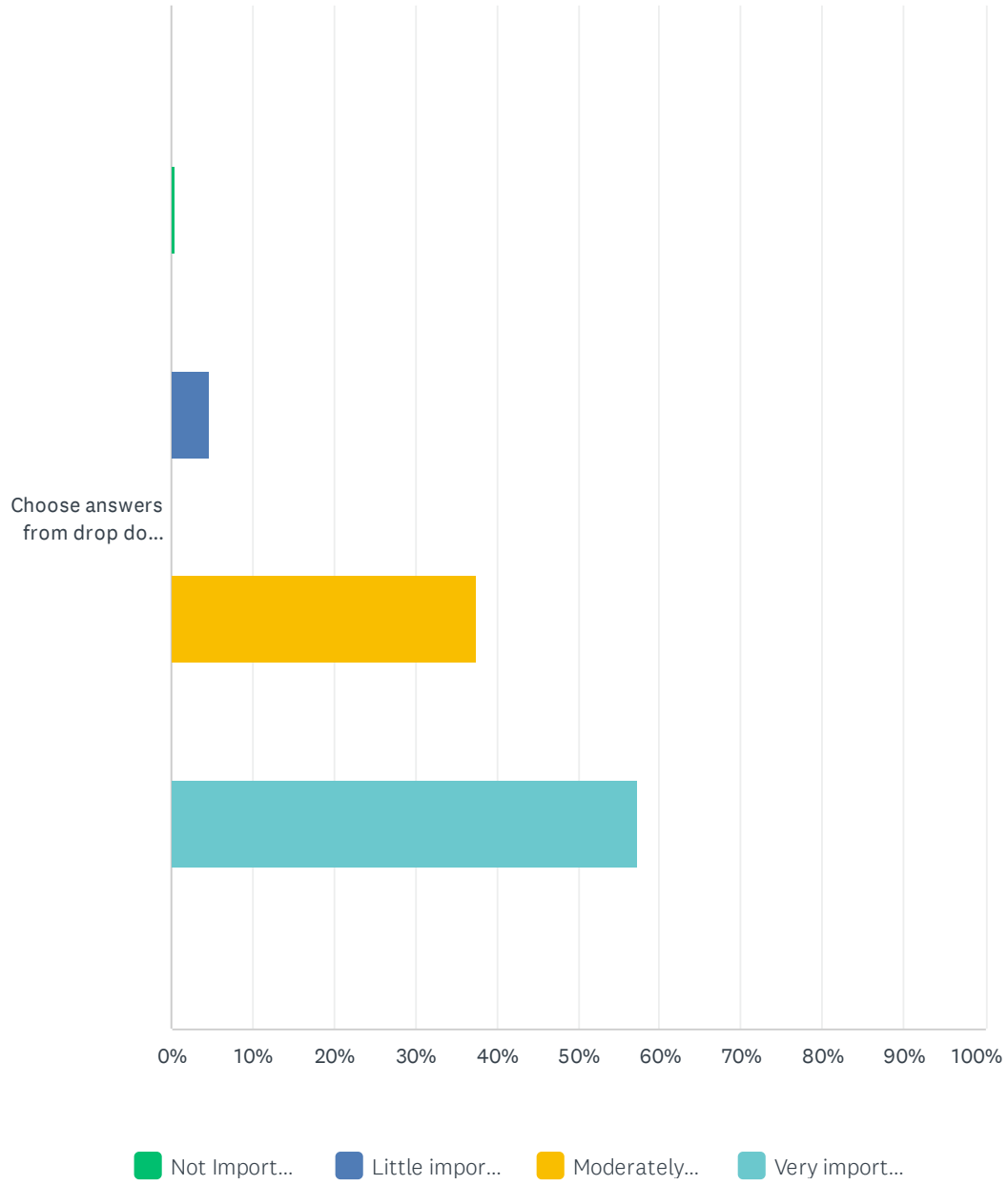
Spine Validation Practice Analysis Survey 2022

Frequency



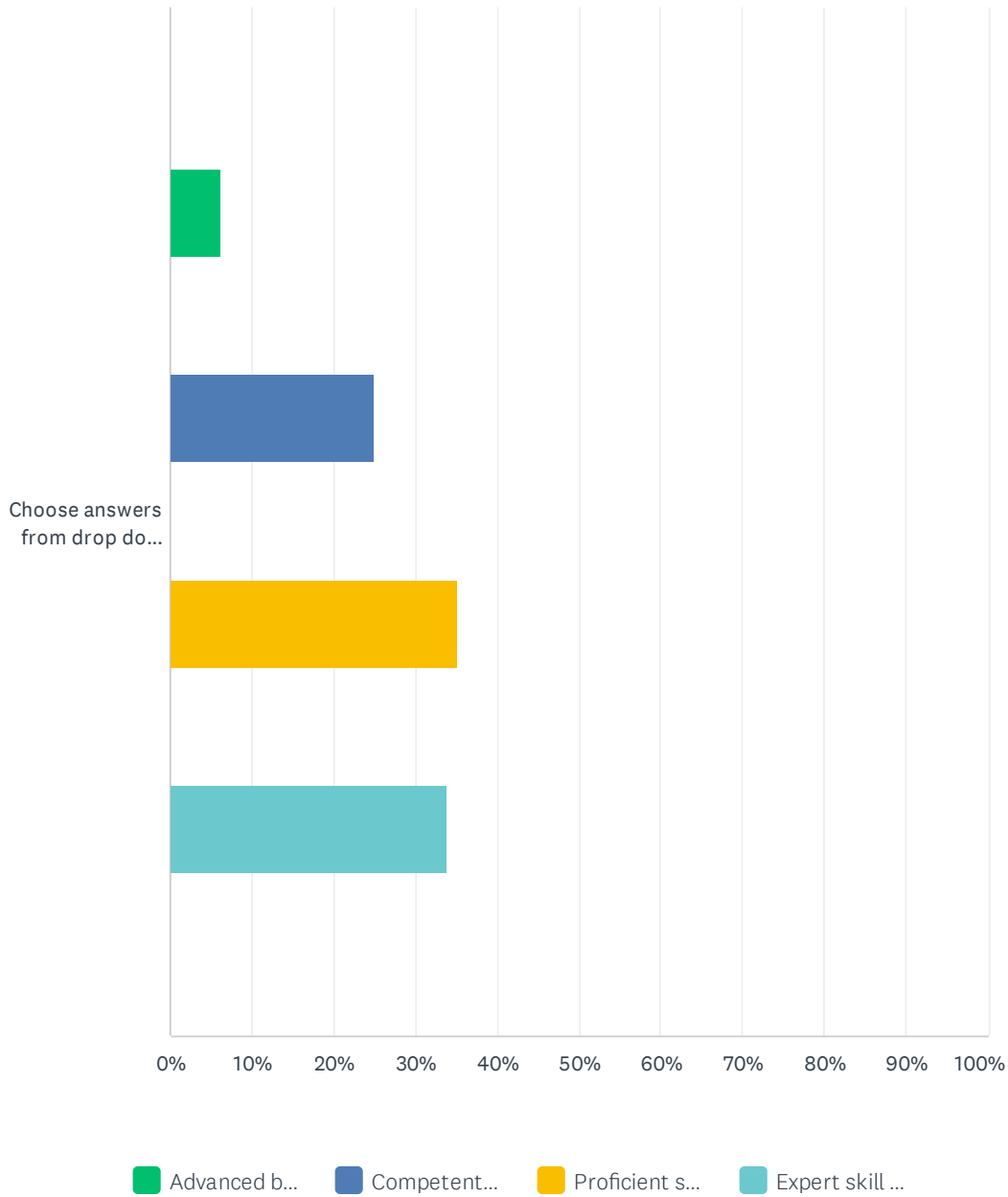
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.45% 1	0.89% 2	16.07% 36	35.27% 79	47.32% 106	224

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	4.59% 10	37.61% 82	57.34% 125	218

Spine Validation Practice Analysis Survey 2022

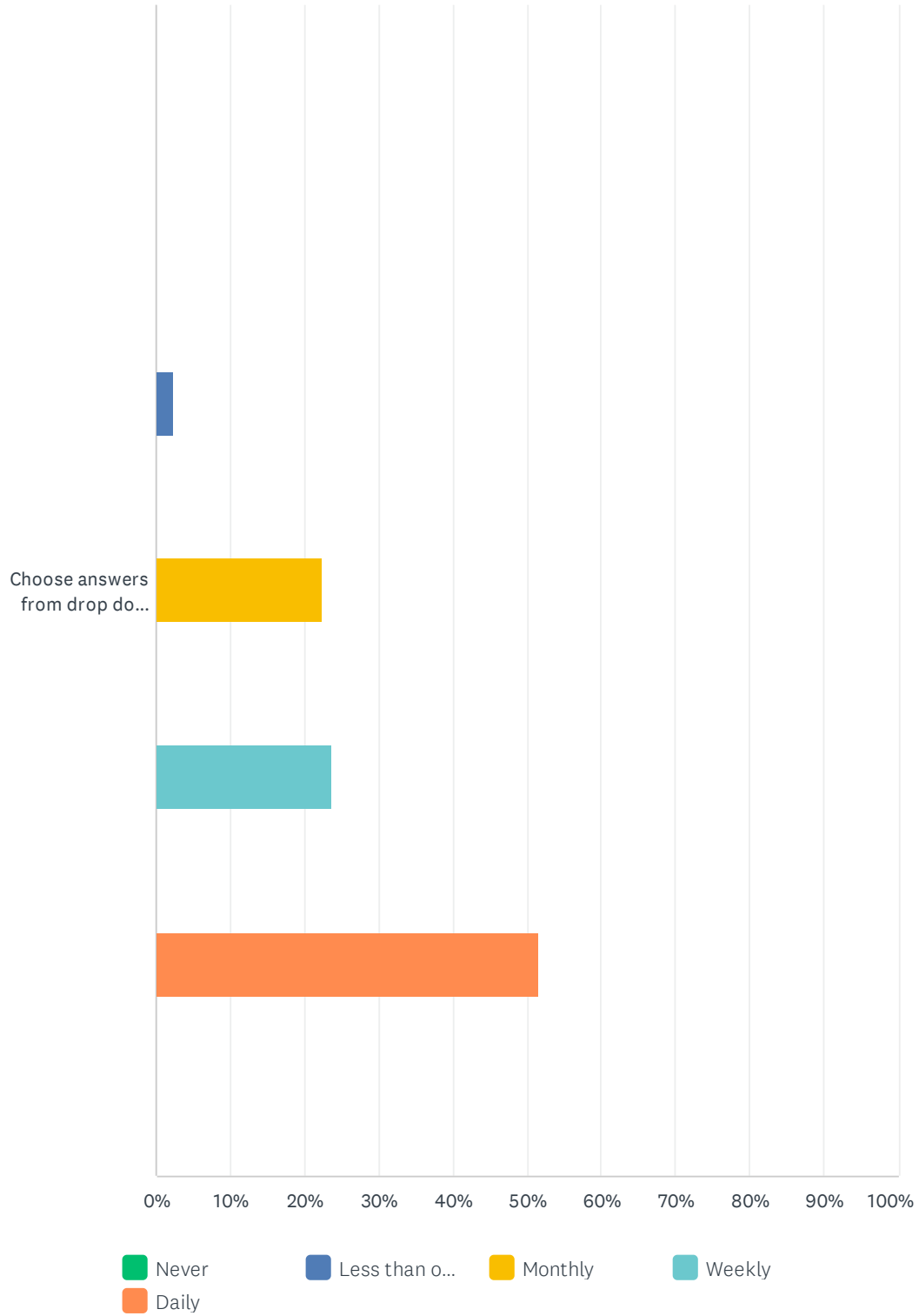
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.10% 13	24.88% 53	35.21% 75	33.80% 72	213

Q164 3.7.5 Using applicable, evidence-based outcomes measurement tools/questionnaires/scales (e.g., Oswestry, Fear Avoidance Behavior Questionnaire).

Answered: 223 Skipped: 987

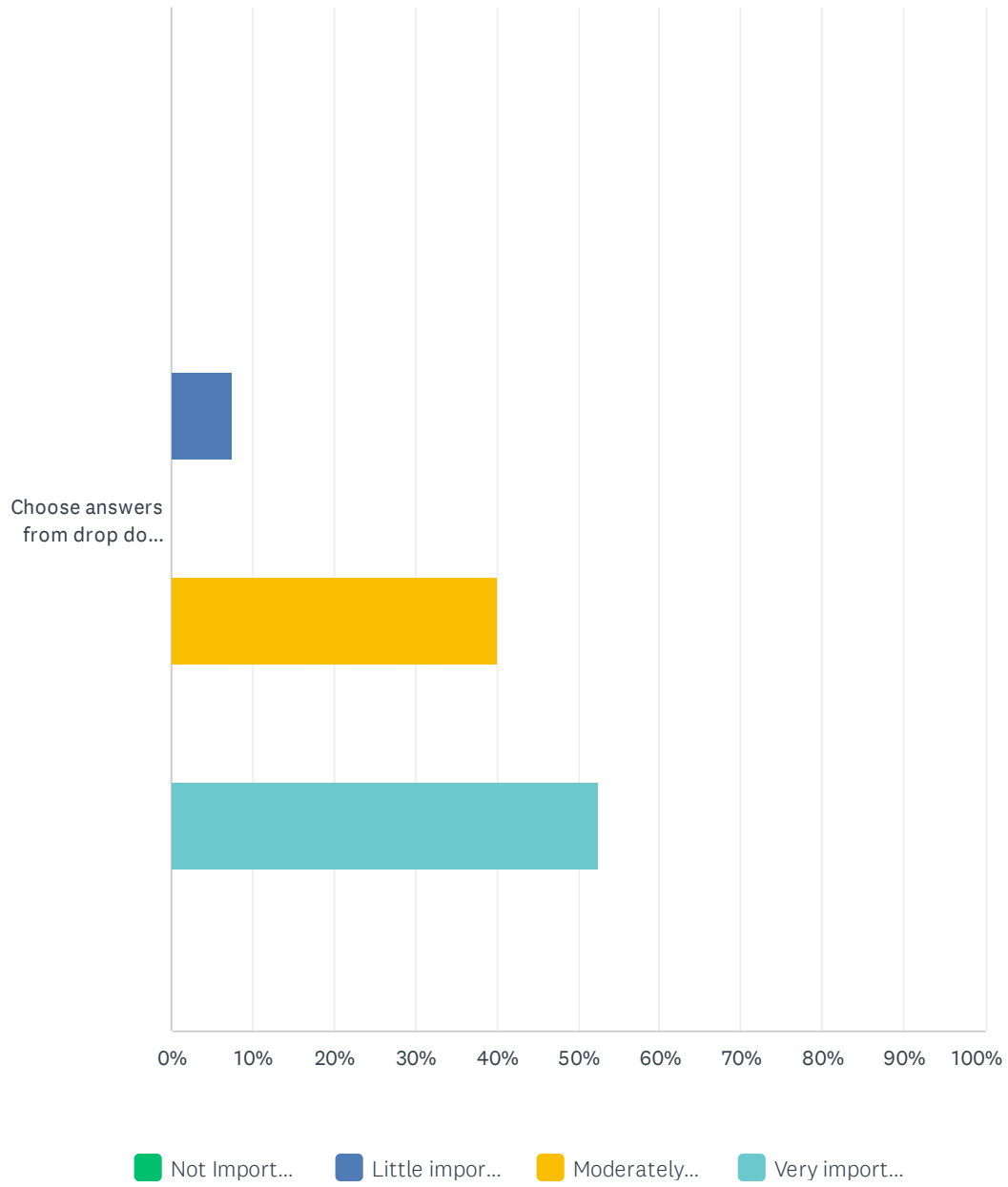
Spine Validation Practice Analysis Survey 2022

Frequency



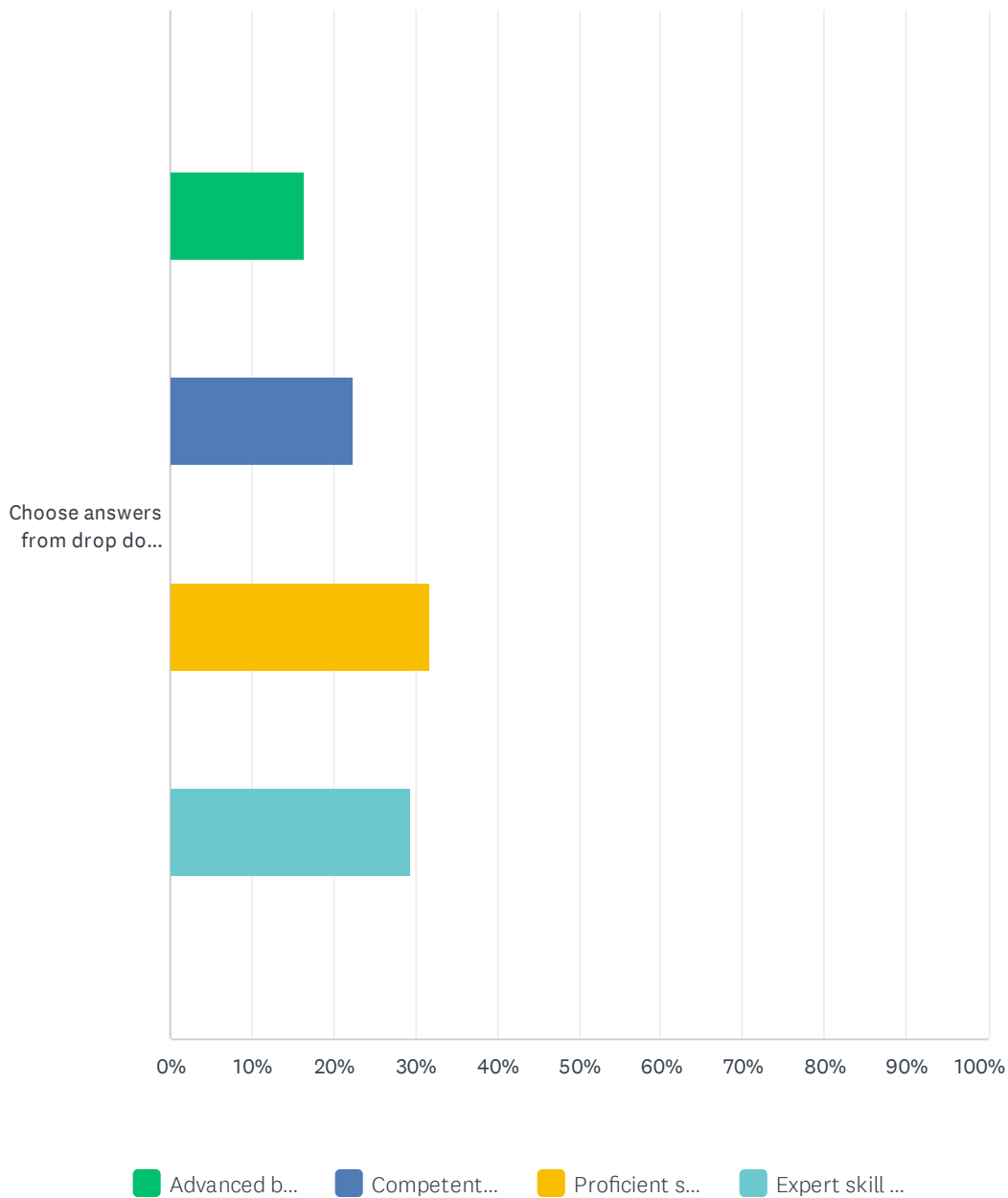
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	2.24% 5	22.42% 50	23.77% 53	51.57% 115	223

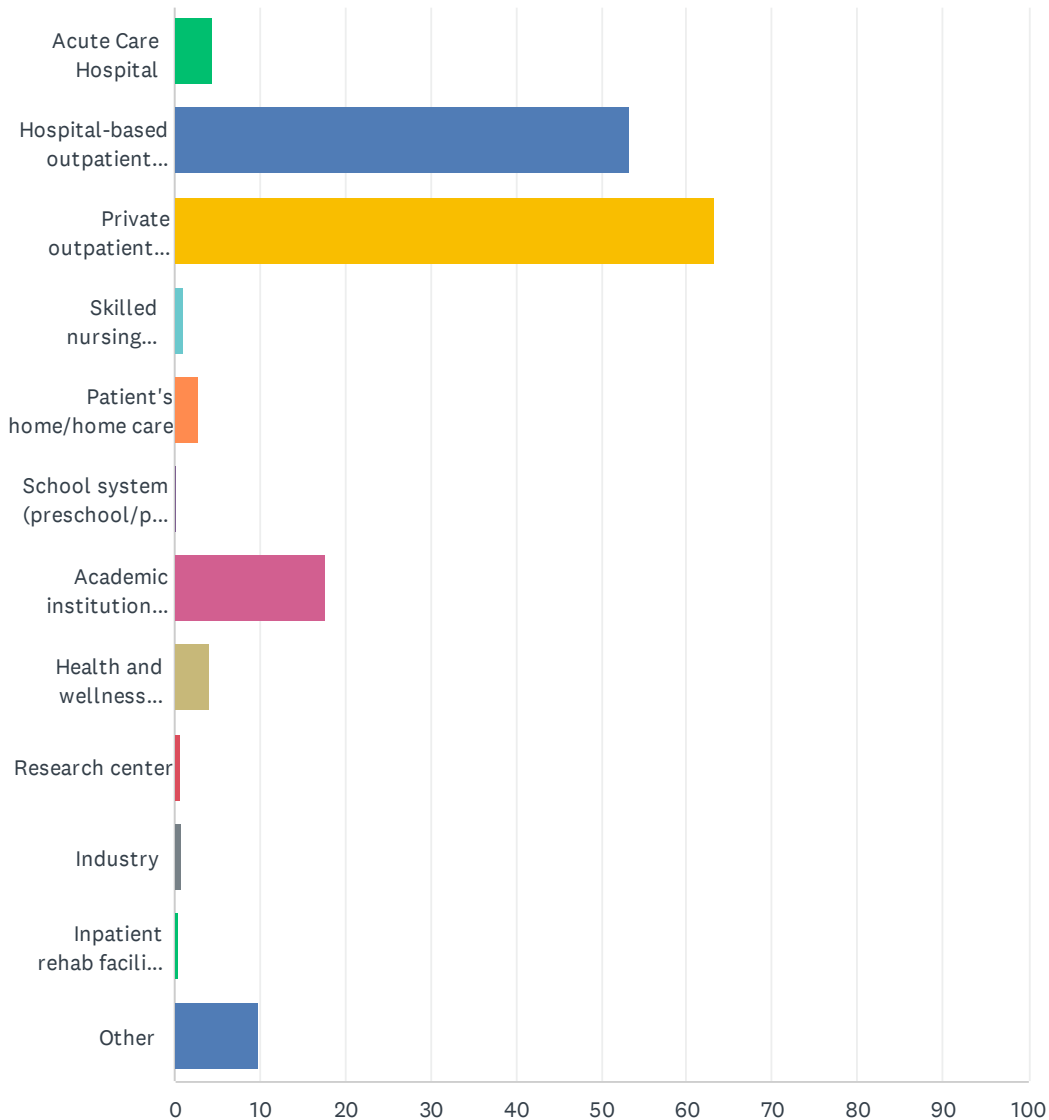
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	7.37% 16	40.09% 87	52.53% 114	217

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	16.36% 35	22.43% 48	31.78% 68	29.44% 63	214

Q165 4.1 Please indicate the percentage of time you spend in the following settings as an orthopaedic spine physical therapist (total must equal 100%).

Answered: 230 Skipped: 980

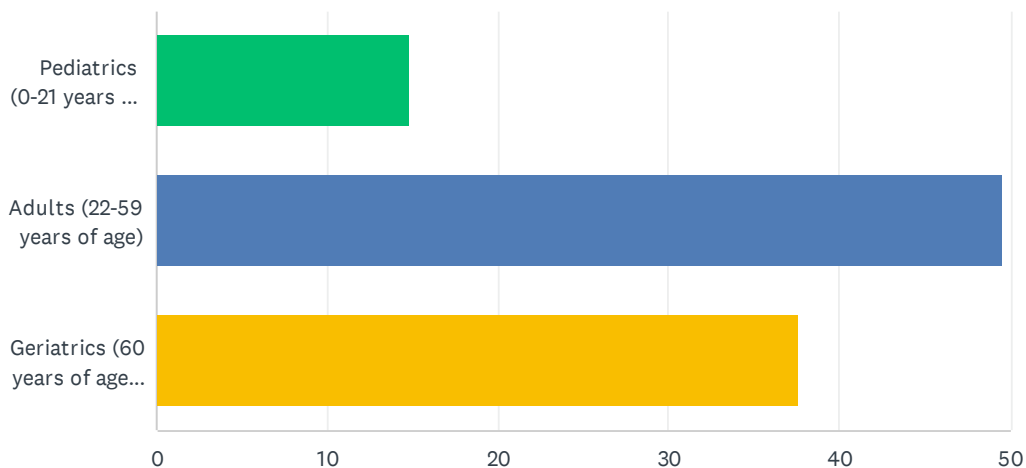


Spine Validation Practice Analysis Survey 2022

ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
Acute Care Hospital	5	466	115
Hospital-based outpatient facility or clinic	53	8,590	162
Private outpatient office or group practice	63	10,005	159
Skilled nursing facility (SNF)/long-term care	1	115	96
Patient's home/home care	3	295	103
School system (preschool/primary/secondary)	0	15	97
Academic institution (postsecondary)	18	2,101	116
Health and wellness facility	4	362	103
Research center	1	80	97
Industry	1	90	97
Inpatient rehab facility (IRF)	0	35	98
Other	10	846	86
Total Respondents: 230			

Q166 5.1 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following age groups? (total must equal 100%)

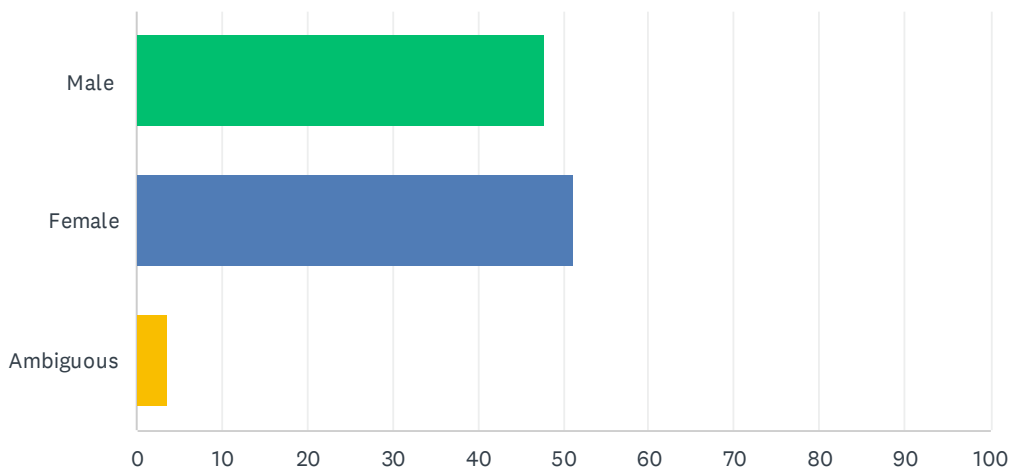
Answered: 230 Skipped: 980



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
Pediatrics (0-21 years of age)	15	3,150	211
Adults (22-59 years of age)	50	11,398	230
Geriatrics (60 years of age to end of life)	38	8,452	225
Total Respondents: 230			

Q167 5.2 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following sex groups? (total must equal 100%)

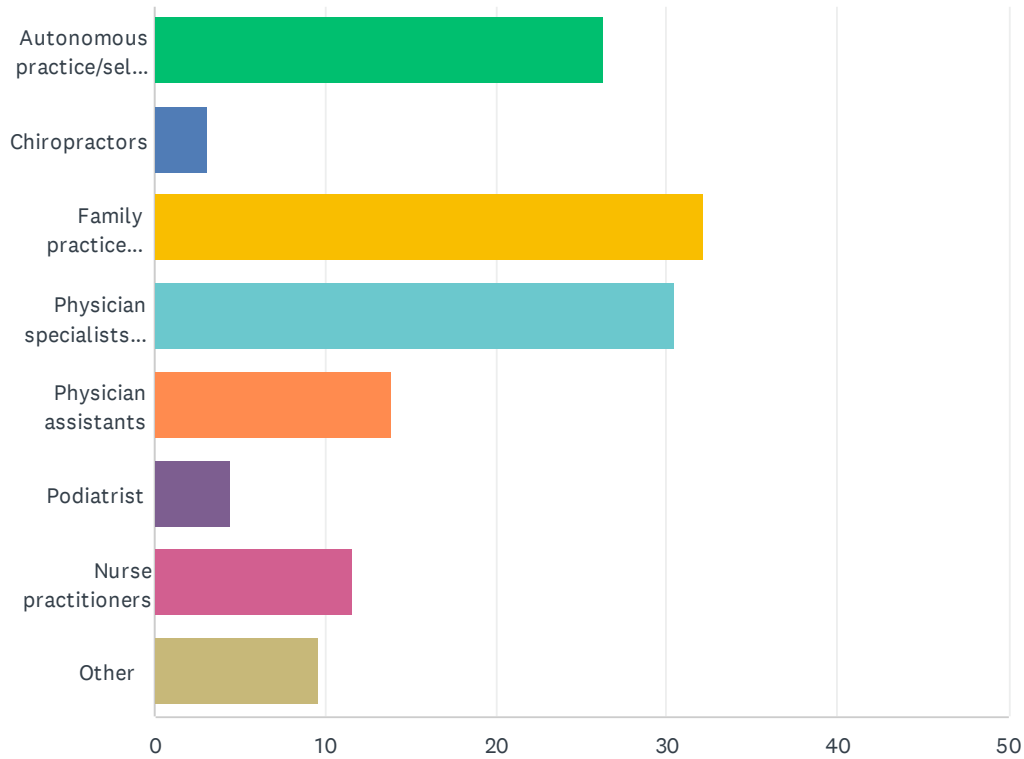
Answered: 228 Skipped: 982



ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
Male	48	10,826	227
Female	51	11,615	227
Ambiguous	4	359	99
Total Respondents: 228			

Q168 5.3 Please indicate your referral sources by percentage below. (total must equal 100%)

Answered: 228 Skipped: 982



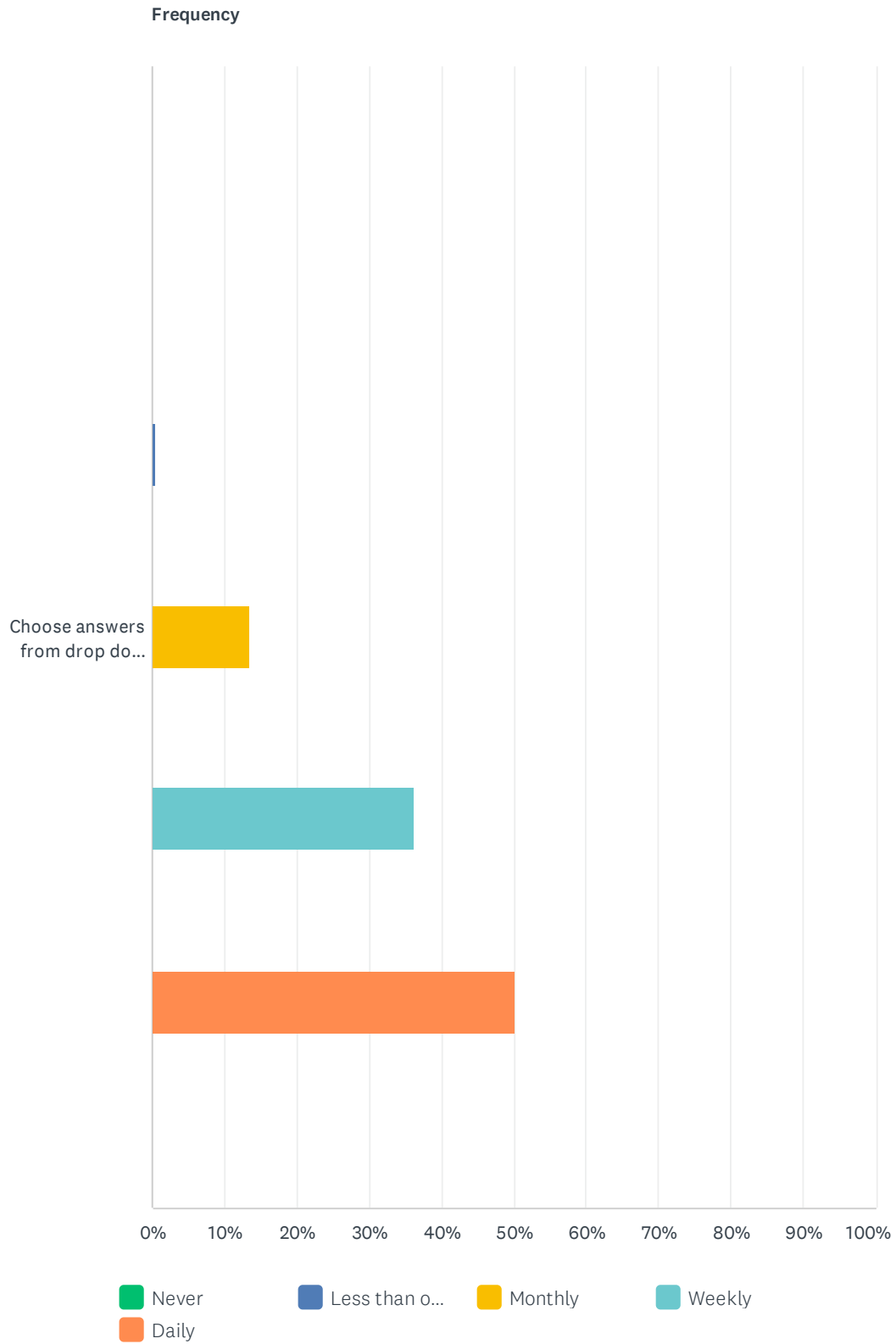
ANSWER CHOICES	AVERAGE NUMBER	TOTAL NUMBER	RESPONSES
Autonomous practice/self-referral	26	4,498	172
Chiropractors	3	345	110
Family practice physicians or other physician primary care providers	32	6,851	212
Physician specialists (e.g. geriatrics physician)	31	5,960	195
Physician assistants	14	2,260	164
Podiatrist	4	492	112
Nurse practitioners	12	1,718	145
Other	10	676	71
Total Respondents: 228			

Q169 5.3.1 If you entered information for "Other" above, please list a different referral source and percentage.

Answered: 33 Skipped: 1,177

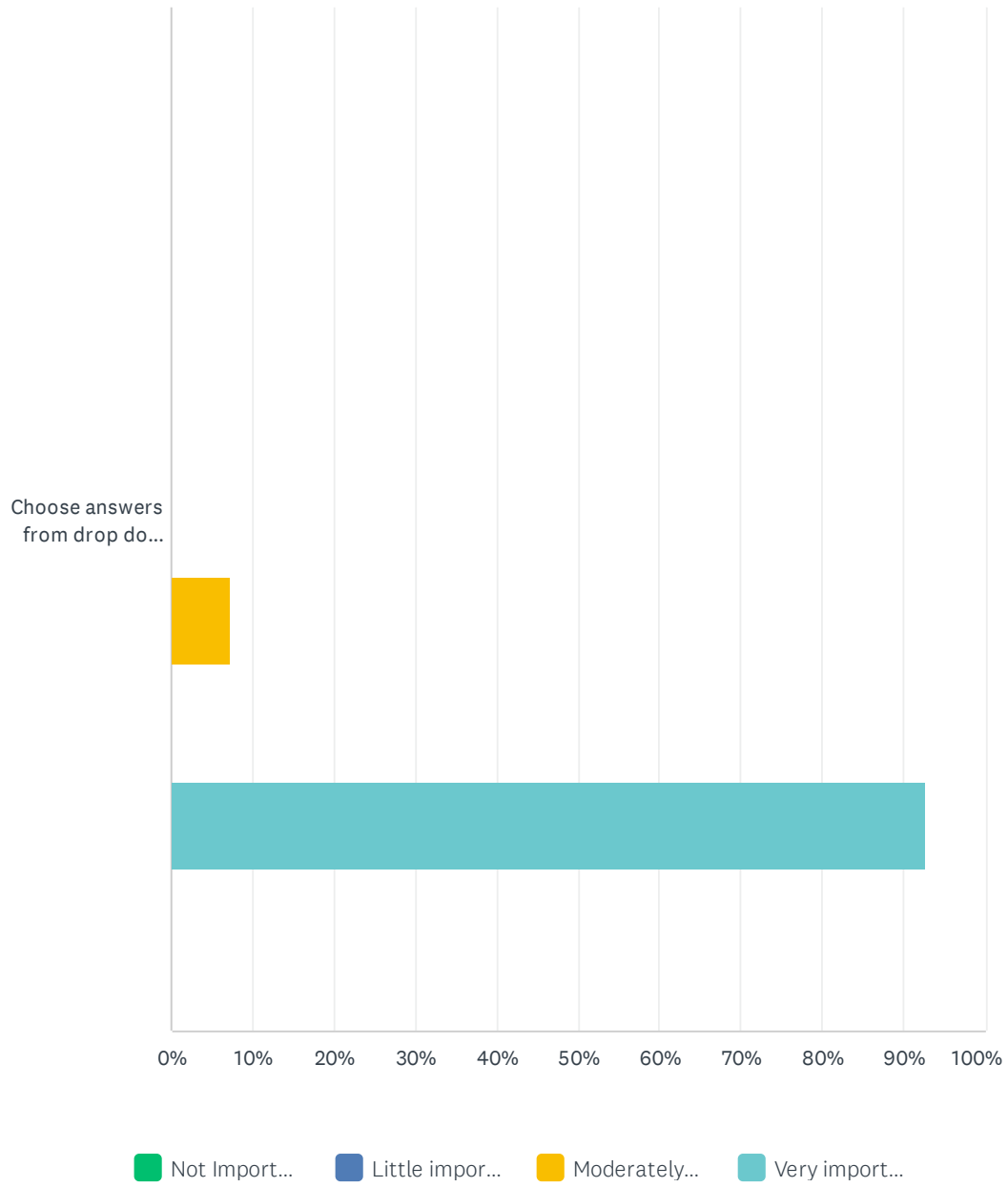
Q170 6.1.1 Cervical Radiculopathy.

Answered: 224 Skipped: 986



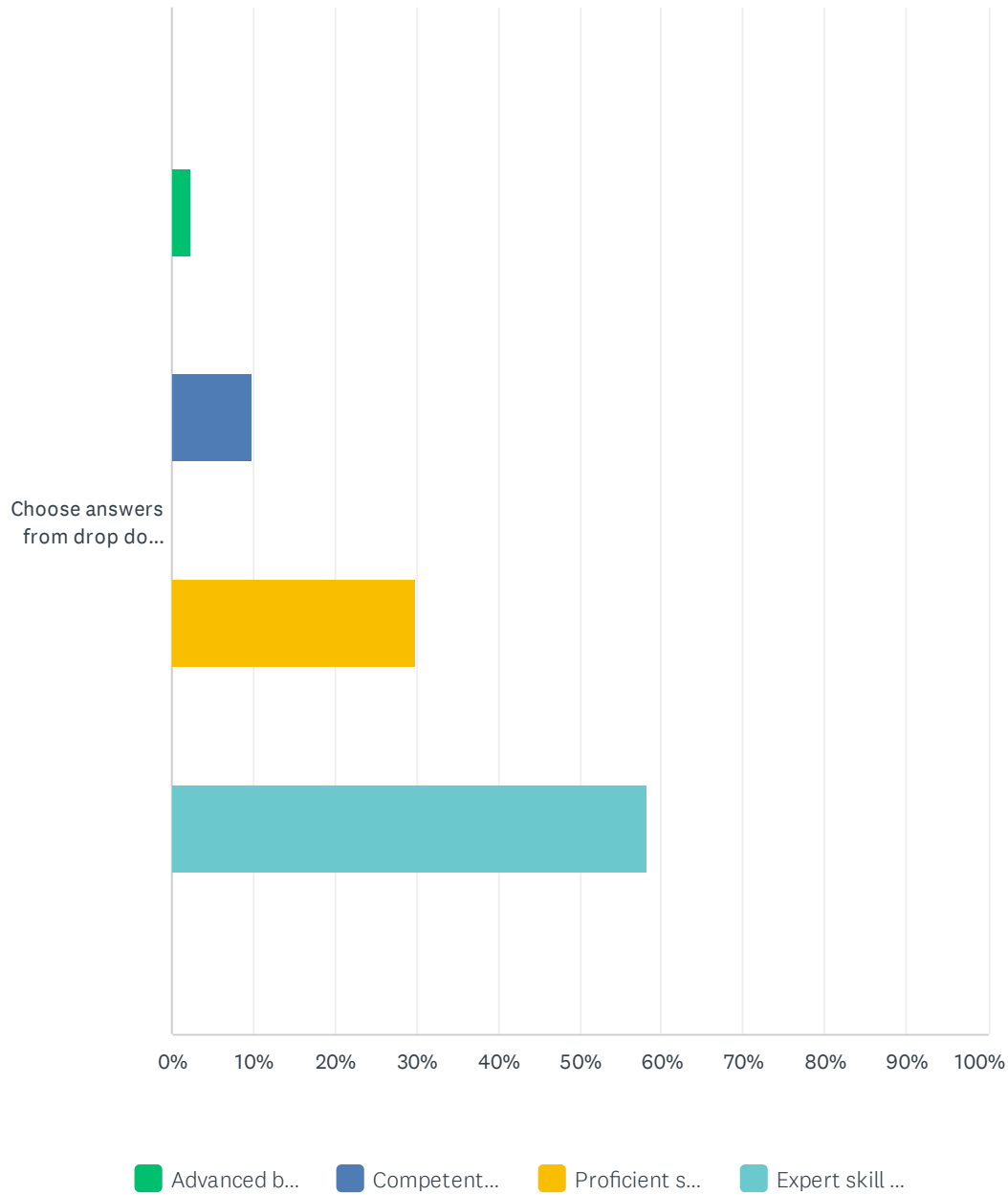
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.45% 1	13.39% 30	36.16% 81	50.00% 112	224

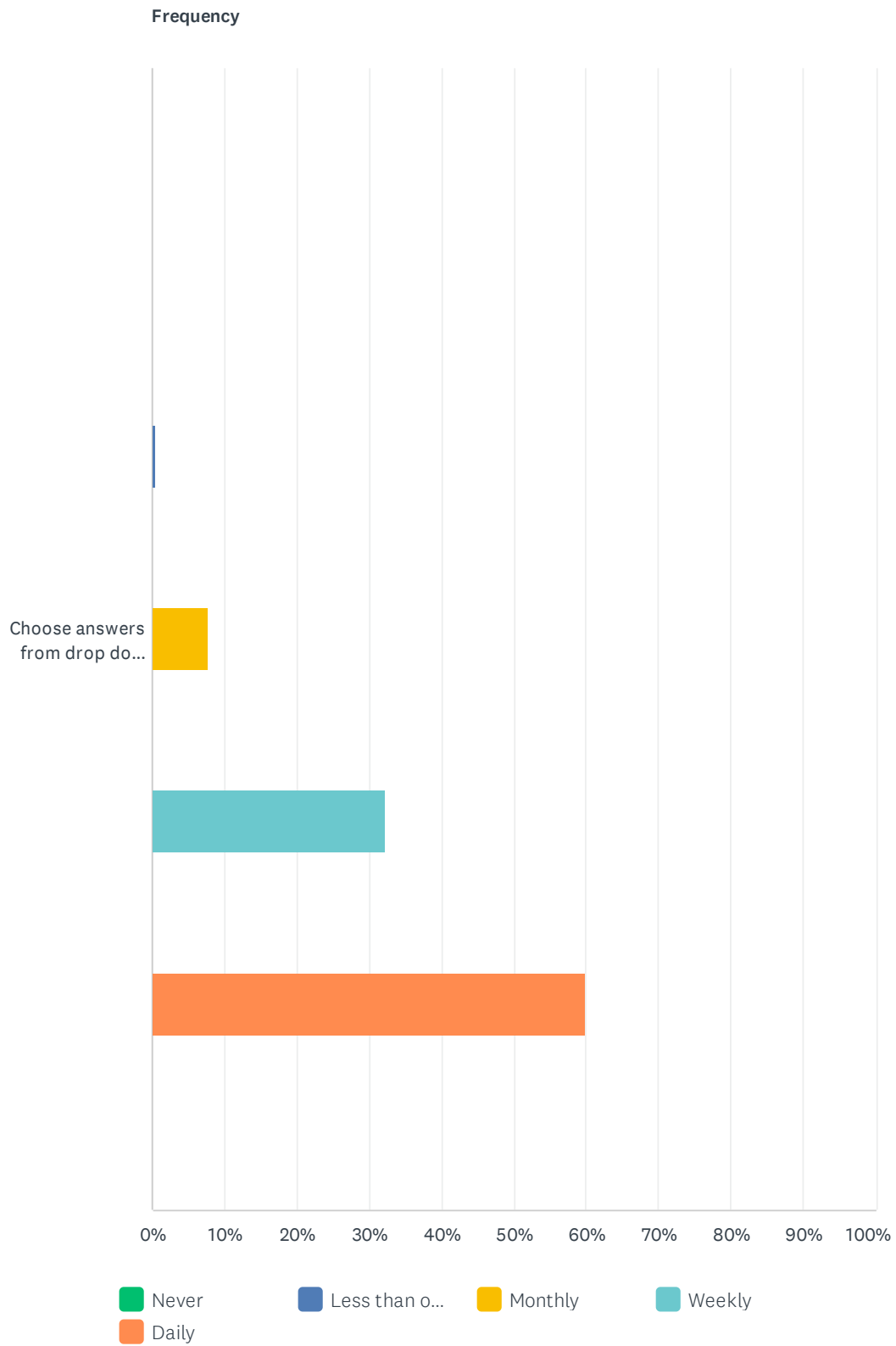
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.00% 0	7.34% 16	92.66% 202	218

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.33% 5	9.77% 21	29.77% 64	58.14% 125	215

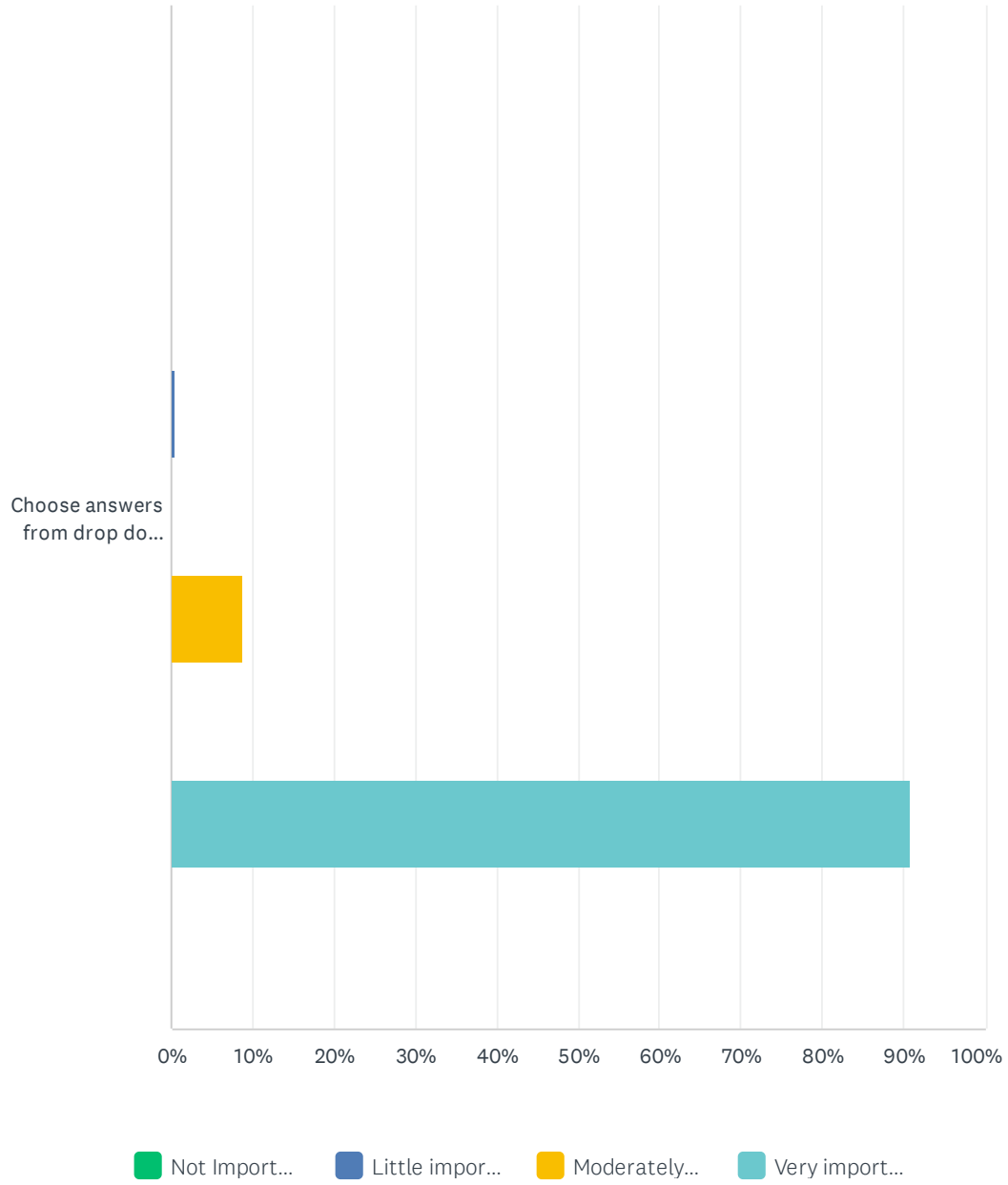
Q171 6.1.2 Lumbar Radiculopathy.

Answered: 224 Skipped: 986



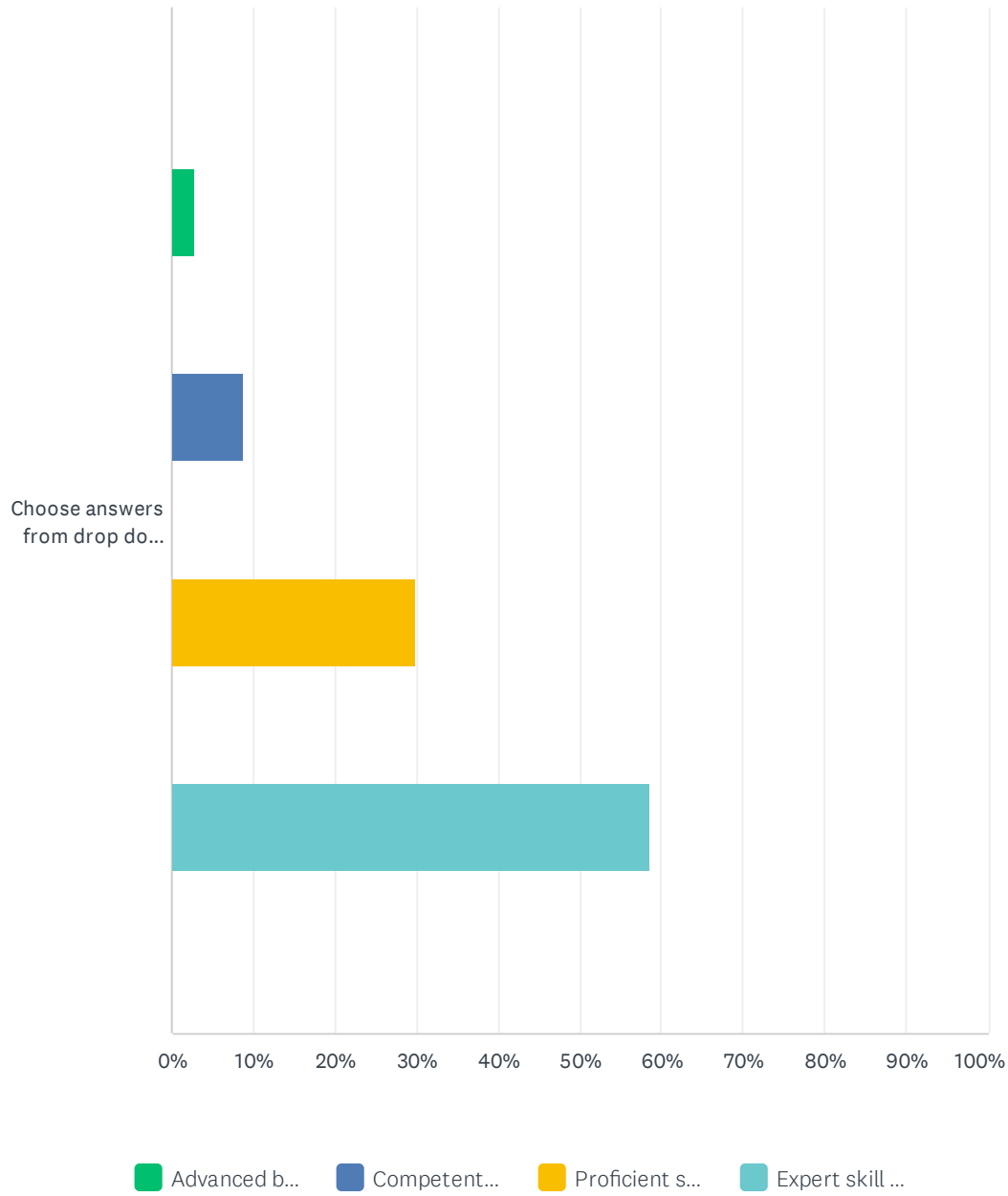
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	0.45% 1	7.59% 17	32.14% 72	59.82% 134	224

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	0.46% 1	8.72% 19	90.83% 198	218

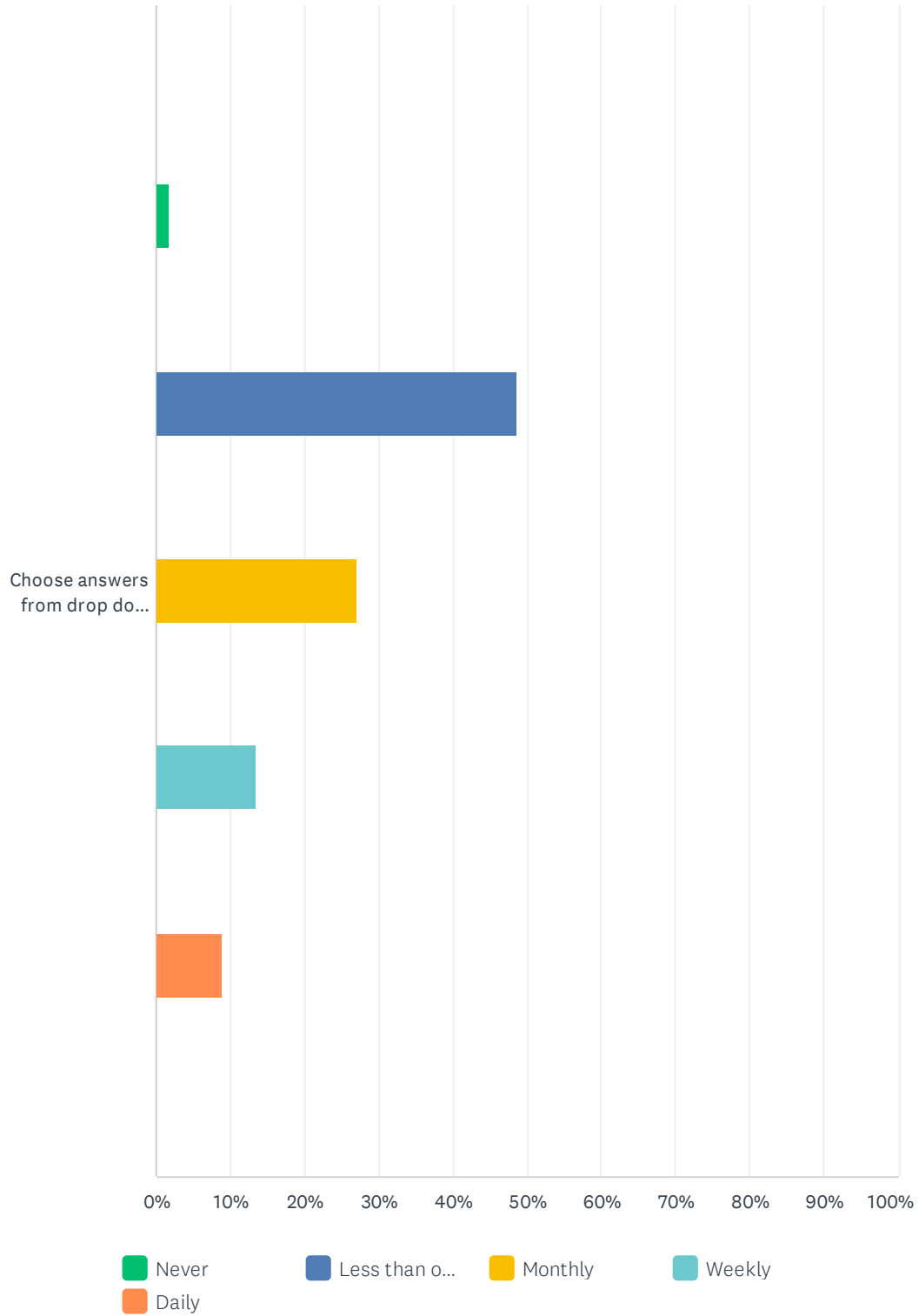
Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.79% 6	8.84% 19	29.77% 64	58.60% 126	215

Q172 6.1.3 Thoracic Outlet Syndrome.

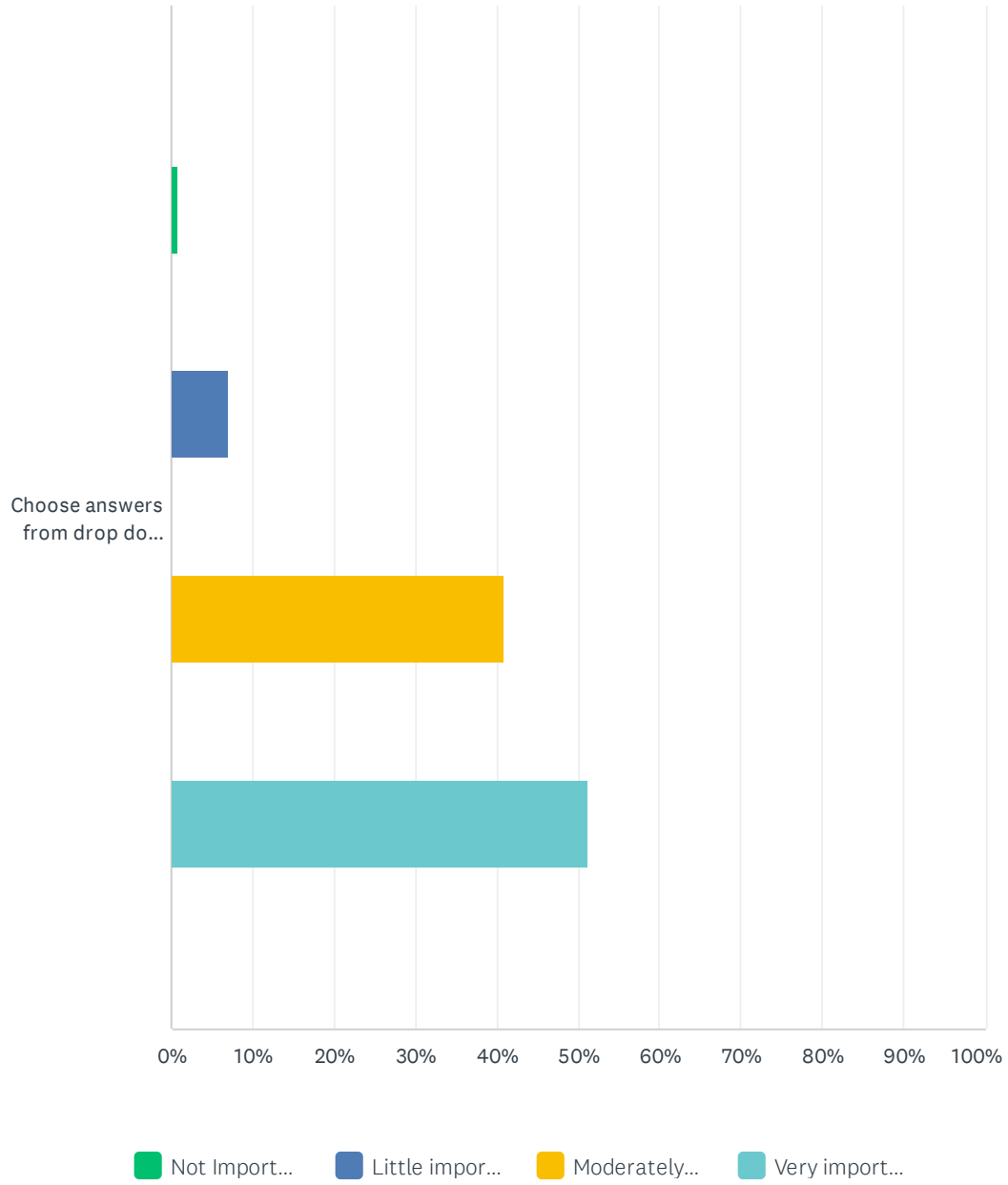
Answered: 222 Skipped: 988

Frequency



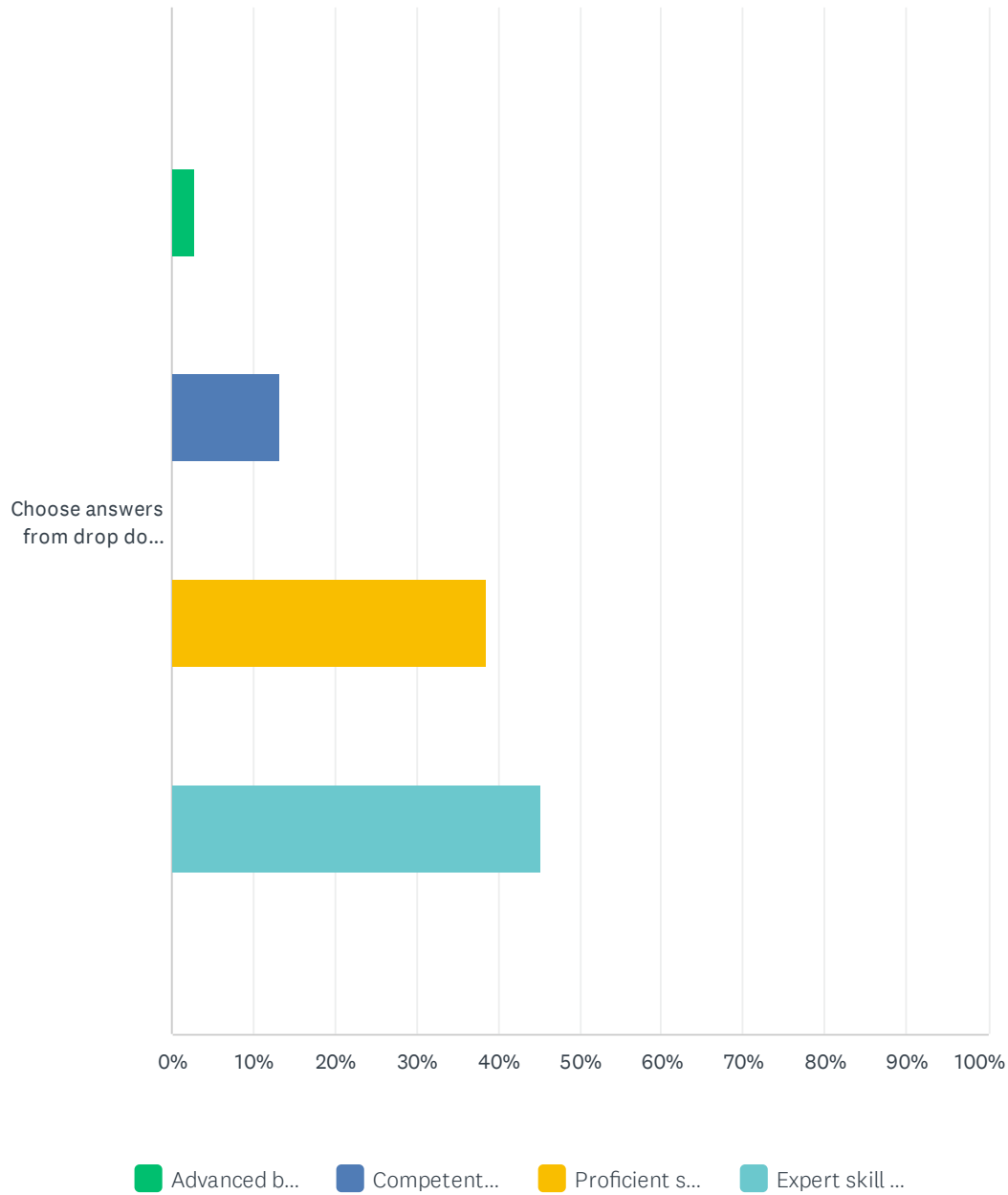
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.80% 4	48.65% 108	27.03% 60	13.51% 30	9.01% 20	222

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.93% 2	6.98% 15	40.93% 88	51.16% 110	215

Spine Validation Practice Analysis Survey 2022

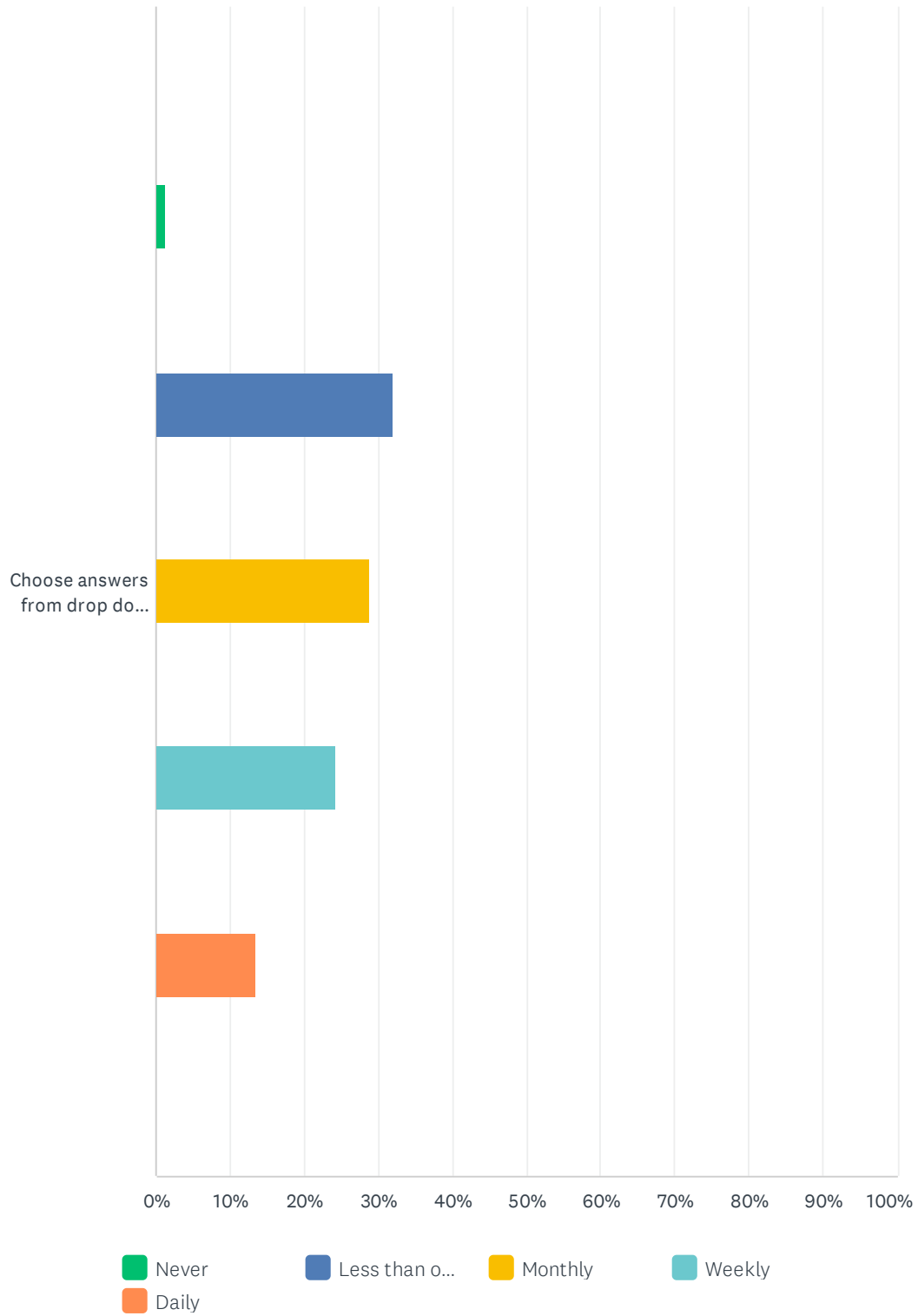
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.83% 6	13.21% 28	38.68% 82	45.28% 96	212

Q173 6.1.4 Other peripheral neural impingements (not including thoracic outlet syndrome; e.g., double crush syndrome, other neurodynamic disorders).

Answered: 223 Skipped: 987

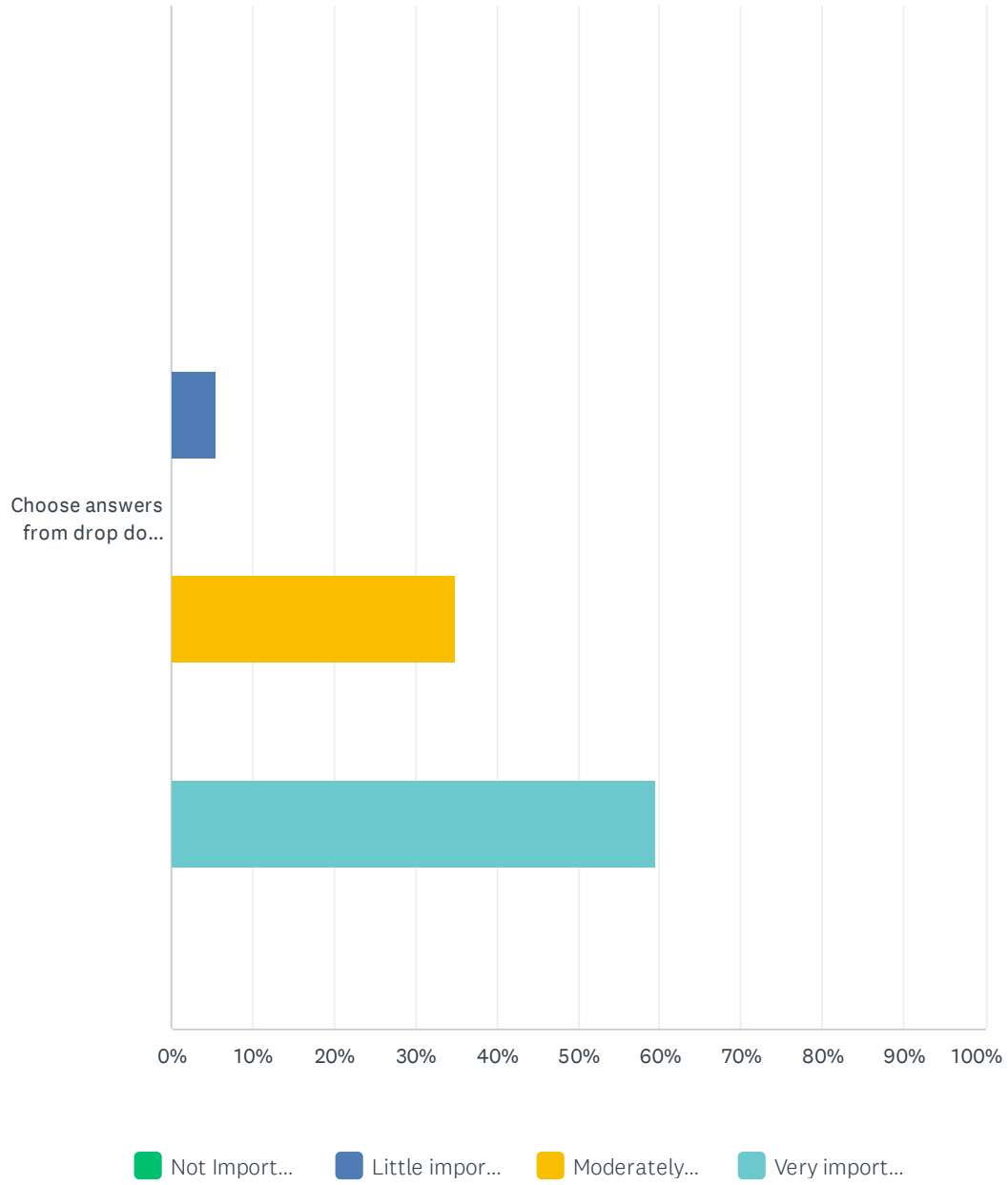
Spine Validation Practice Analysis Survey 2022

Frequency



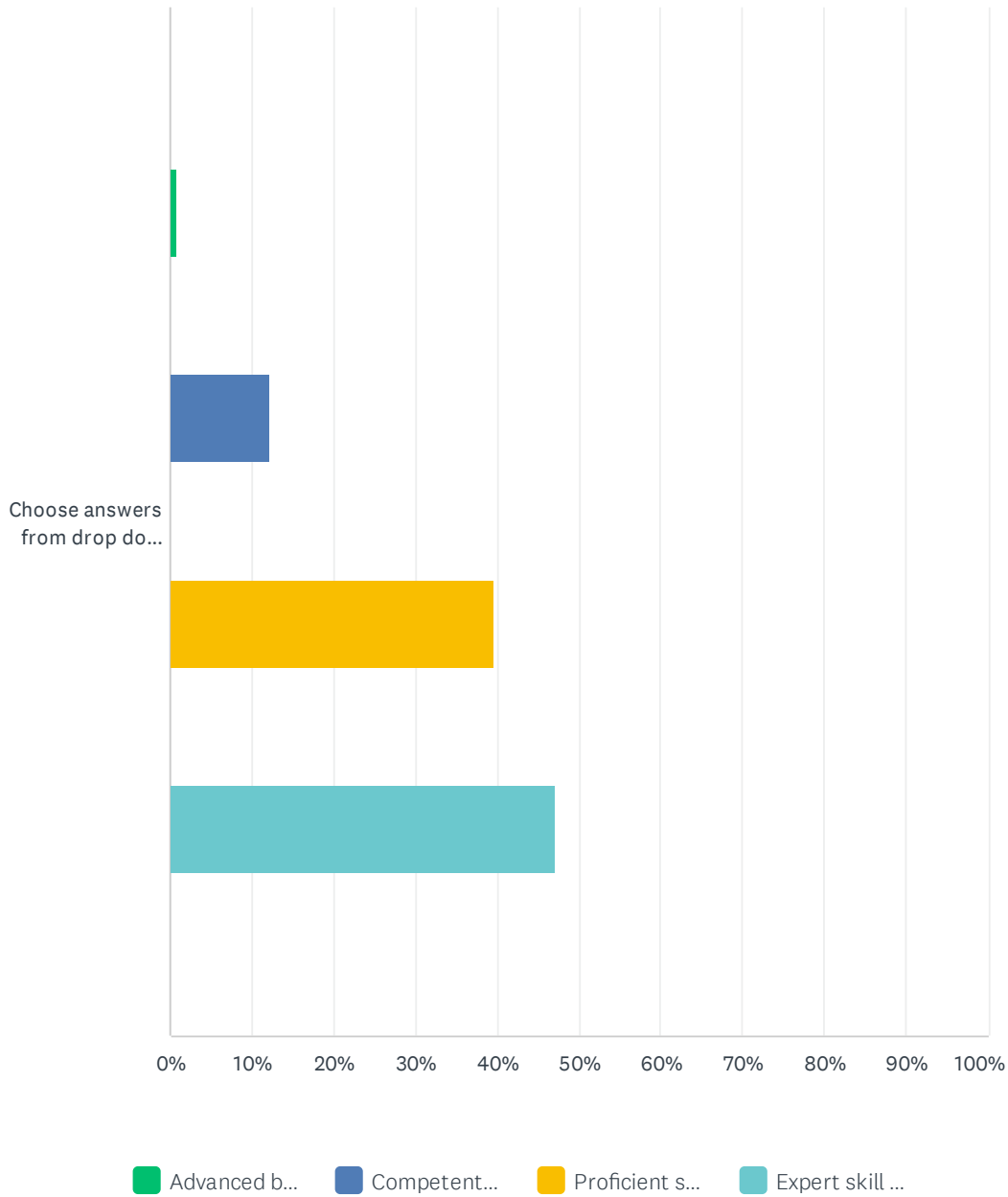
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.35% 3	31.98% 71	28.83% 64	24.32% 54	13.51% 30	222

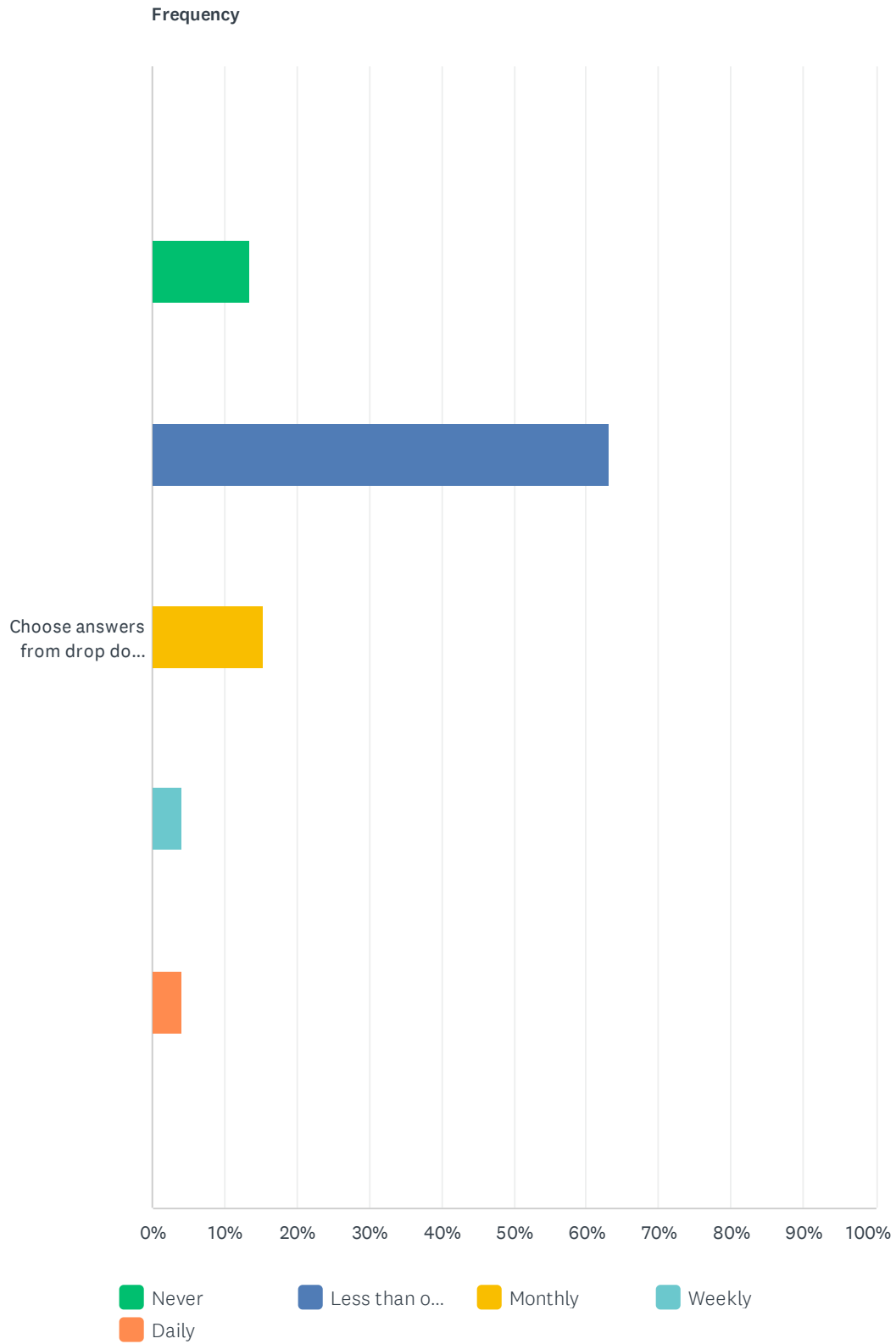
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	5.53% 12	35.02% 76	59.45% 129	217

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	0.93% 2	12.15% 26	39.72% 85	47.20% 101	214

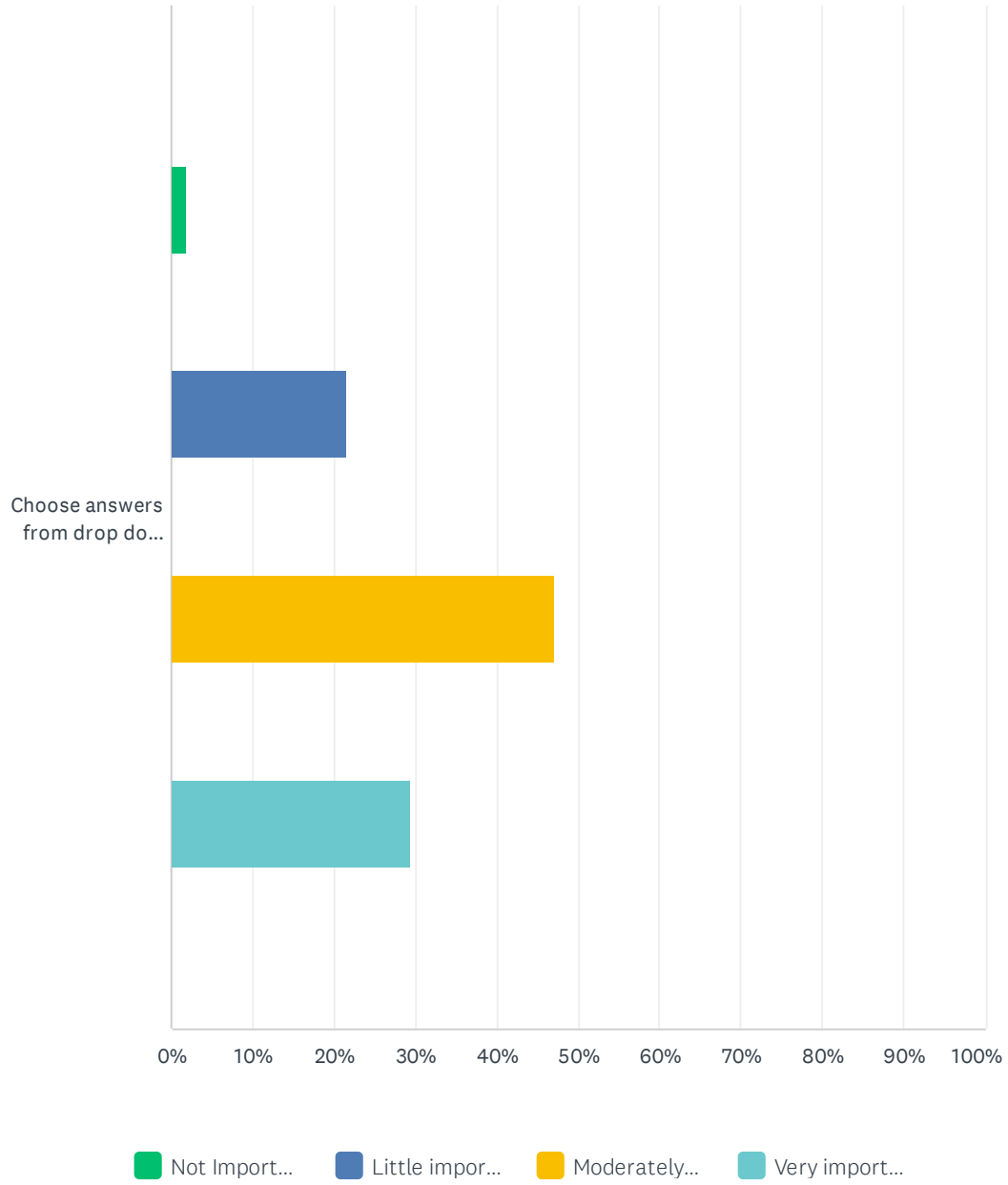
Q174 6.1.5 Meralgia paresthetica.

Answered: 222 Skipped: 988



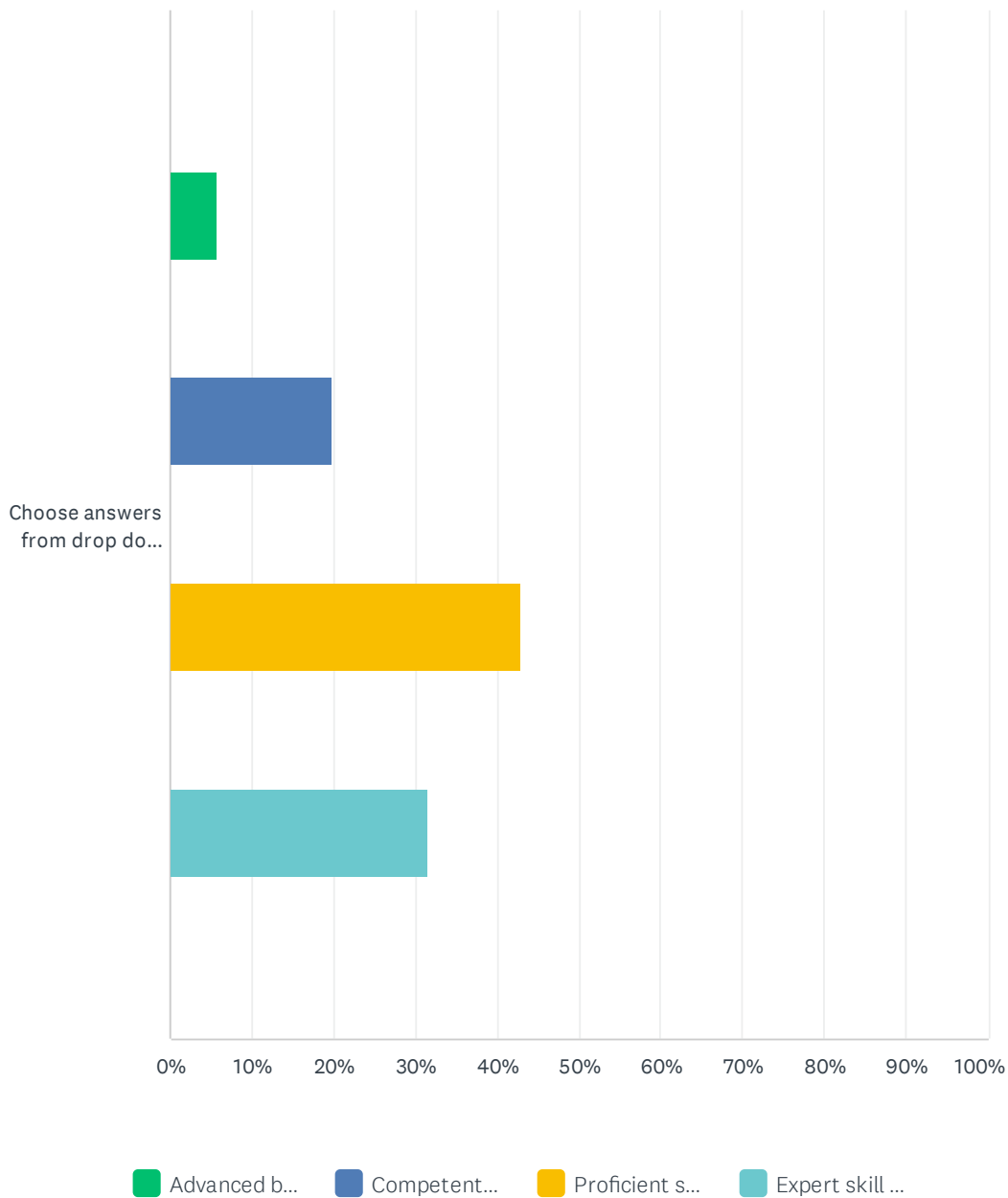
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	13.51% 30	63.06% 140	15.32% 34	4.05% 9	4.05% 9	222

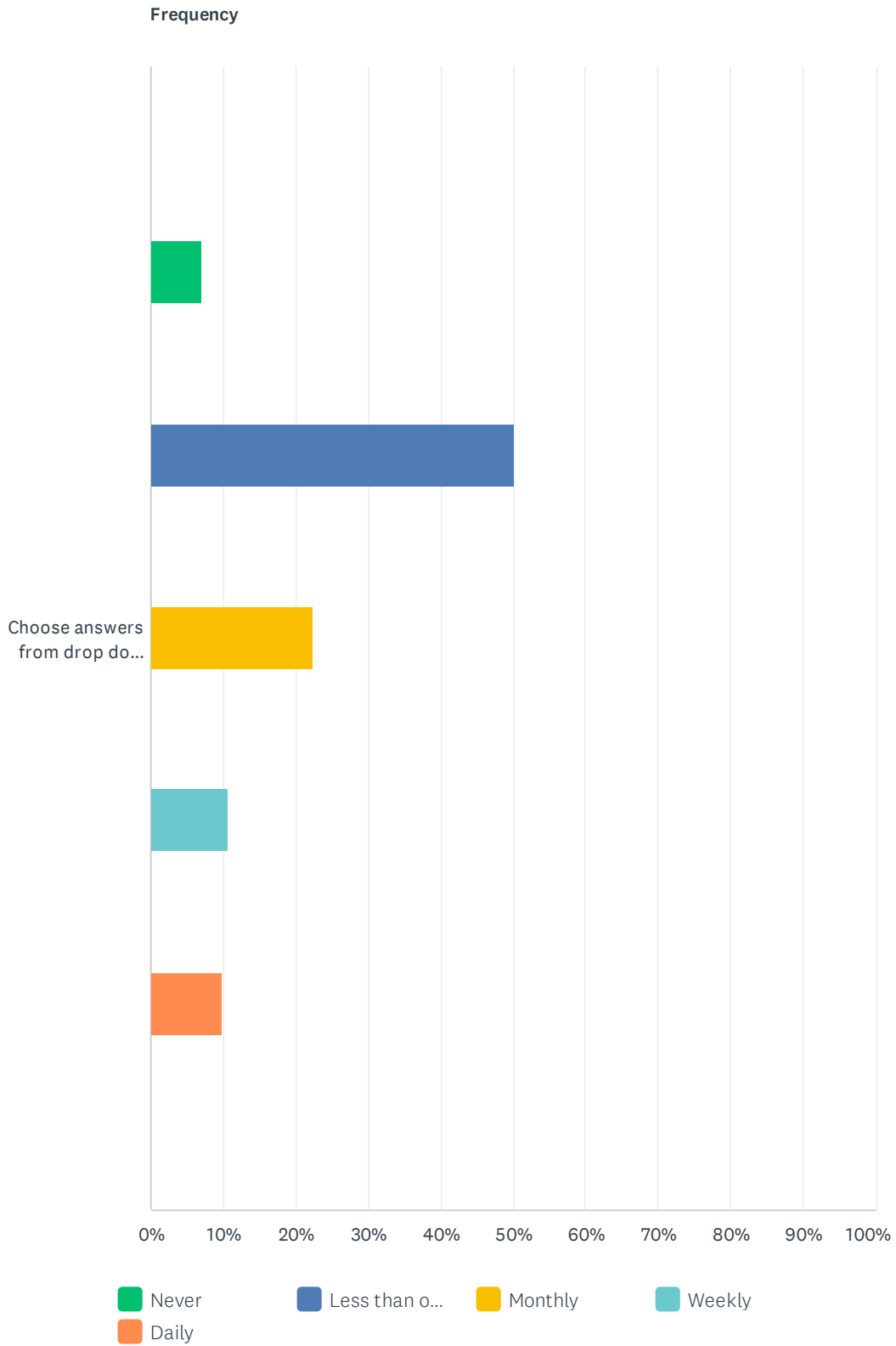
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.87% 4	21.50% 46	47.20% 101	29.44% 63	214

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.66% 12	19.81% 42	42.92% 91	31.60% 67	212

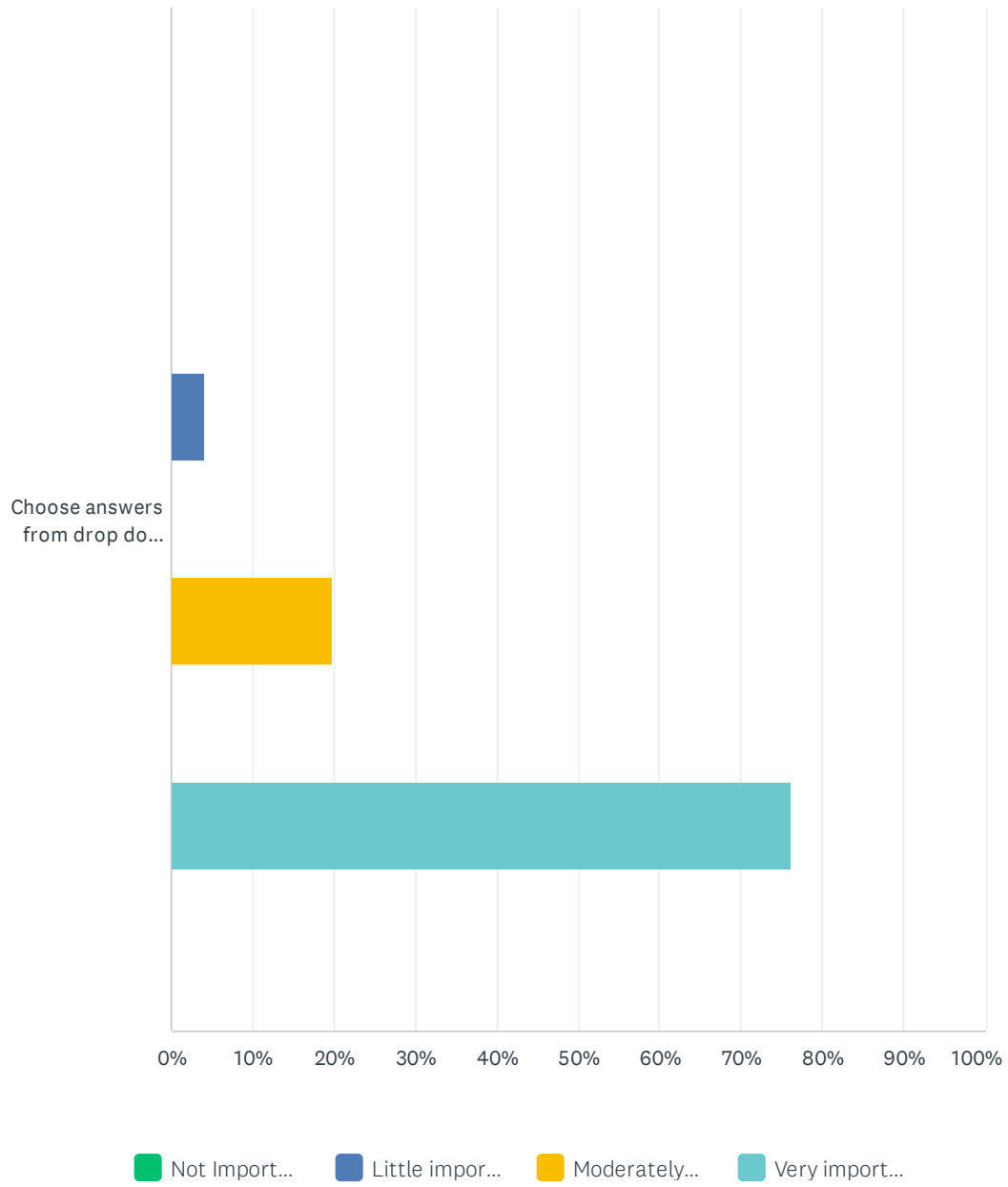
Q175 6.1.6 Cervical Myelopathy.

Answered: 224 Skipped: 986



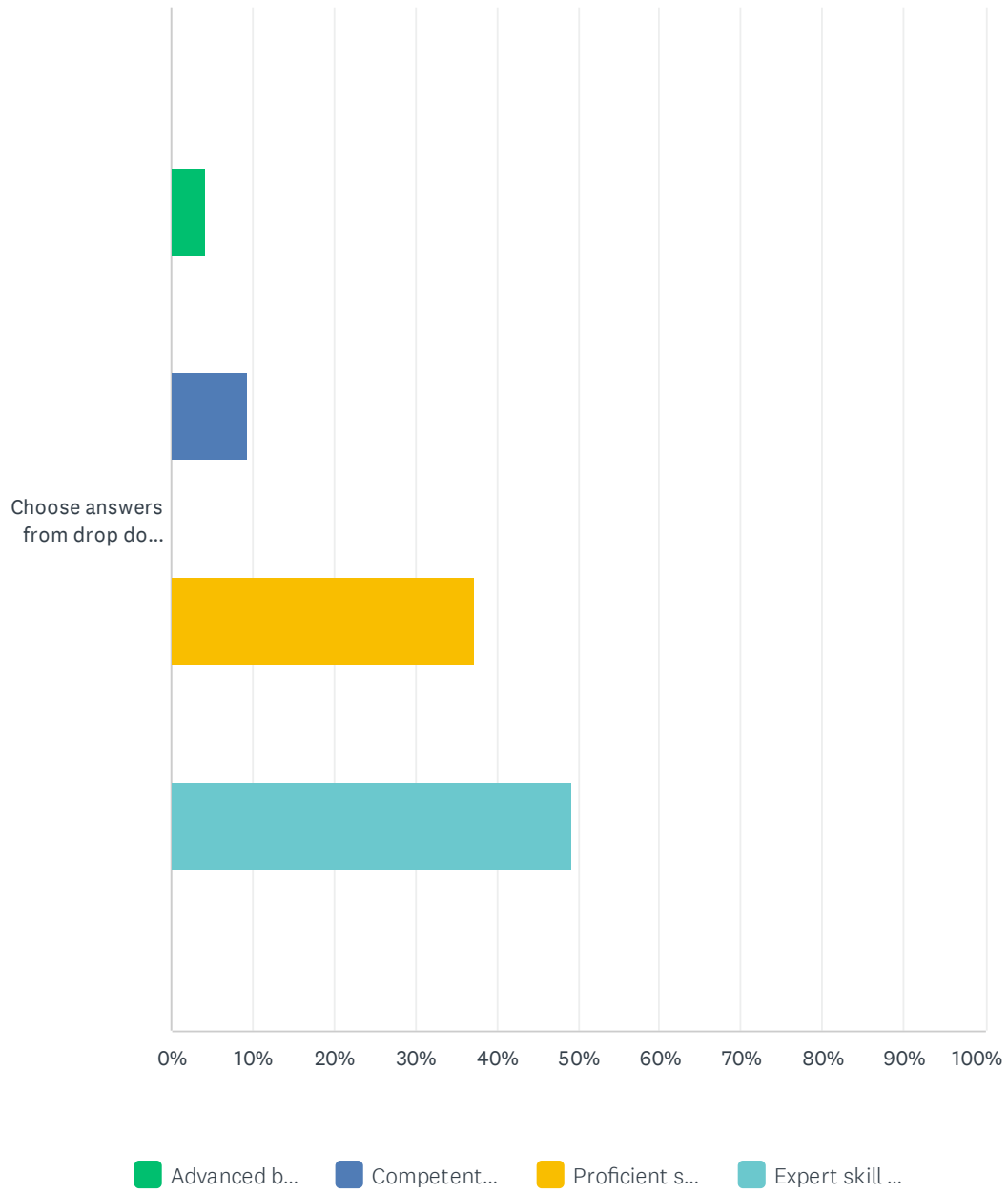
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	7.14% 16	50.00% 112	22.32% 50	10.71% 24	9.82% 22	224

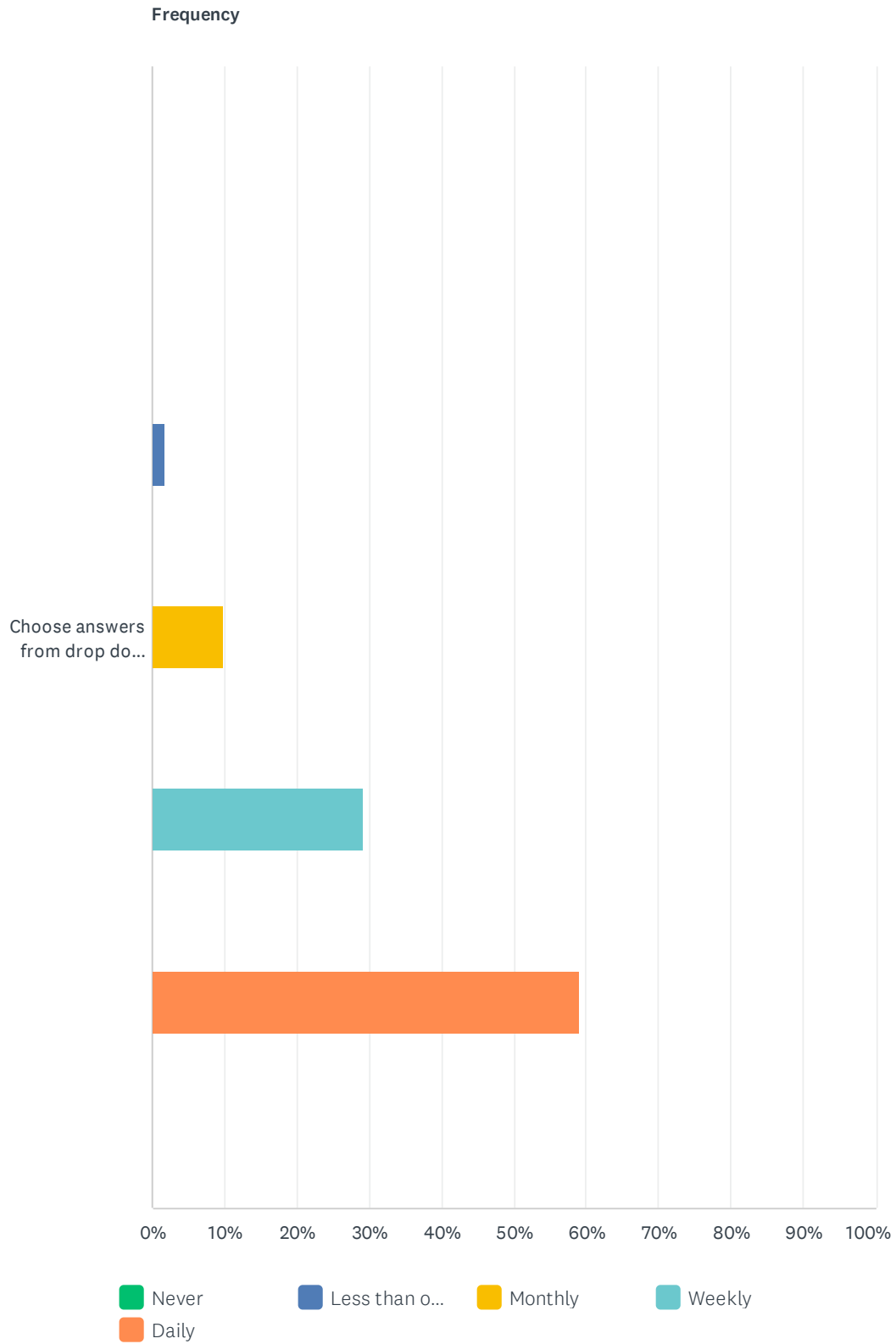
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	4.13% 9	19.72% 43	76.15% 166	218

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.19% 9	9.30% 20	37.21% 80	49.30% 106	215

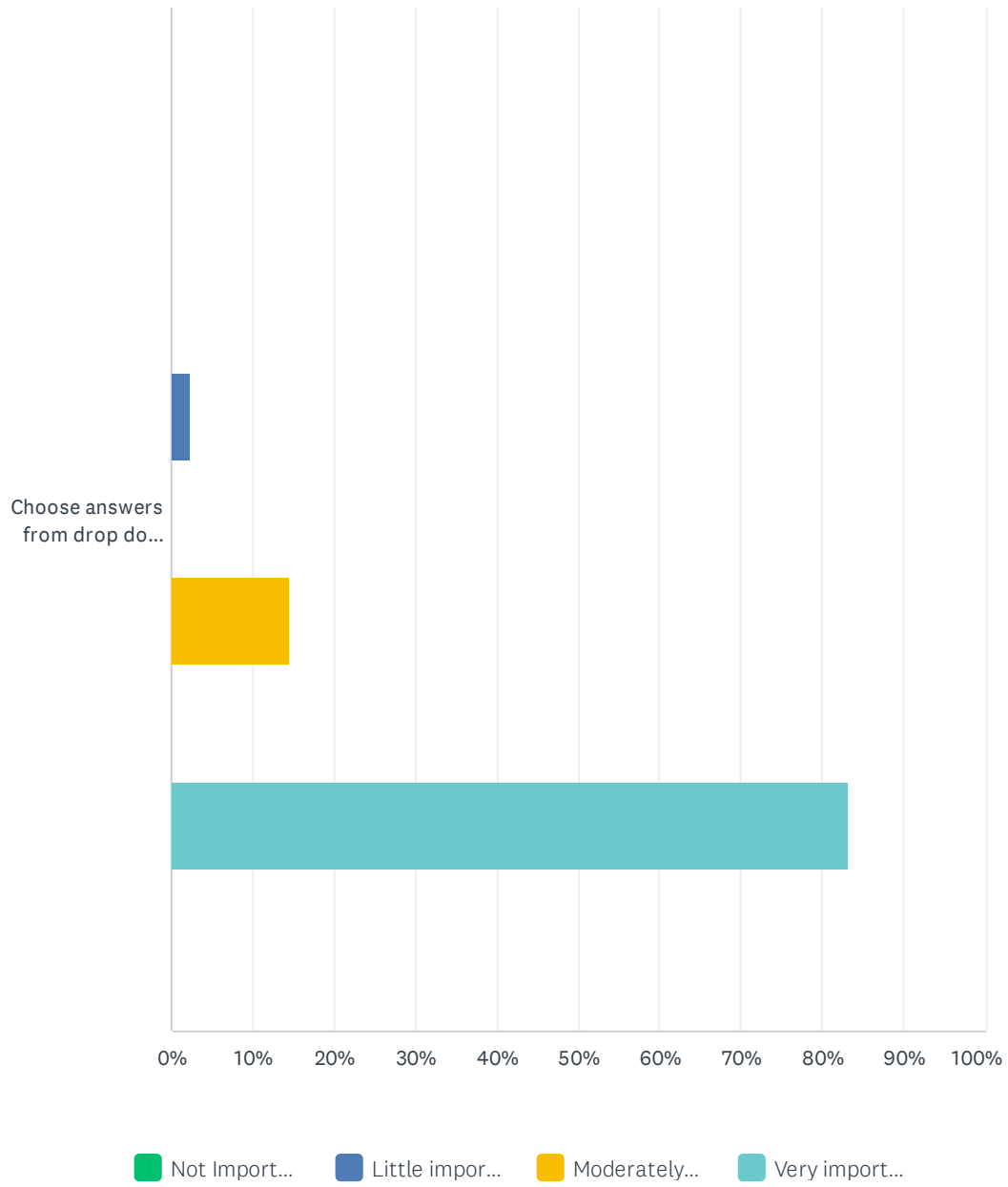
Q176 6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion, herniation).

Answered: 222 Skipped: 988



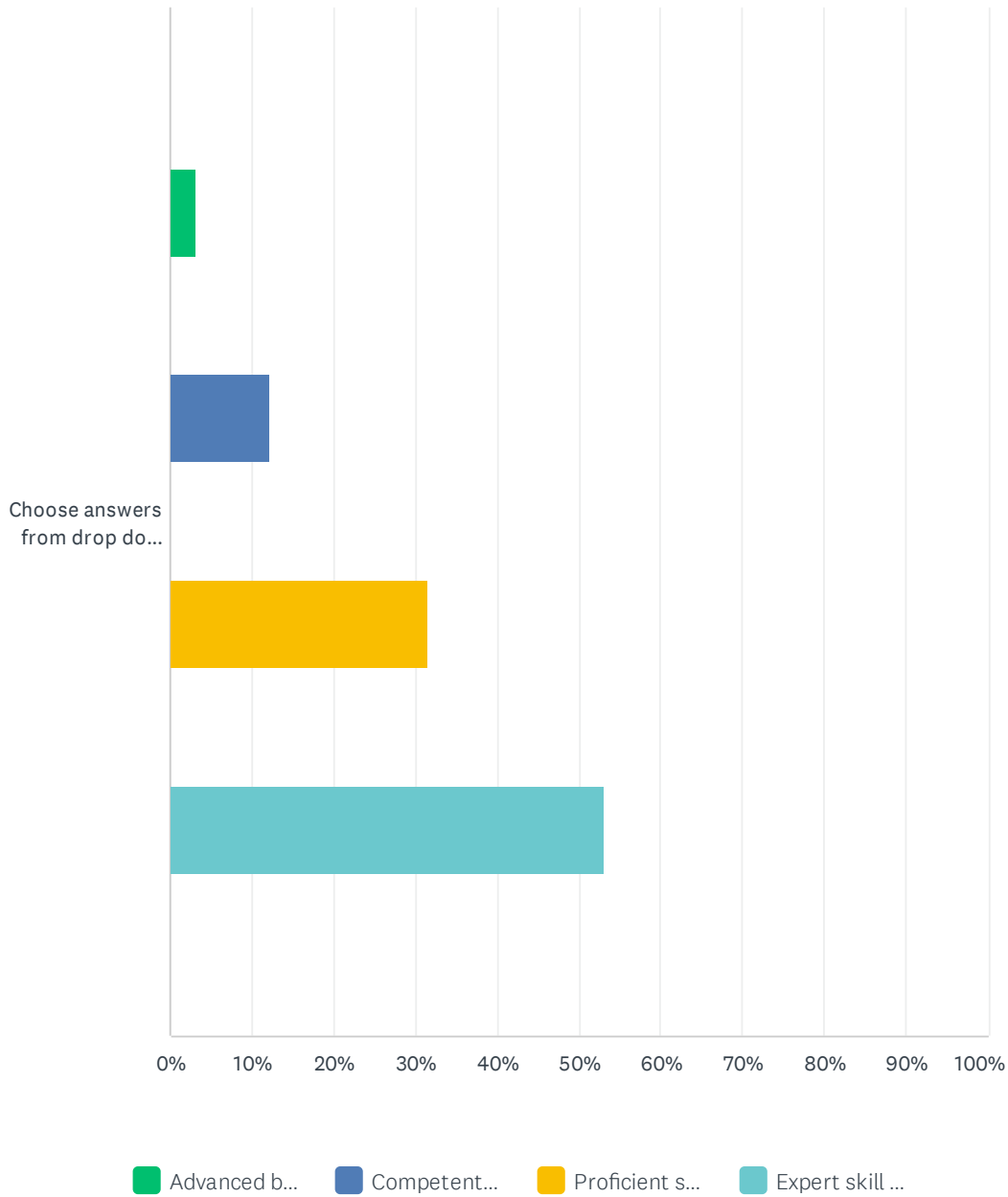
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.80% 4	9.91% 22	29.28% 65	59.01% 131	222

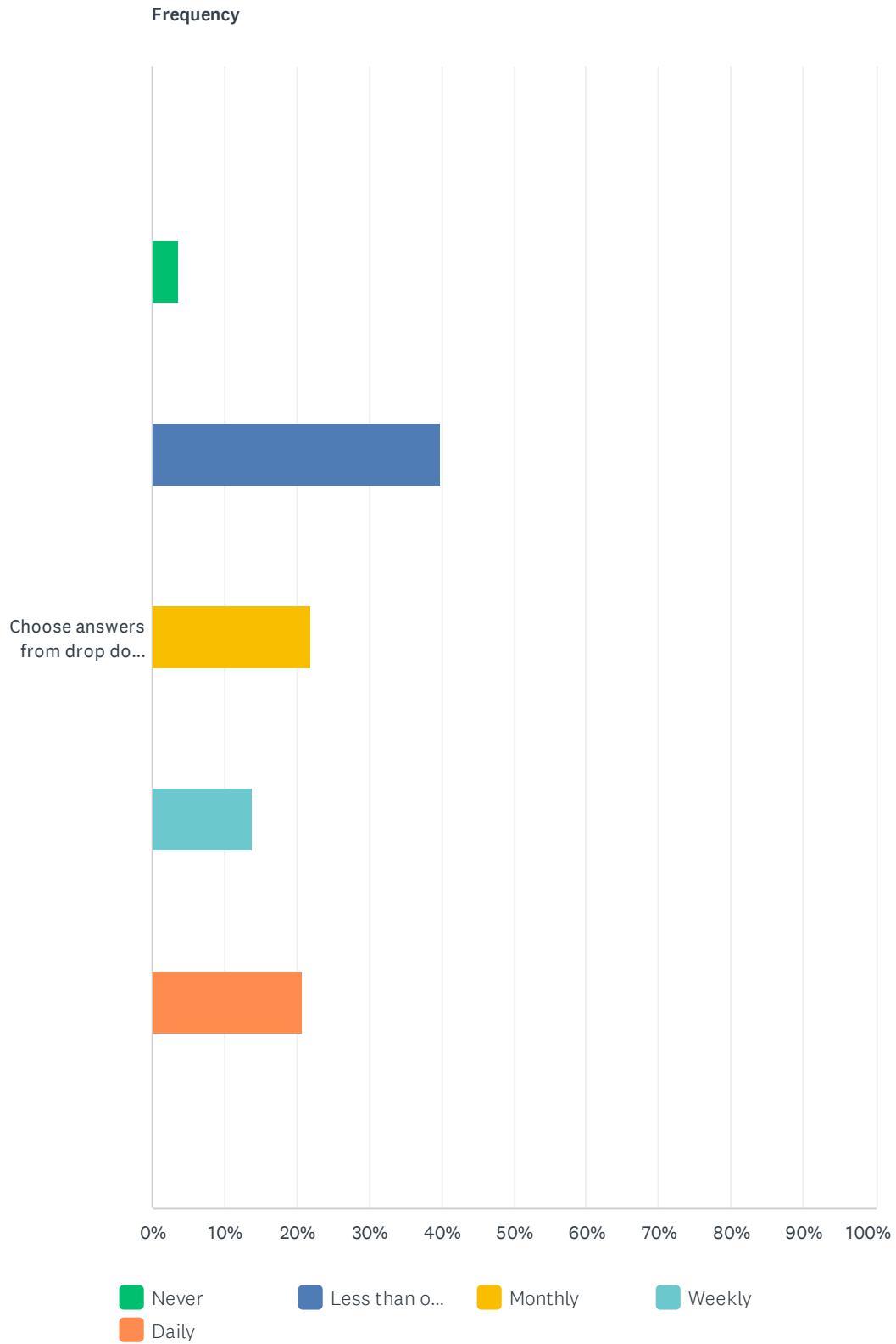
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	2.33% 5	14.42% 31	83.26% 179	215

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.29% 7	12.21% 26	31.46% 67	53.05% 113	213

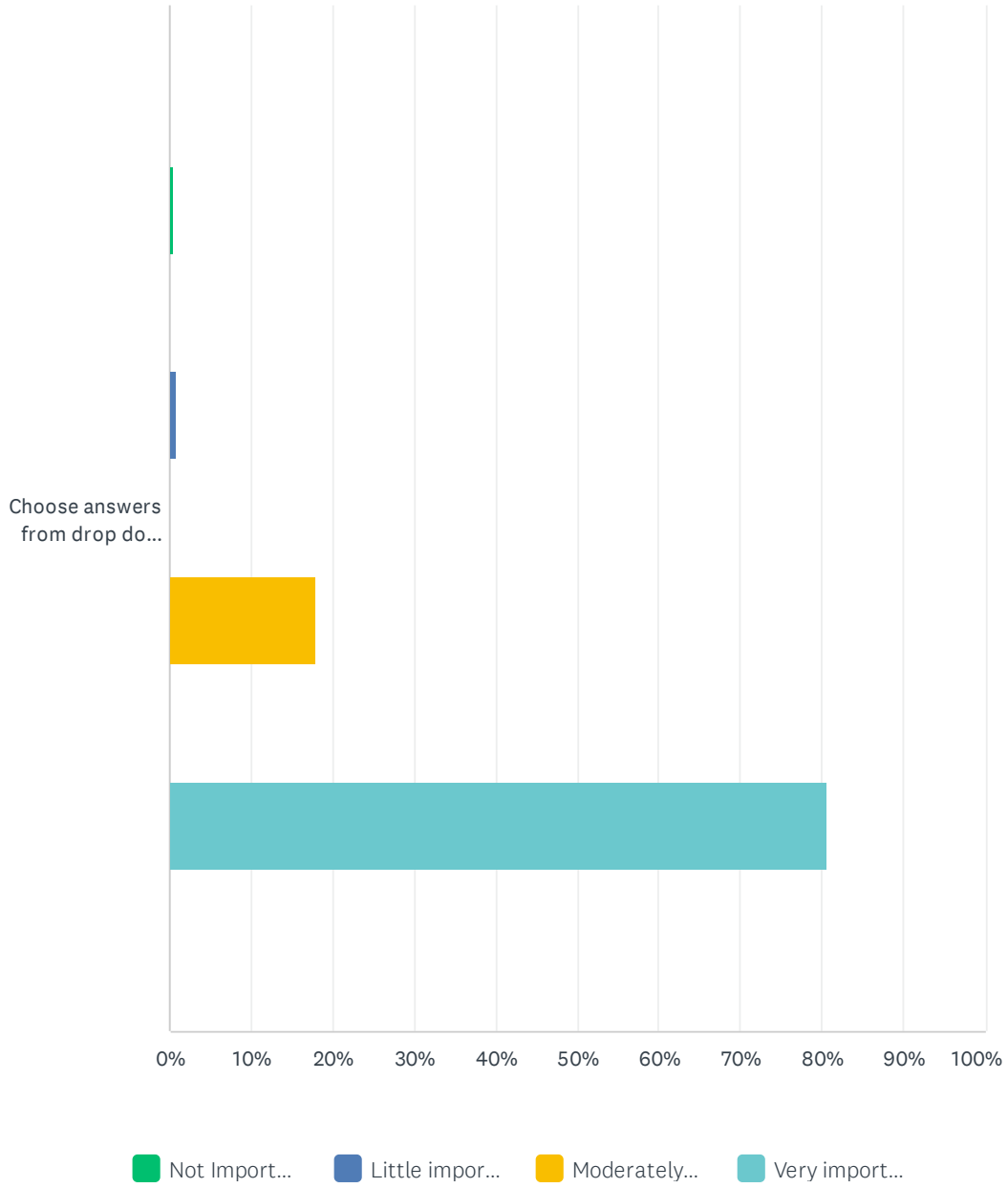
Q177 6.2.2 Cervical Instability.

Answered: 223 Skipped: 987



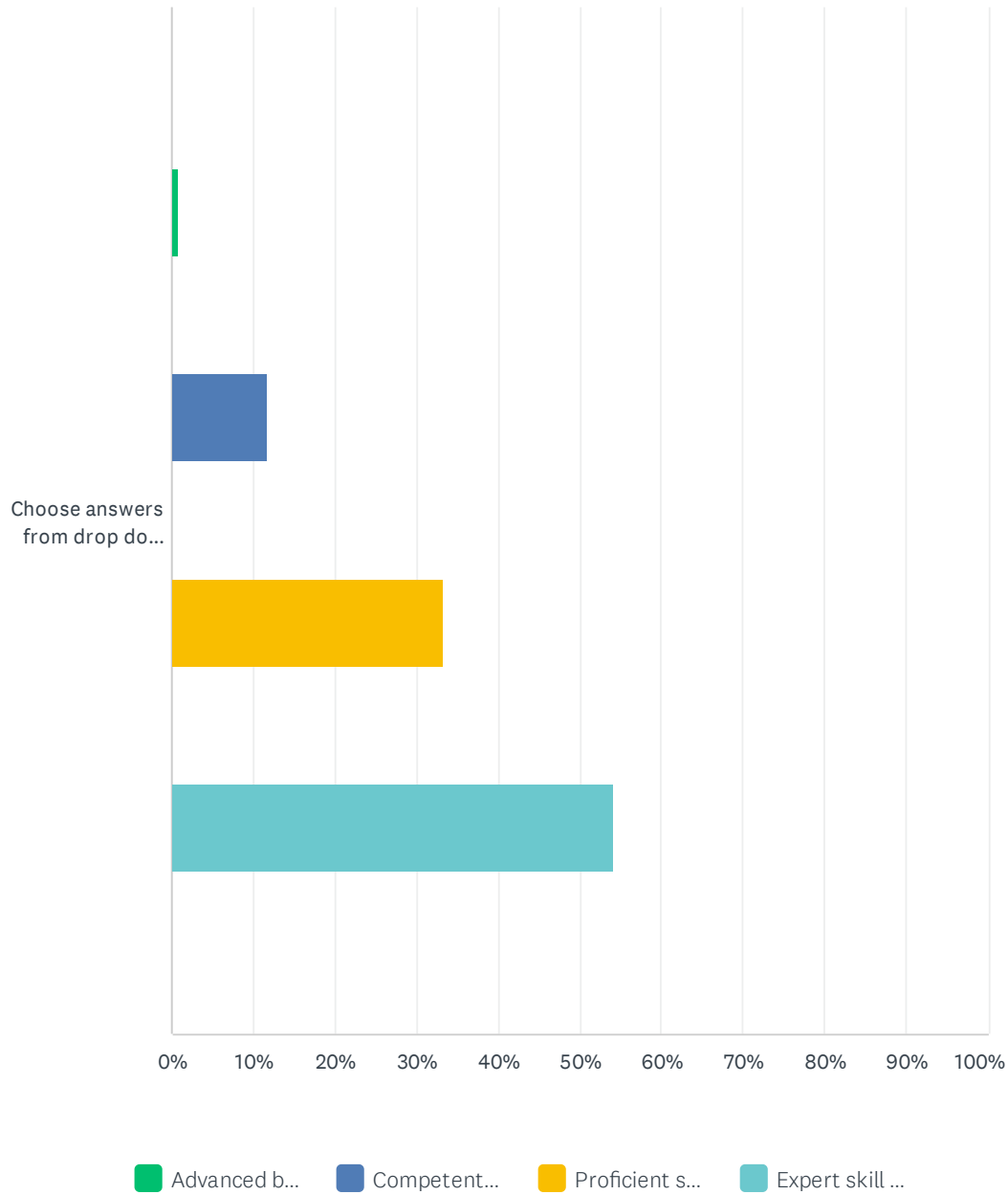
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.59% 8	39.91% 89	21.97% 49	13.90% 31	20.63% 46	223

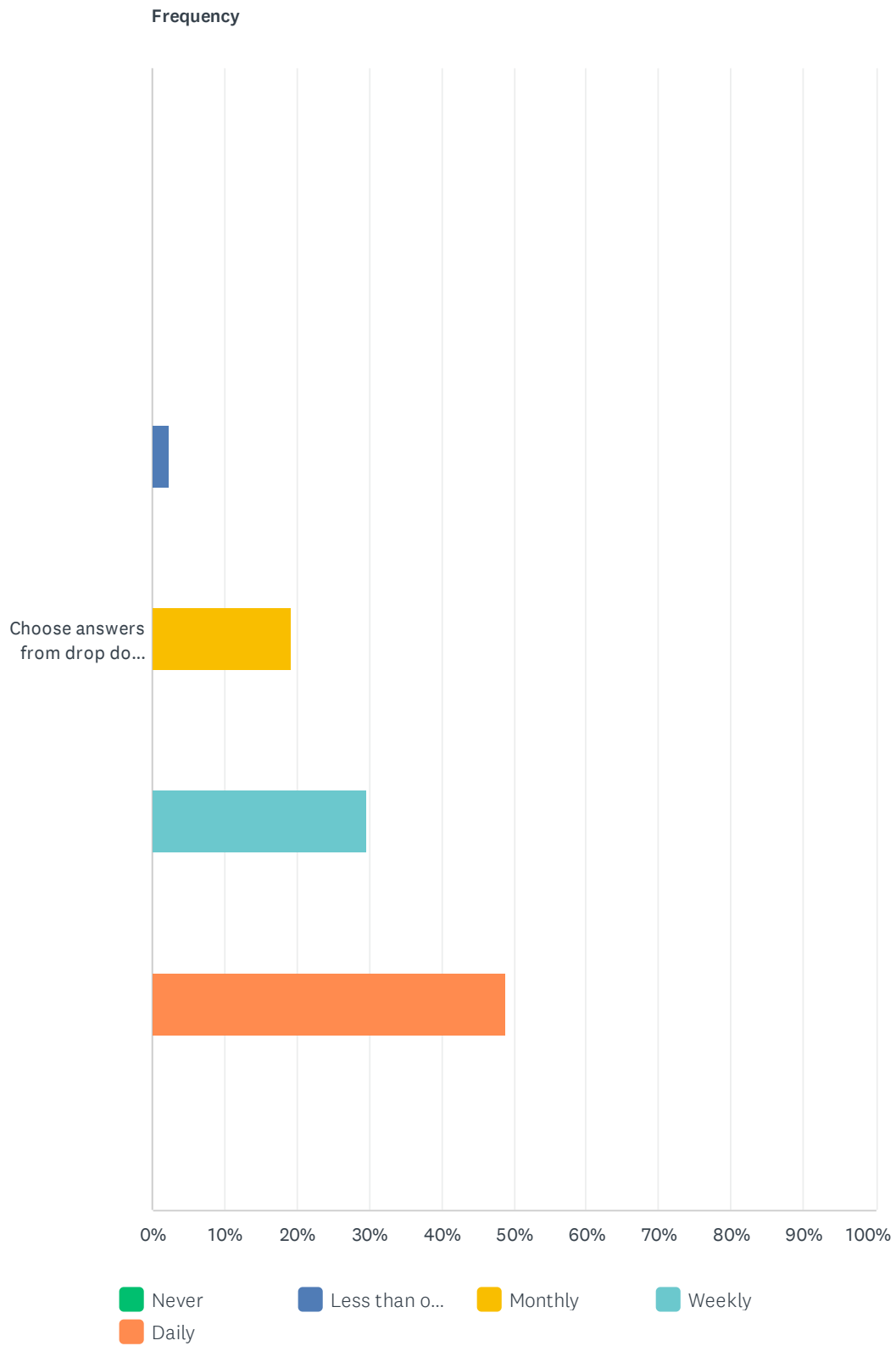
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	0.92% 2	17.97% 39	80.65% 175	217

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	0.93% 2	11.68% 25	33.18% 71	54.21% 116	214

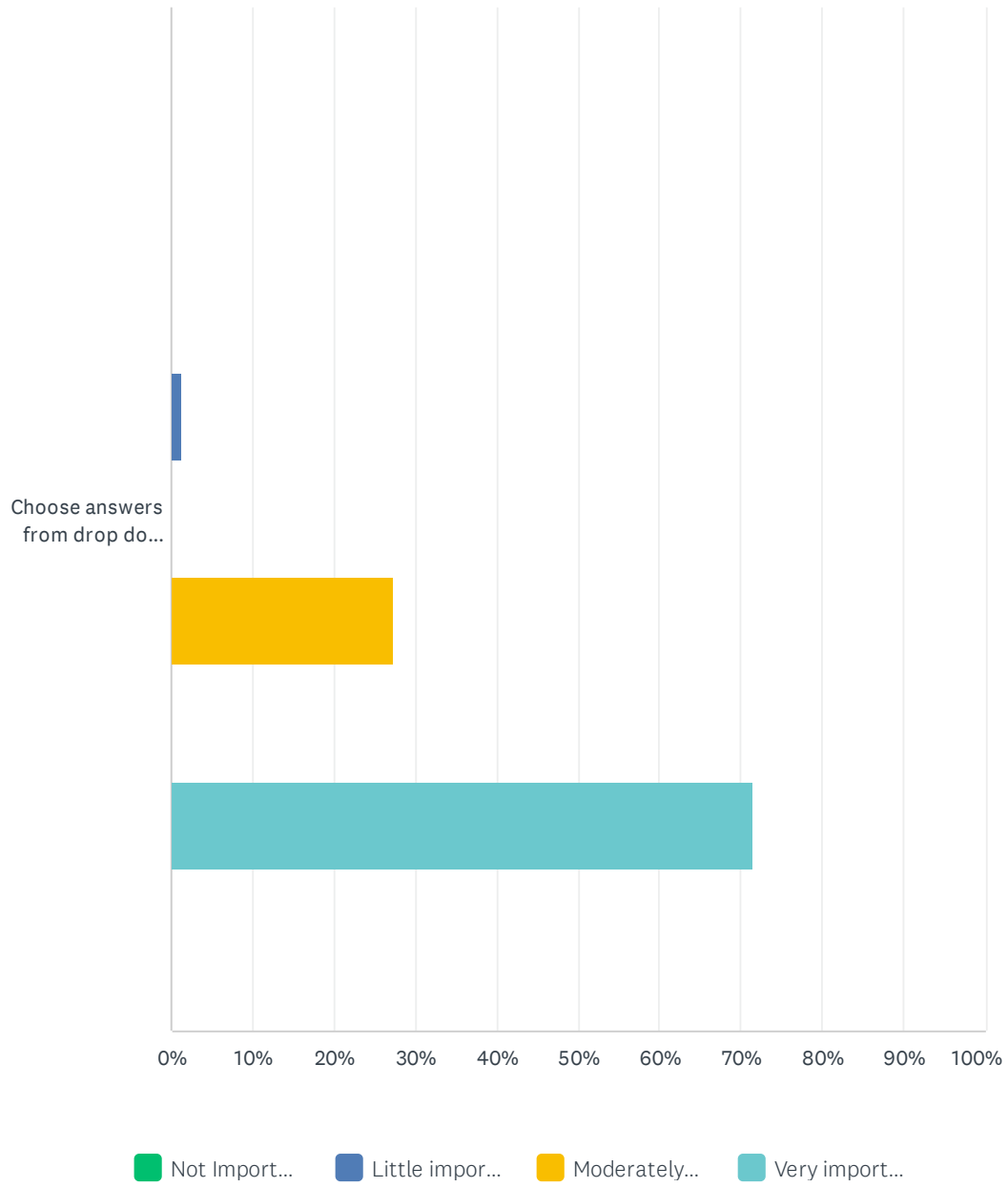
Q178 6.2.3 Cervical Sprain/Strain.

Answered: 223 Skipped: 987



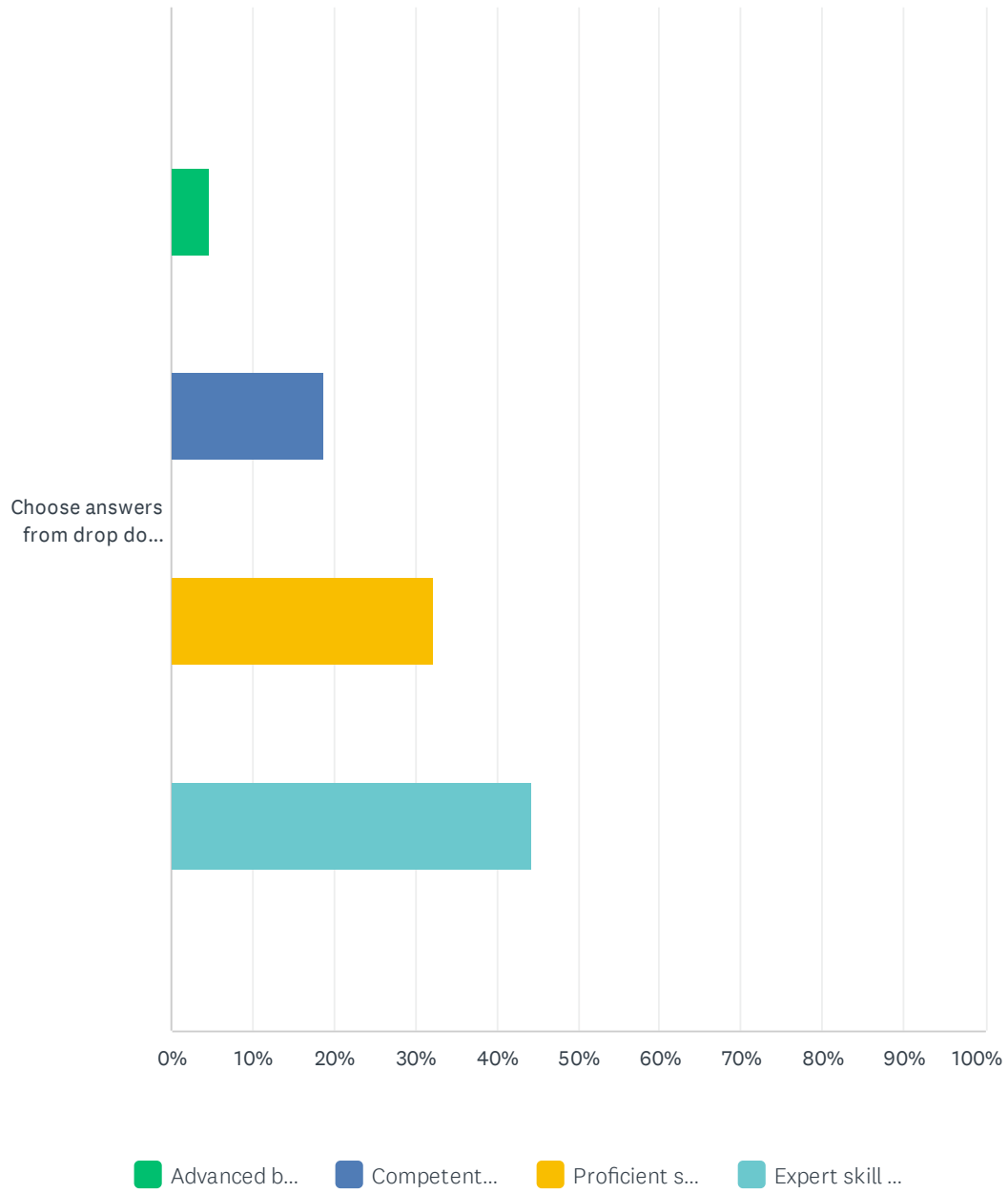
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	2.24% 5	19.28% 43	29.60% 66	48.88% 109	223

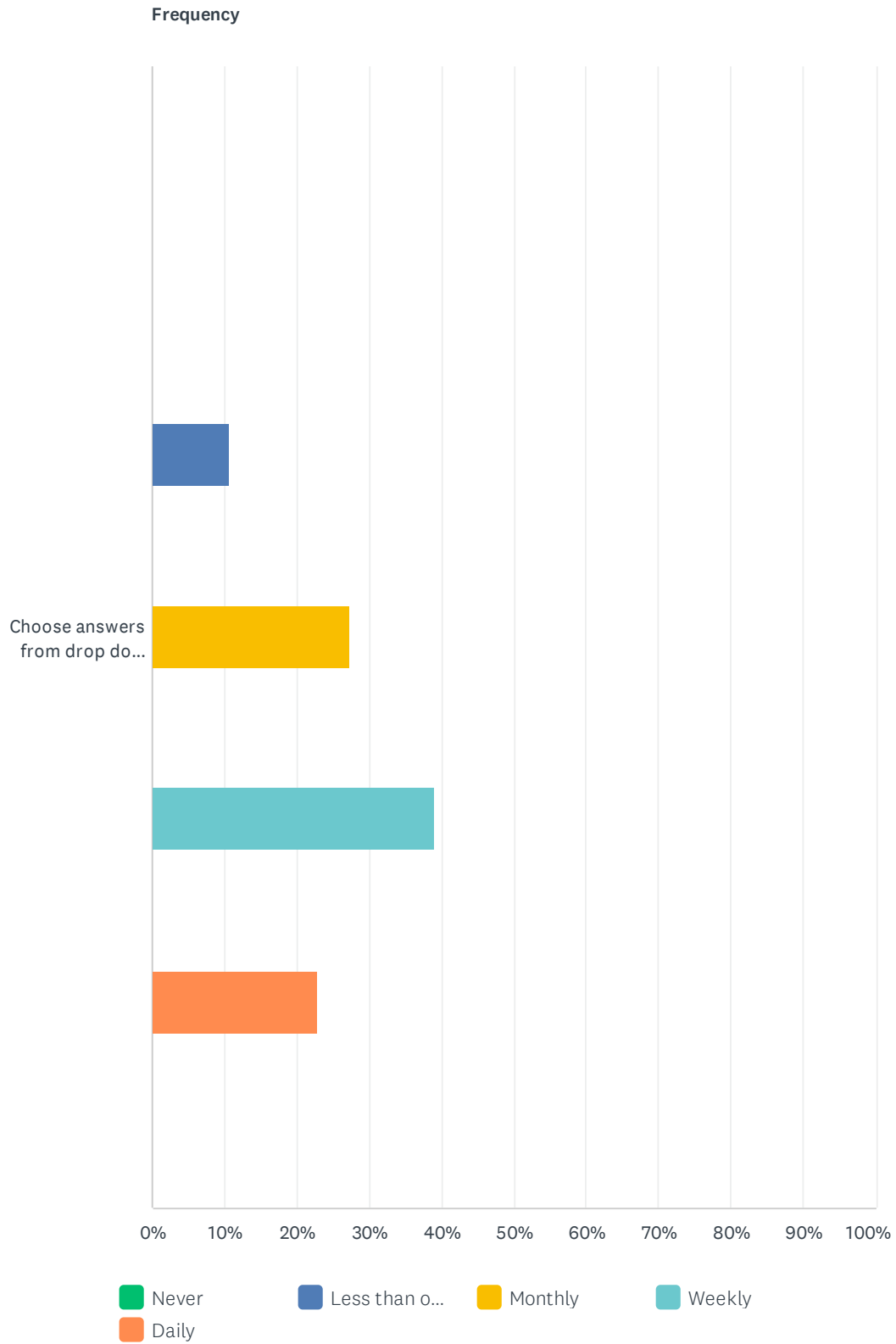
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.38% 3	27.19% 59	71.43% 155	217

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.67% 10	18.69% 40	32.24% 69	44.39% 95	214

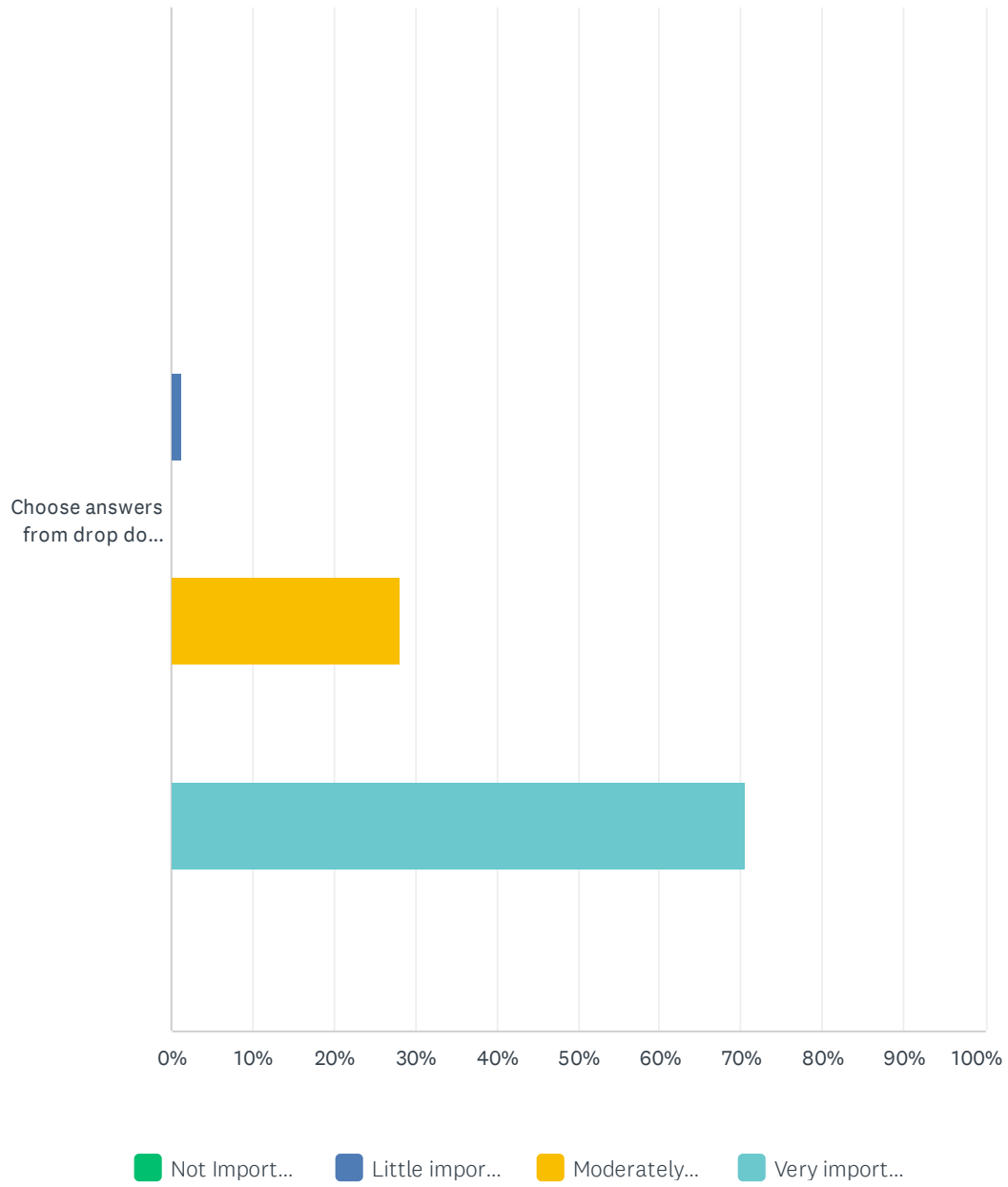
Q179 6.2.4 Cervicogenic Headache.

Answered: 223 Skipped: 987



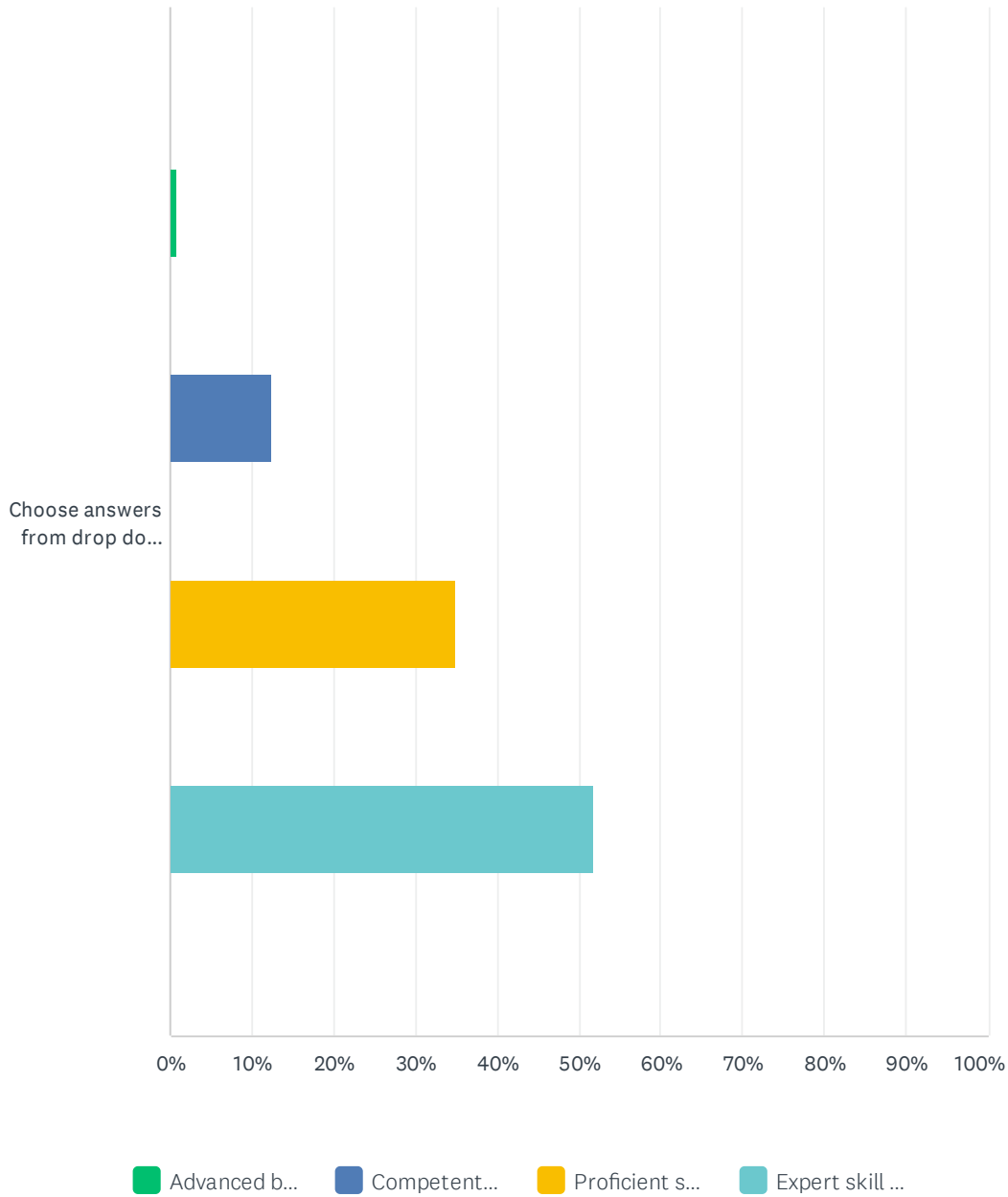
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	10.76% 24	27.35% 61	39.01% 87	22.87% 51	223

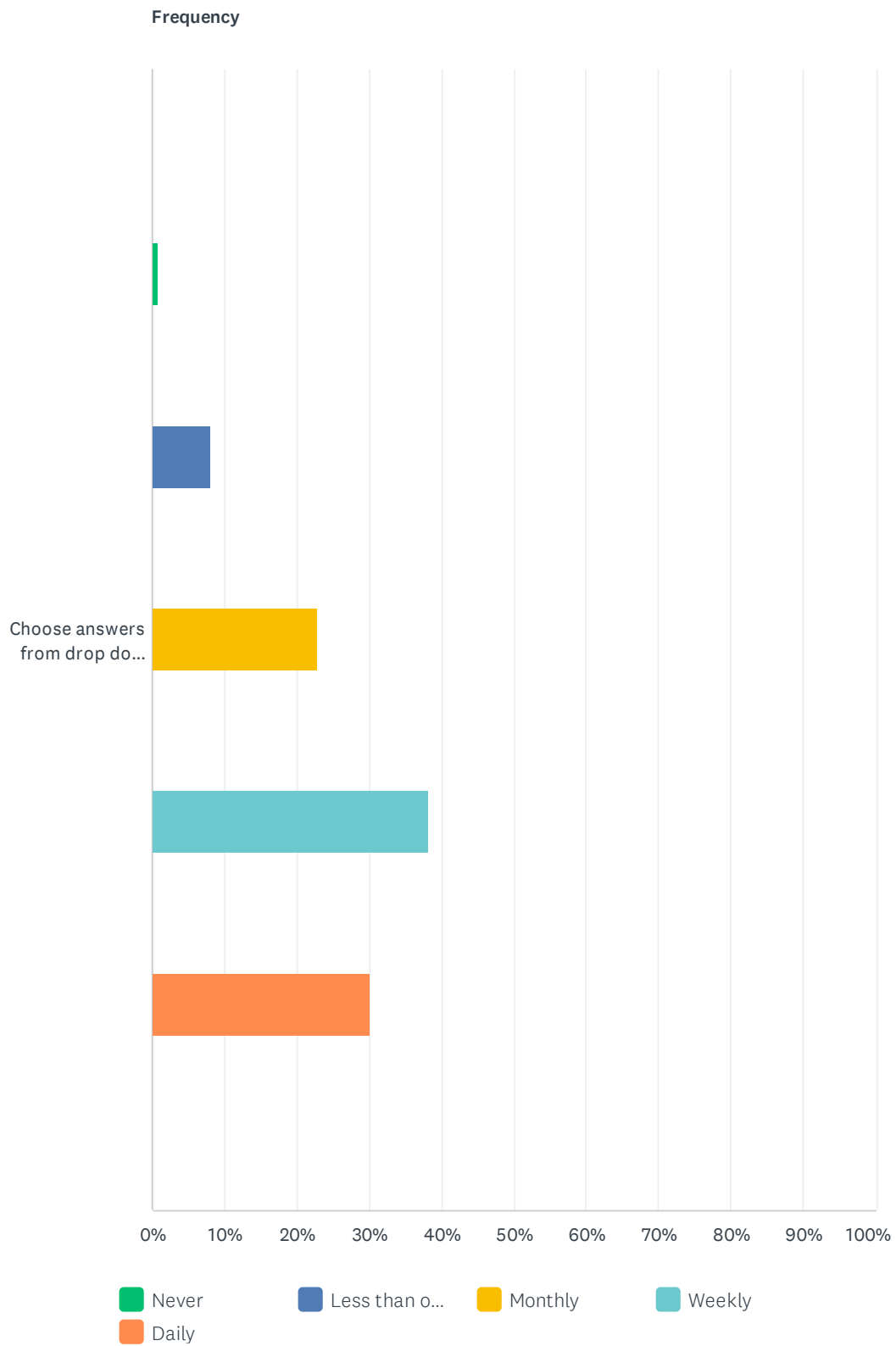
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.38% 3	28.11% 61	70.51% 153	217

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	0.94% 2	12.26% 26	34.91% 74	51.89% 110	212

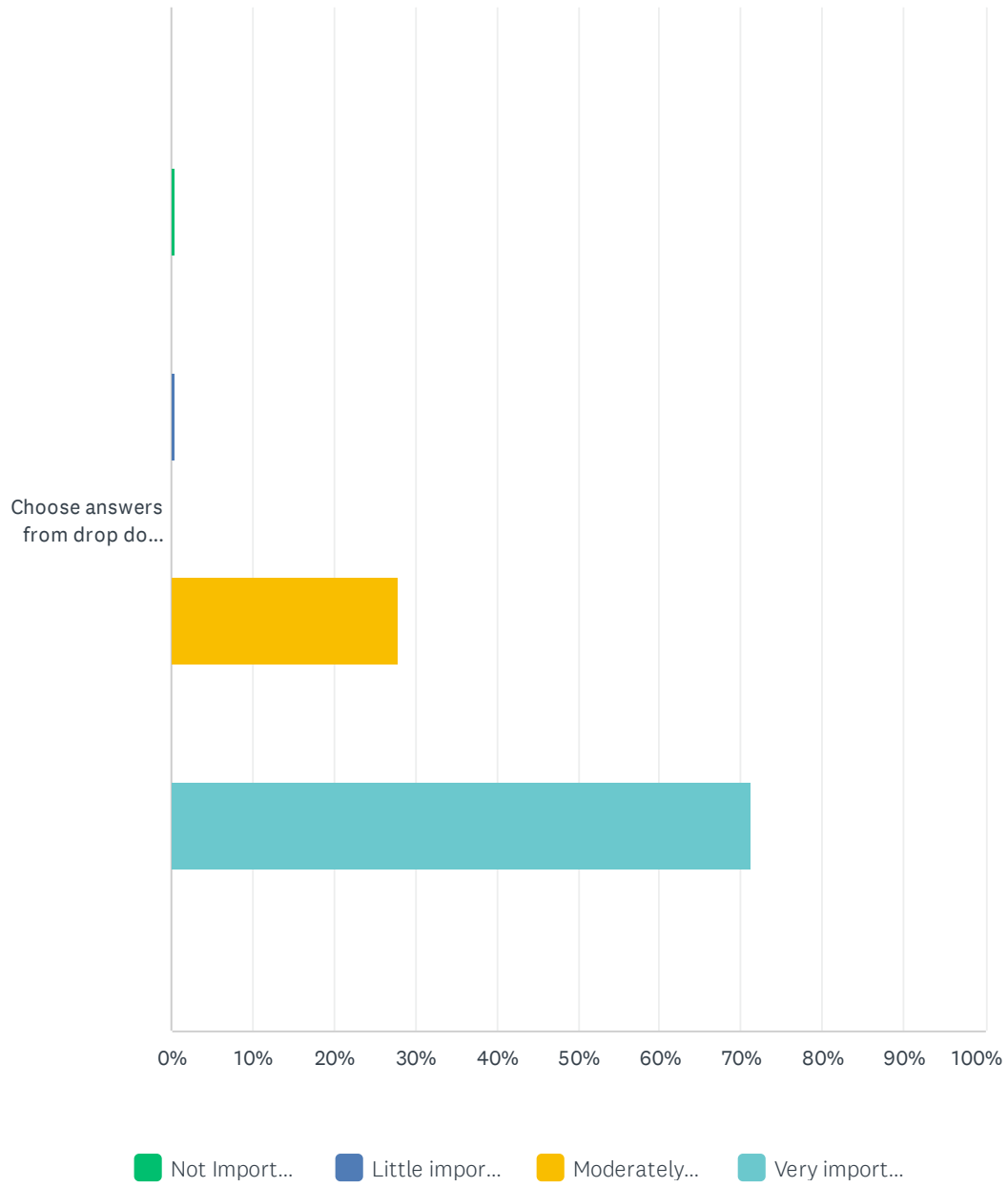
Q180 6.2.5 Chronic Pain Syndromes (e.g., central sensitization and/or nociplastic pain, other persistent pain conditions).

Answered: 223 Skipped: 987



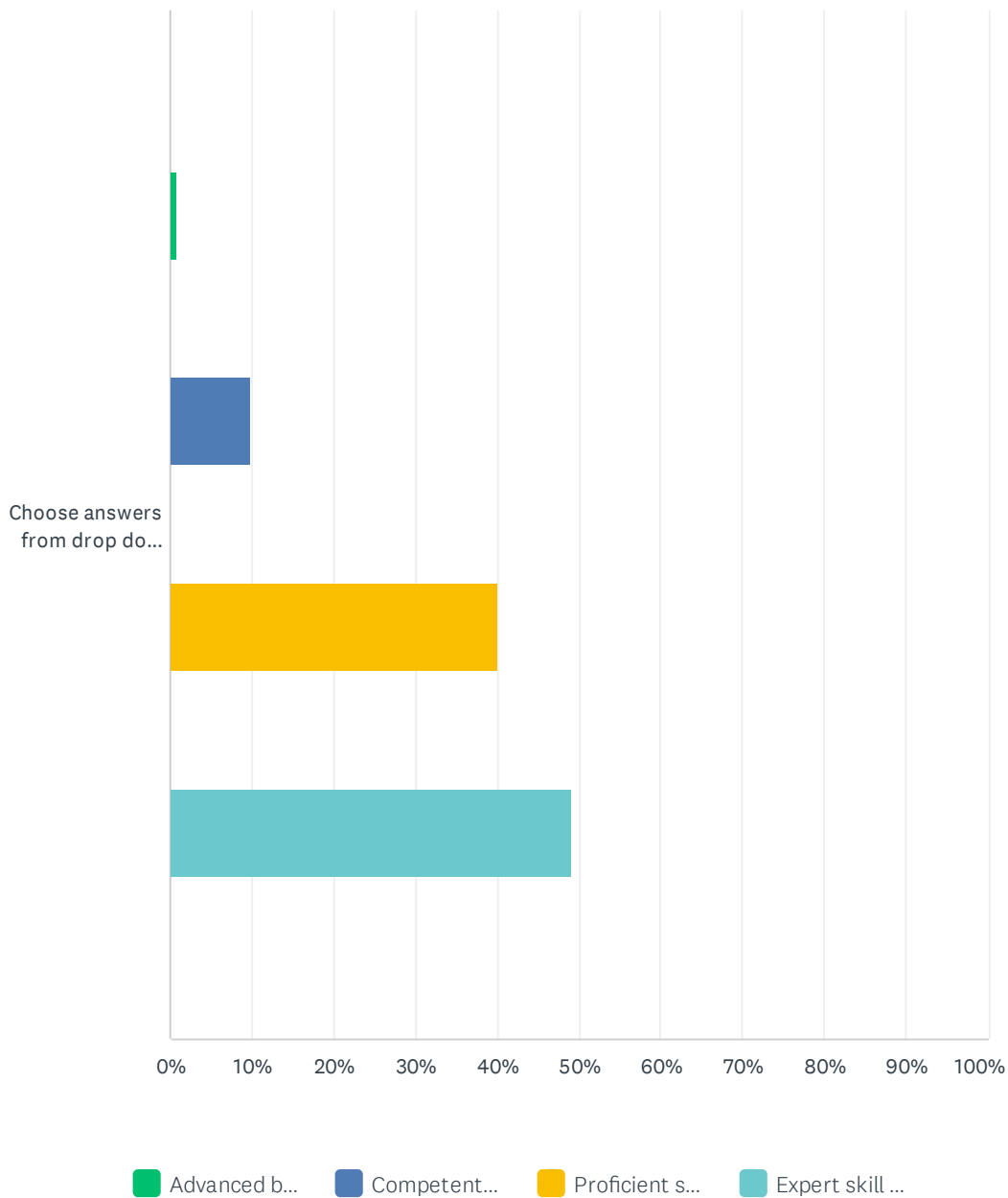
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.90% 2	8.07% 18	22.87% 51	38.12% 85	30.04% 67	223

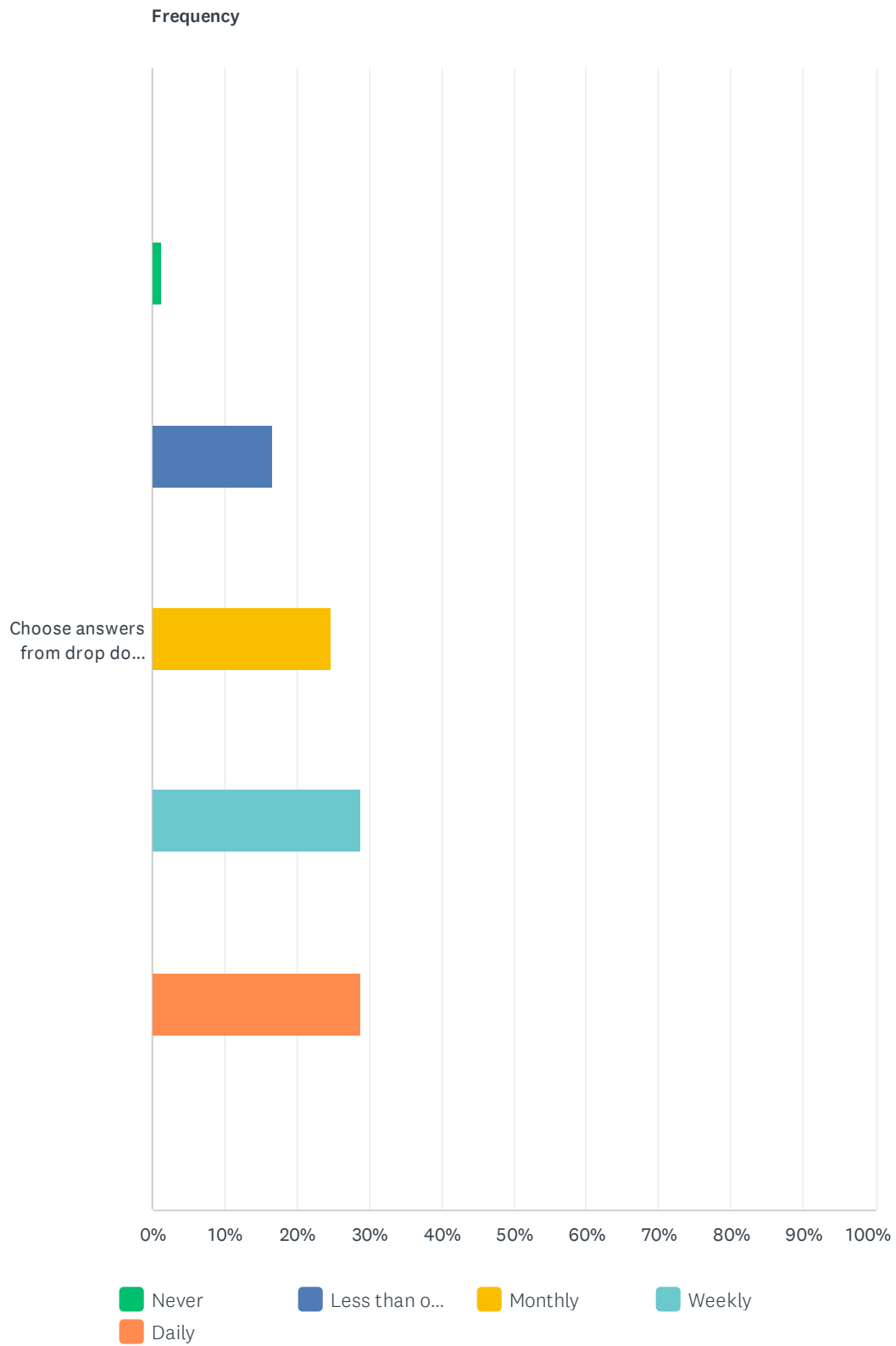
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.47% 1	0.47% 1	27.91% 60	71.16% 153	215

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	0.94% 2	9.91% 21	40.09% 85	49.06% 104	212

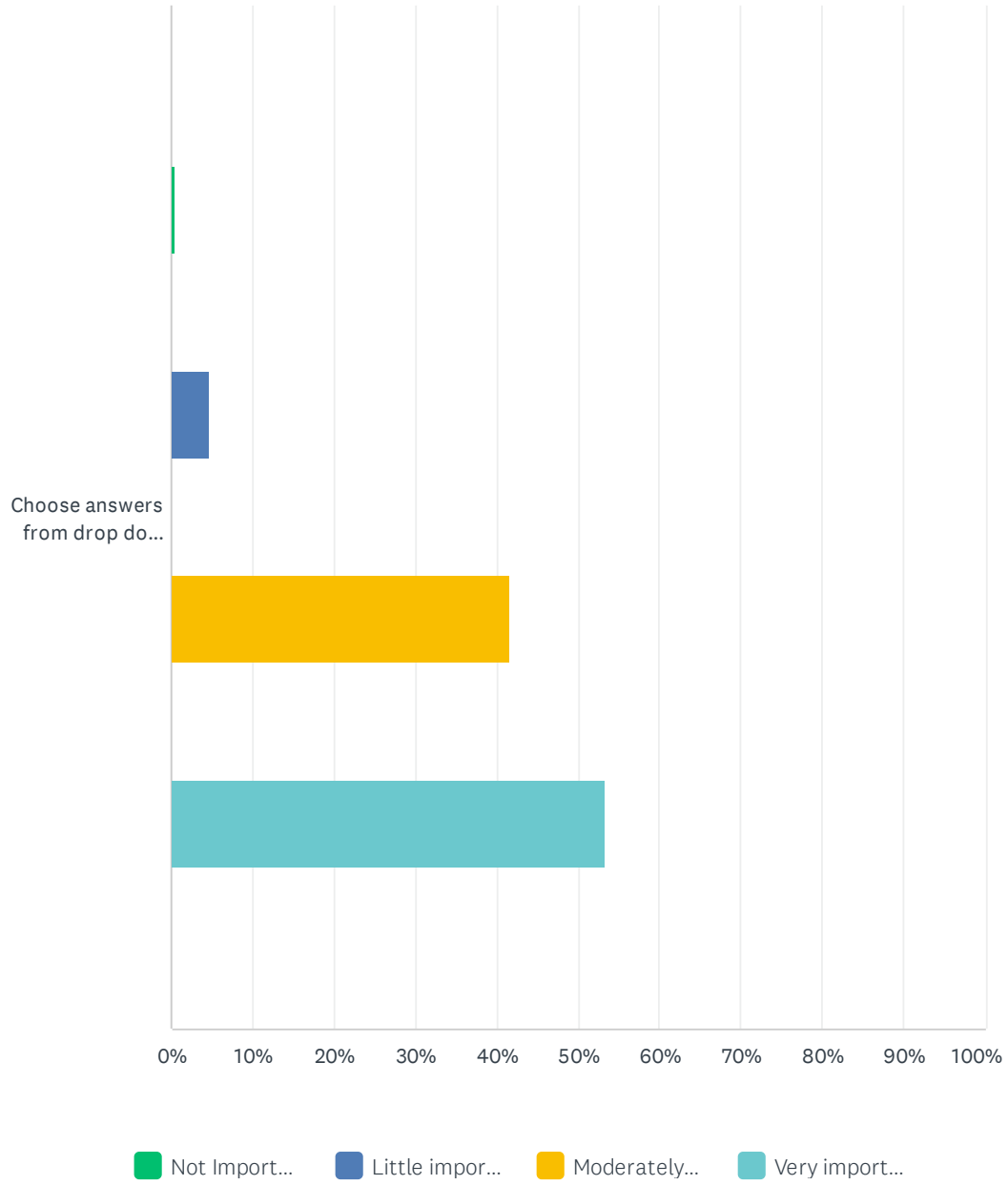
Q181 6.2.6 Other Disorders of Cervical Spine.

Answered: 223 Skipped: 987



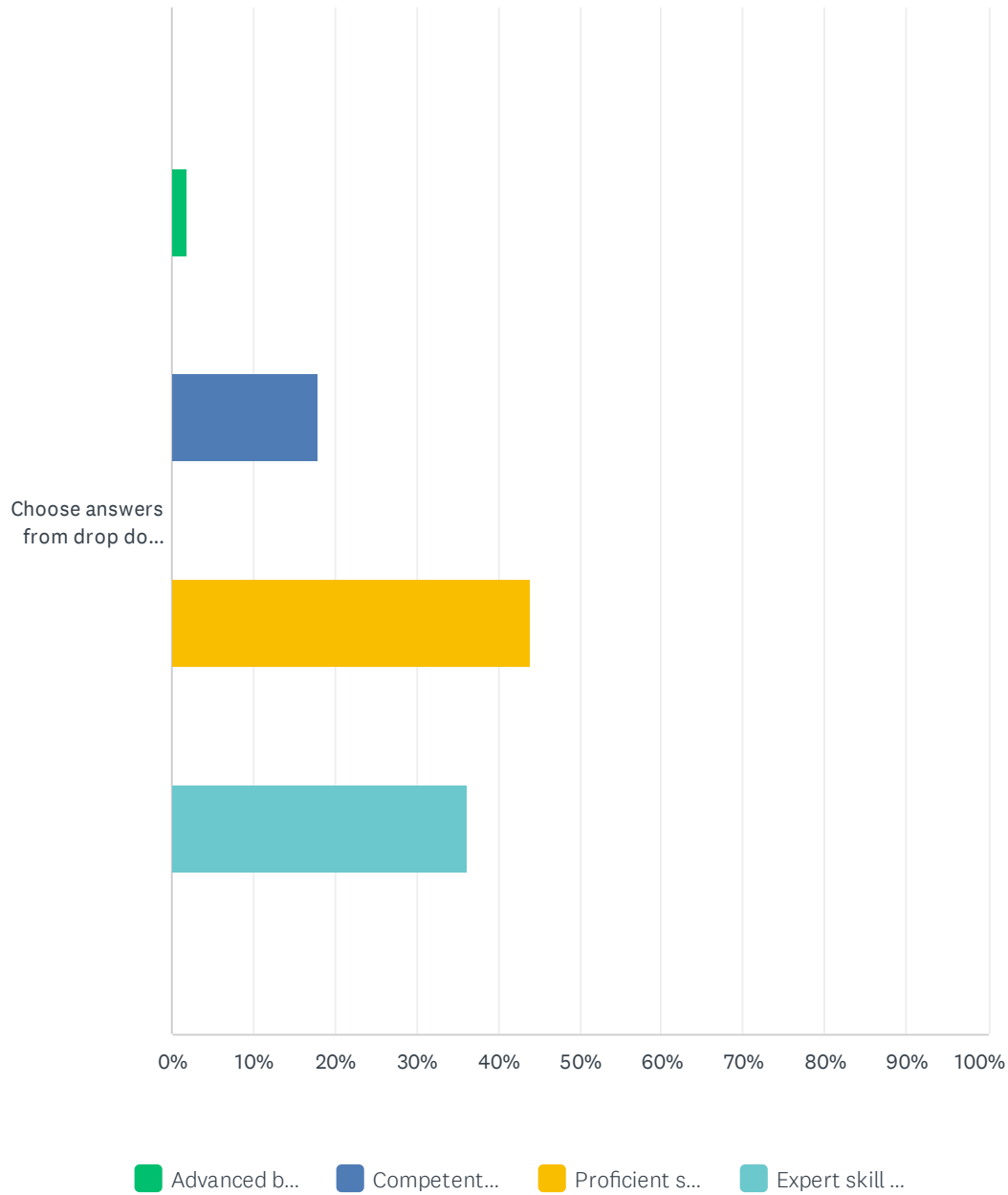
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.35% 3	16.59% 37	24.66% 55	28.70% 64	28.70% 64	223

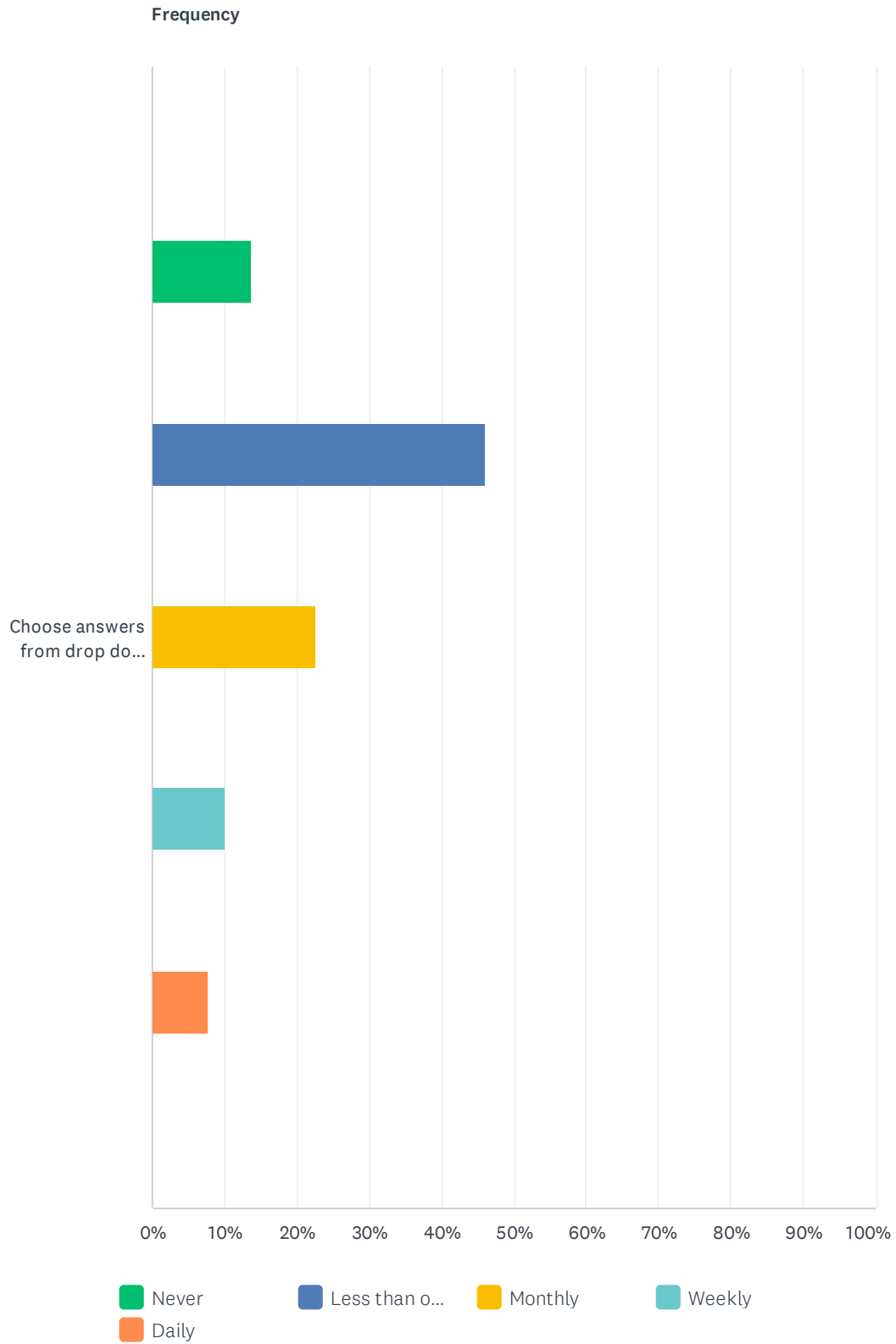
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	4.63% 10	41.67% 90	53.24% 115	216

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.89% 4	17.92% 38	43.87% 93	36.32% 77	212

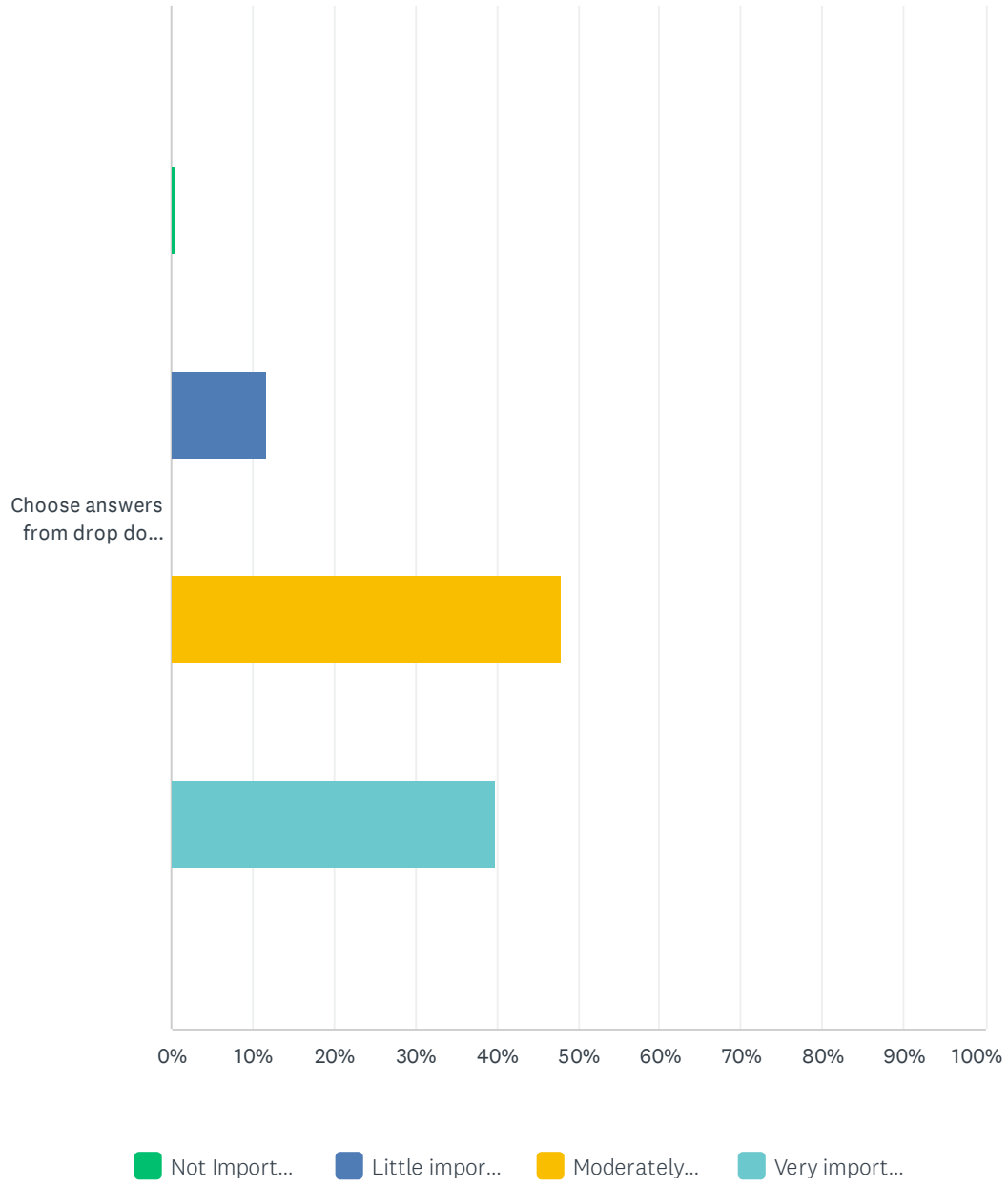
Q182 6.2.7 Temporomandibular Dysfunction.

Answered: 221 Skipped: 989



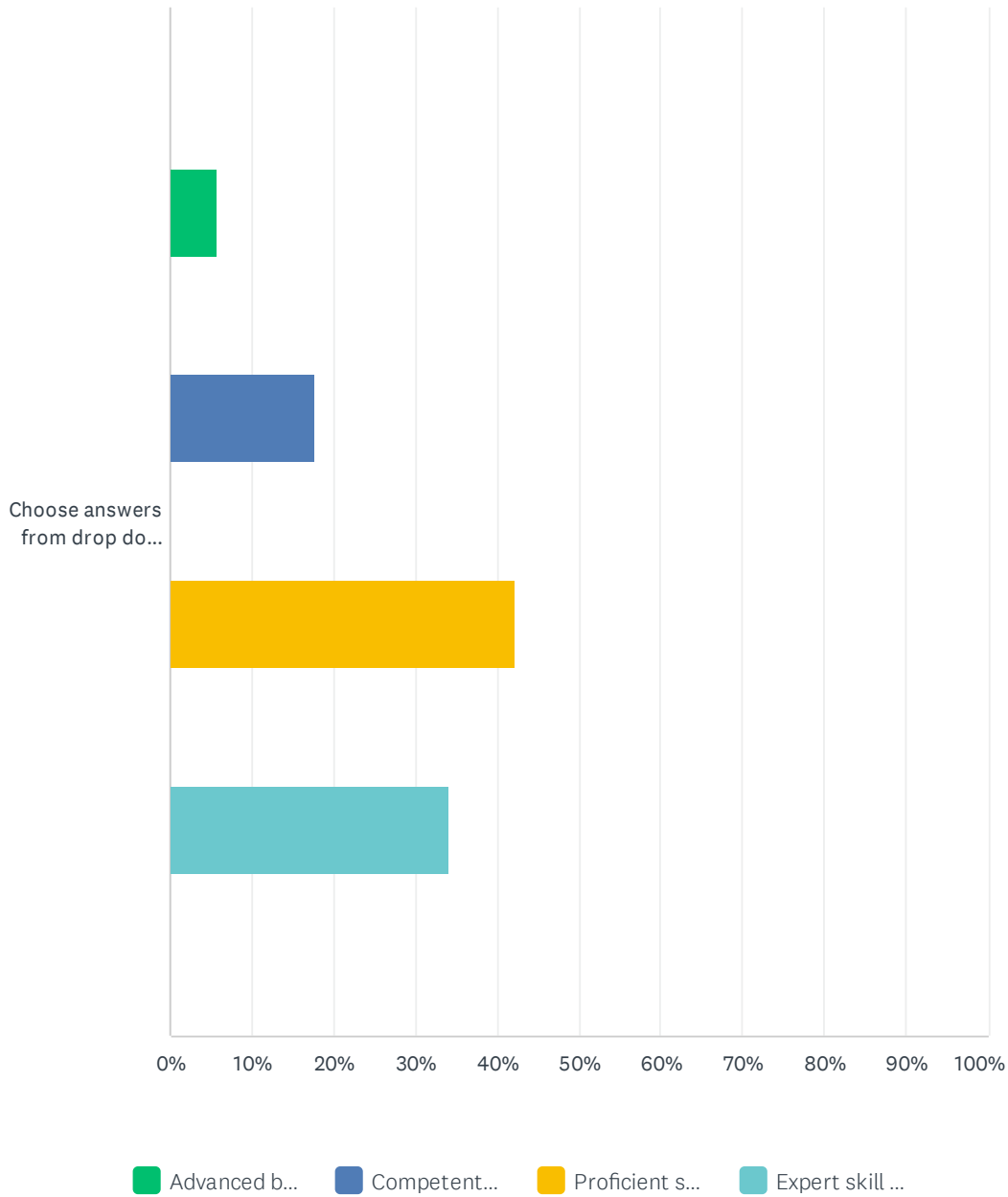
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	13.57% 30	46.15% 102	22.62% 50	9.95% 22	7.69% 17	221

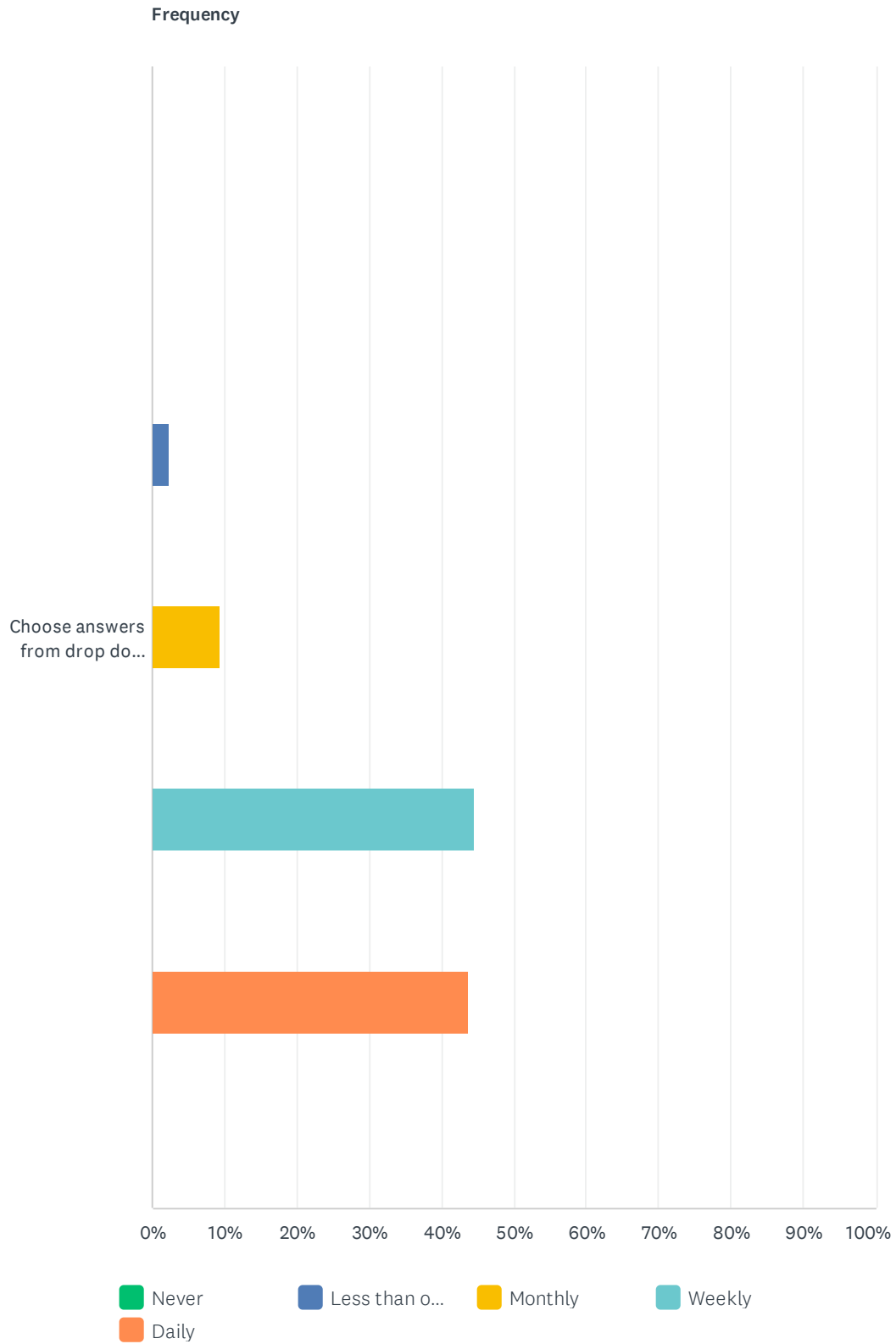
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.47% 1	11.74% 25	47.89% 102	39.91% 85	213

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.77% 12	17.79% 37	42.31% 88	34.13% 71	208

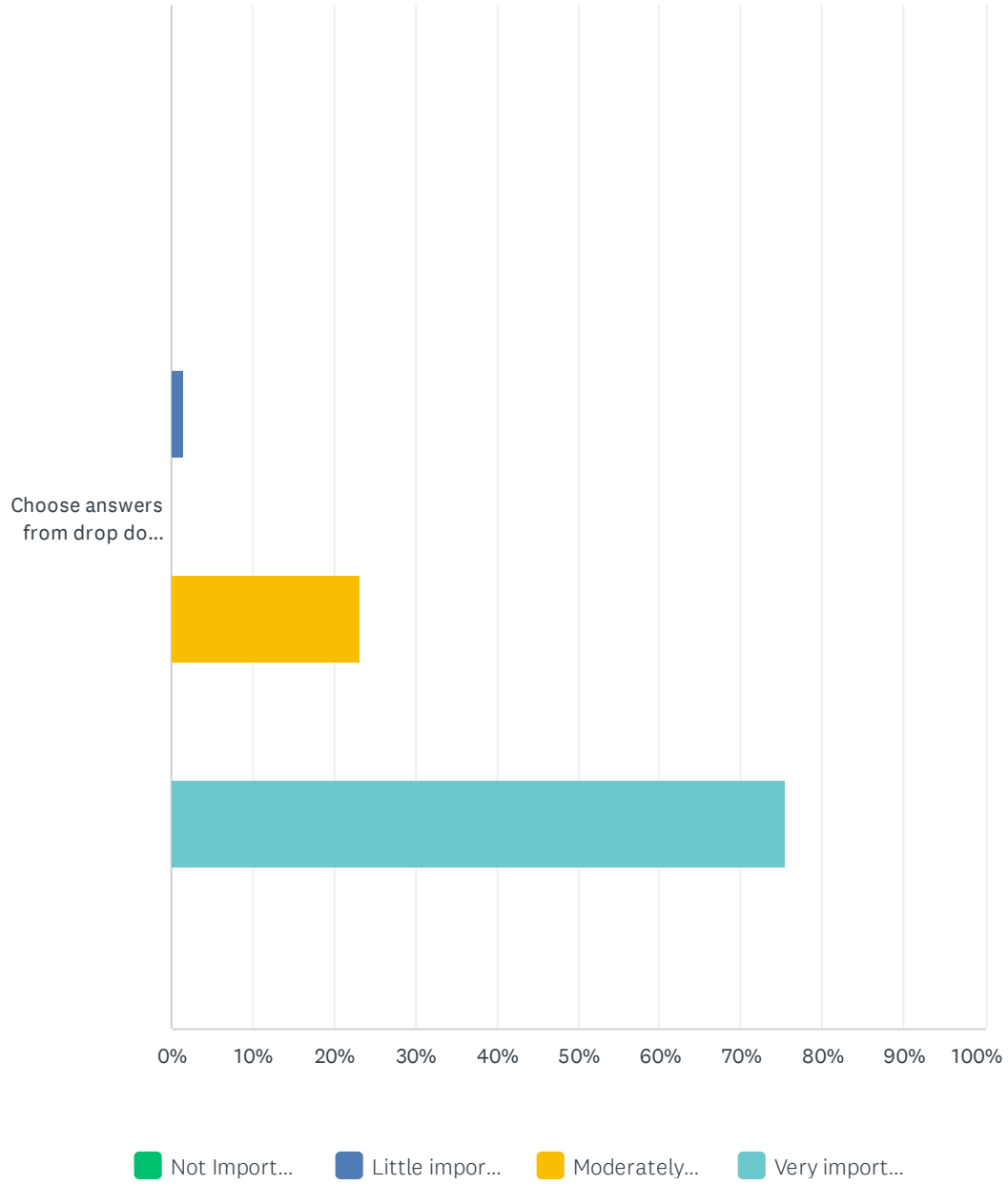
Q183 6.2.8 Disorders of the Hip.

Answered: 222 Skipped: 988



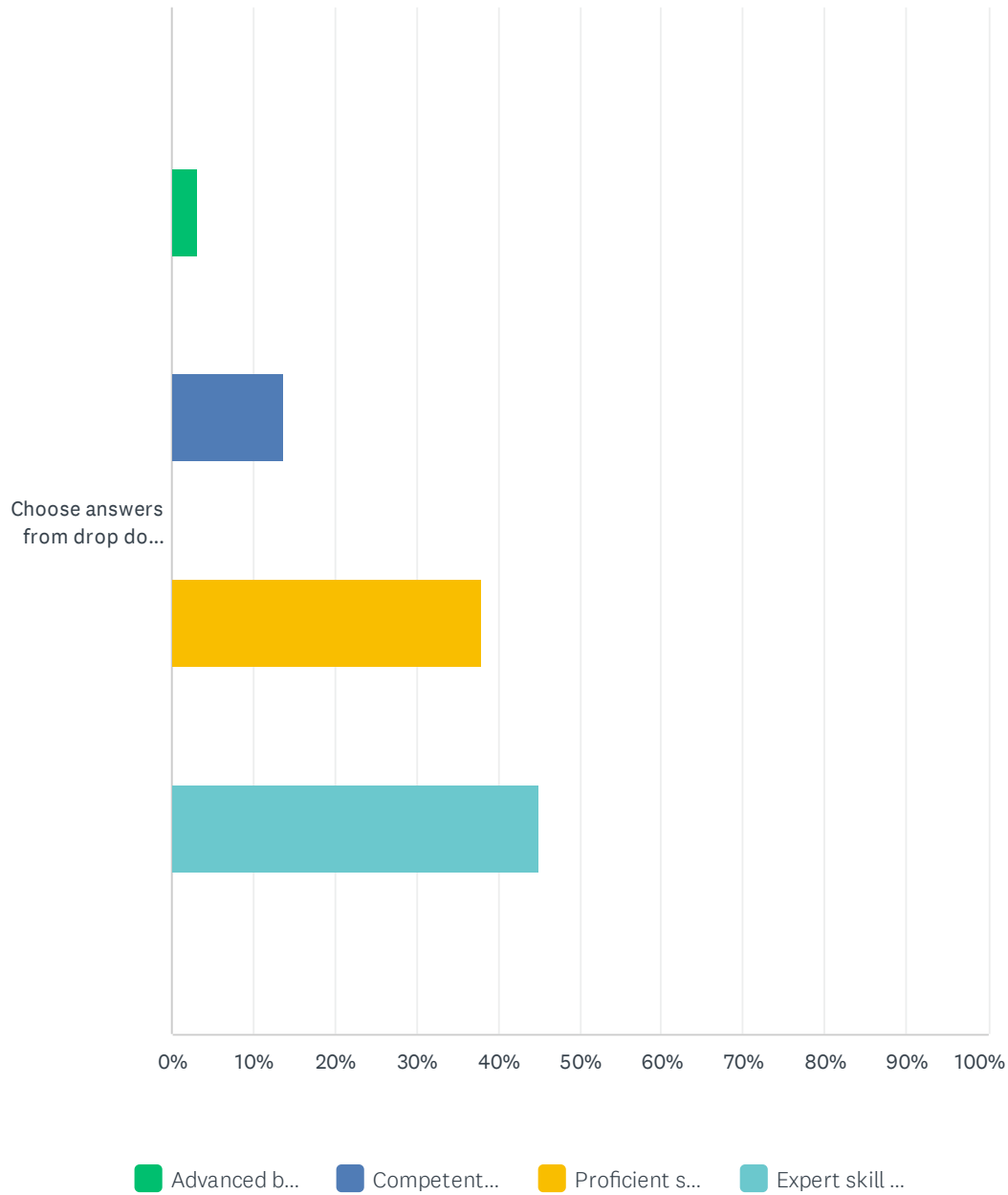
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	2.25% 5	9.46% 21	44.59% 99	43.69% 97	222

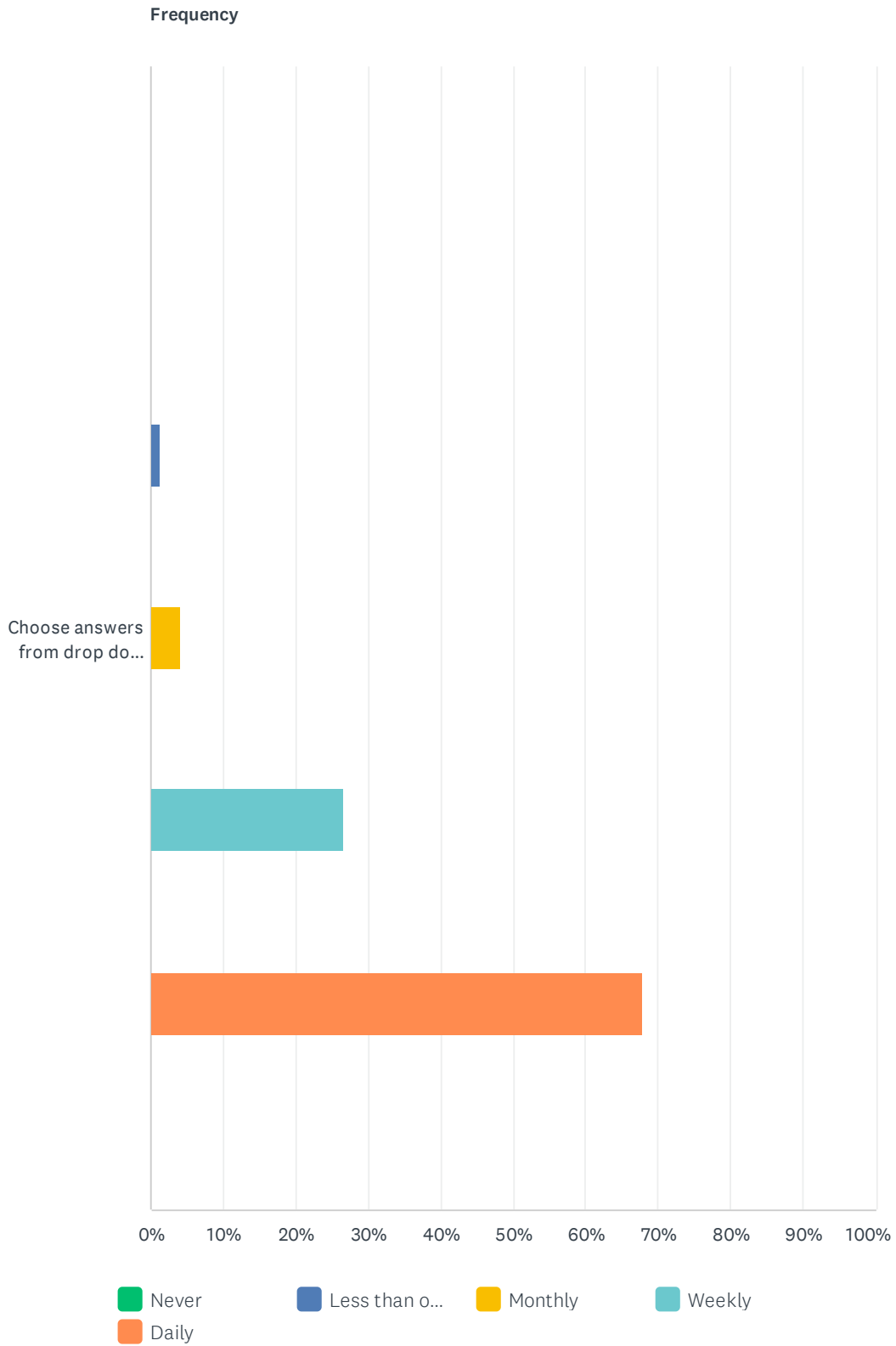
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.39% 3	23.15% 50	75.46% 163	216

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.29% 7	13.62% 29	38.03% 81	45.07% 96	213

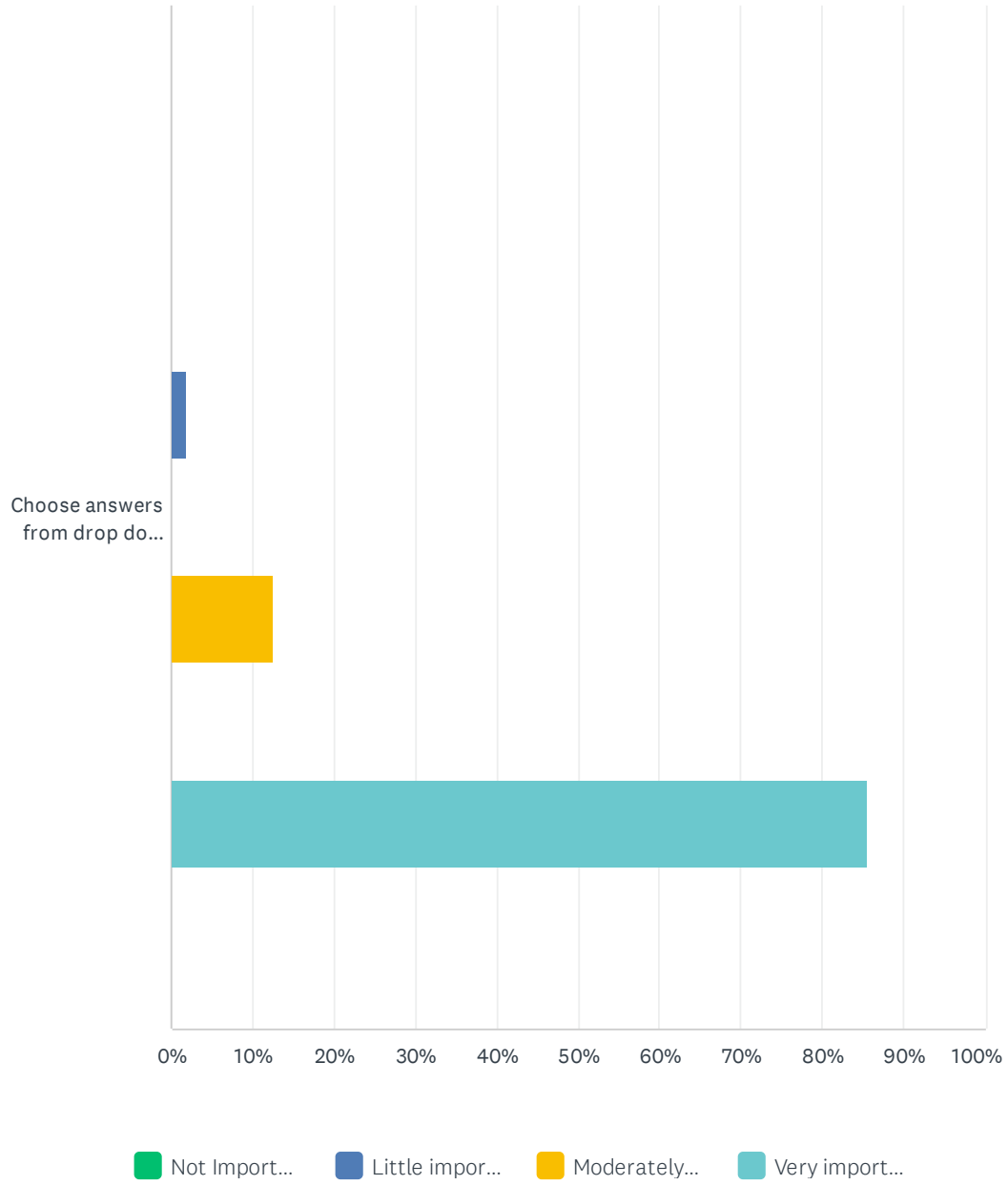
Q184 6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion, herniation).

Answered: 222 Skipped: 988



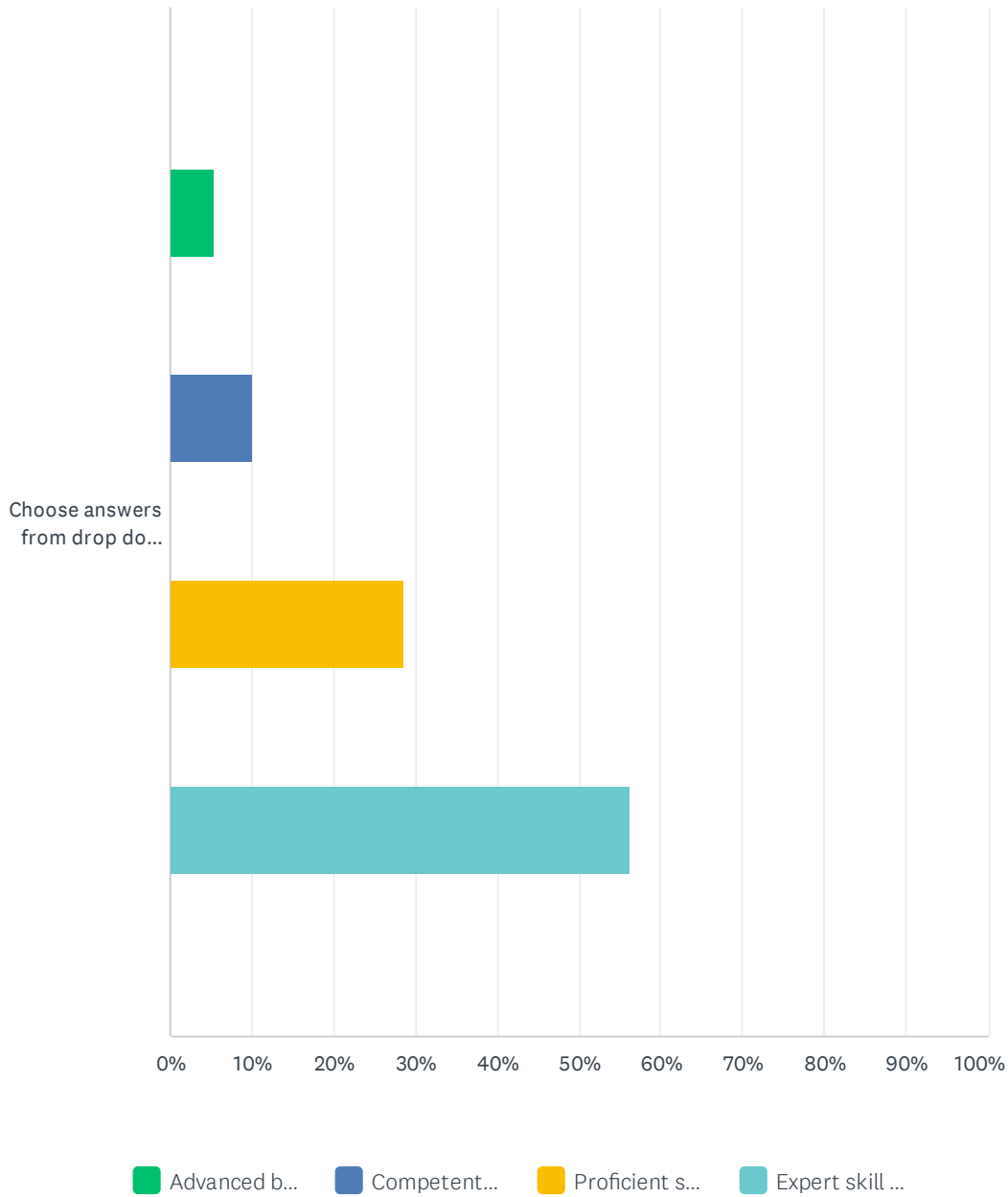
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.36% 3	4.07% 9	26.70% 59	67.87% 150	221

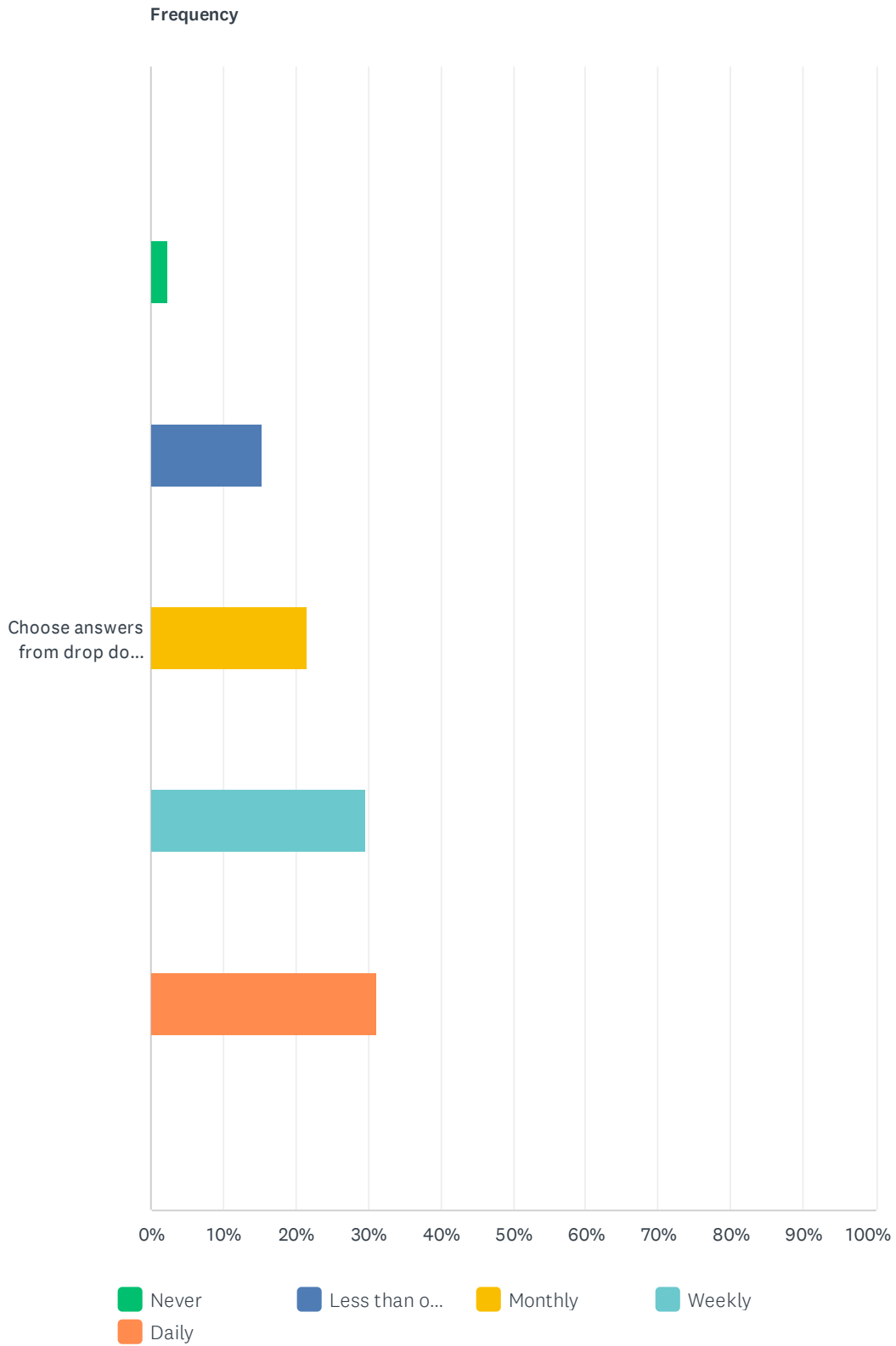
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	1.86% 4	12.56% 27	85.58% 184	215

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.24% 11	10.00% 21	28.57% 60	56.19% 118	210

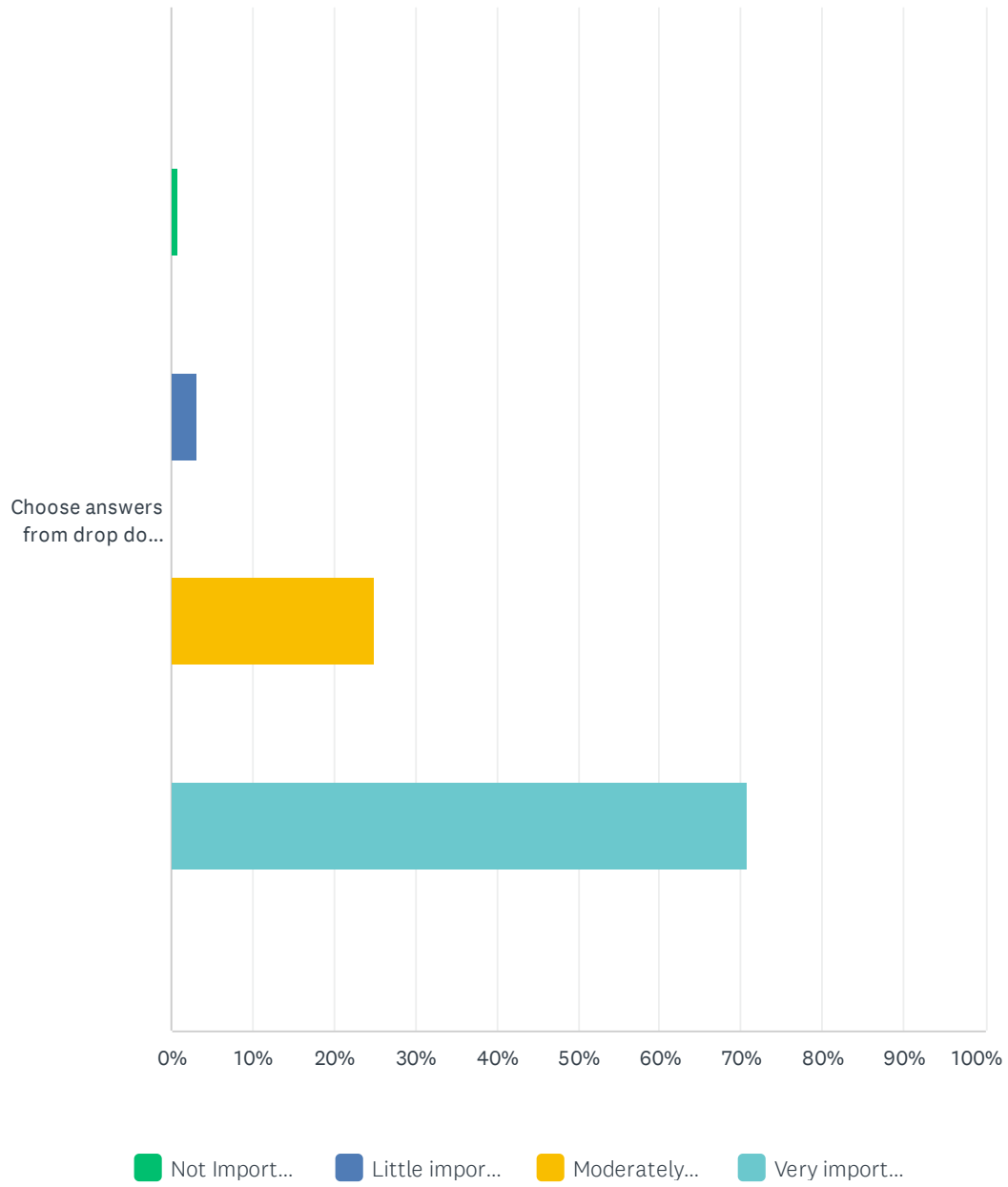
Q185 6.2.10 Lumbar Instability.

Answered: 222 Skipped: 988



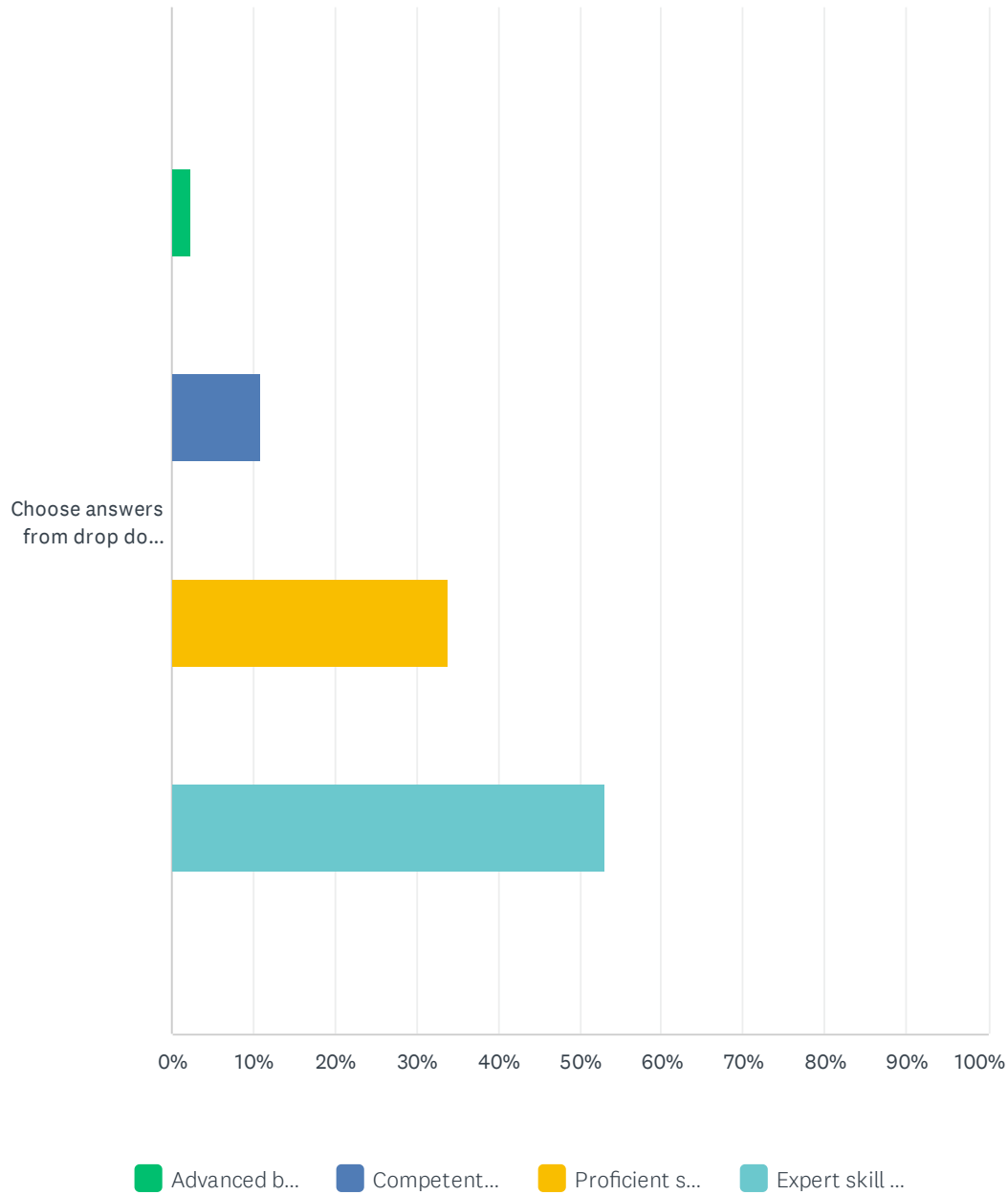
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	2.25% 5	15.32% 34	21.62% 48	29.73% 66	31.08% 69	222

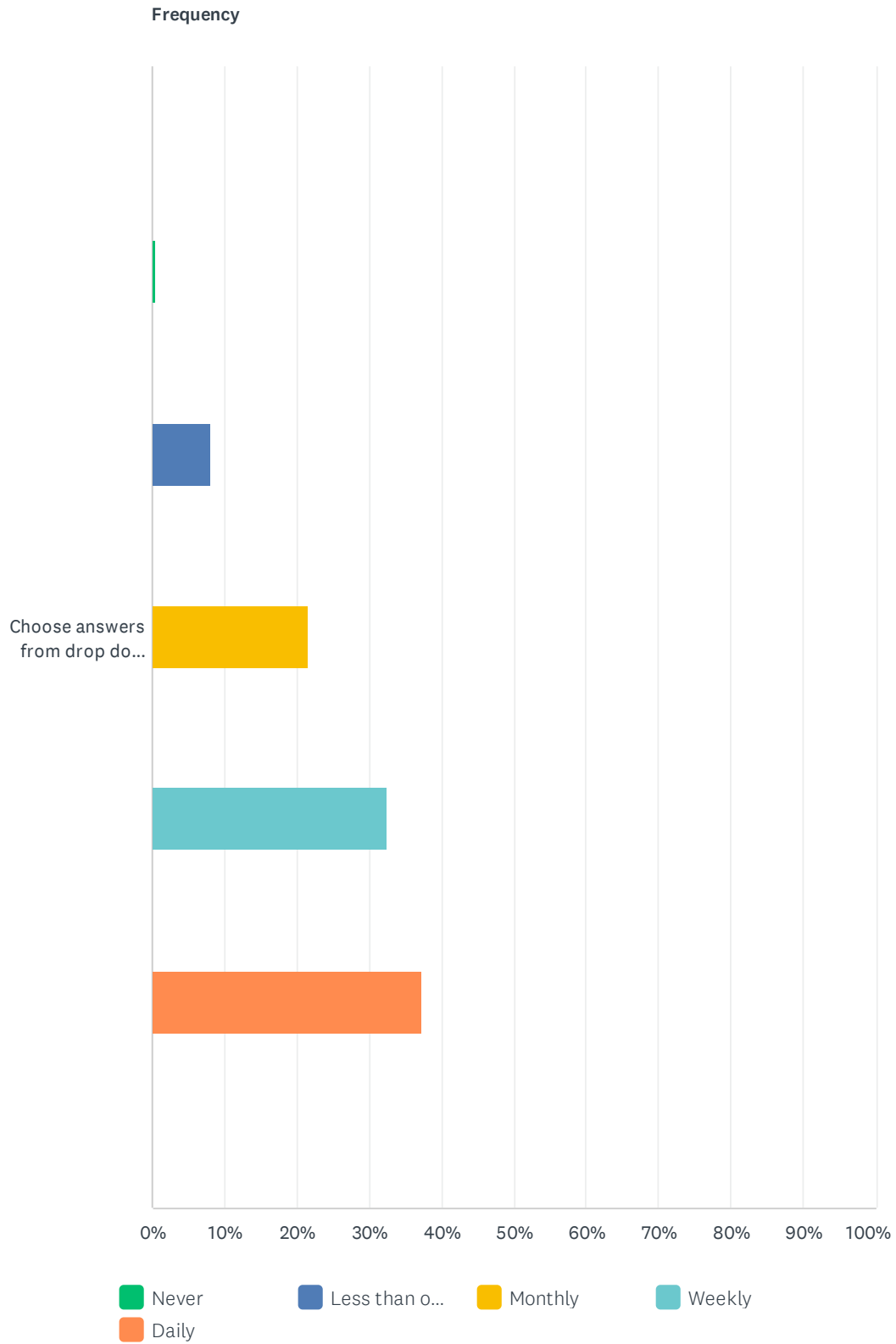
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.93% 2	3.24% 7	25.00% 54	70.83% 153	216

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	2.35% 5	10.80% 23	33.80% 72	53.05% 113	213

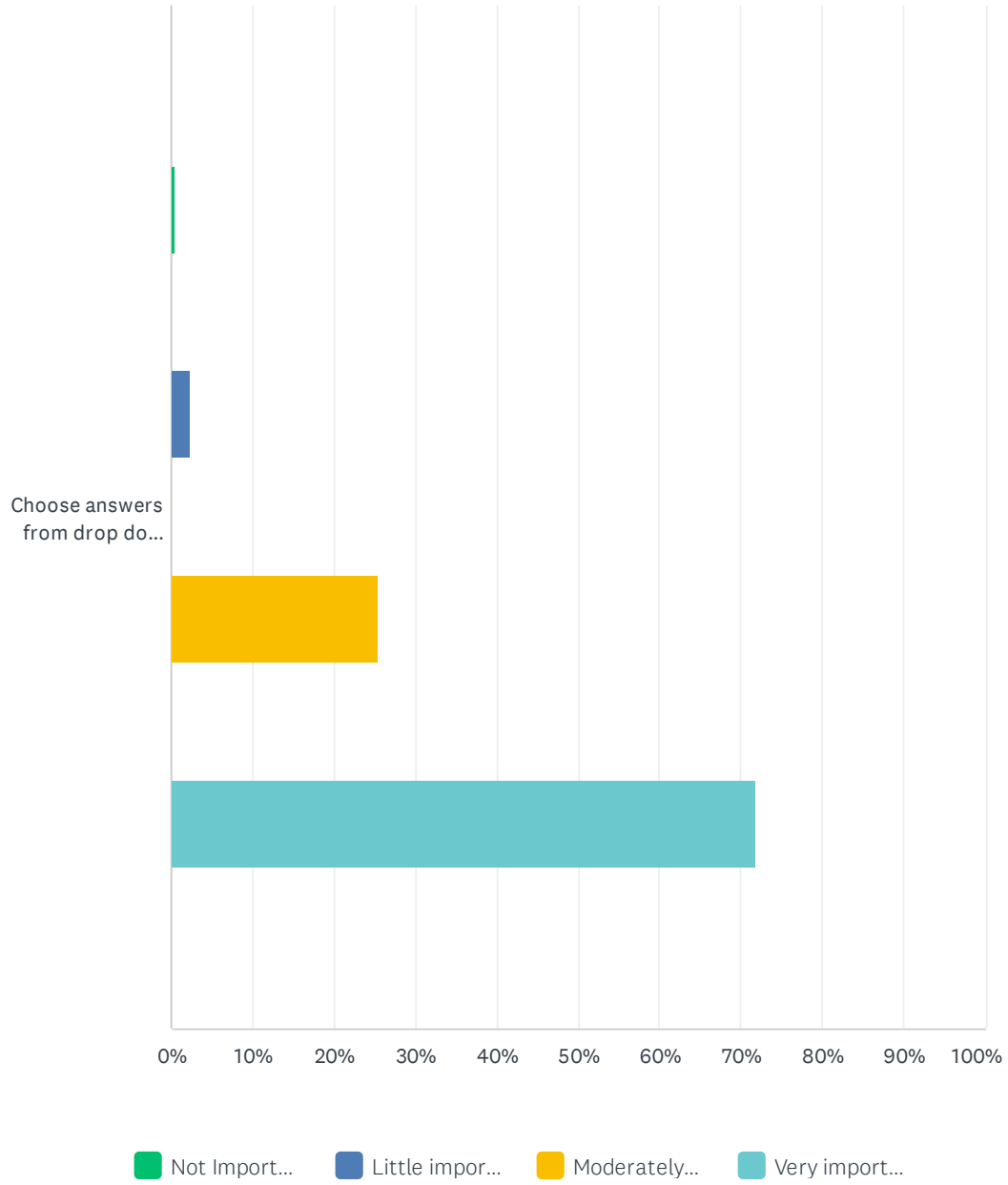
Q186 6.2.11 Lumbar Spondylosis / Spondylolisthesis.

Answered: 222 Skipped: 988



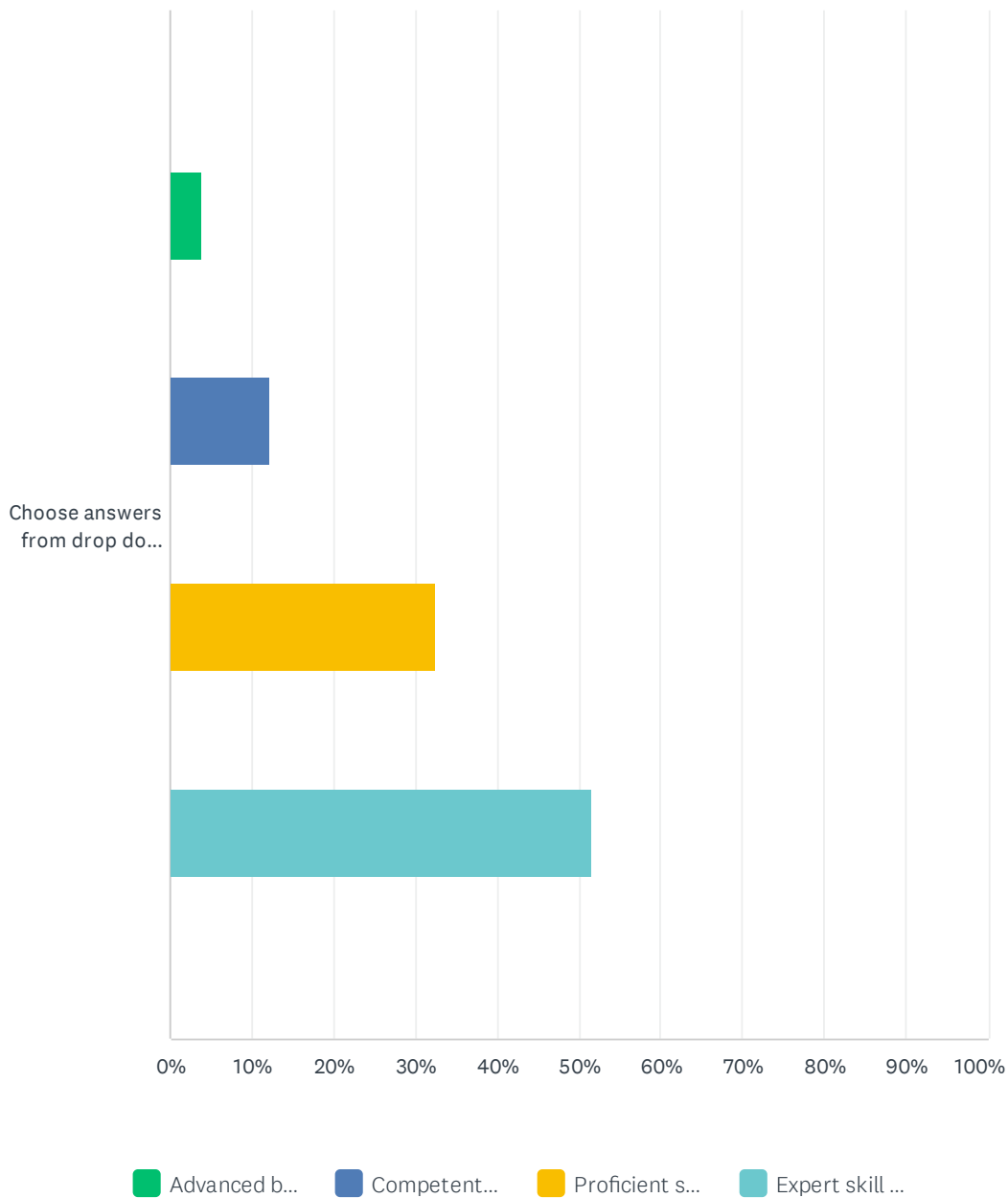
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.45% 1	8.11% 18	21.62% 48	32.43% 72	37.39% 83	222

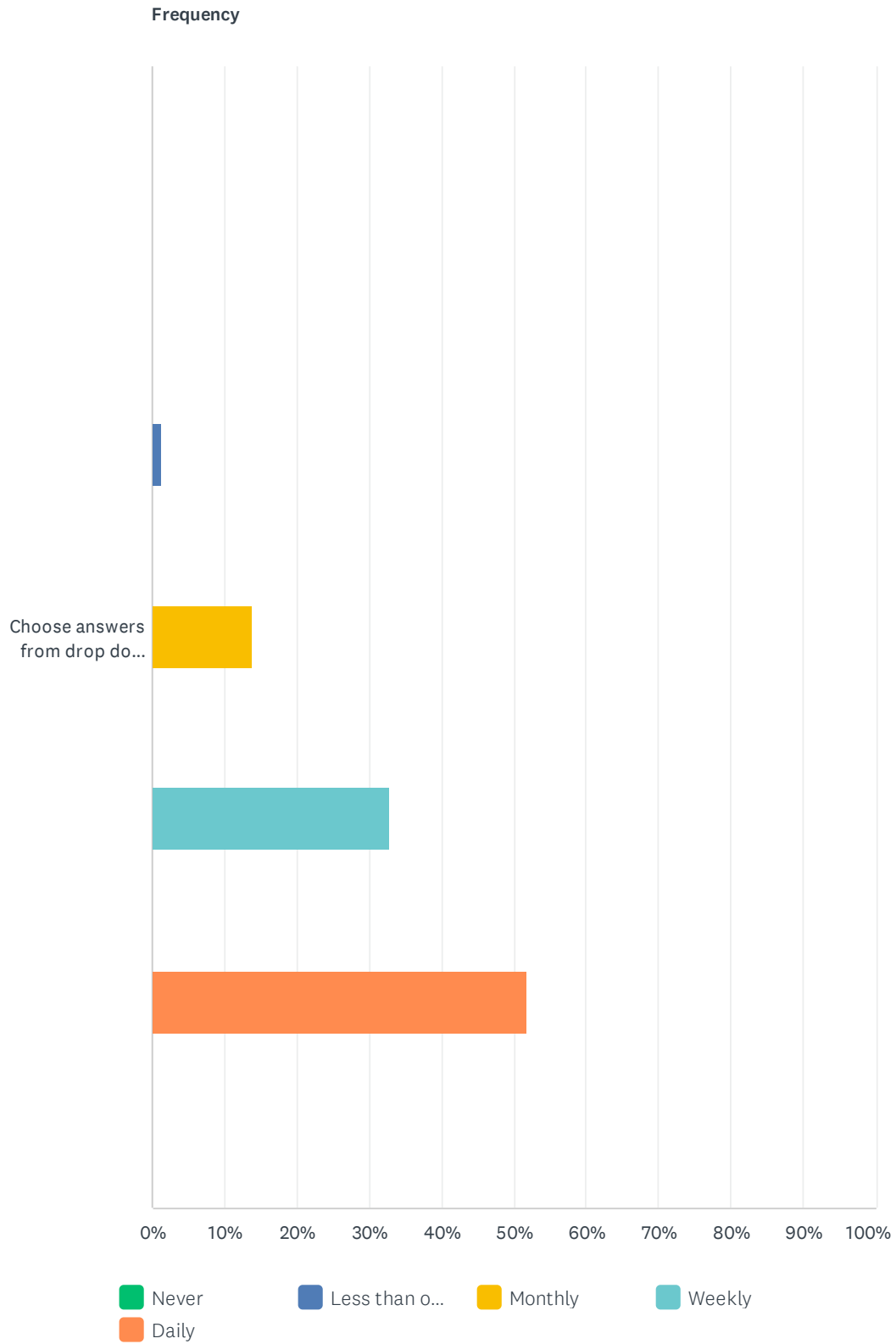
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.46% 1	2.31% 5	25.46% 55	71.76% 155	216

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.76% 8	12.21% 26	32.39% 69	51.64% 110	213

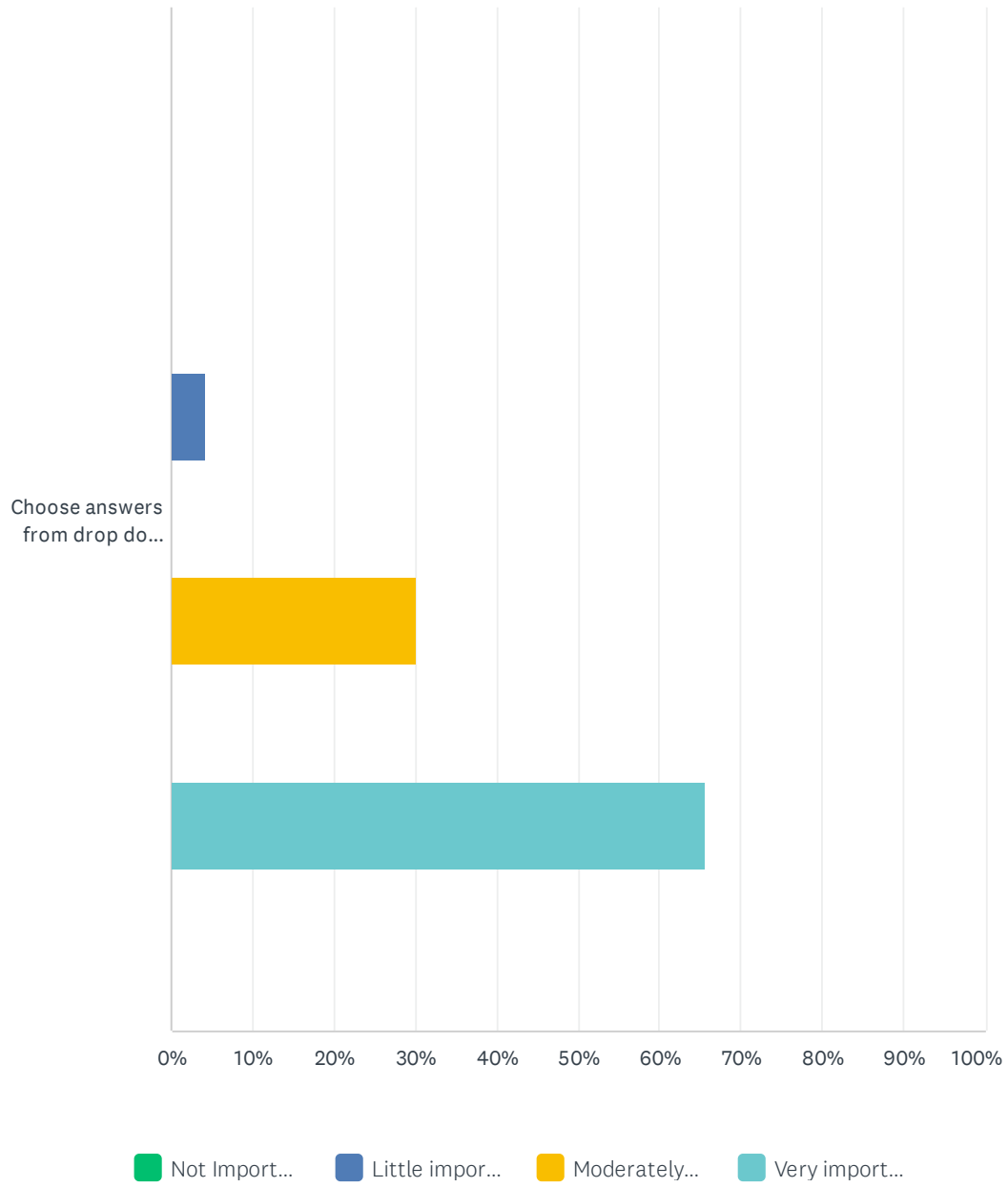
Q187 6.2.12 Lumbar Strain.

Answered: 222 Skipped: 988



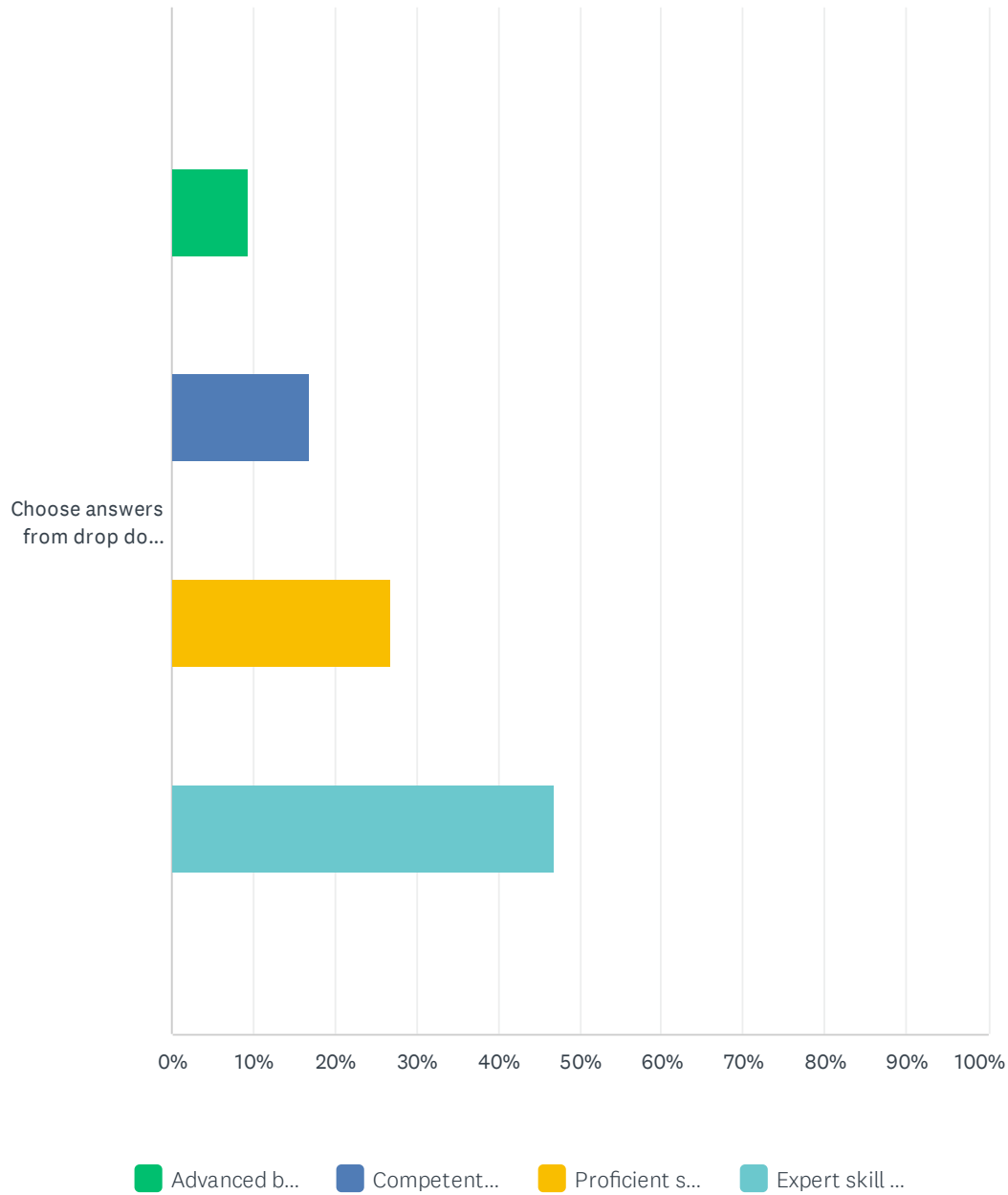
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	1.35% 3	13.96% 31	32.88% 73	51.80% 115	222

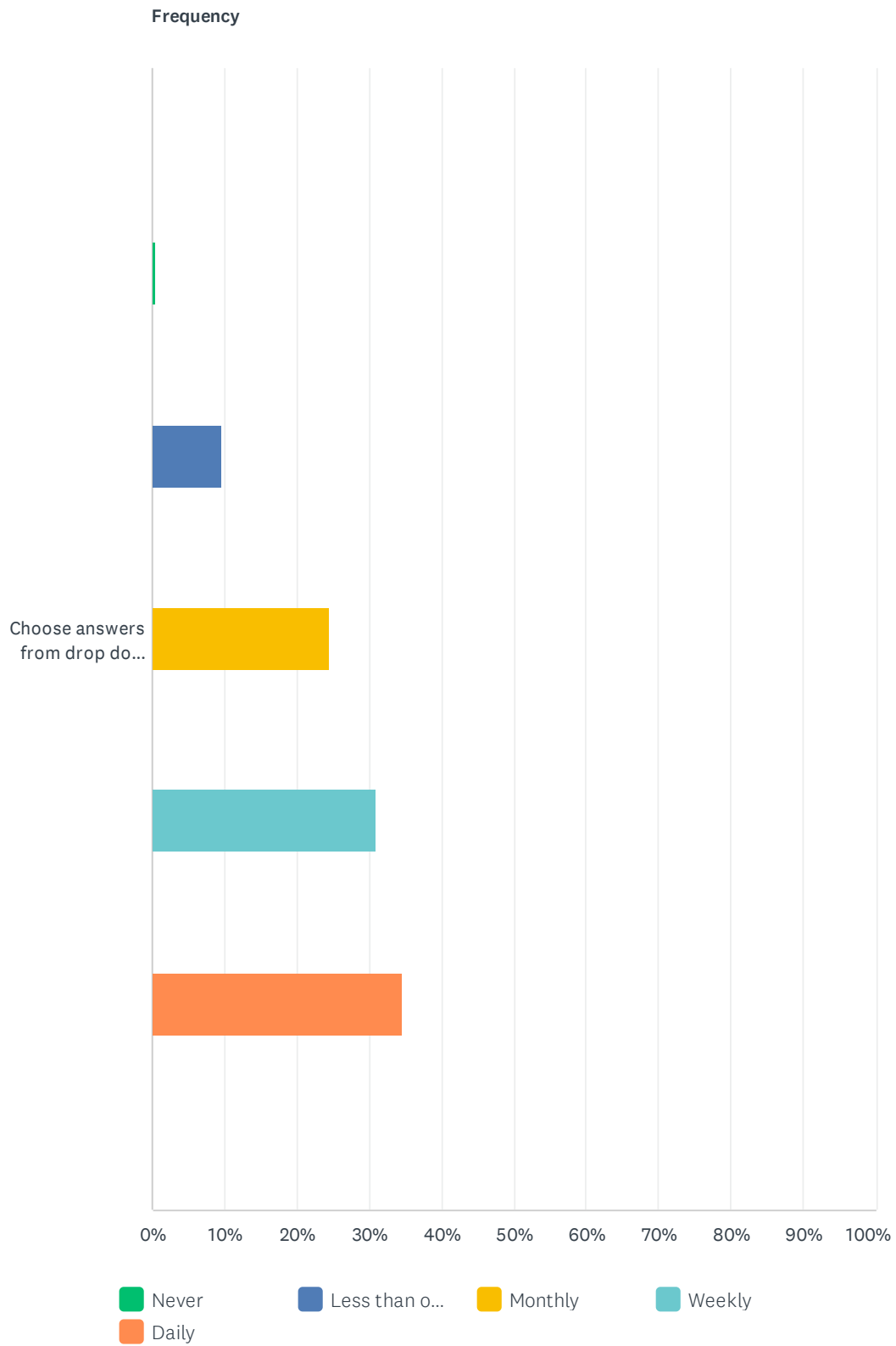
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	4.17% 9	30.09% 65	65.74% 142	216

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	9.39% 20	16.90% 36	26.76% 57	46.95% 100	213

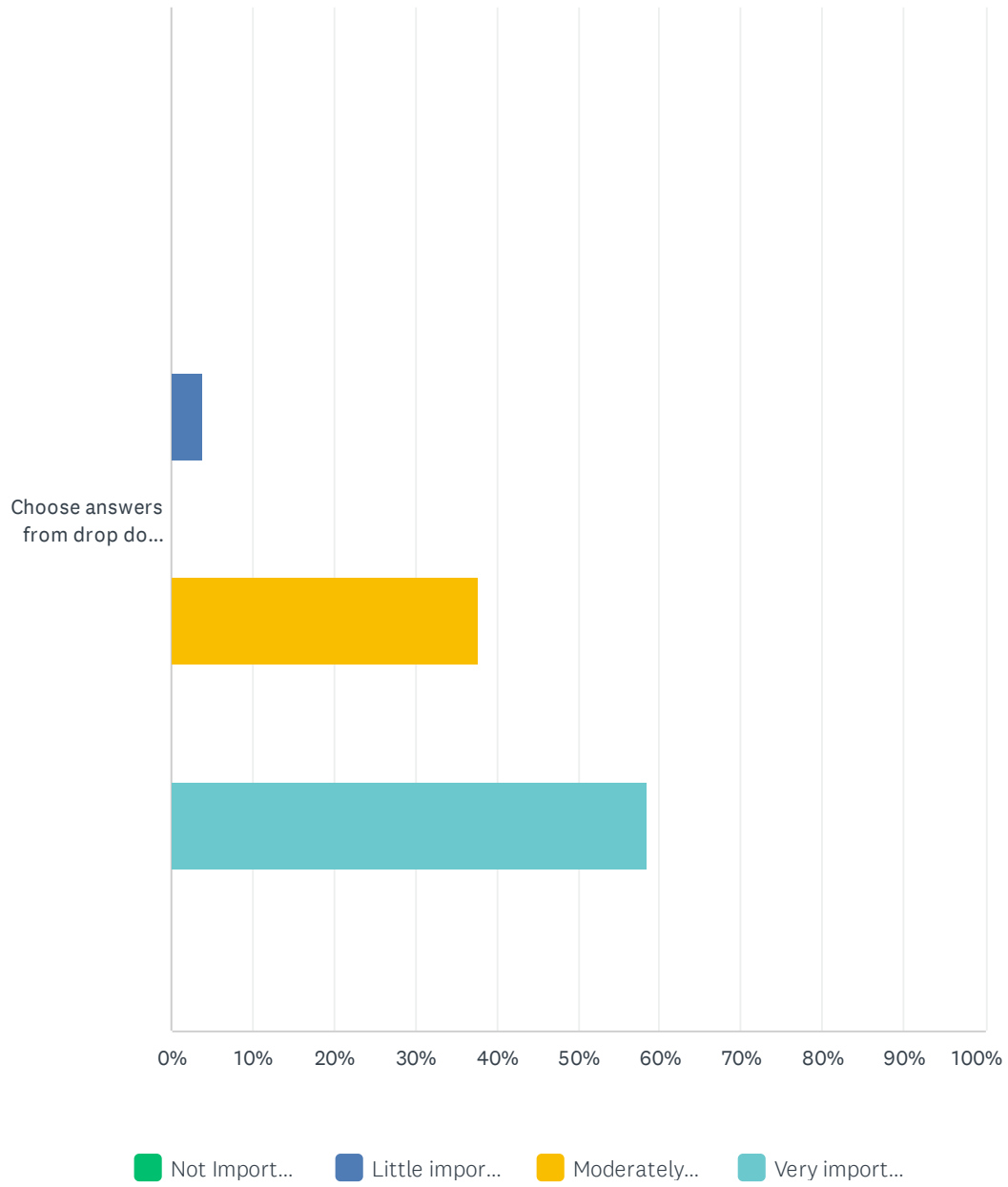
Q188 6.2.13 Other Disorders of the Lumbar Spine.

Answered: 220 Skipped: 990



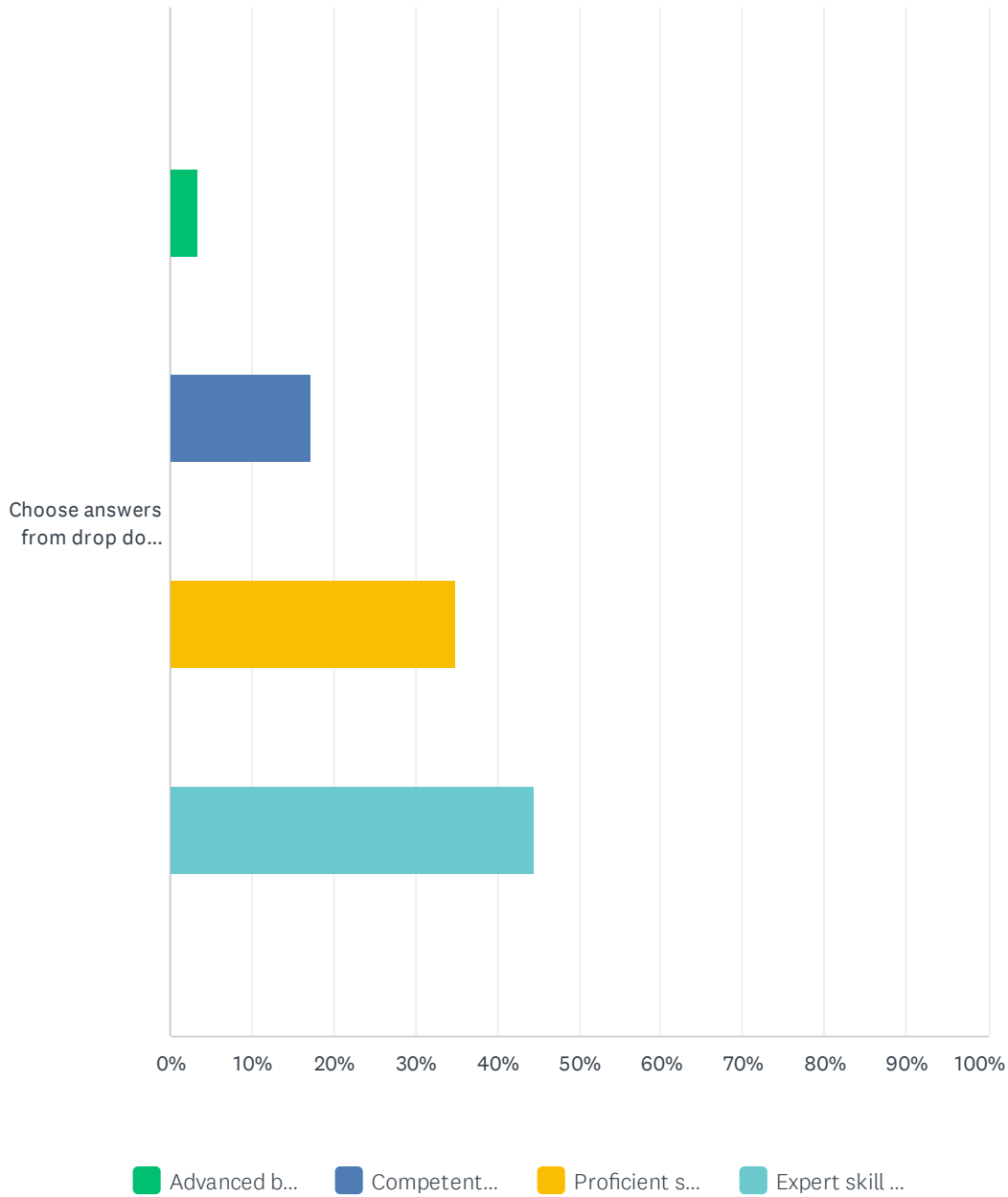
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.45% 1	9.55% 21	24.55% 54	30.91% 68	34.55% 76	220

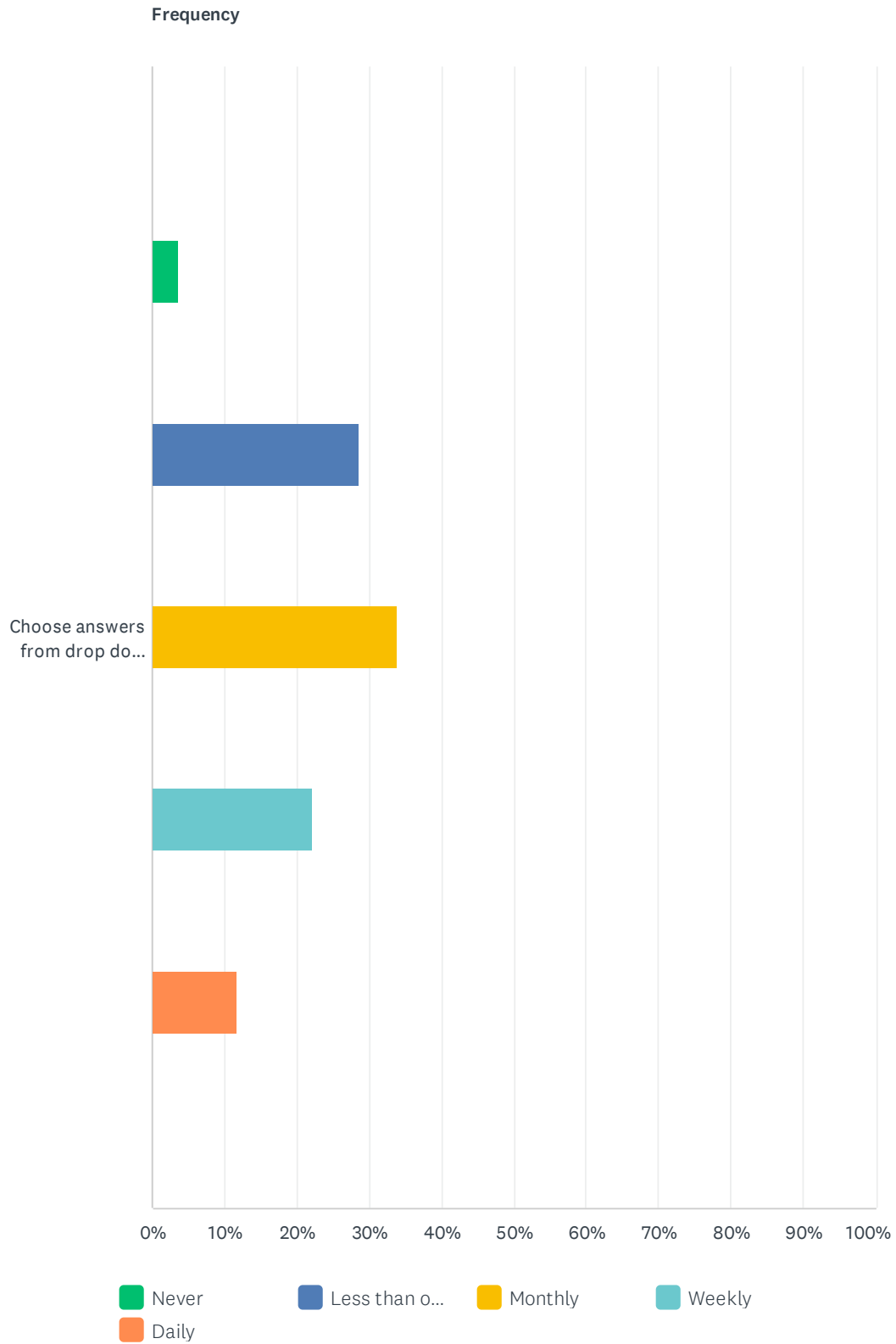
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	3.77% 8	37.74% 80	58.49% 124	212

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.35% 7	17.22% 36	34.93% 73	44.50% 93	209

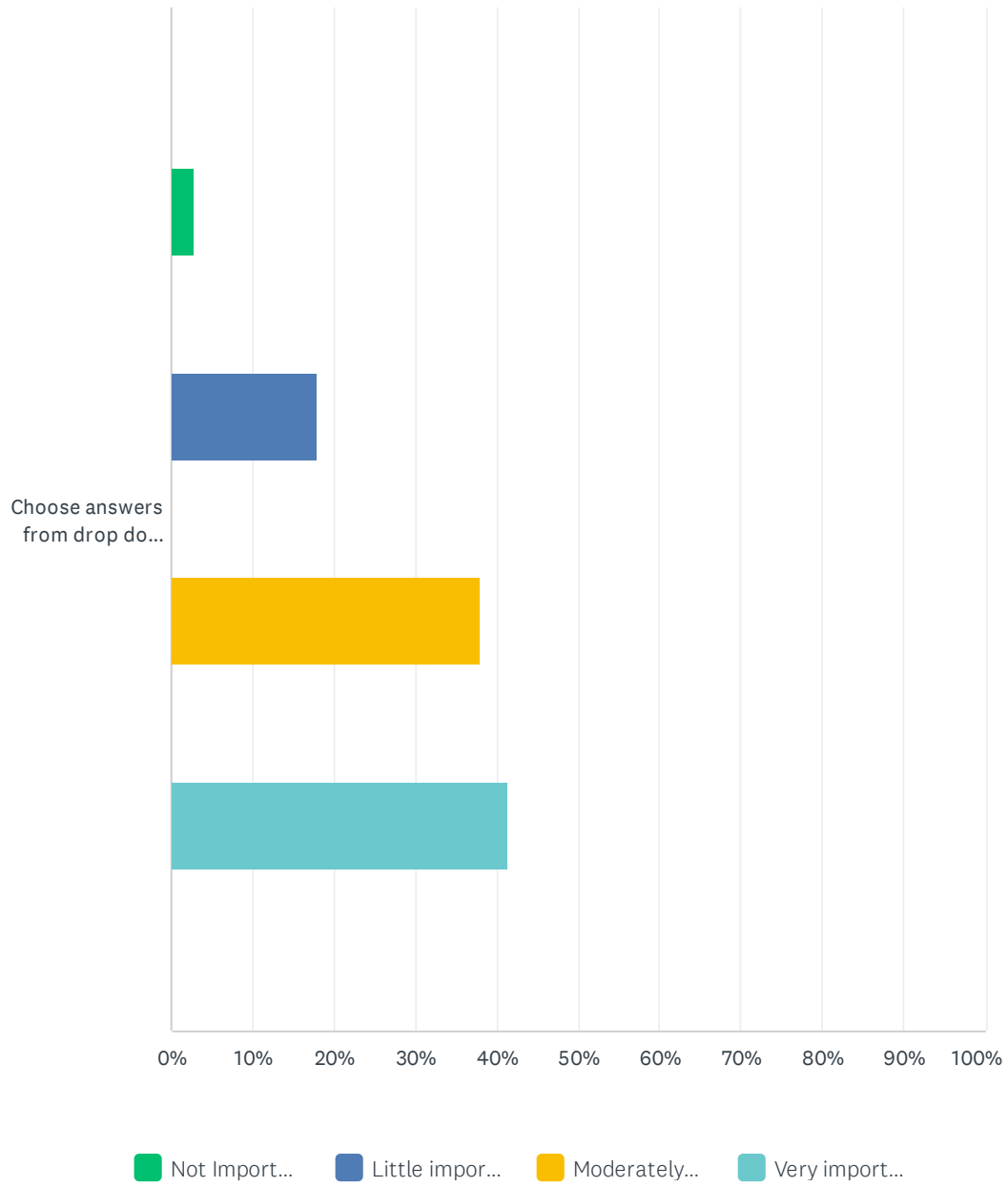
Q189 6.2.14 Piriformis Syndrome.

Answered: 221 Skipped: 989



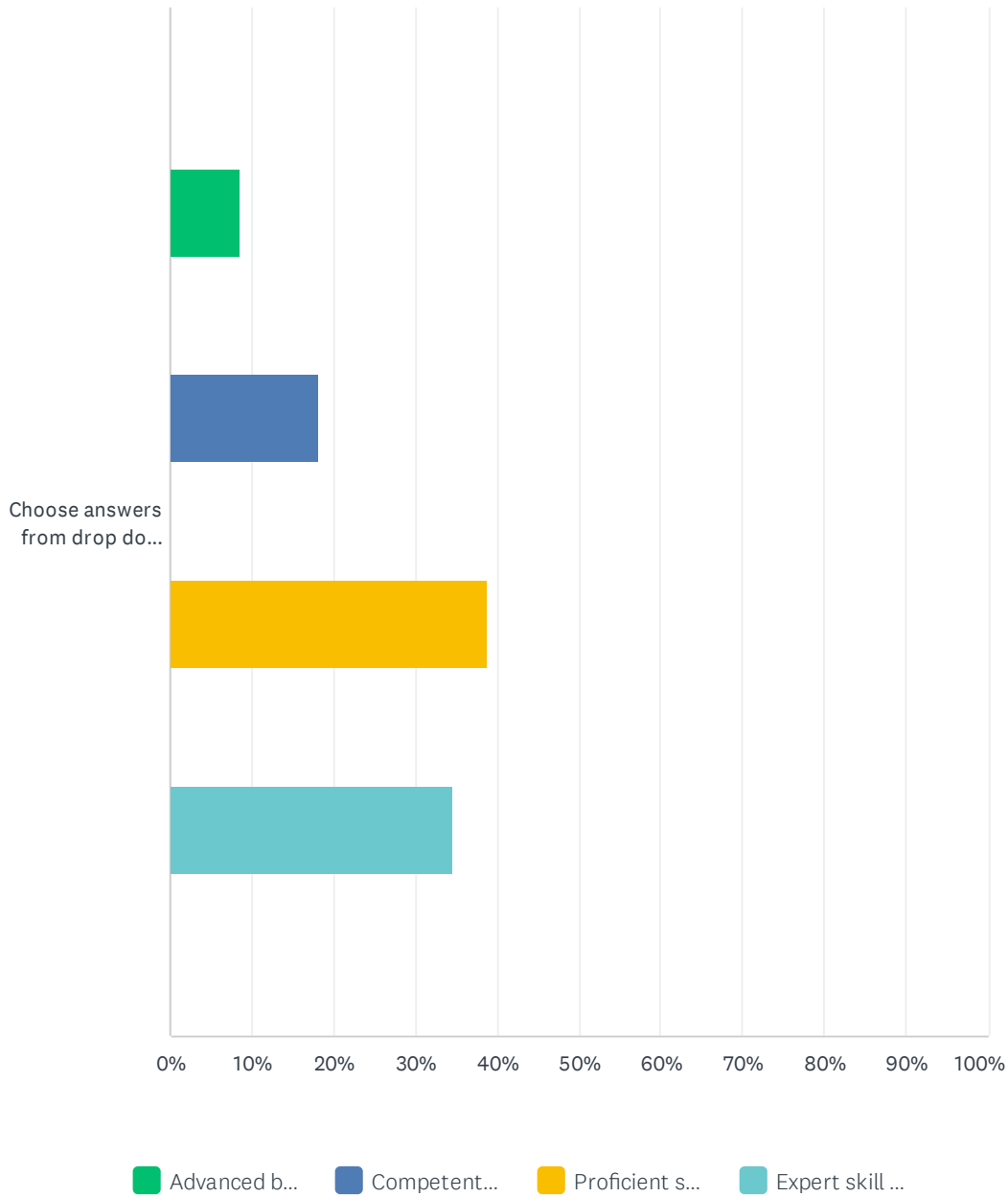
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.62% 8	28.51% 63	33.94% 75	22.17% 49	11.76% 26	221

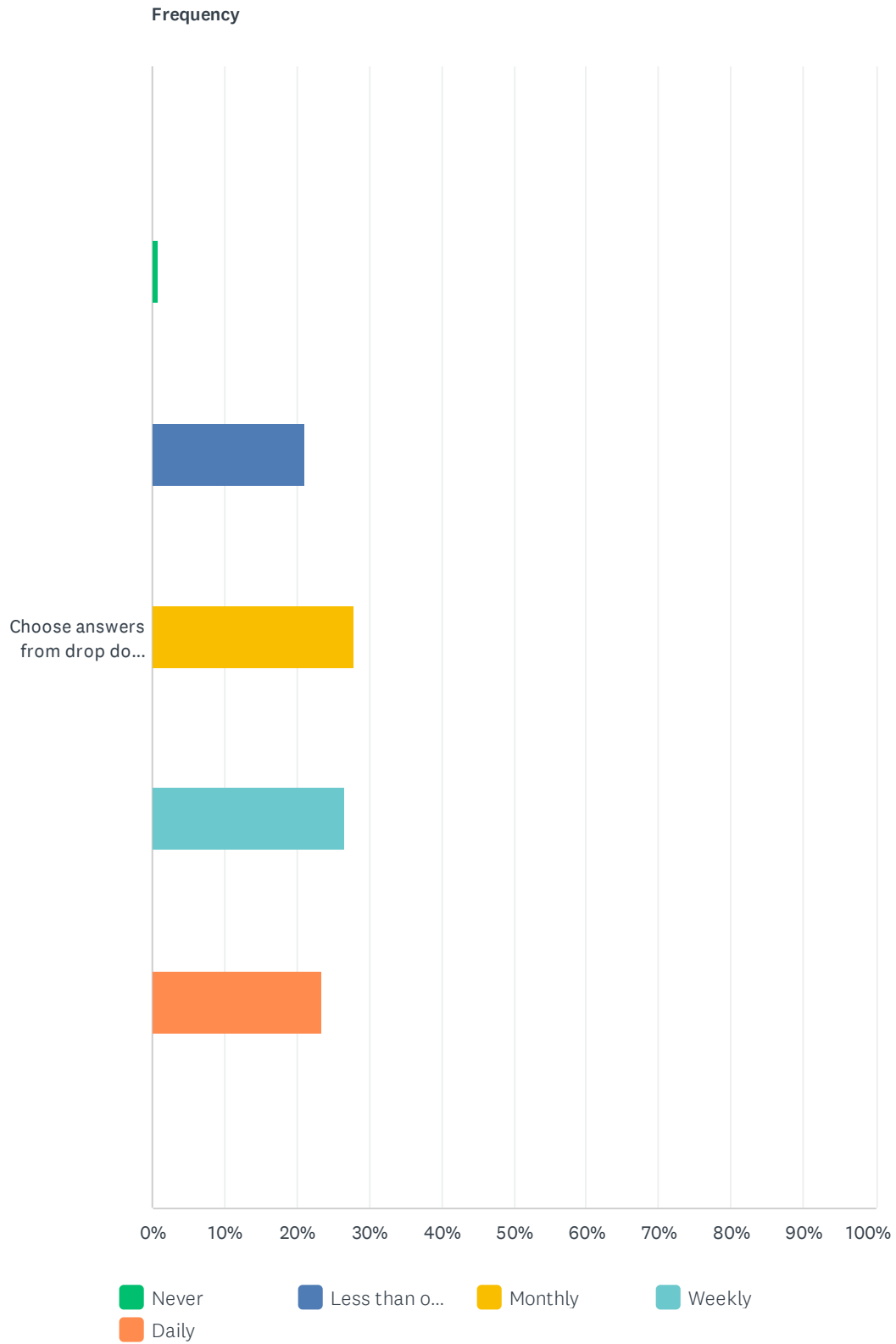
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.82% 6	17.84% 38	38.03% 81	41.31% 88	213

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	8.61% 18	18.18% 38	38.76% 81	34.45% 72	209

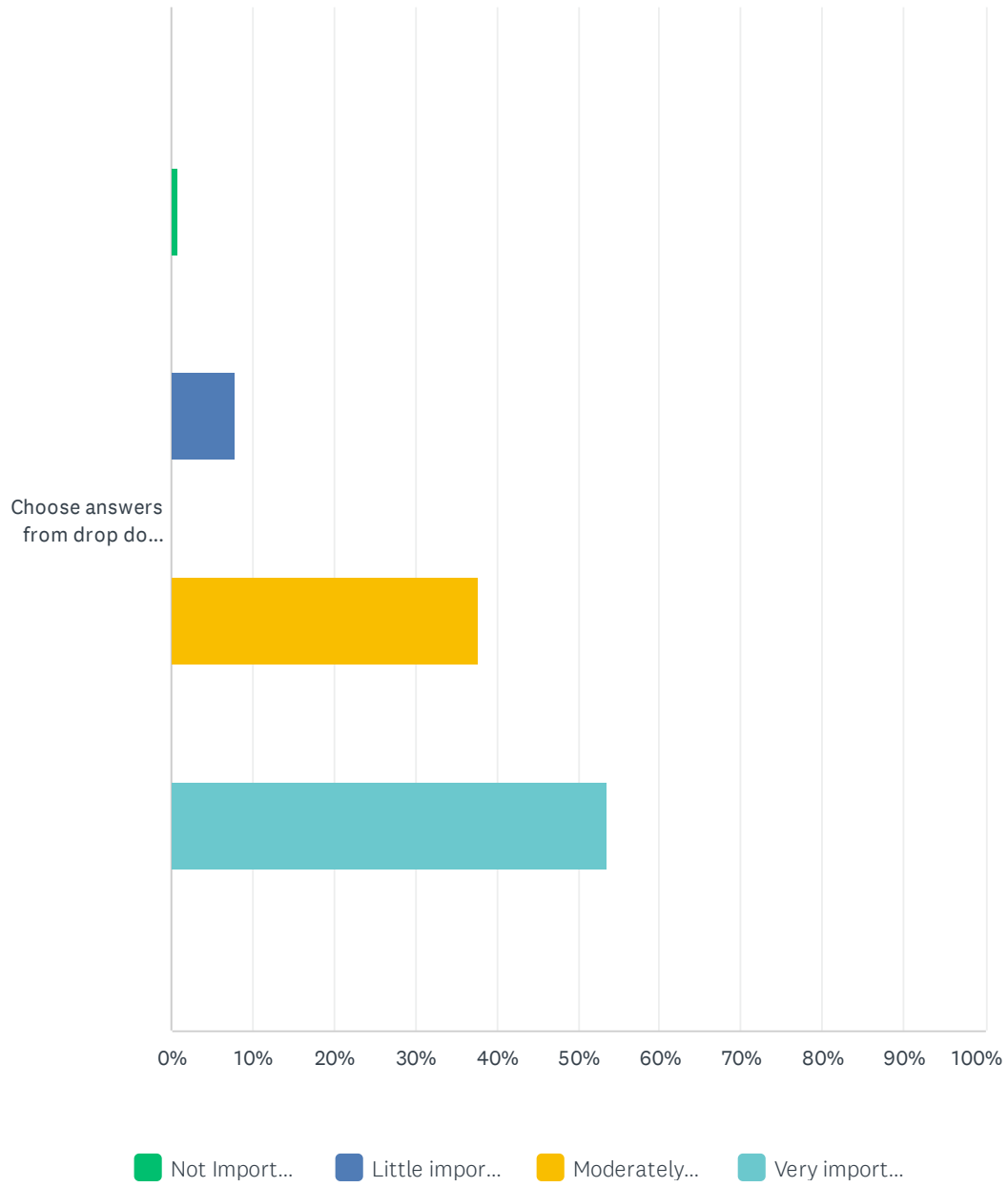
Q190 6.2.15 Sacroiliac Dysfunction.

Answered: 222 Skipped: 988



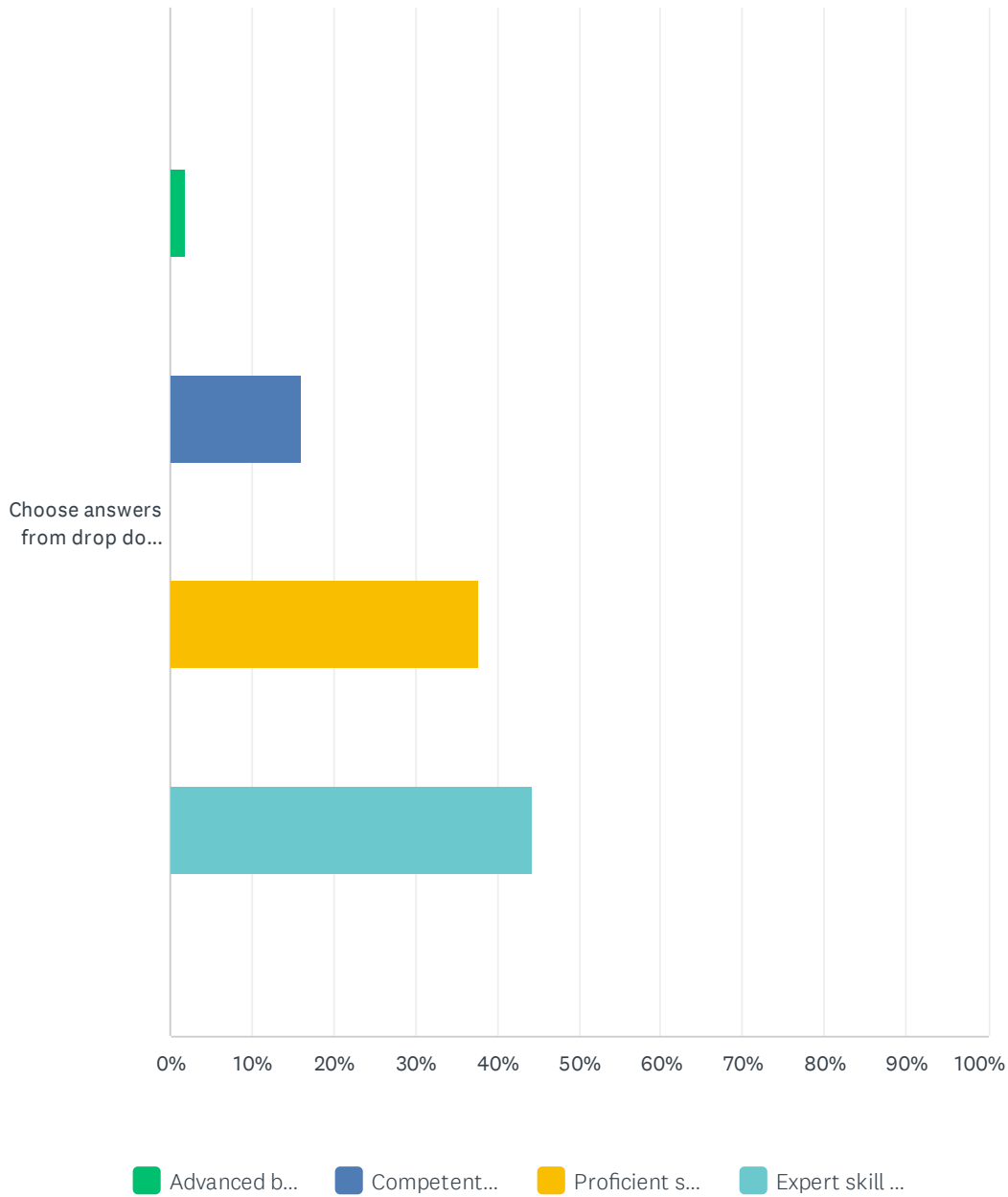
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.90% 2	21.17% 47	27.93% 62	26.58% 59	23.42% 52	222

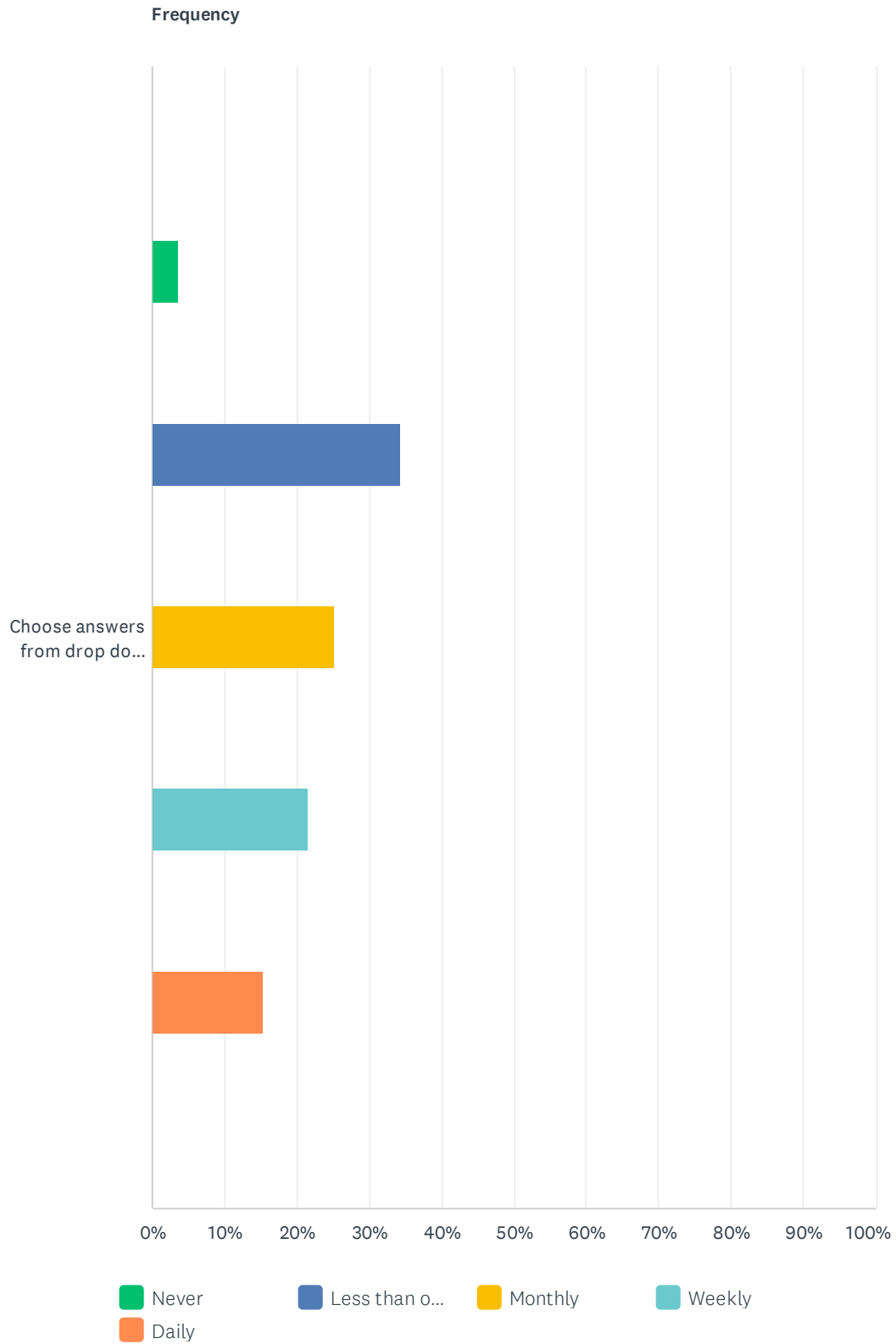
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.93% 2	7.91% 17	37.67% 81	53.49% 115	215

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.89% 4	16.04% 34	37.74% 80	44.34% 94	212

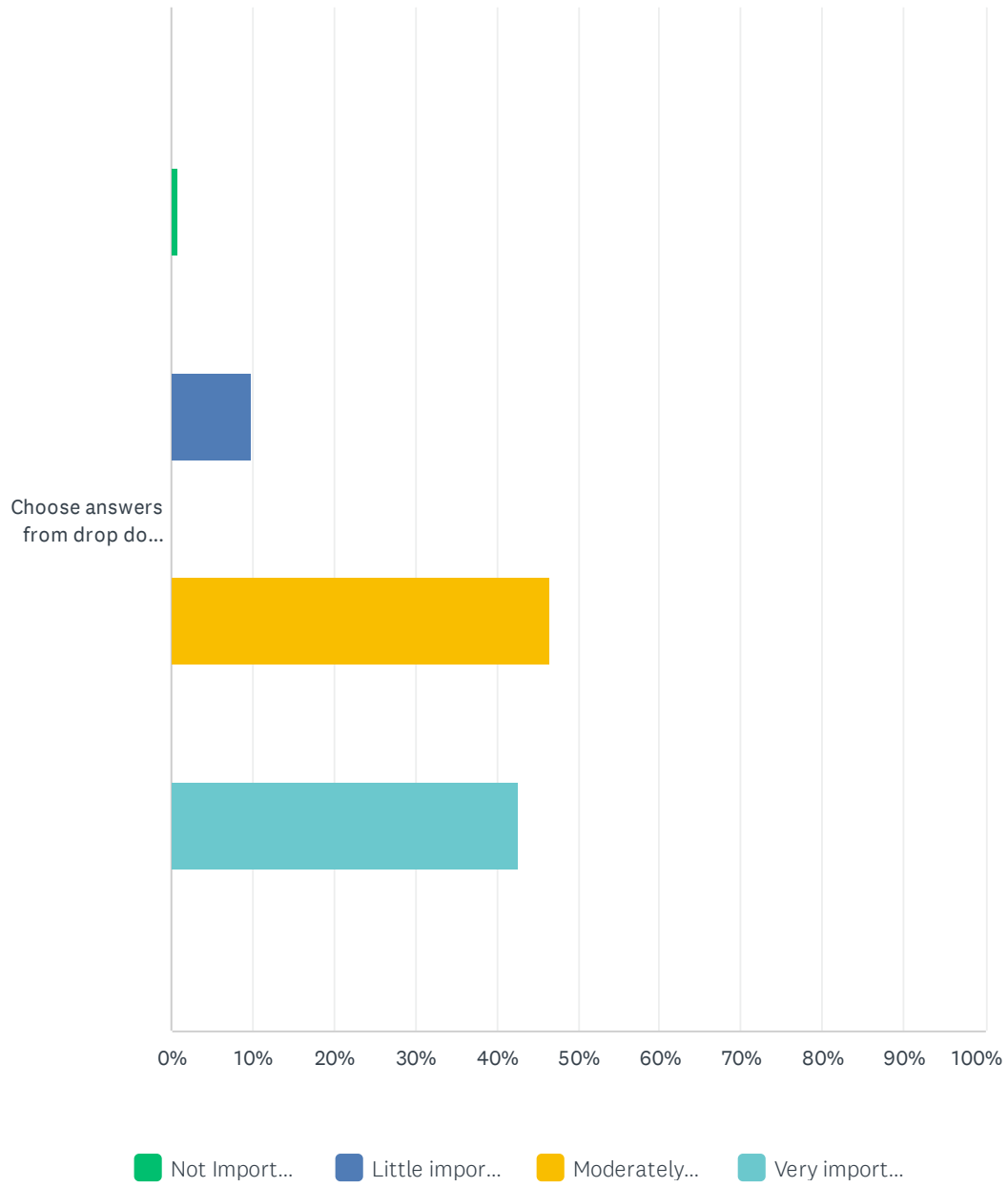
Q191 6.2.16 Other Disorders of the Pelvic Girdle.

Answered: 222 Skipped: 988



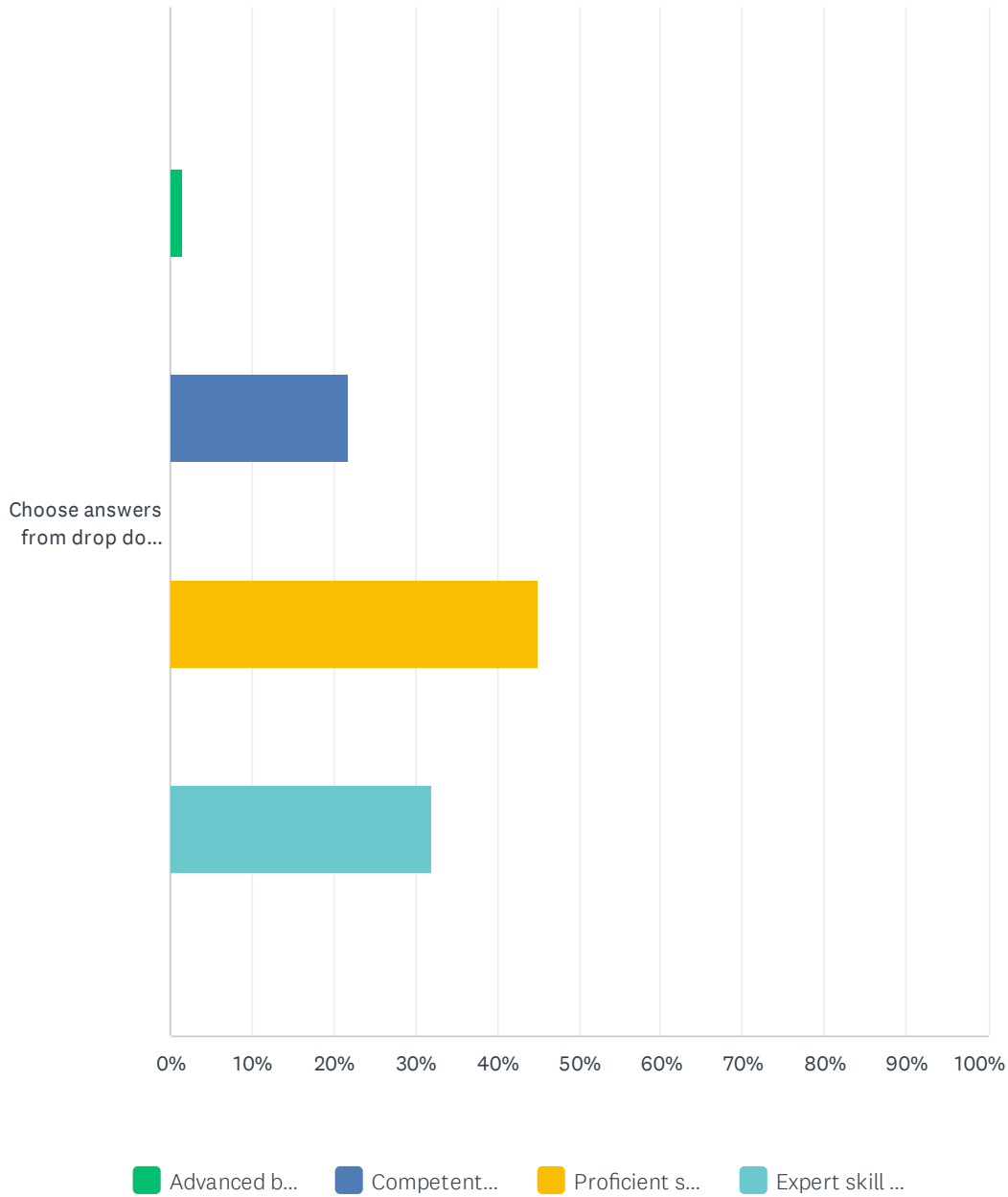
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.60% 8	34.23% 76	25.23% 56	21.62% 48	15.32% 34	222

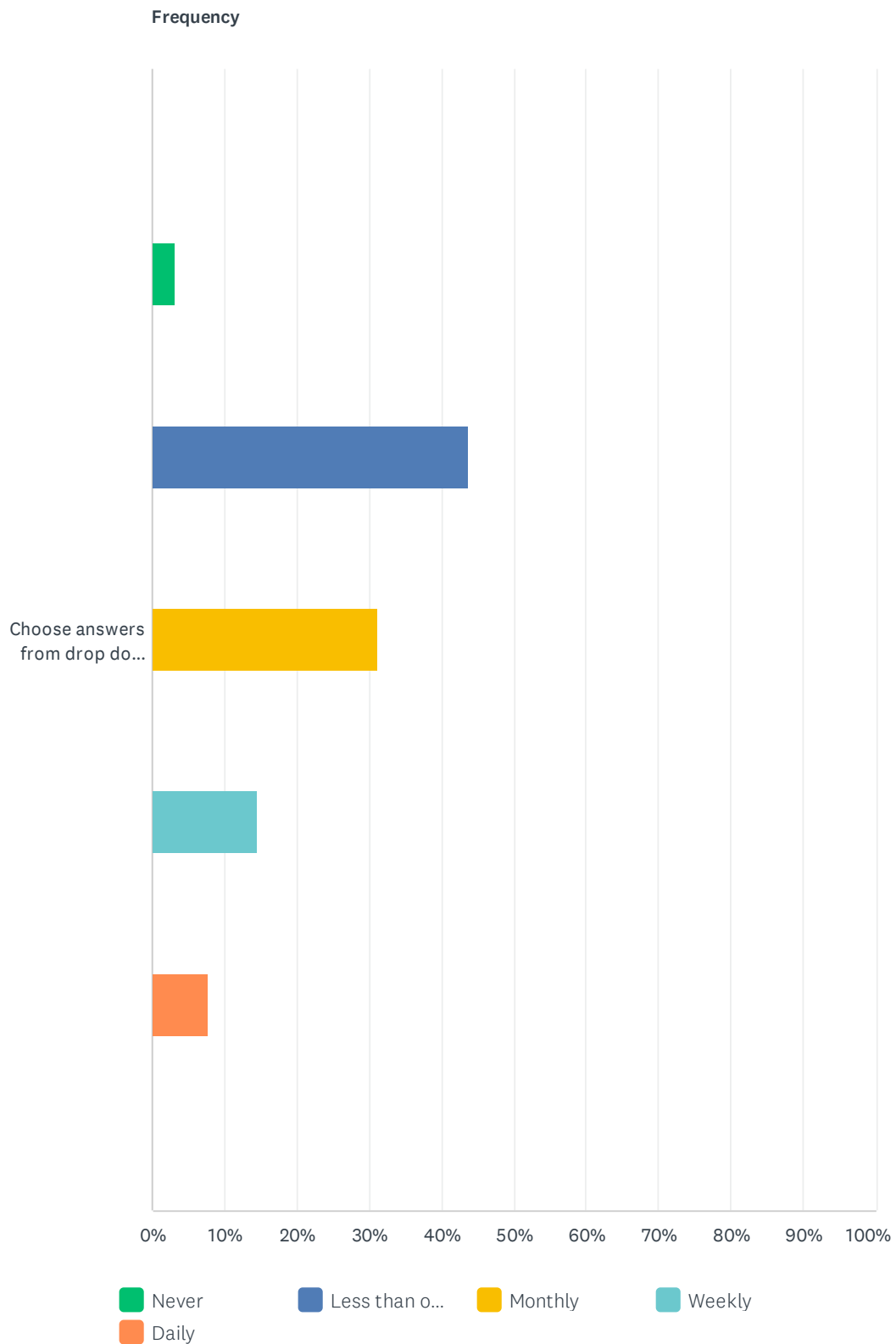
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.94% 2	9.86% 21	46.48% 99	42.72% 91	213

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.45% 3	21.74% 45	44.93% 93	31.88% 66	207

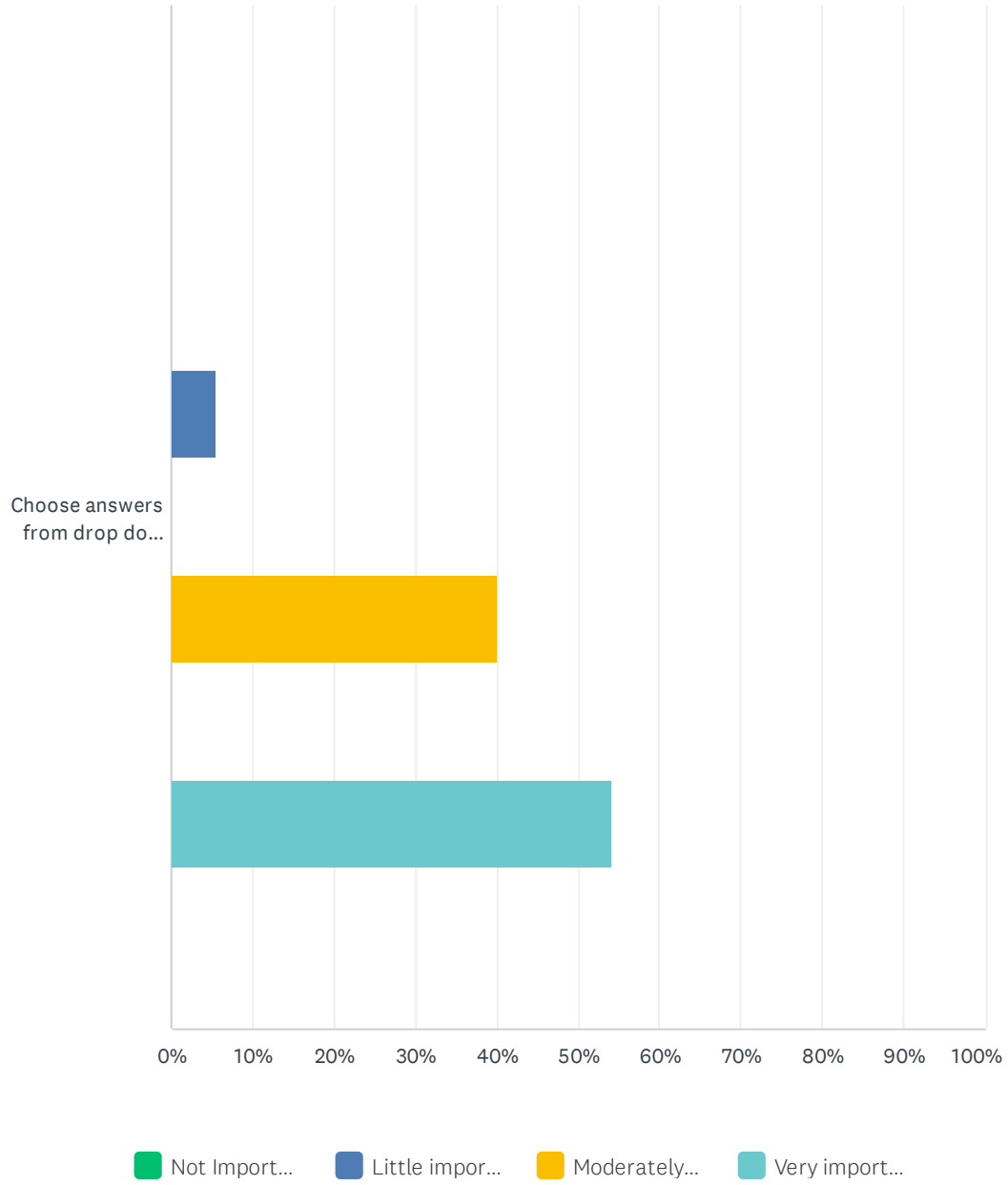
Q192 6.2.17 Inflammatory Conditions (spondyloarthropathies such as ankylosing spondylitis, RA, etc.).

Answered: 222 Skipped: 988



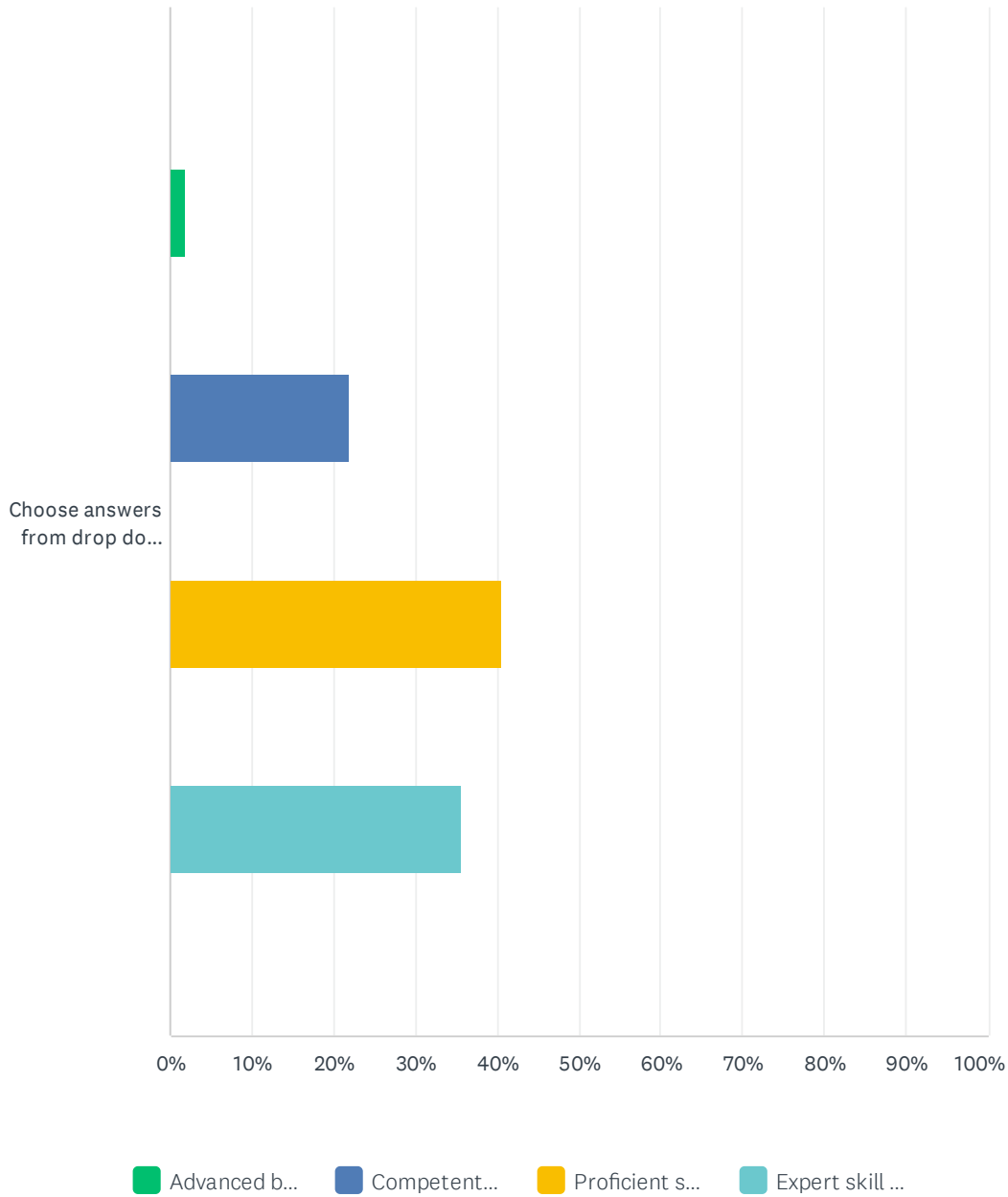
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.15% 7	43.69% 97	31.08% 69	14.41% 32	7.66% 17	222

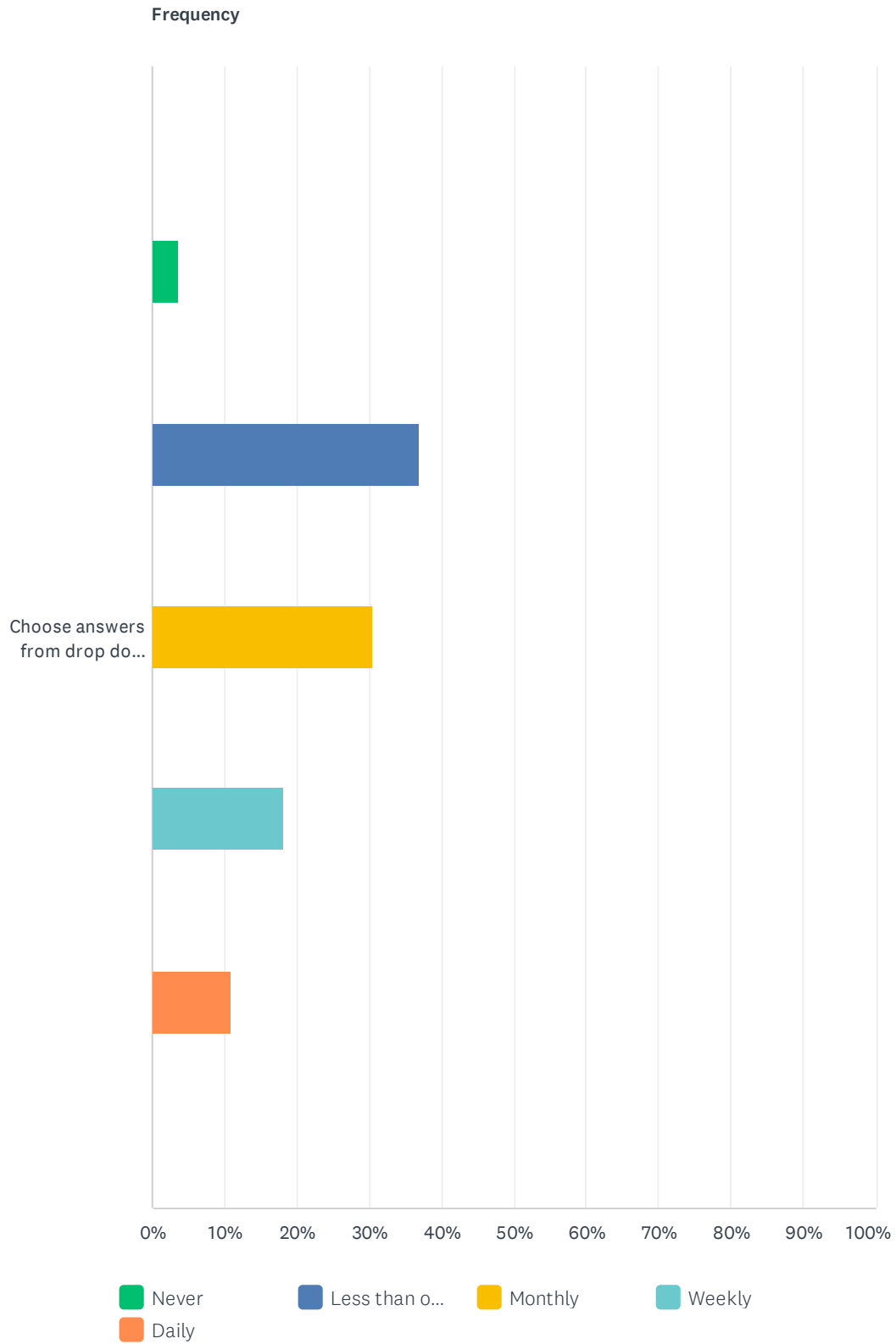
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	5.61% 12	40.19% 86	54.21% 116	214

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.90% 4	21.90% 46	40.48% 85	35.71% 75	210

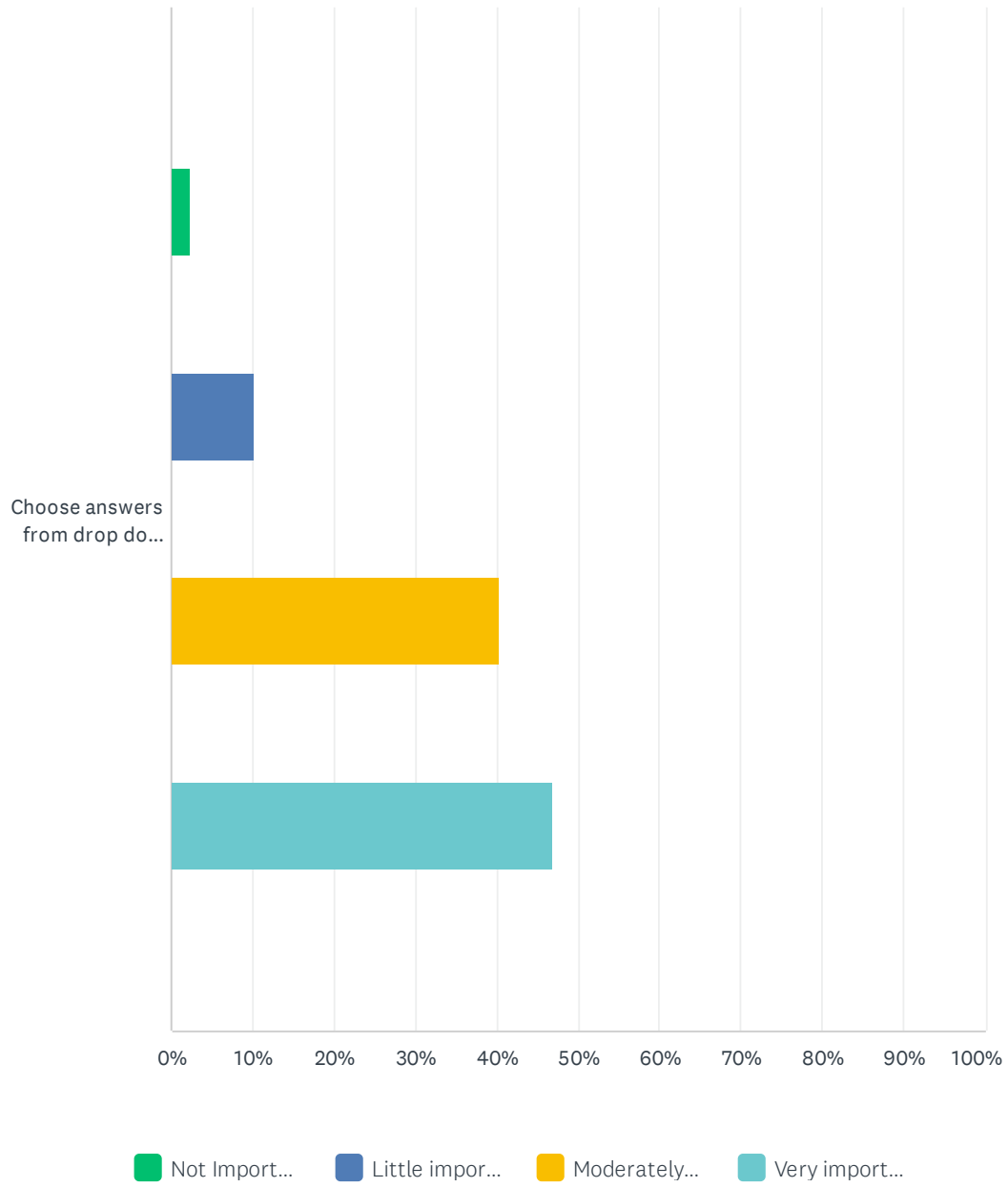
Q193 6.2.18 Rib Dysfunction.

Answered: 220 Skipped: 990



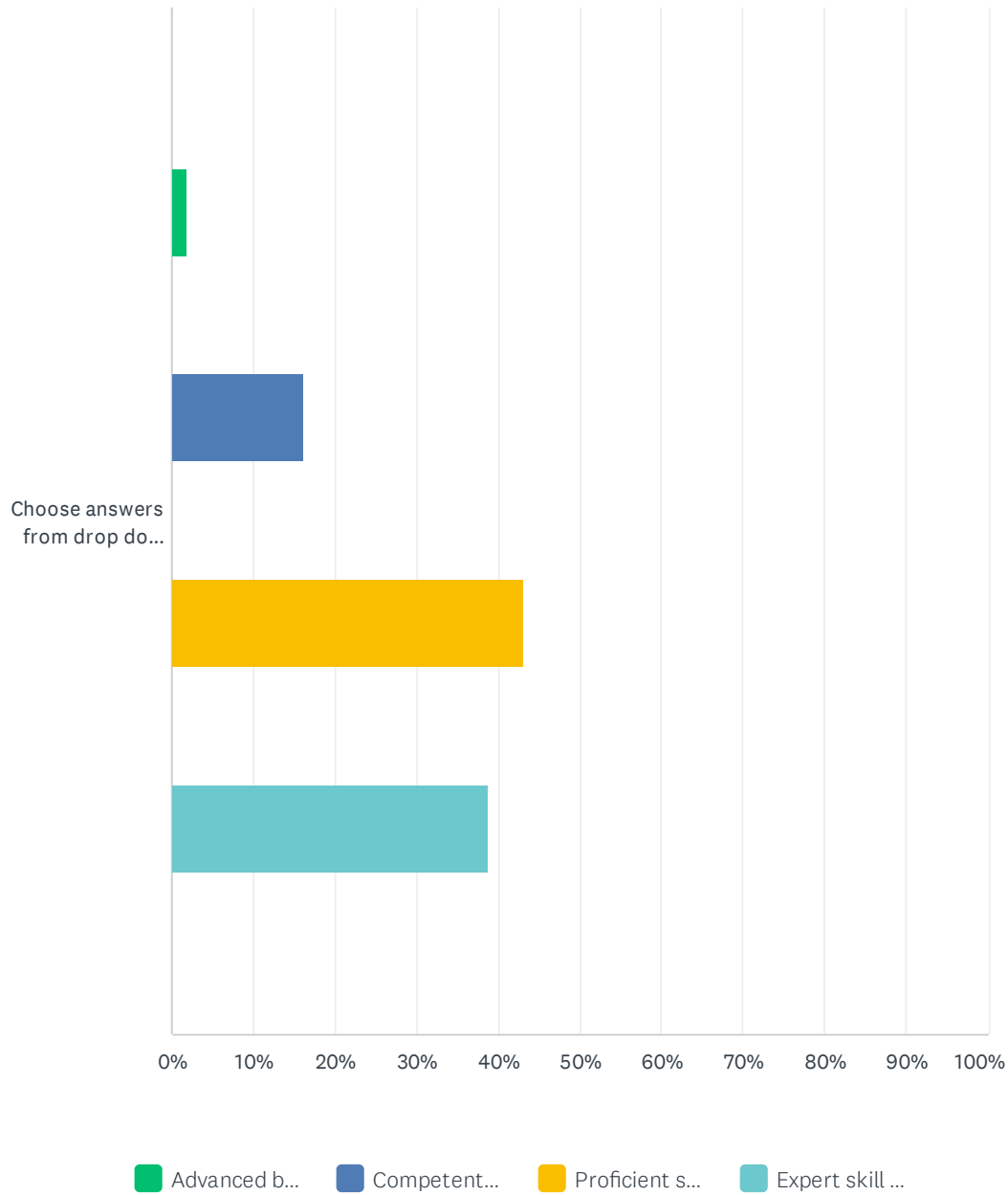
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	3.64% 8	36.82% 81	30.45% 67	18.18% 40	10.91% 24	220

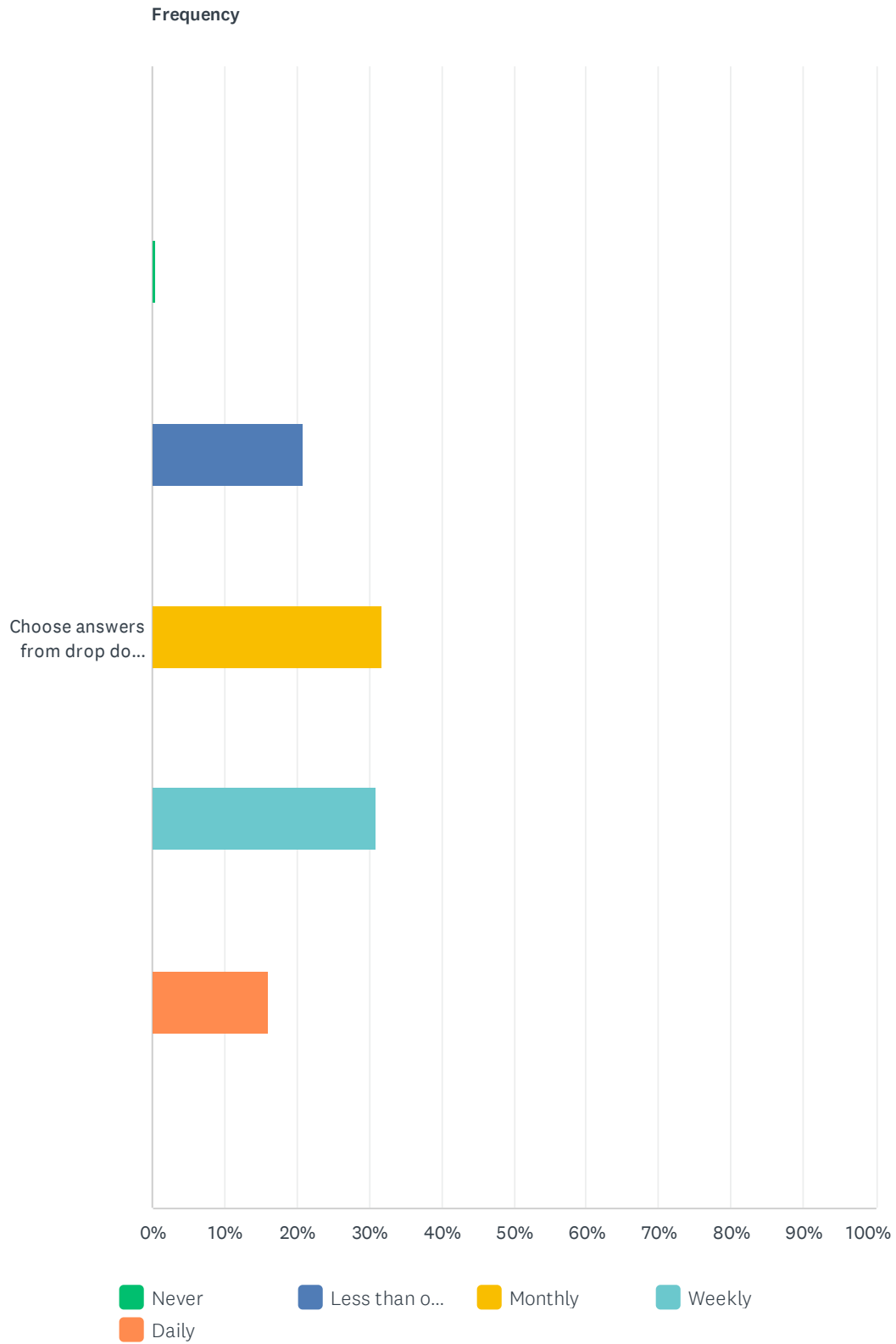
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	2.35% 5	10.33% 22	40.38% 86	46.95% 100	213

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	1.91% 4	16.27% 34	43.06% 90	38.76% 81	209

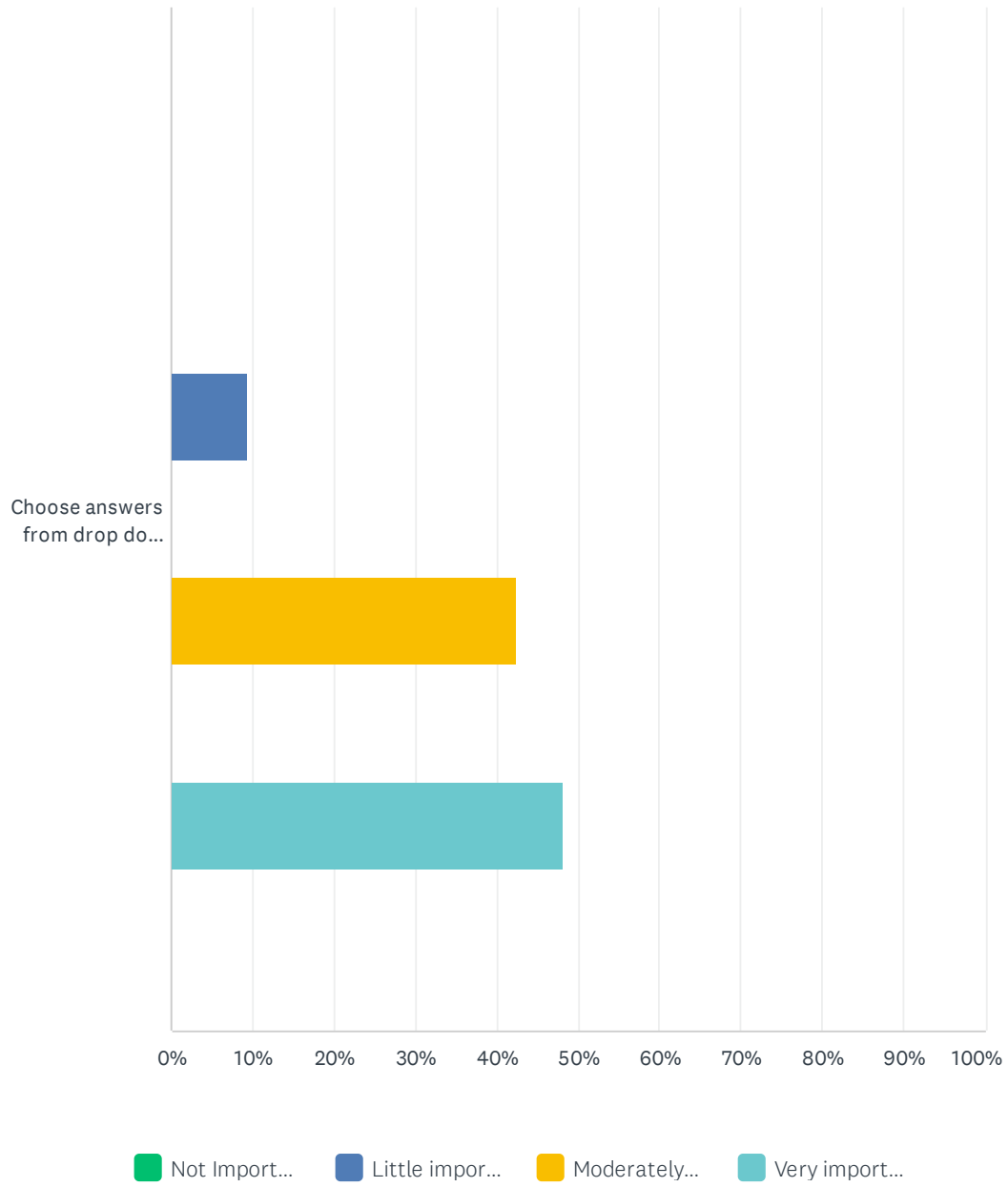
Q194 6.2.19 Thoracic Sprain/Strain.

Answered: 220 Skipped: 990



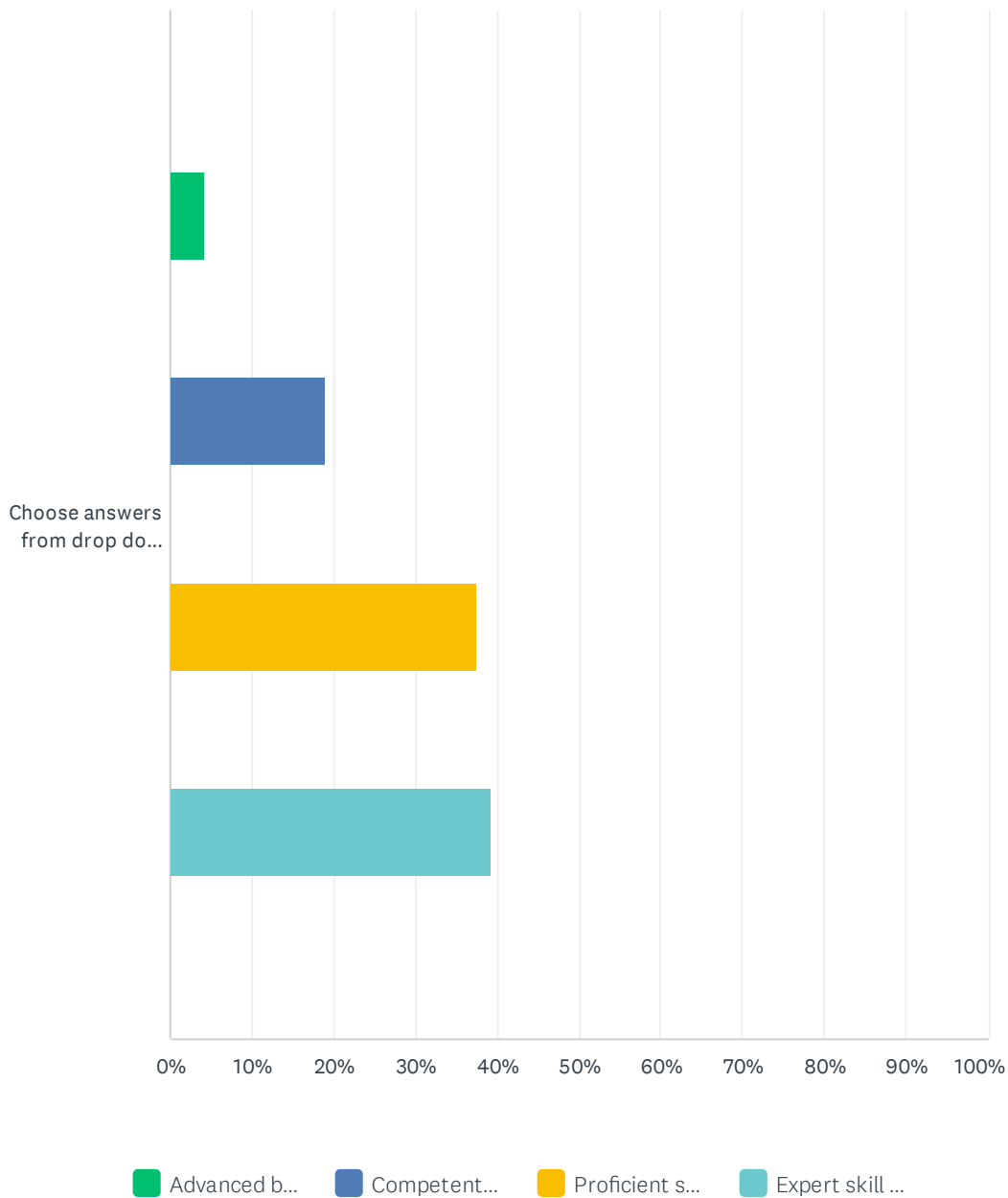
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.45% 1	20.91% 46	31.82% 70	30.91% 68	15.91% 35	220

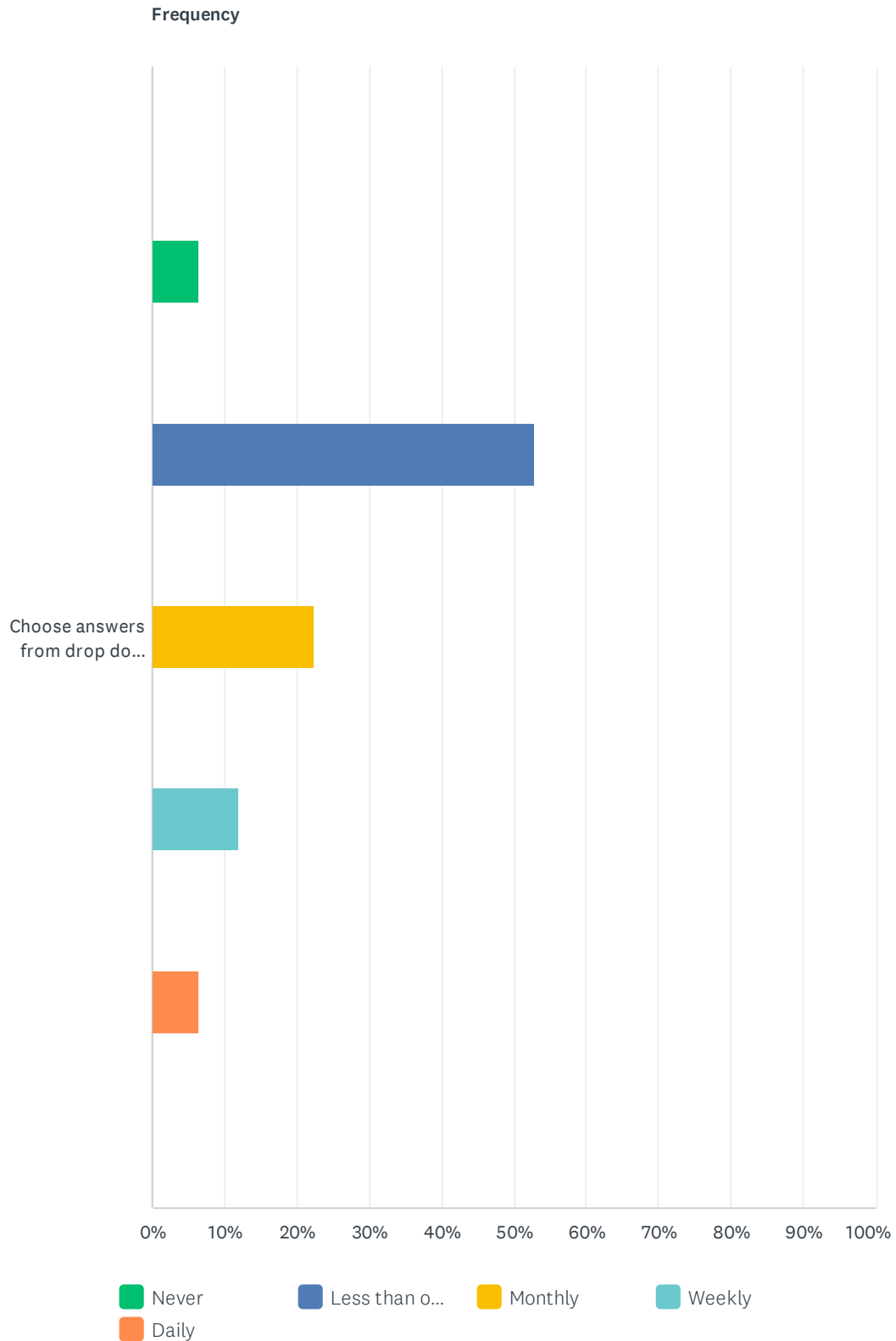
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	9.35% 20	42.52% 91	48.13% 103	214

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.27% 9	18.96% 40	37.44% 79	39.34% 83	211

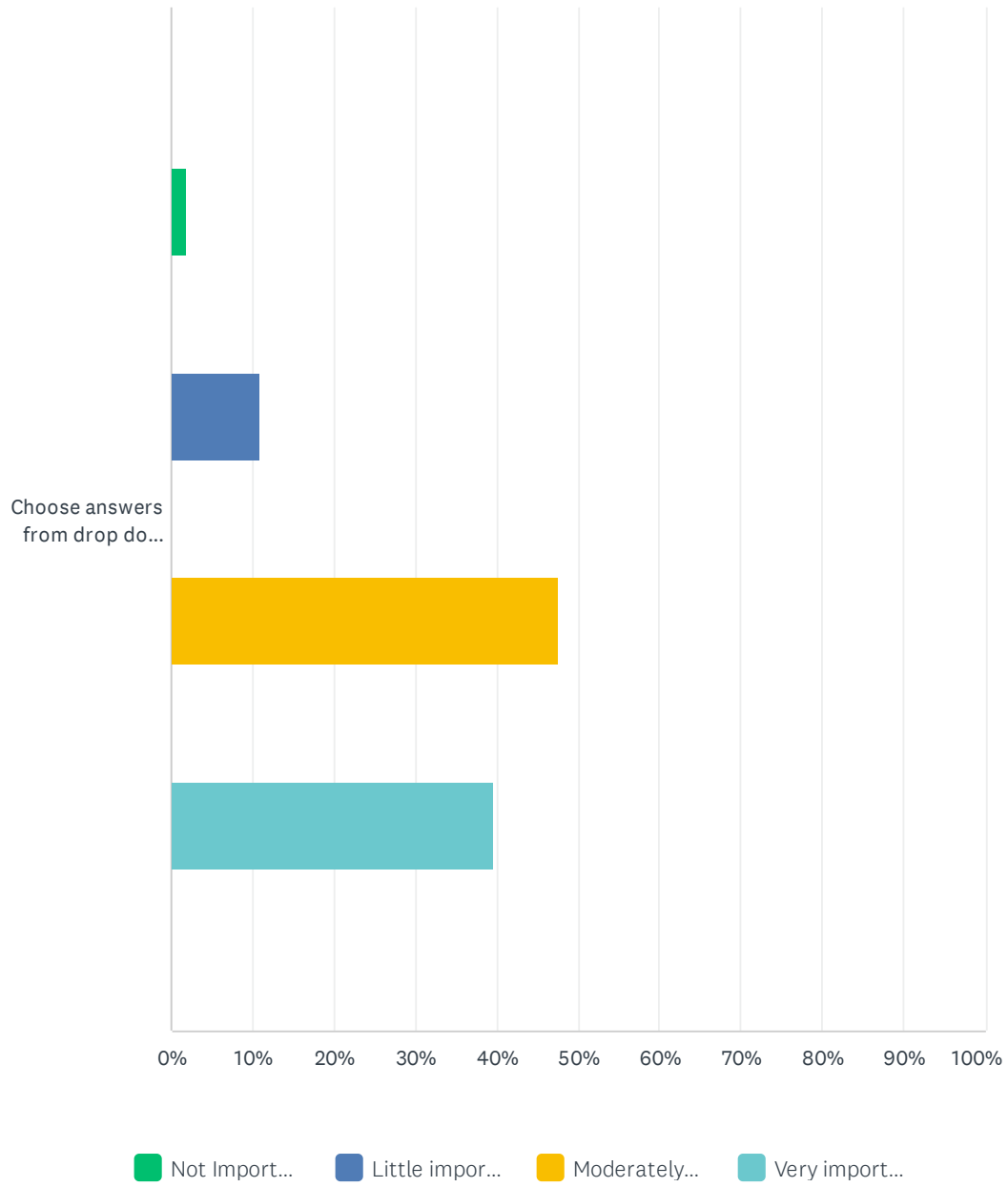
Q195 6.2.20 Thoracic Disc Pathologies (e.g., thoracic disc herniation, thoracic radiculopathy).

Answered: 219 Skipped: 991



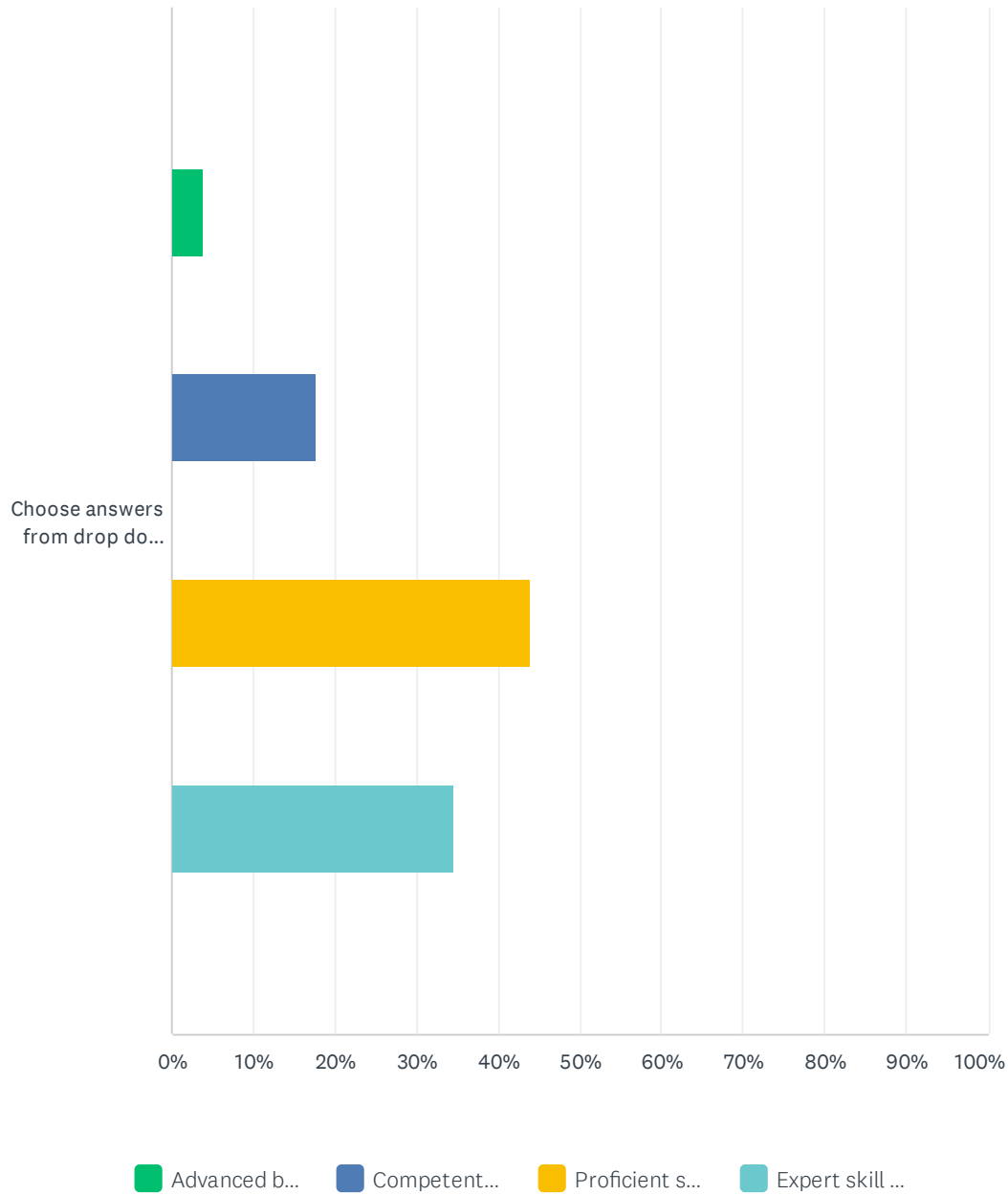
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



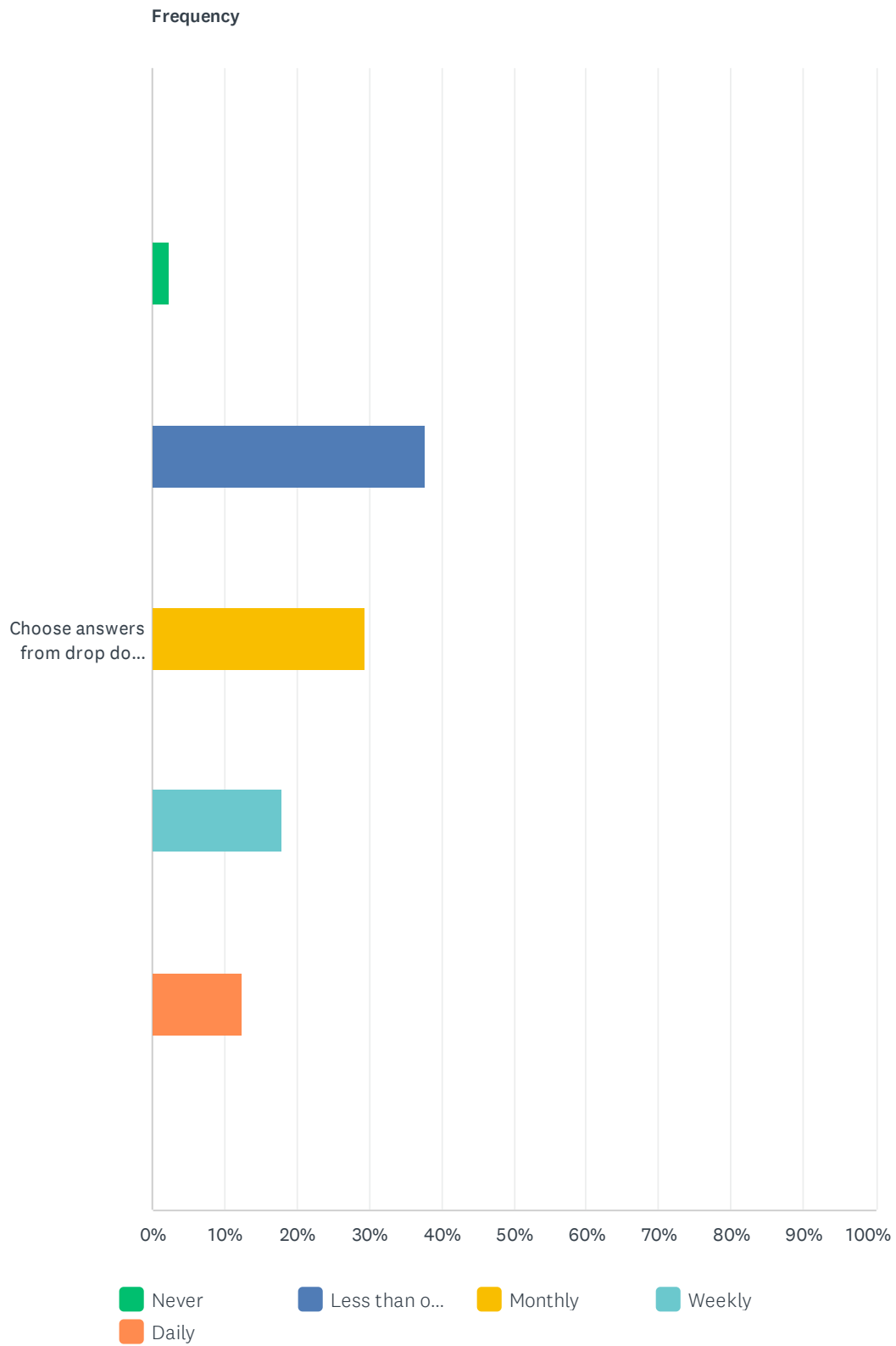
Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	6.39%	52.97%	22.37%	11.87%	6.39%	
	14	116	49	26	14	219
Importance						
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL	
Choose answers from drop down menus.	1.89%	10.85%	47.64%	39.62%		
	4	23	101	84	212	

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.83% 8	17.70% 37	44.02% 92	34.45% 72	209

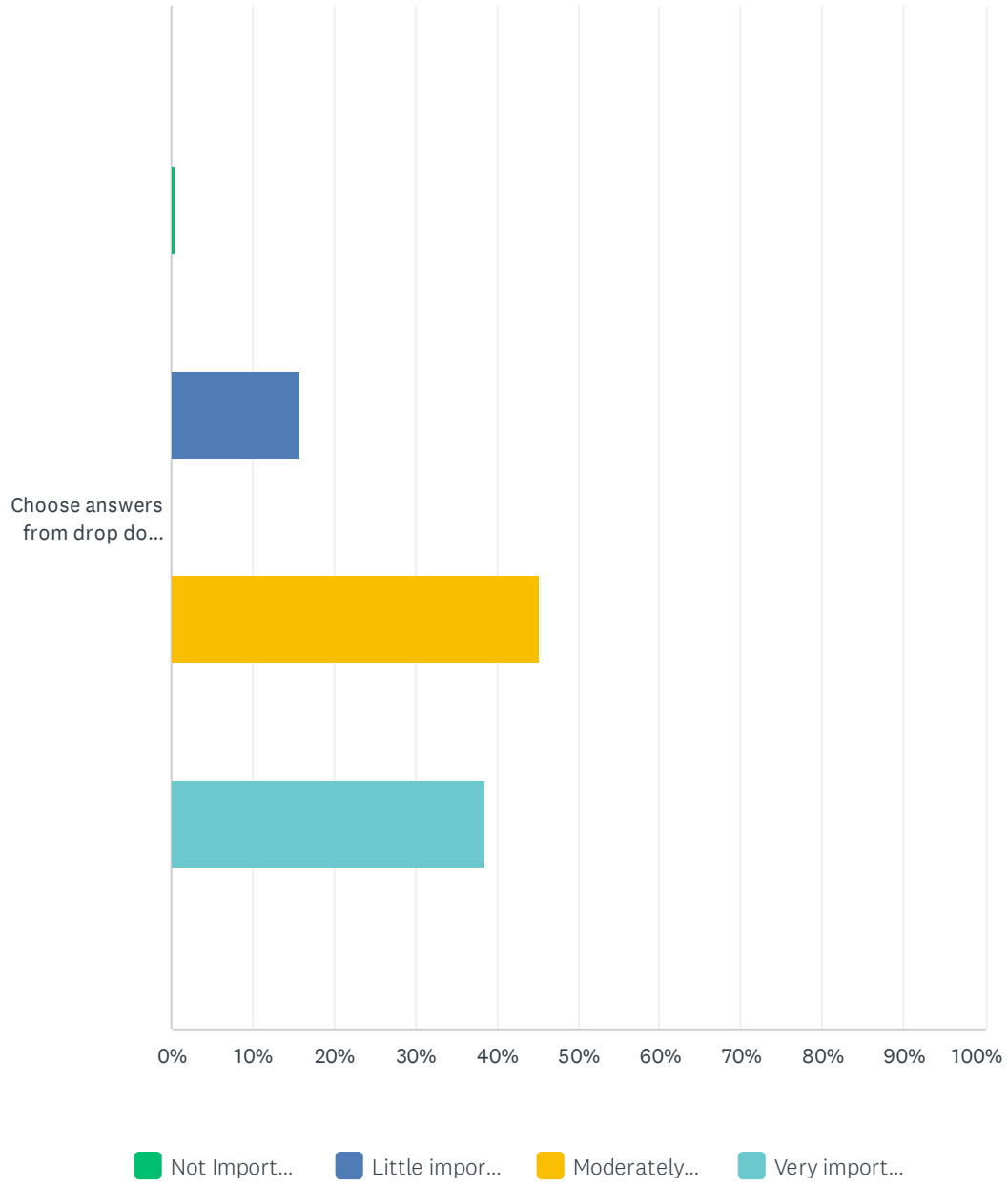
Q196 6.2.21 Other Disorders of the Thoracic Spine.

Answered: 217 Skipped: 993



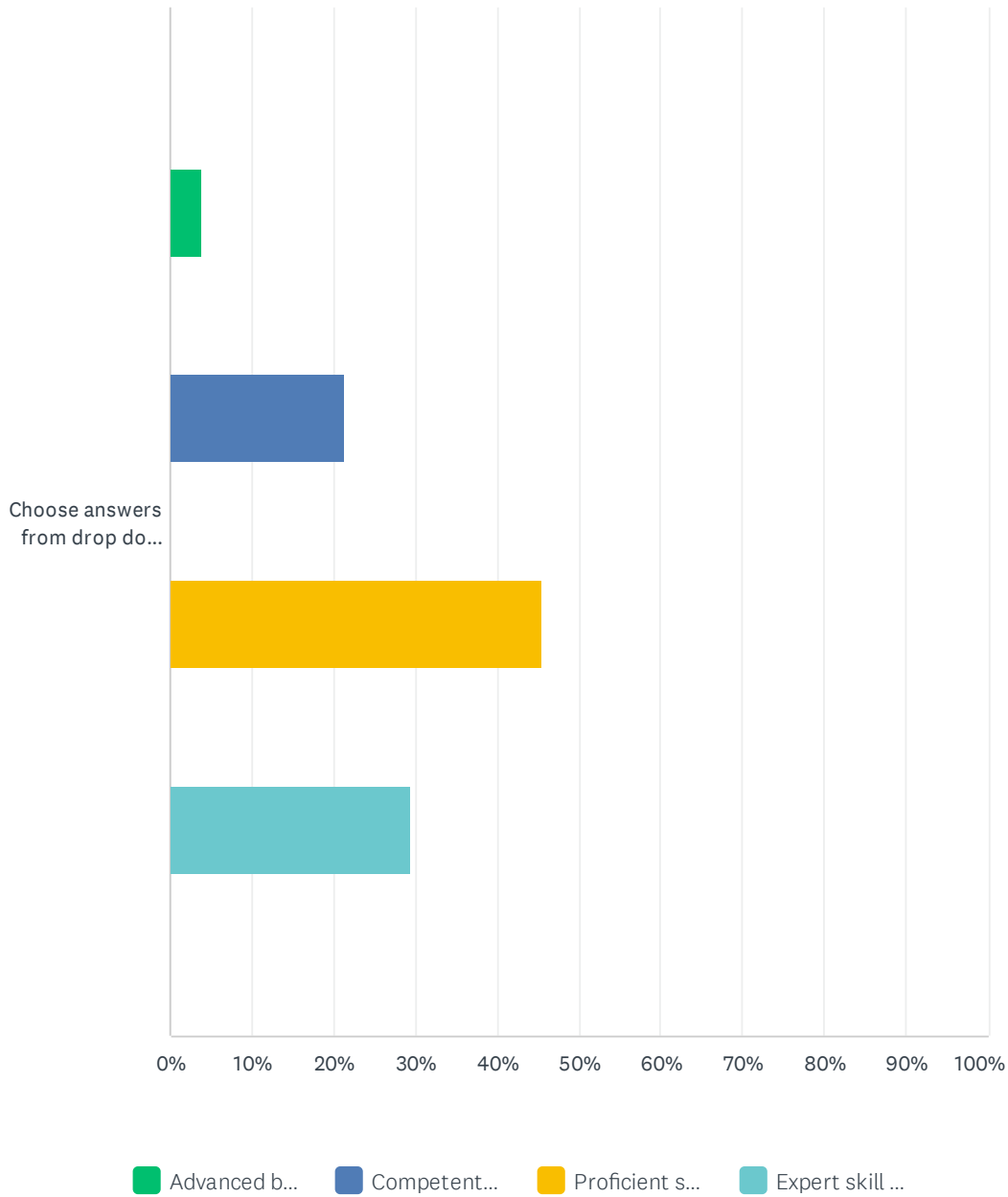
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	2.30% 5	37.79% 82	29.49% 64	17.97% 39	12.44% 27	217

Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.48% 1	15.71% 33	45.24% 95	38.57% 81	210

Spine Validation Practice Analysis Survey 2022

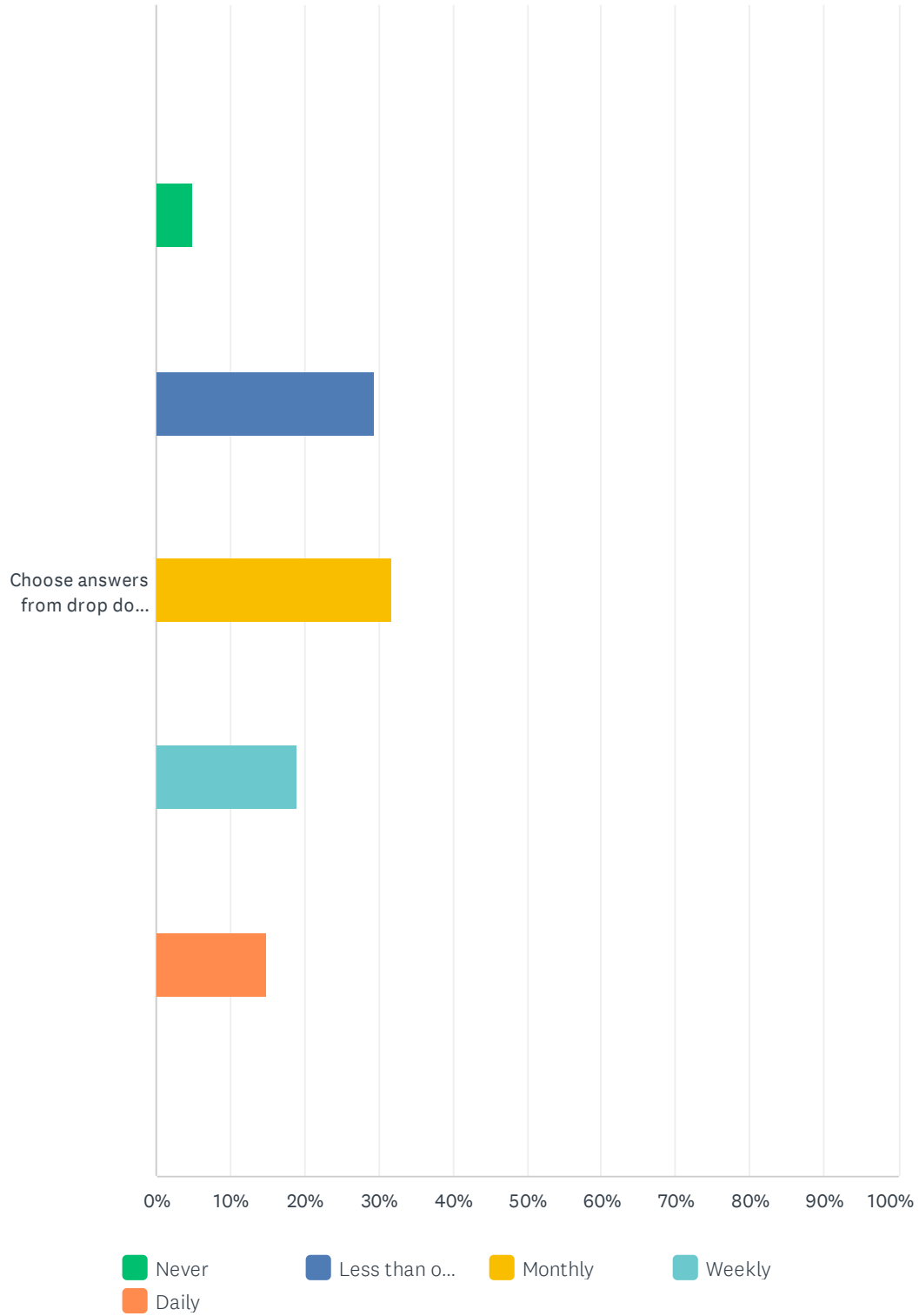
Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.86% 8	21.26% 44	45.41% 94	29.47% 61	207

Q197 6.2.22 Curvature of the spine (e.g., adolescent idiopathic scoliosis, congenital muscular scoliosis, pathologic scoliosis, adult idiopathic scoliosis, degenerative scoliosis, kyphosis, lordosis).

Answered: 221 Skipped: 989

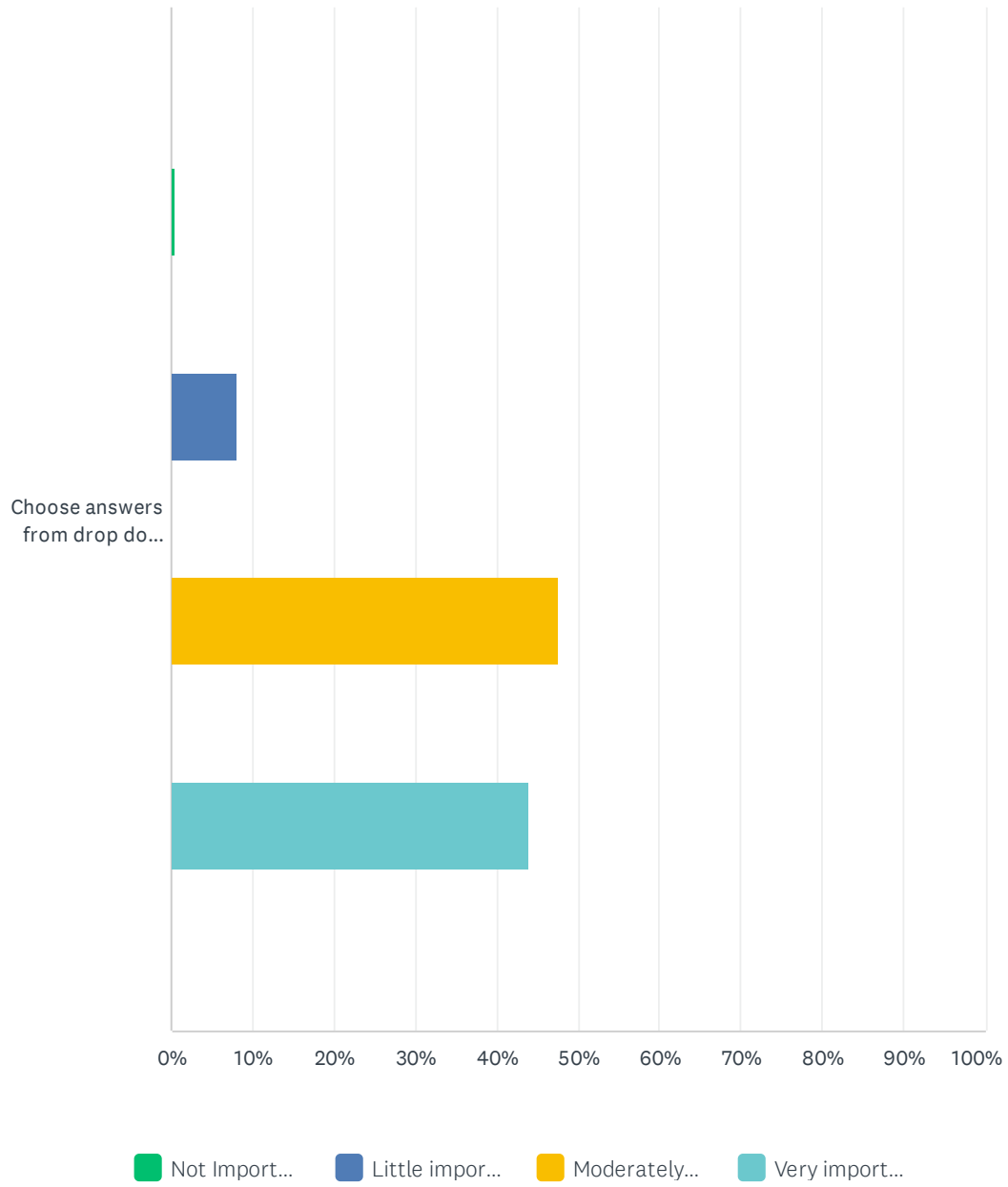
Spine Validation Practice Analysis Survey 2022

Frequency



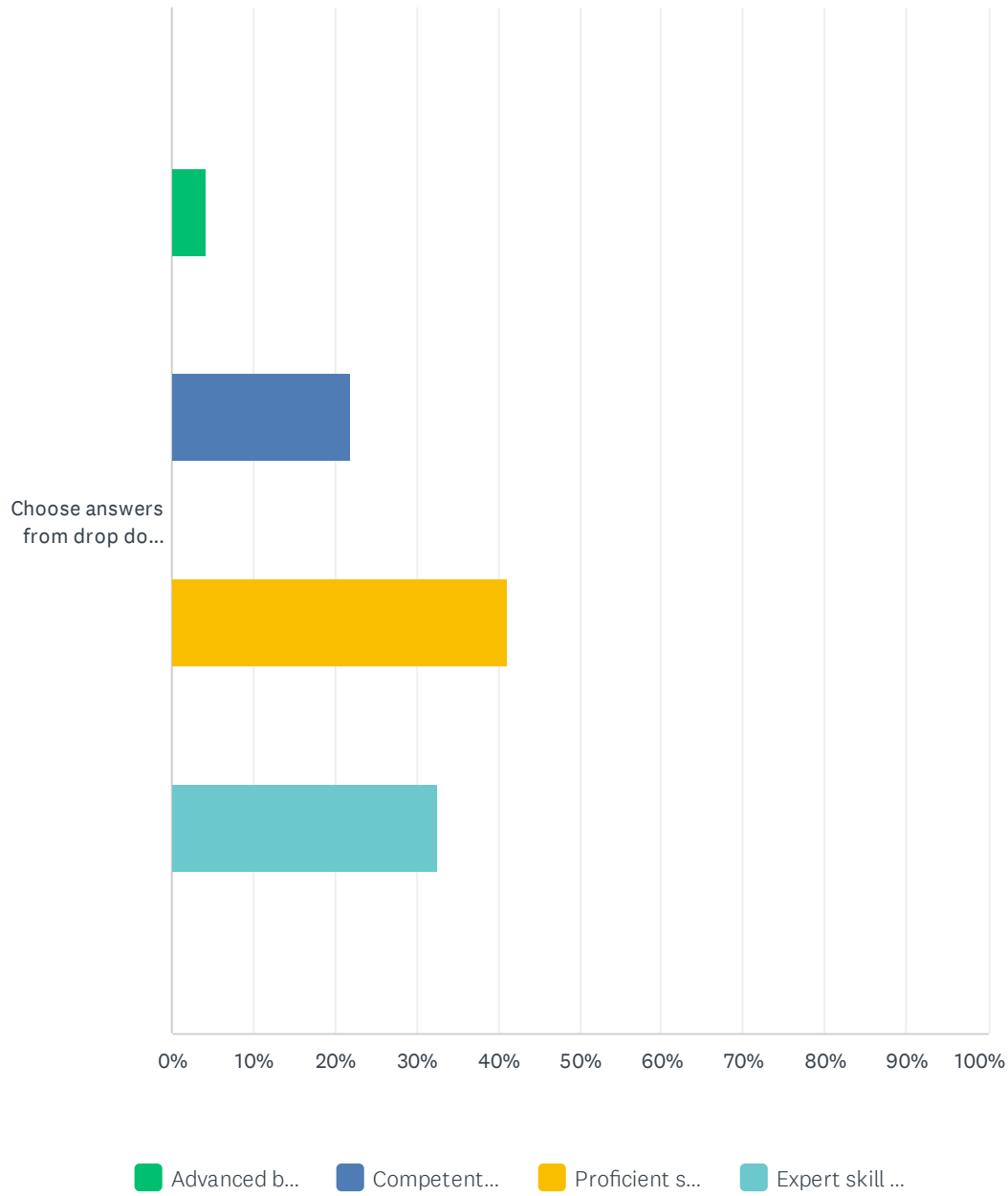
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	4.98% 11	29.41% 65	31.67% 70	19.00% 42	14.93% 33	221

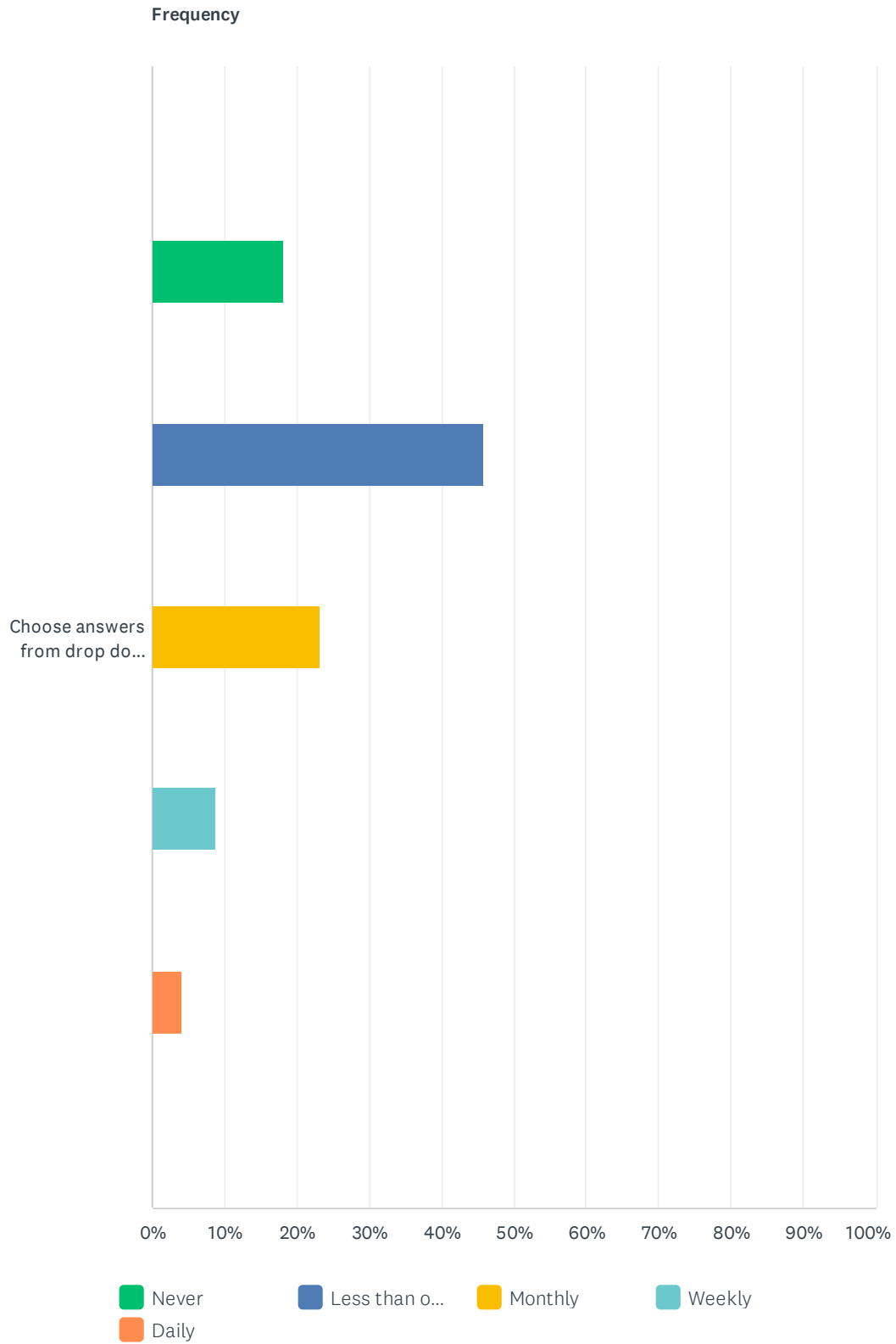
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.47% 1	8.02% 17	47.64% 101	43.87% 93	212

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	4.31% 9	22.01% 46	41.15% 86	32.54% 68	209

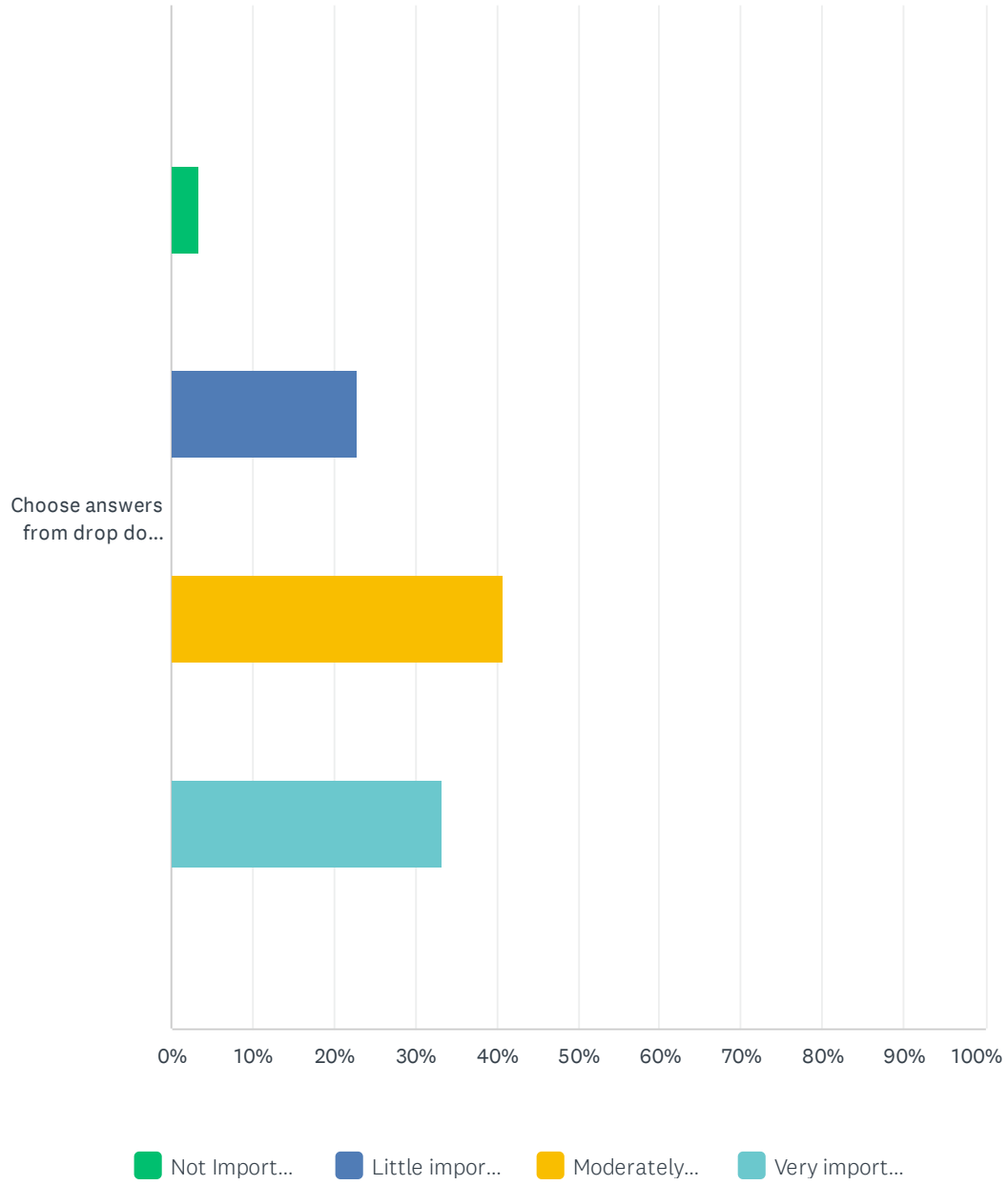
Q198 6.2.23 Diastasis recti.

Answered: 220 Skipped: 990



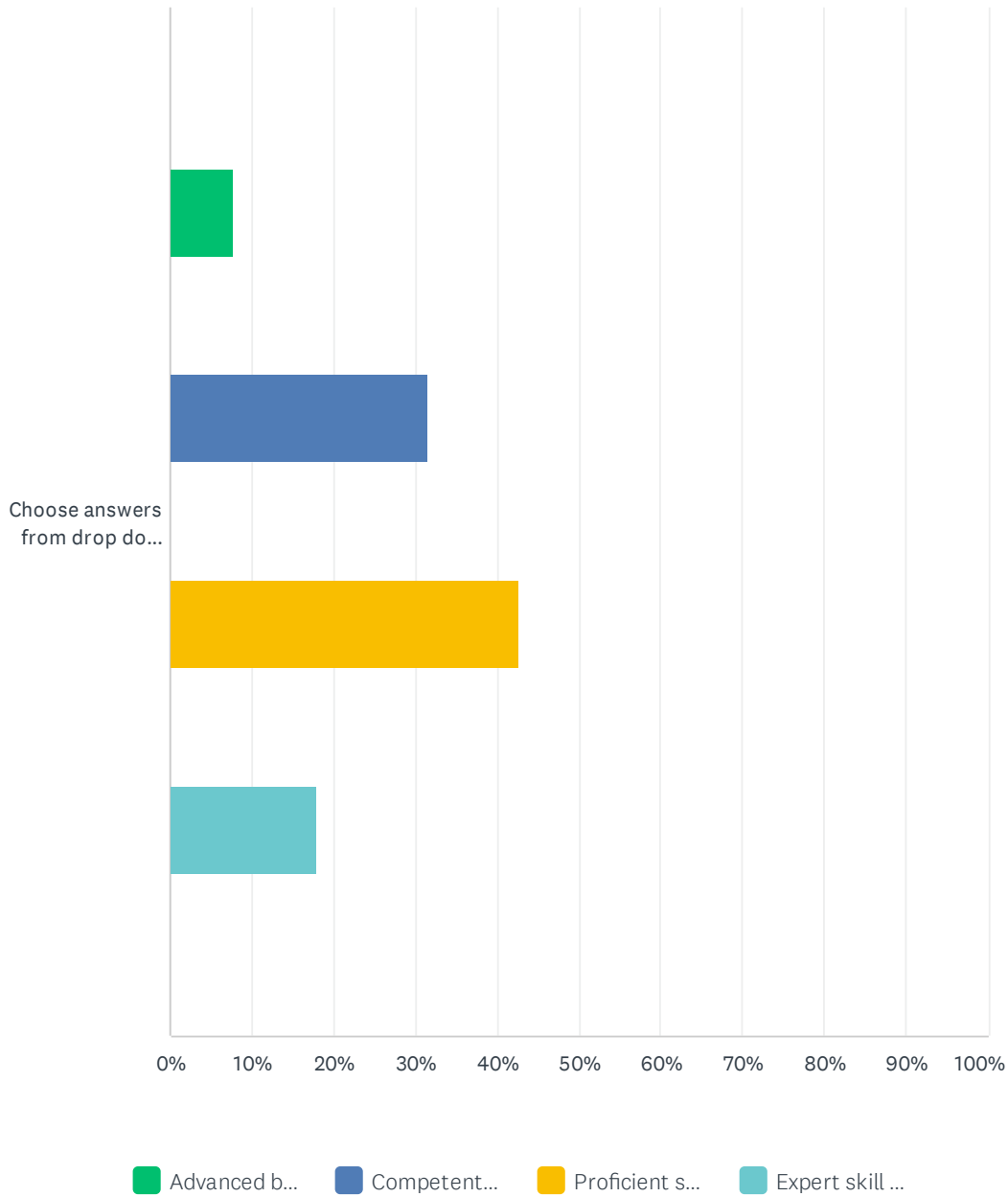
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	18.18% 40	45.91% 101	23.18% 51	8.64% 19	4.09% 9	220

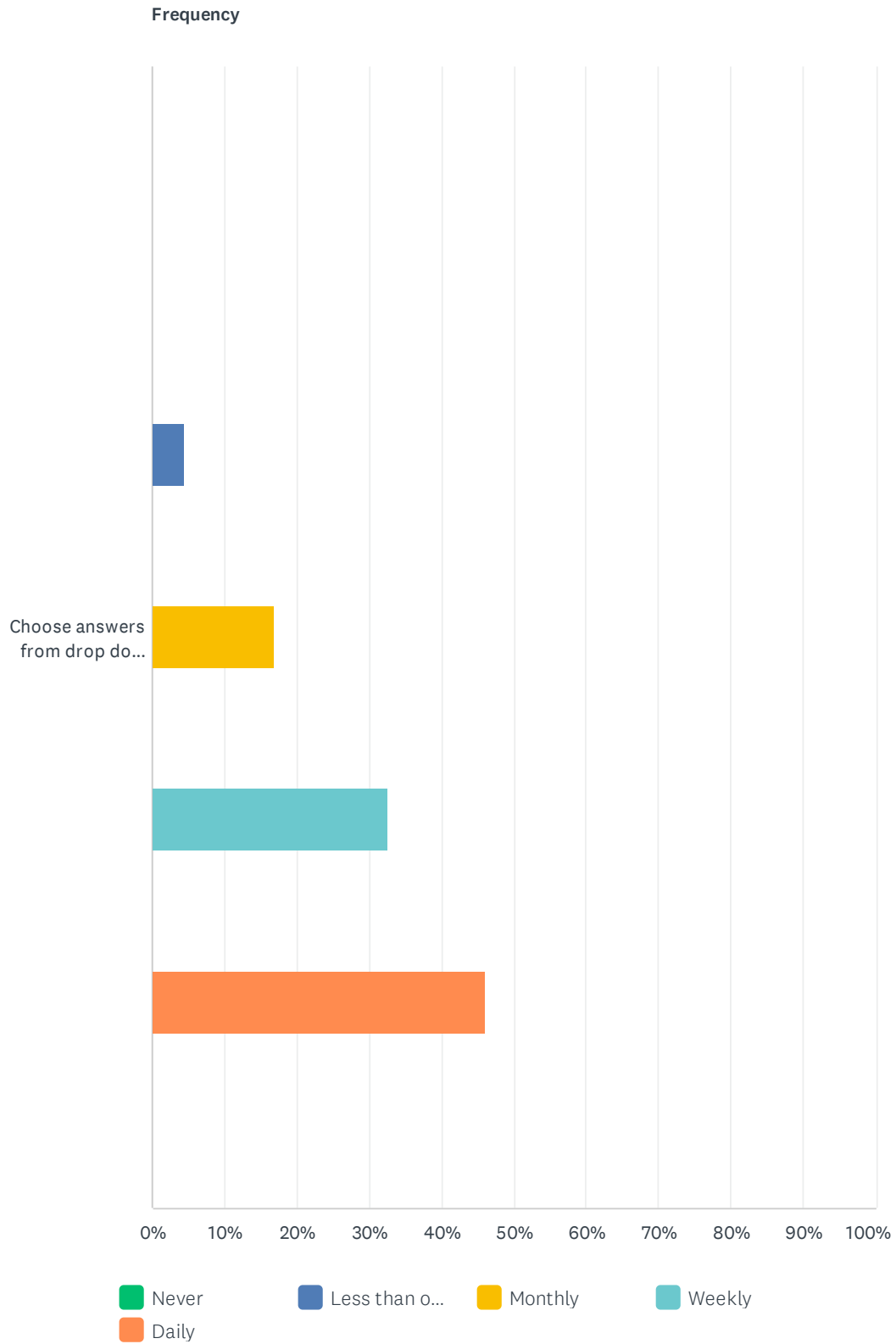
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	3.32% 7	22.75% 48	40.76% 86	33.18% 70	211

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	7.77% 16	31.55% 65	42.72% 88	17.96% 37	206

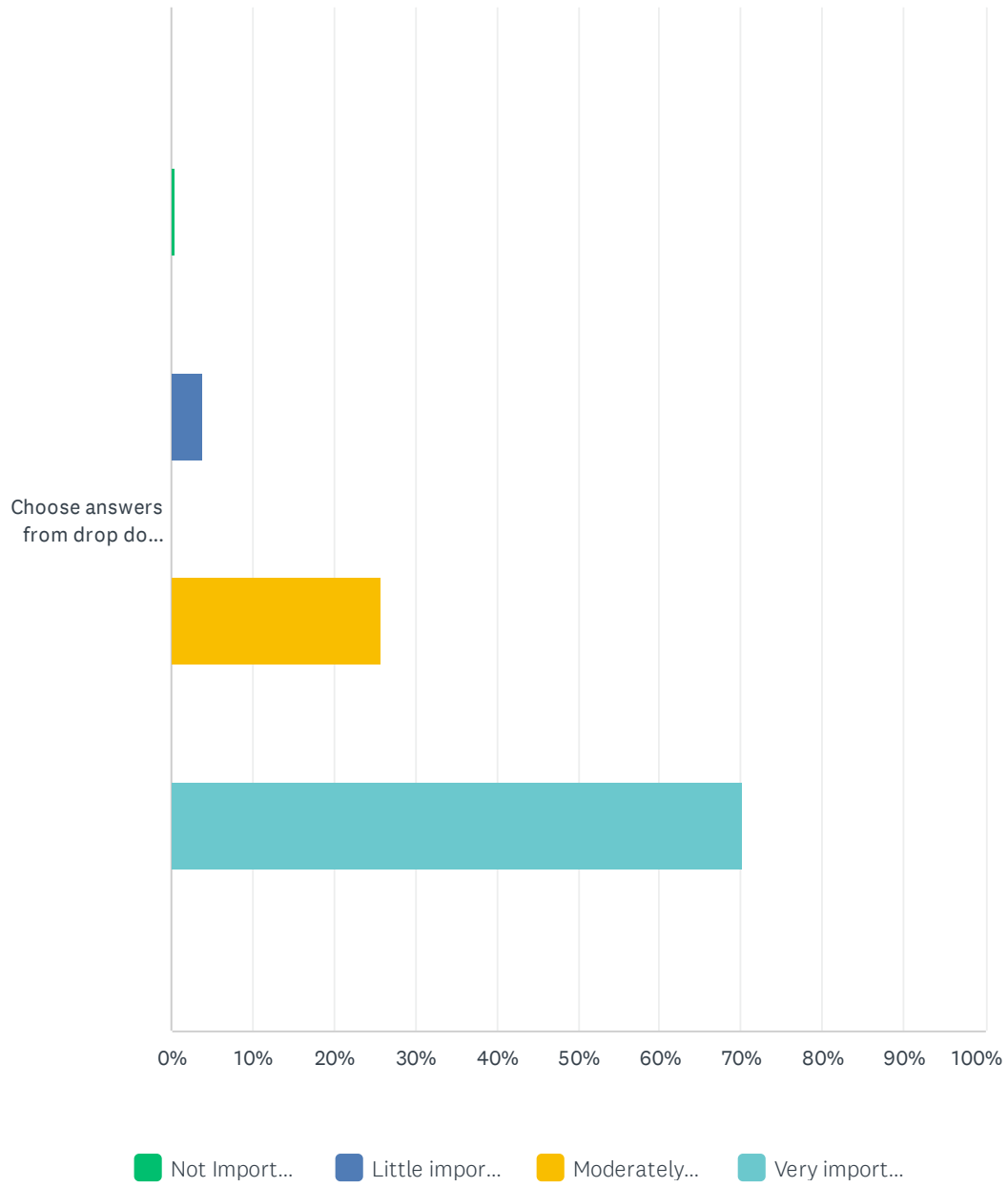
Q199 6.2.24 Facet dysfunction (cervical, thoracic, lumbar).

Answered: 221 Skipped: 989



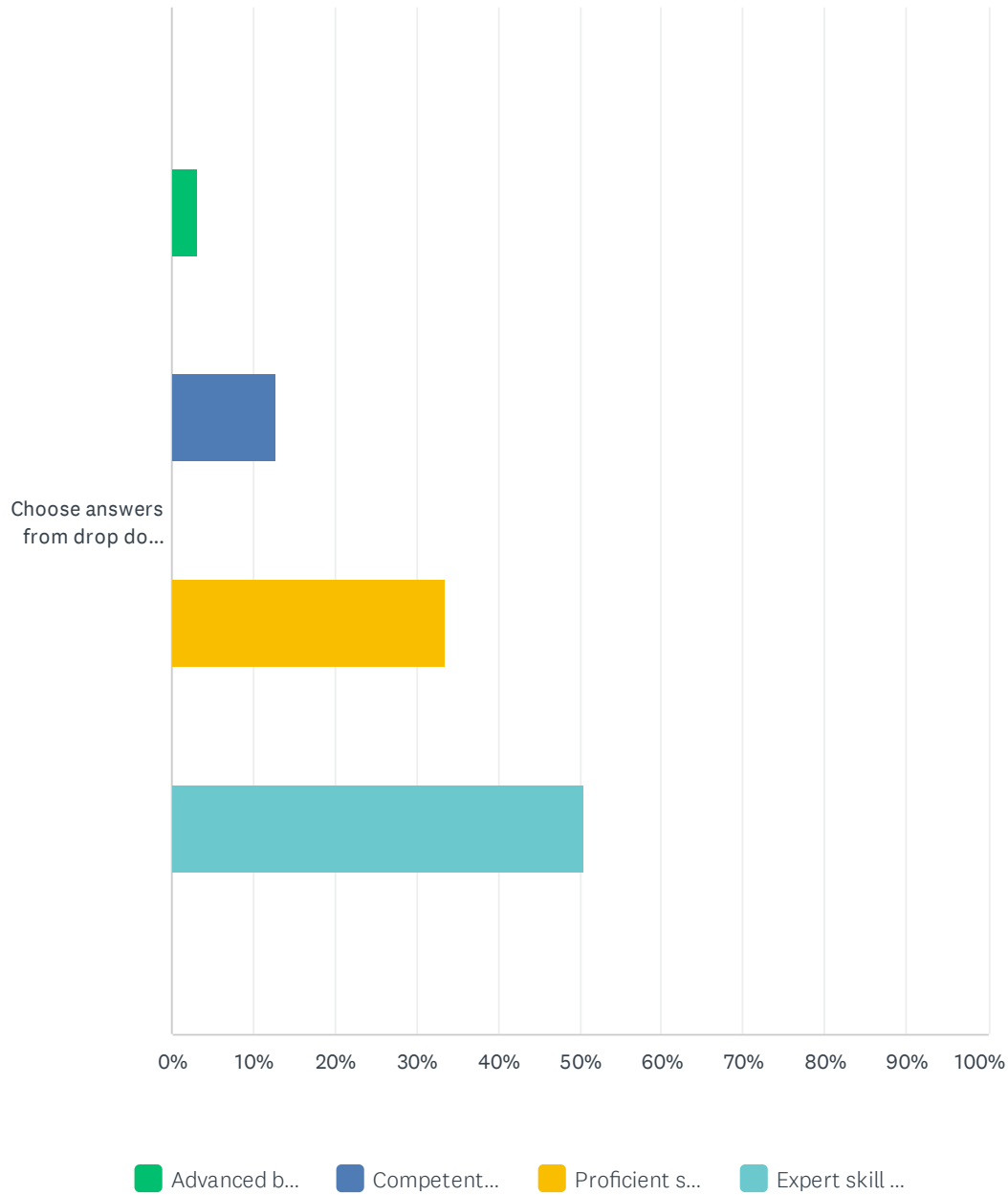
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.00% 0	4.52% 10	16.74% 37	32.58% 72	46.15% 102	221

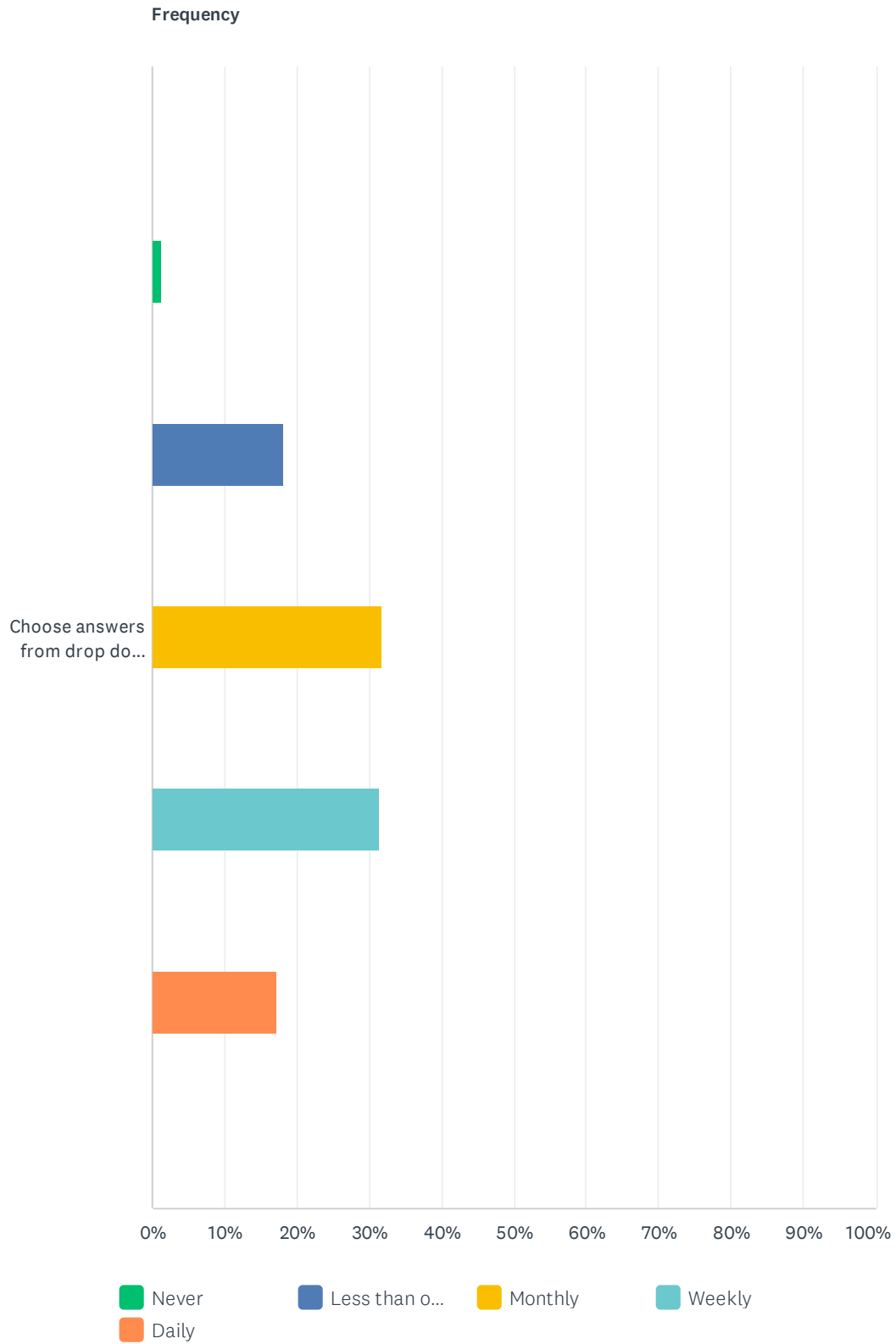
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.47% 1	3.74% 8	25.70% 55	70.09% 150	214

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.30% 7	12.74% 27	33.49% 71	50.47% 107	212

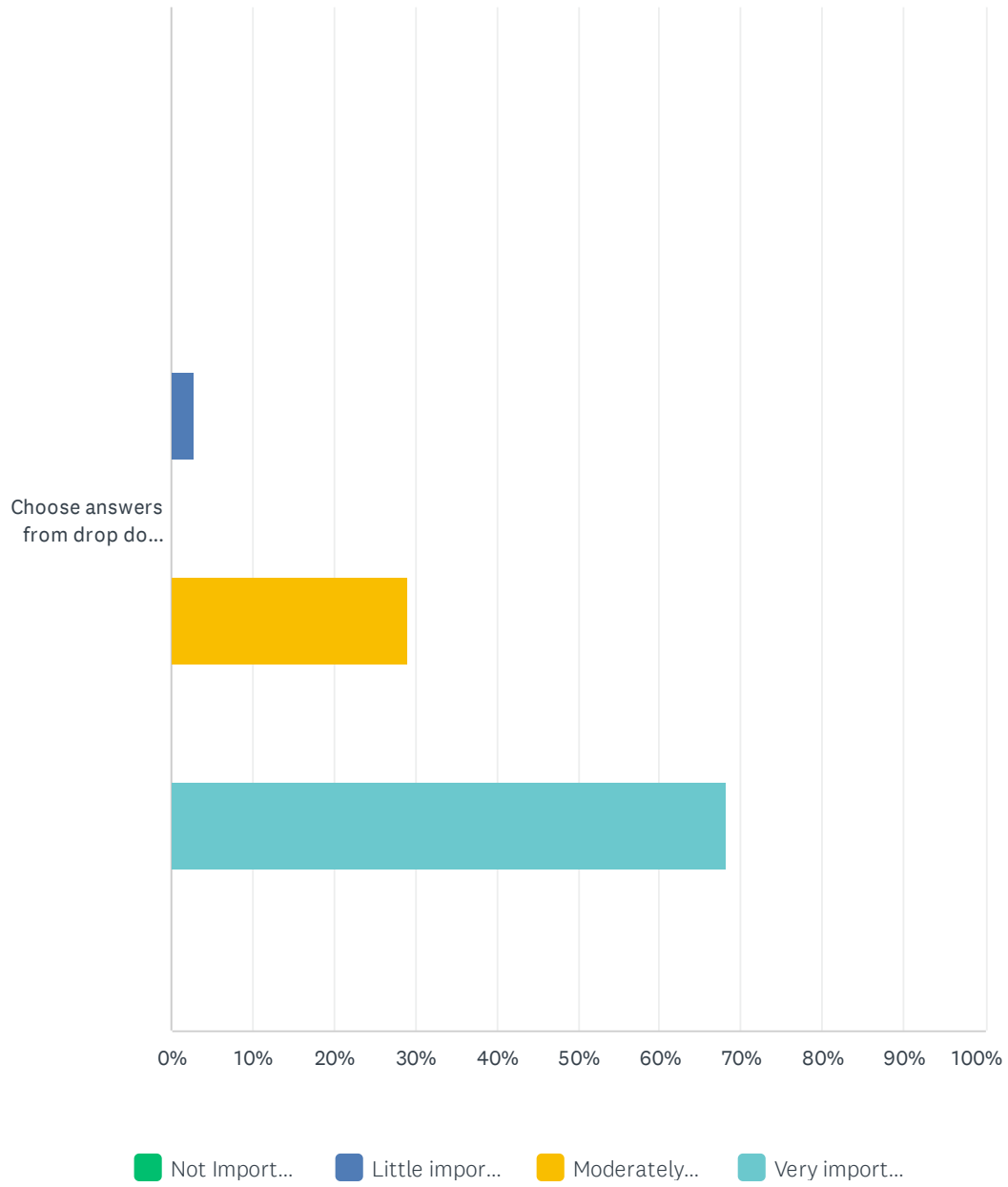
Q200 6.2.25 Operative procedure on spinal structure.

Answered: 220 Skipped: 990



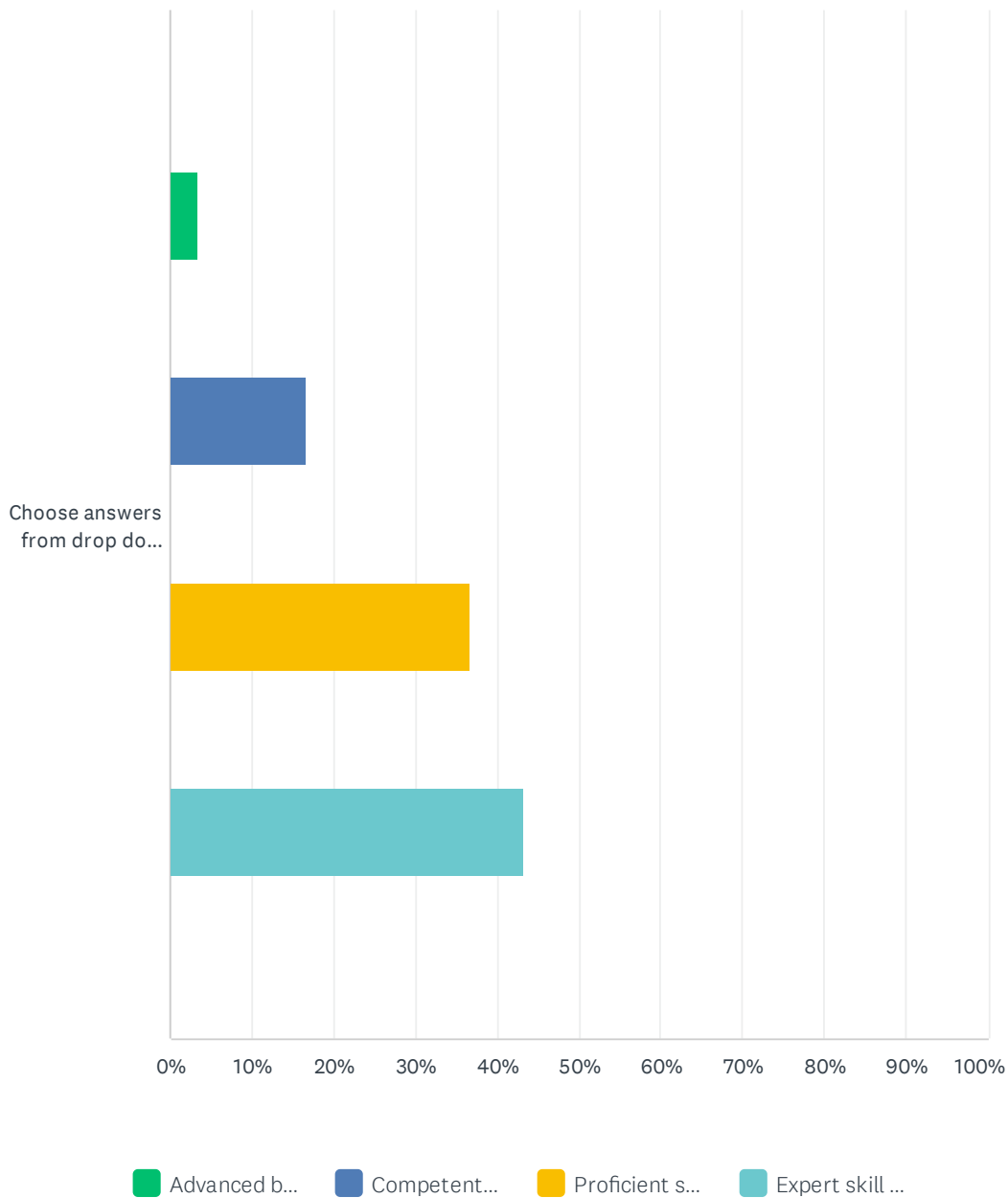
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	1.36% 3	18.18% 40	31.82% 70	31.36% 69	17.27% 38	220

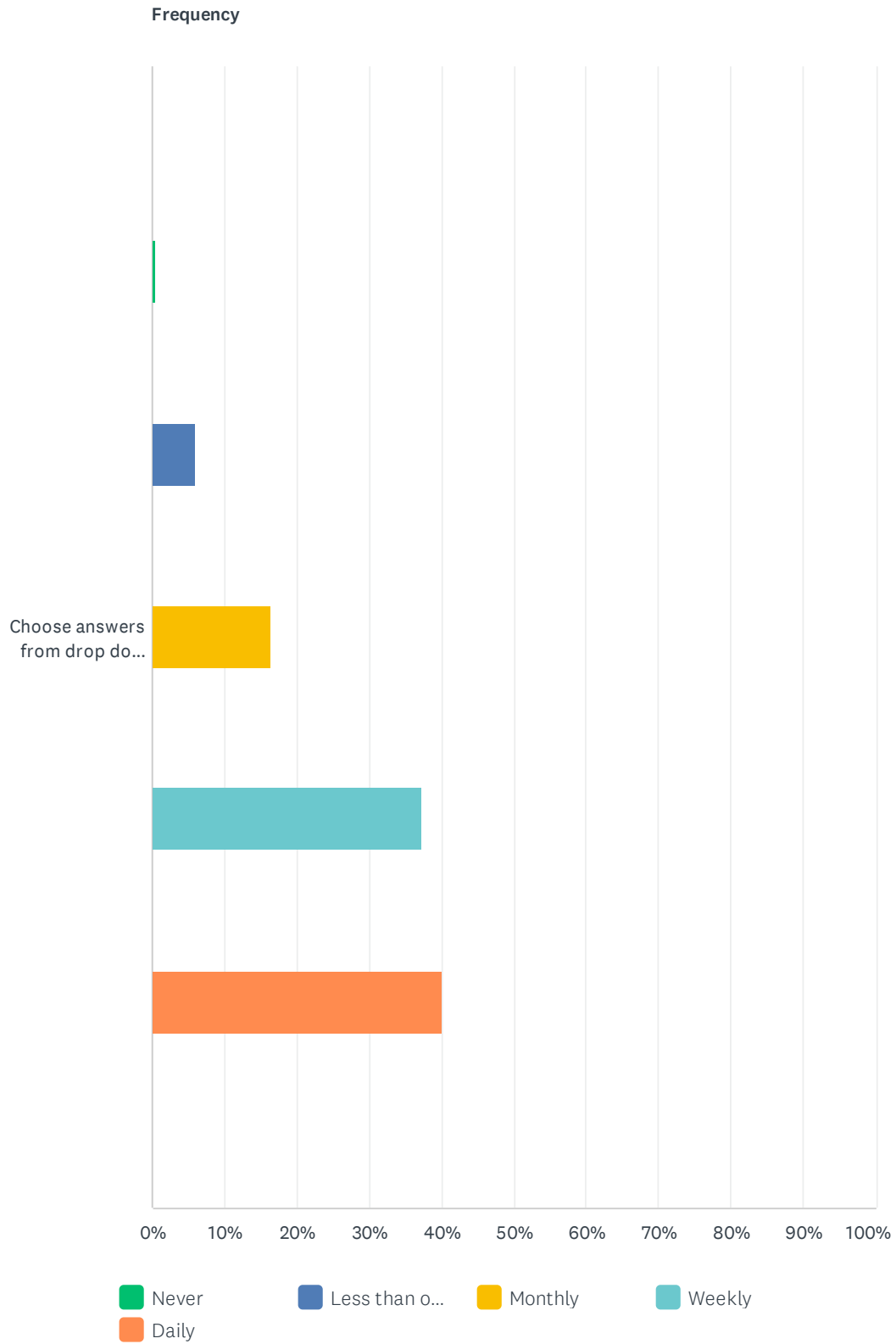
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.00% 0	2.80% 6	28.97% 62	68.22% 146	214

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	3.33% 7	16.67% 35	36.67% 77	43.33% 91	210

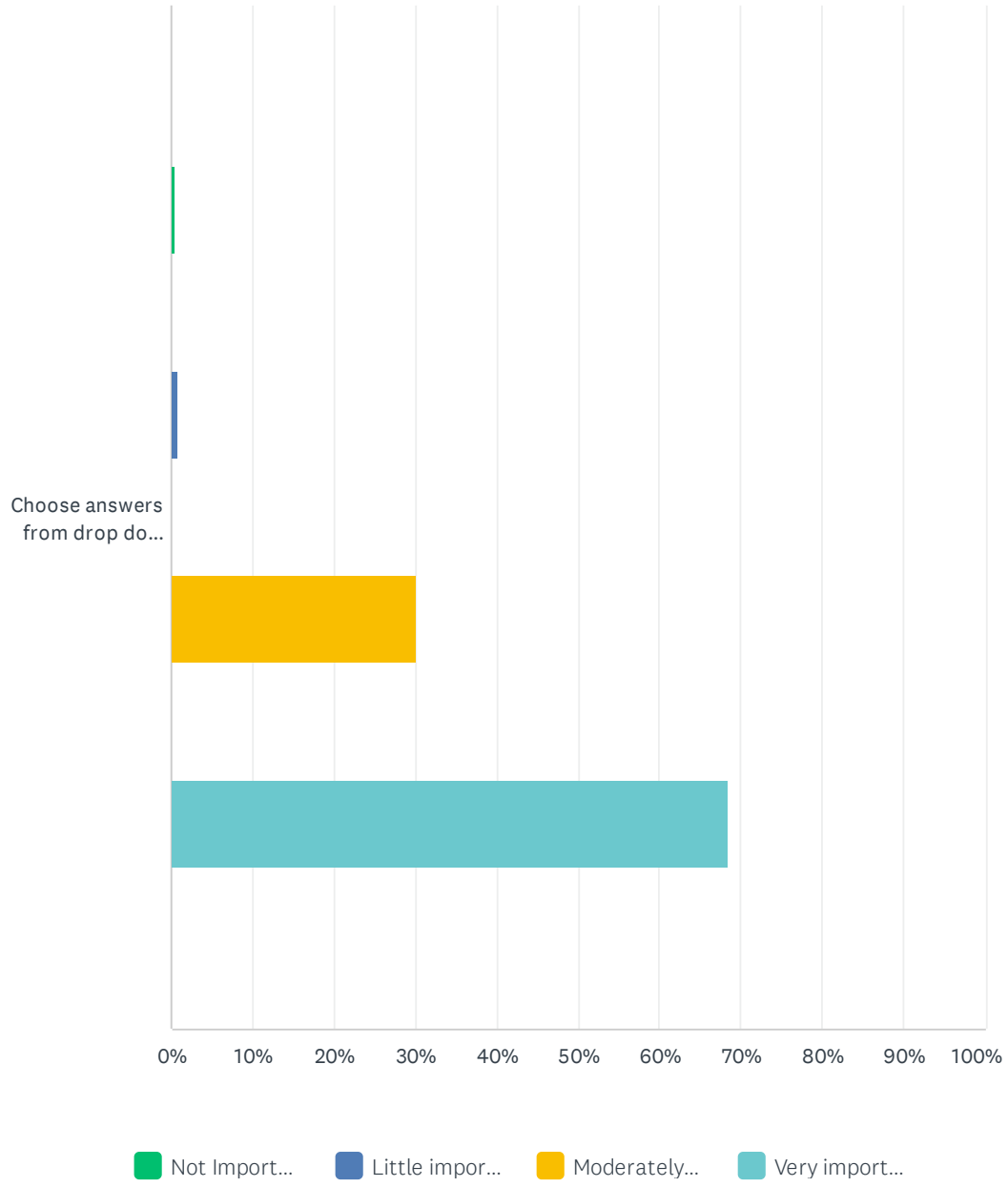
Q201 6.2.26 Spinal stenosis.

Answered: 220 Skipped: 990



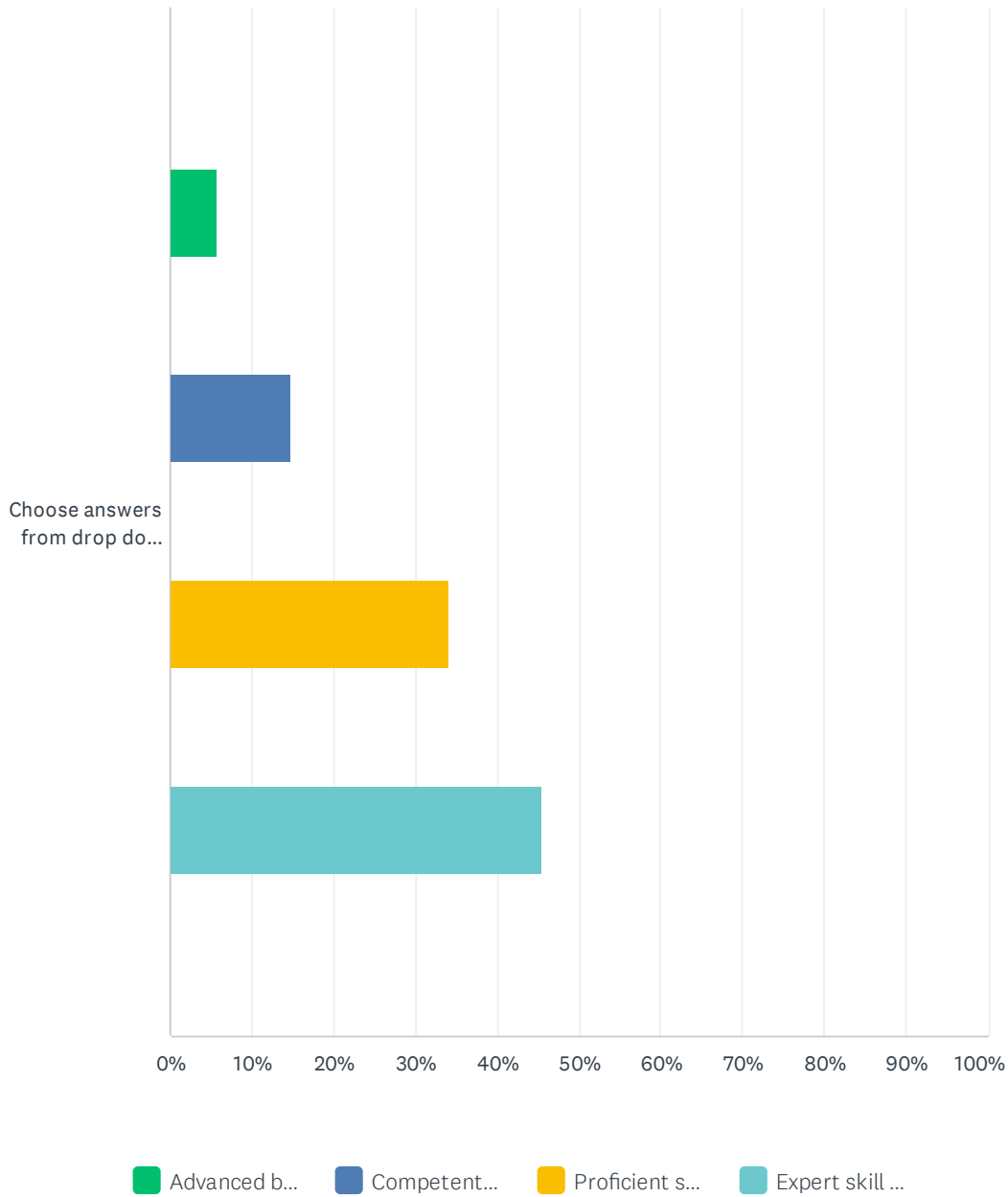
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	0.45% 1	5.91% 13	16.36% 36	37.27% 82	40.00% 88	220

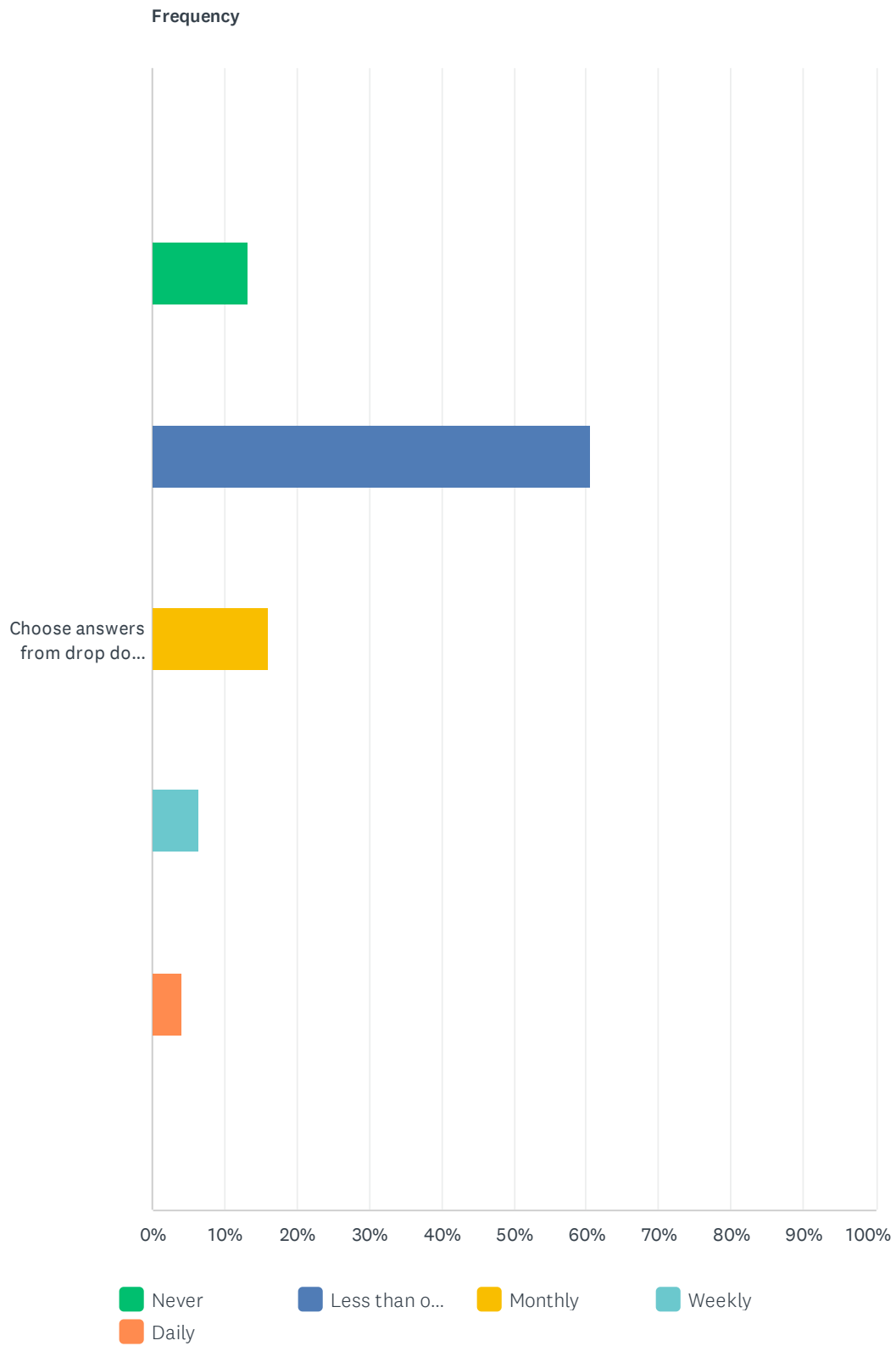
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	0.47% 1	0.94% 2	30.05% 64	68.54% 146	213

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	5.69% 12	14.69% 31	34.12% 72	45.50% 96	211

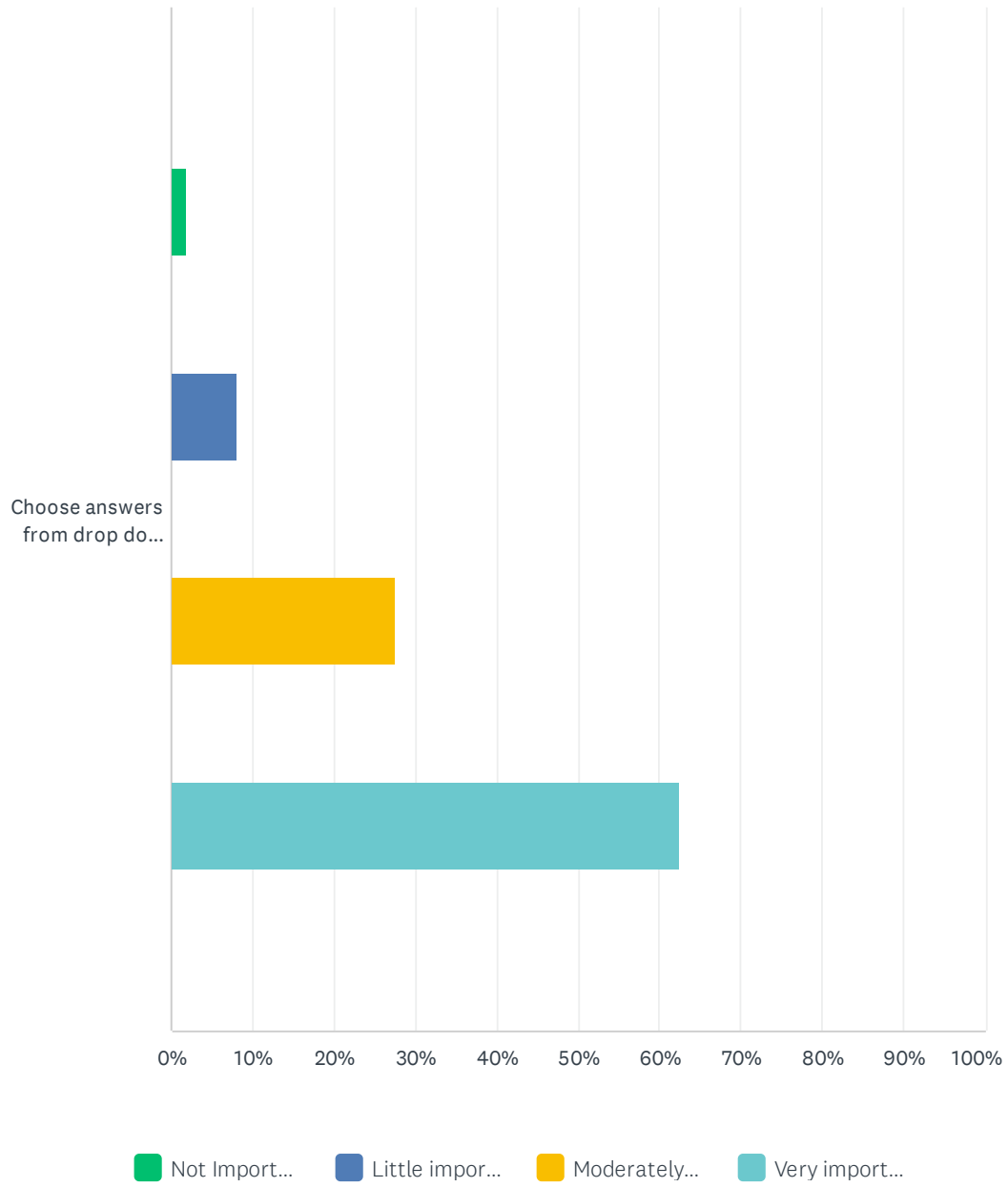
Q202 6.2.27 Oncological Disorders (e.g., tumor, spine metastases, etc.).

Answered: 220 Skipped: 990



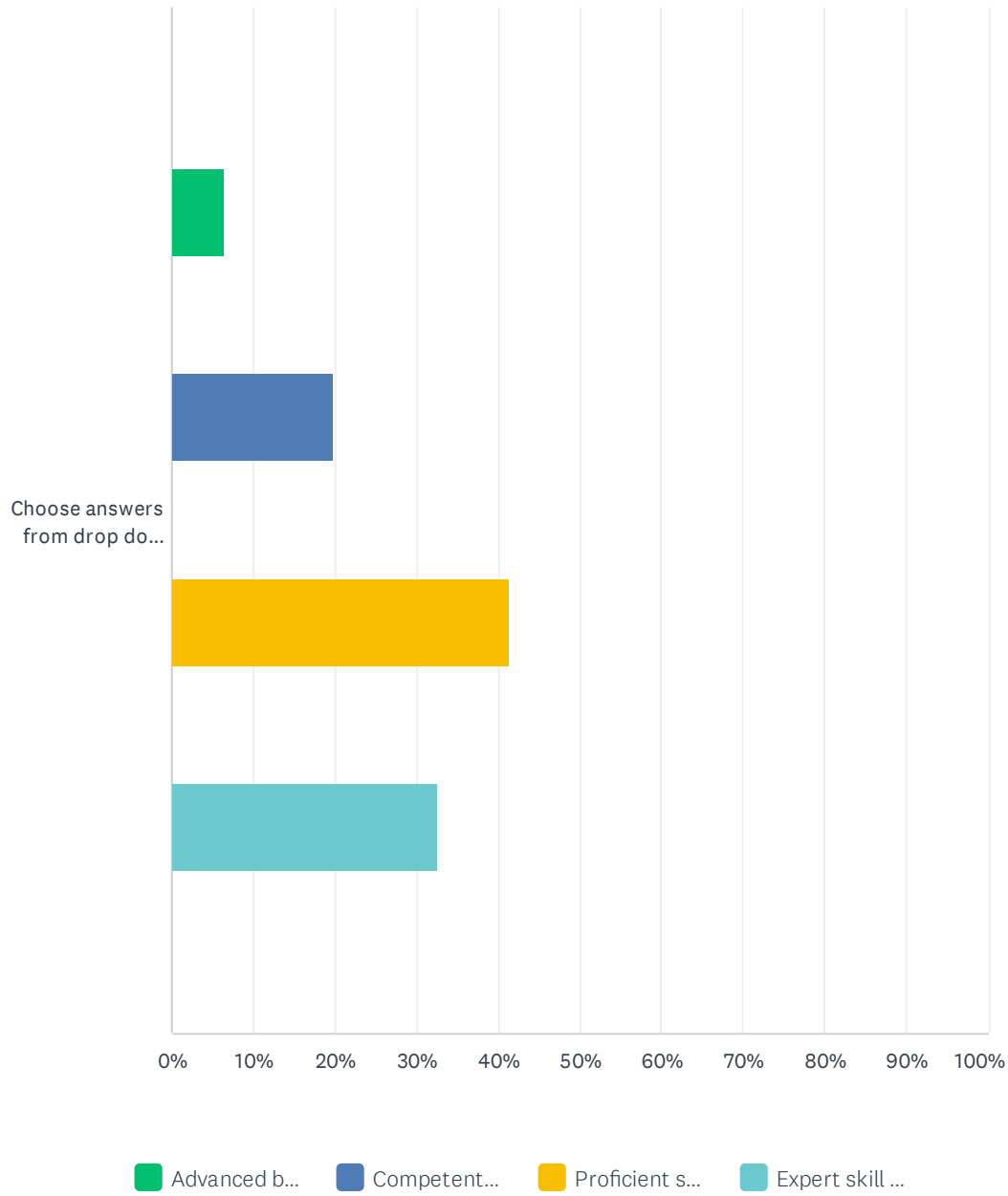
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	13.18% 29	60.45% 133	15.91% 35	6.36% 14	4.09% 9	220

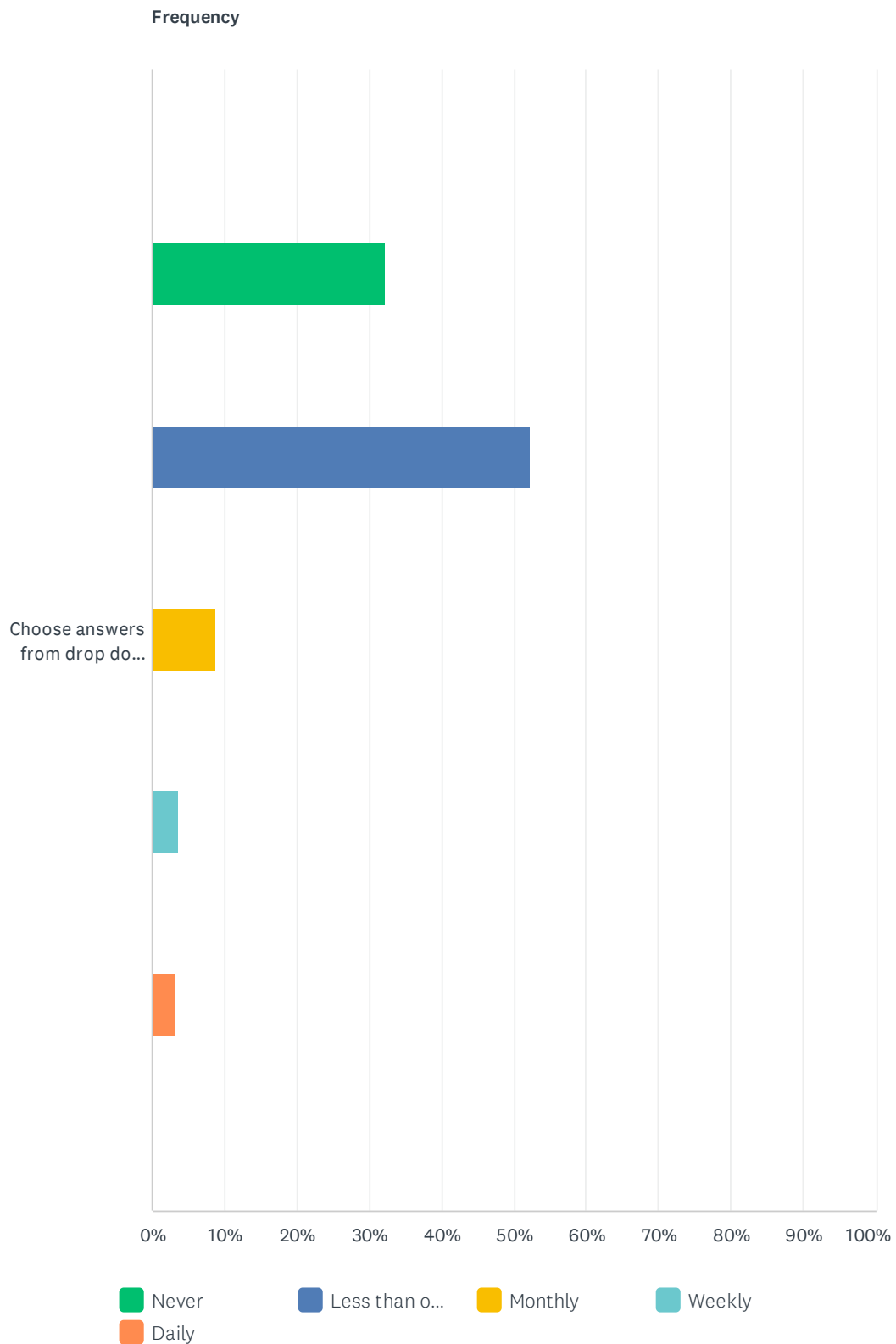
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	1.92% 4	8.17% 17	27.40% 57	62.50% 130	208

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	6.31% 13	19.90% 41	41.26% 85	32.52% 67	206

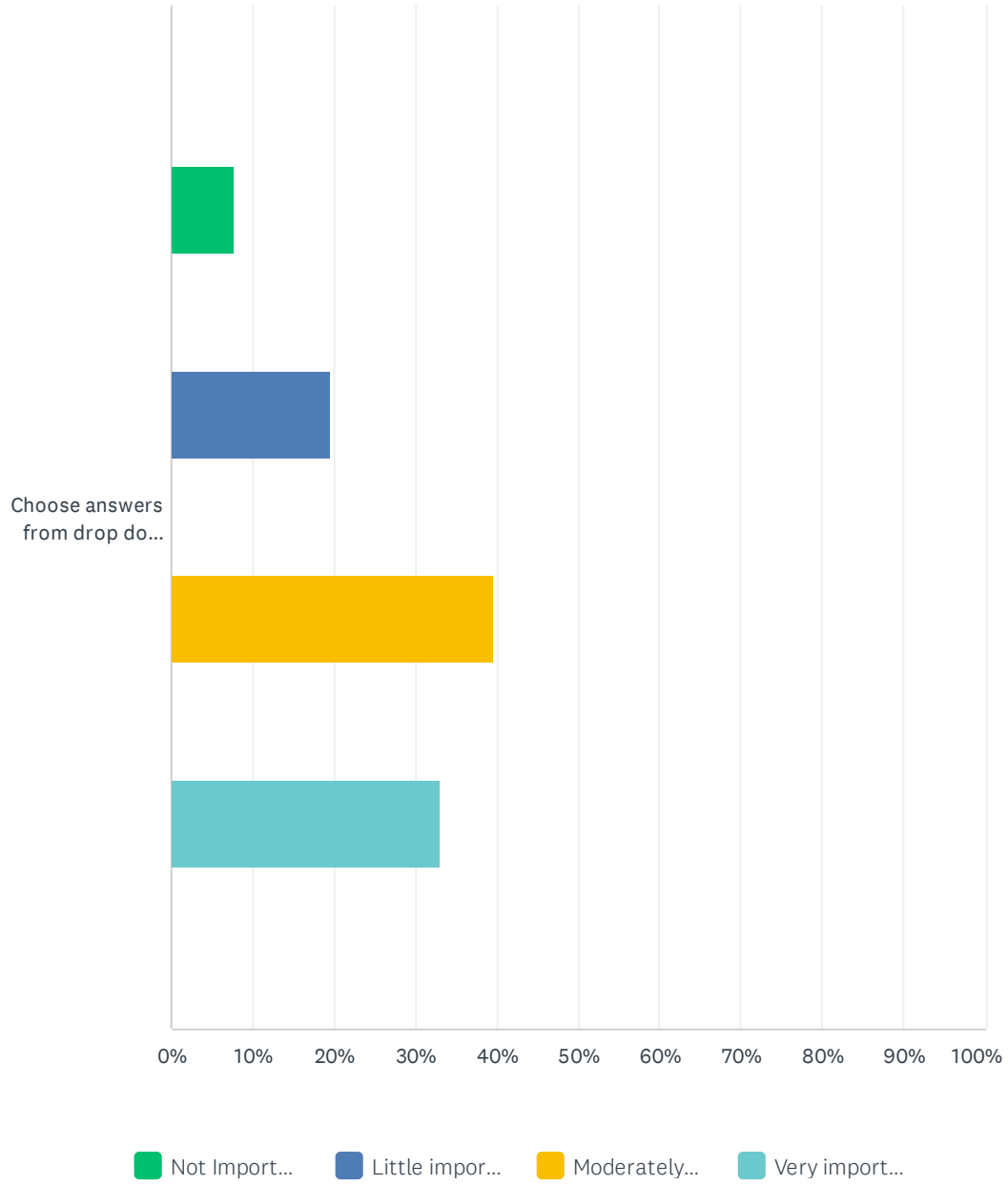
Q203 6.2.28 Torticollis (e.g., atlanto axial rotary displacement, congenital muscular torticollis).

Answered: 220 Skipped: 990



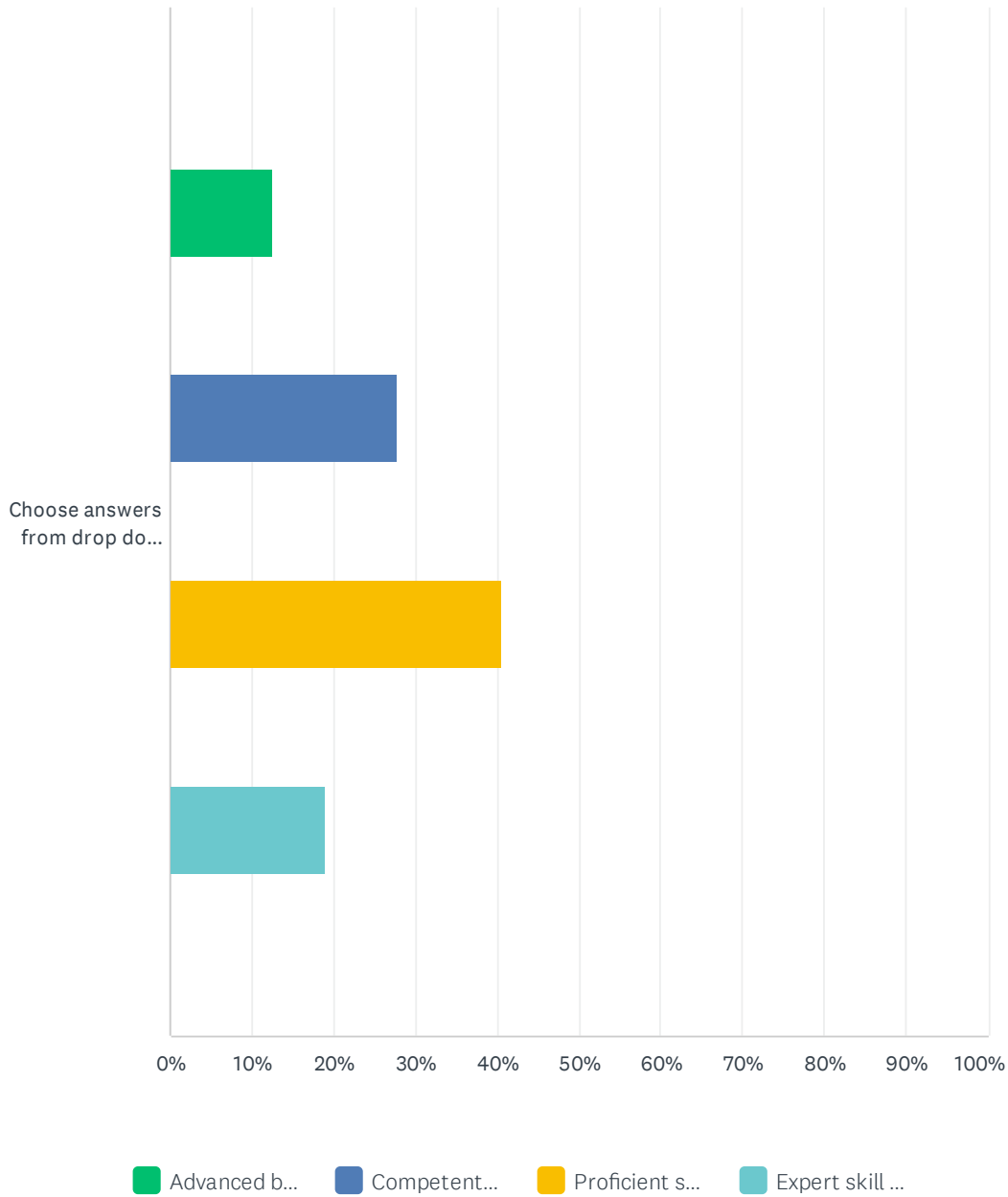
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	32.27% 71	52.27% 115	8.64% 19	3.64% 8	3.18% 7	220

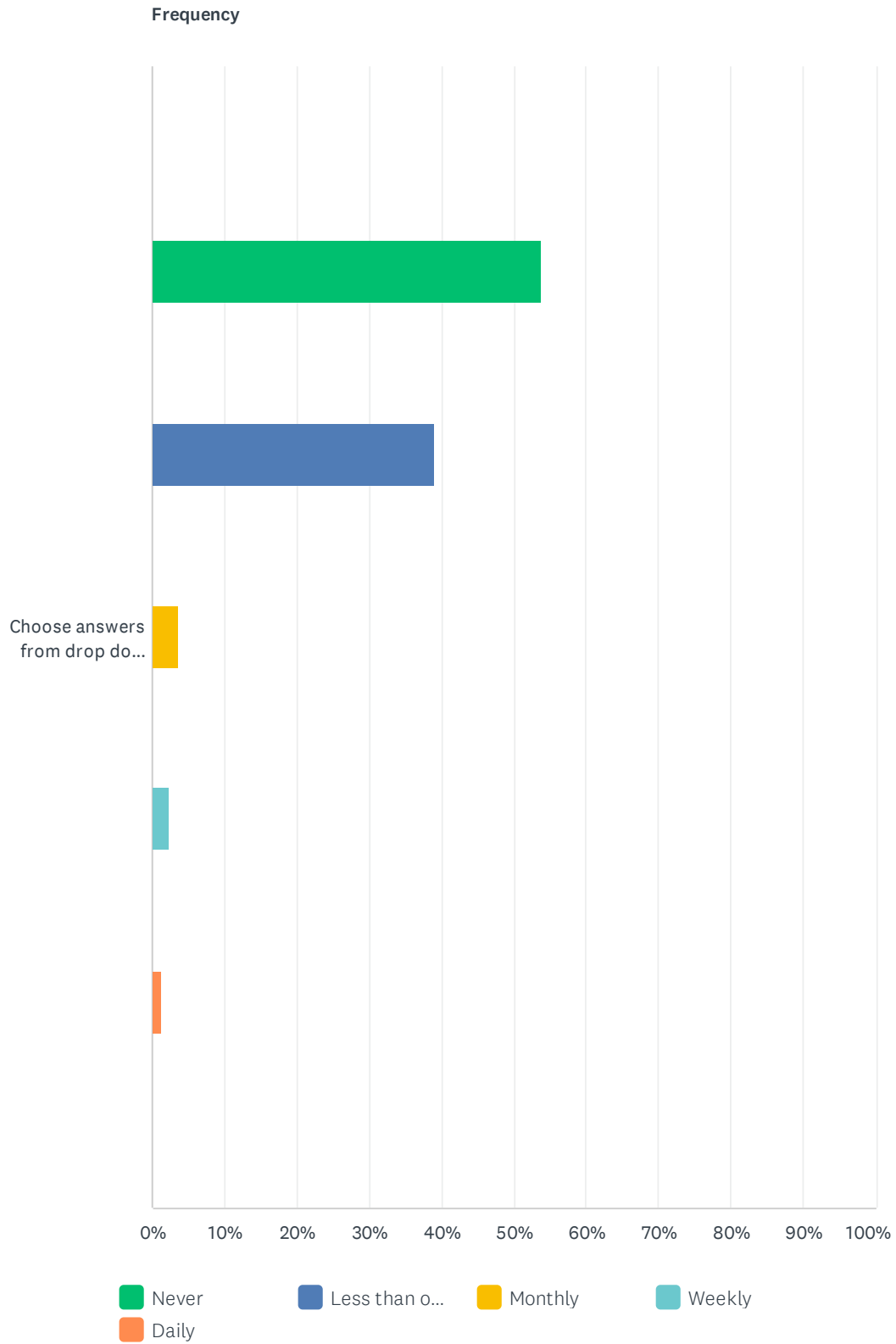
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	7.66% 16	19.62% 41	39.71% 83	33.01% 69	209

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	12.68% 26	27.80% 57	40.49% 83	19.02% 39	205

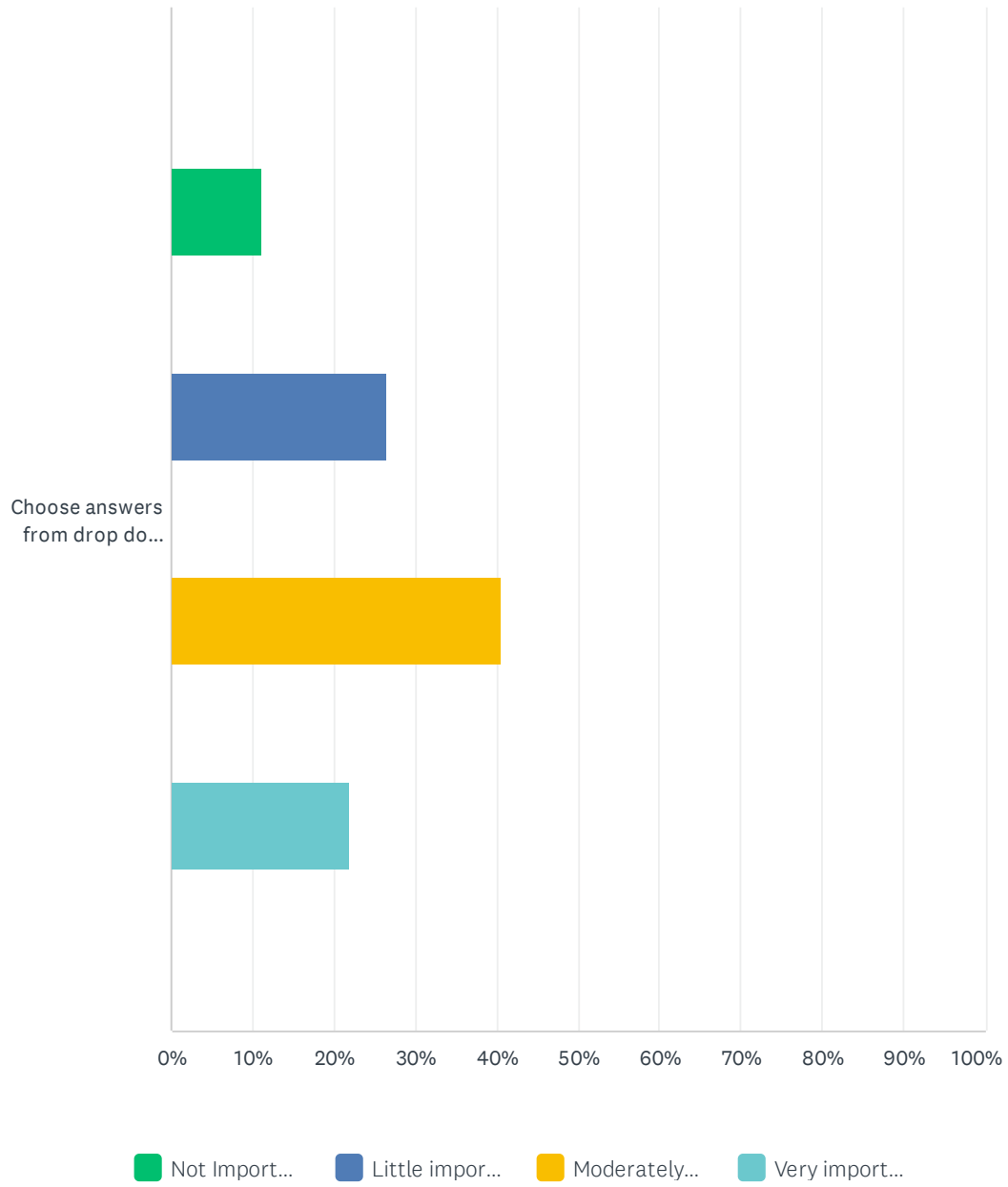
Q204 6.2.29 Klippel-Feil Syndrome.

Answered: 220 Skipped: 990



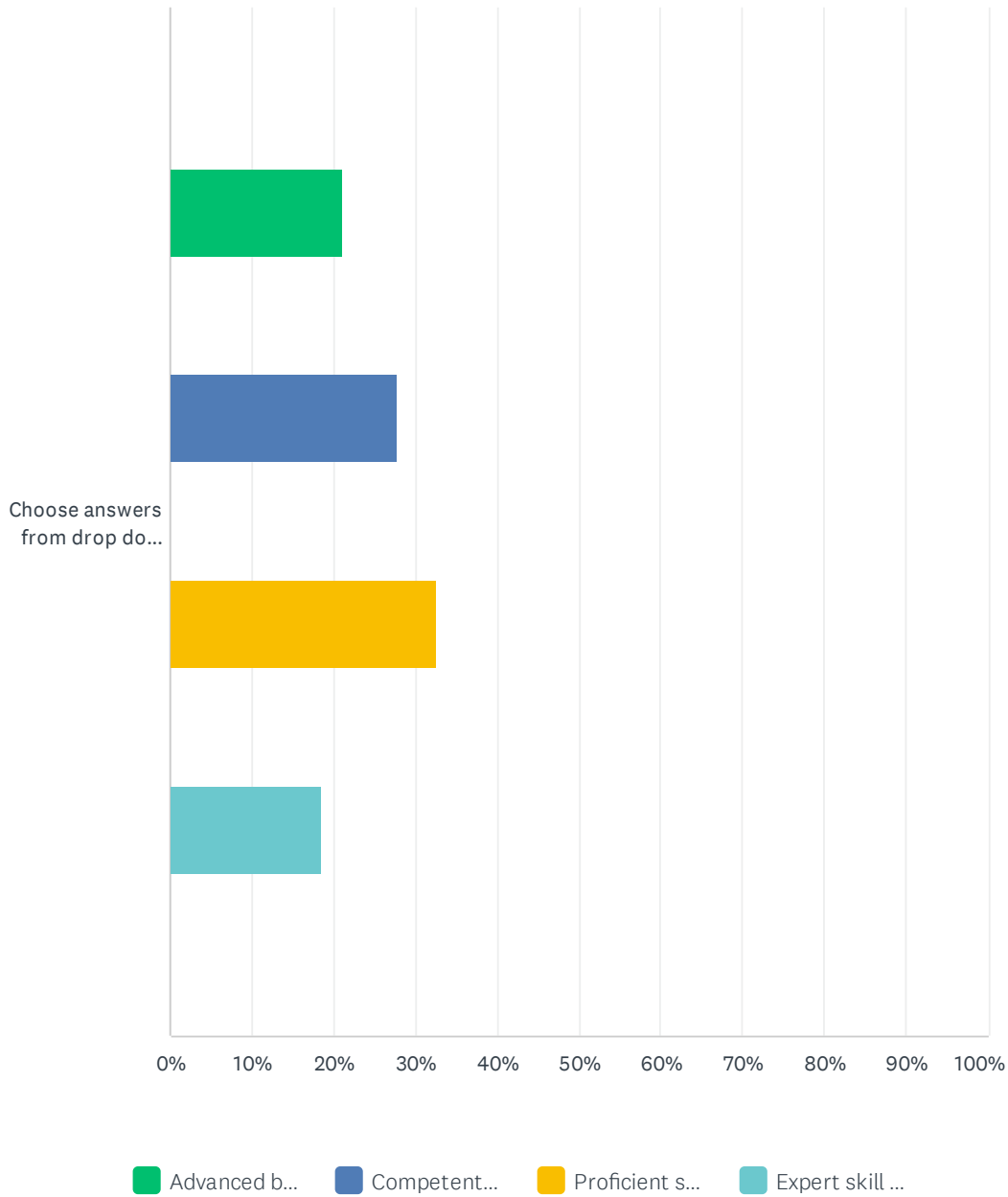
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	53.64% 118	39.09% 86	3.64% 8	2.27% 5	1.36% 3	220

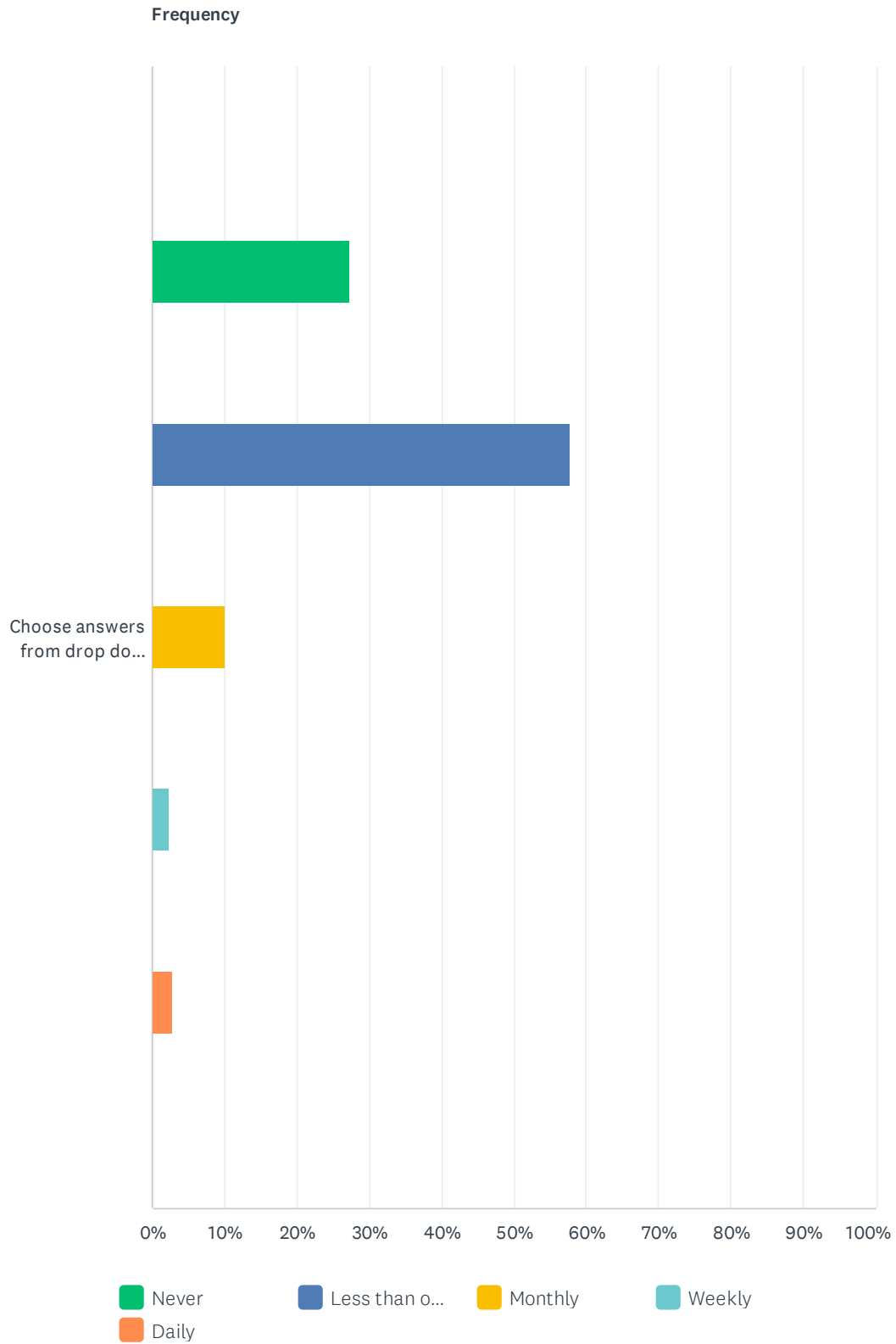
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	11.00% 22	26.50% 53	40.50% 81	22.00% 44	200

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	21.11% 42	27.64% 55	32.66% 65	18.59% 37	199

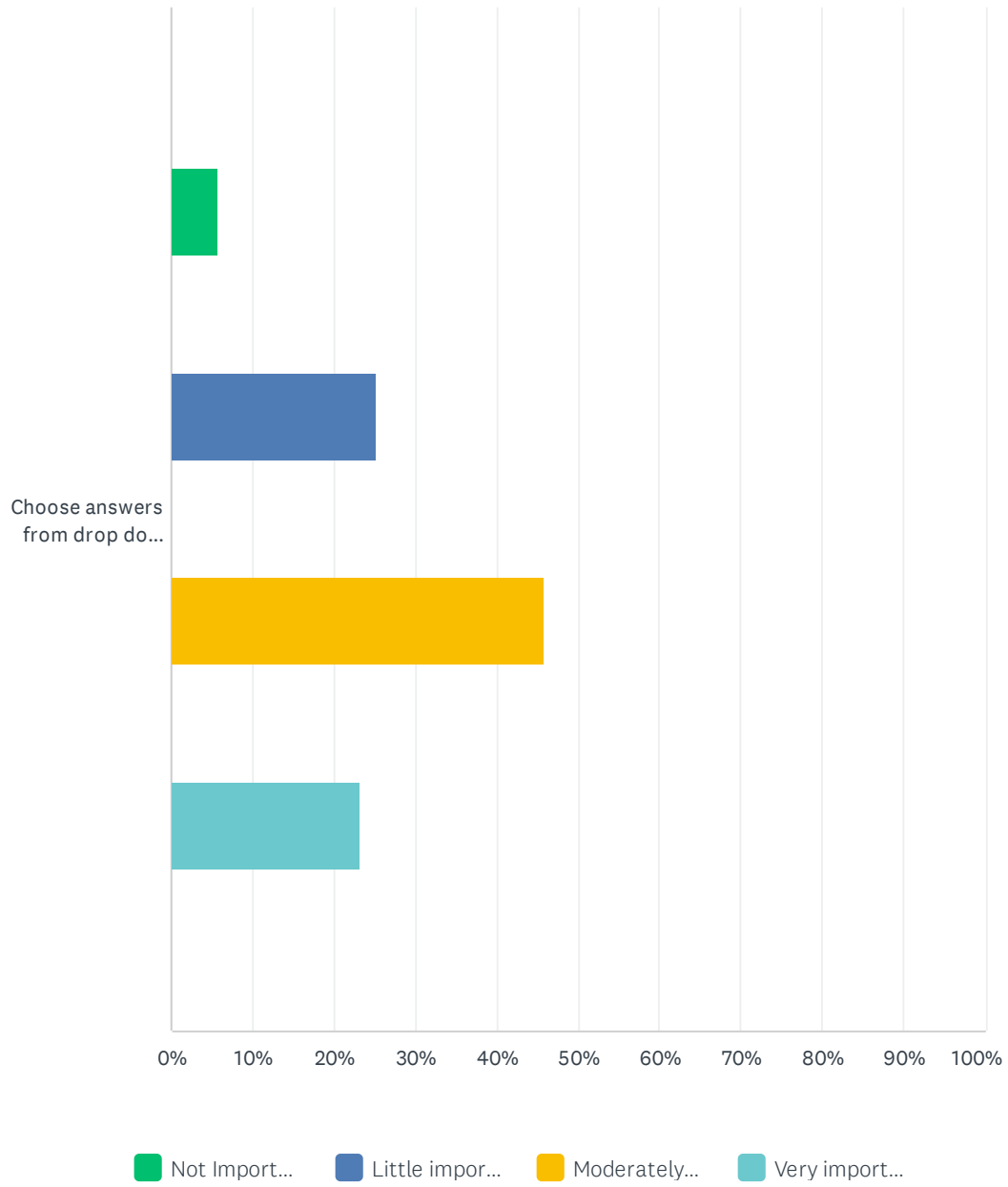
Q205 6.2.30 Scheuermann's Disease.

Answered: 220 Skipped: 990



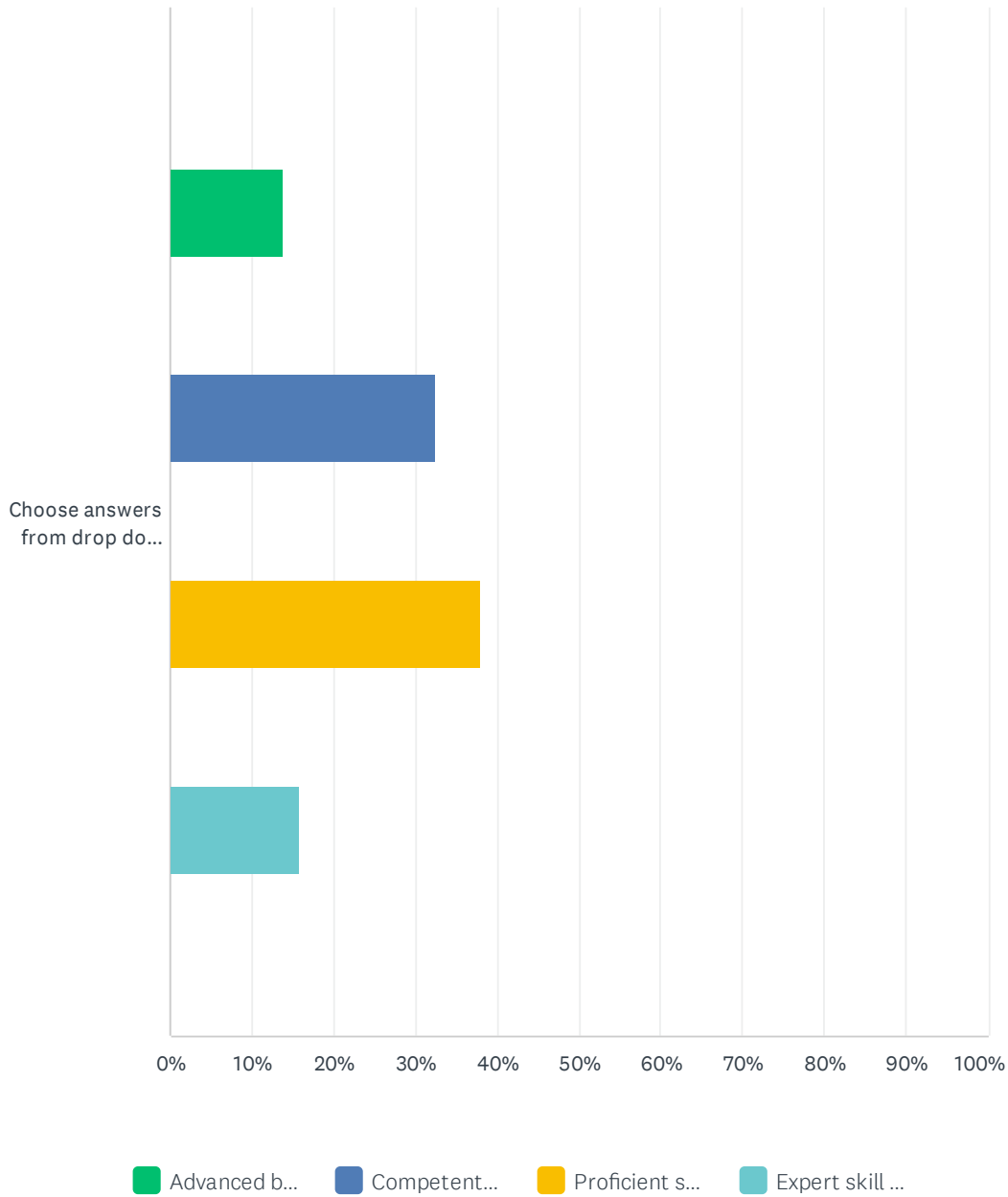
Spine Validation Practice Analysis Survey 2022

Importance



Spine Validation Practice Analysis Survey 2022

Level of Mastery



Frequency						
	NEVER	LESS THAN ONCE A MONTH	MONTHLY	WEEKLY	DAILY	TOTAL
Choose answers from drop down menus.	27.27% 60	57.73% 127	10.00% 22	2.27% 5	2.73% 6	220

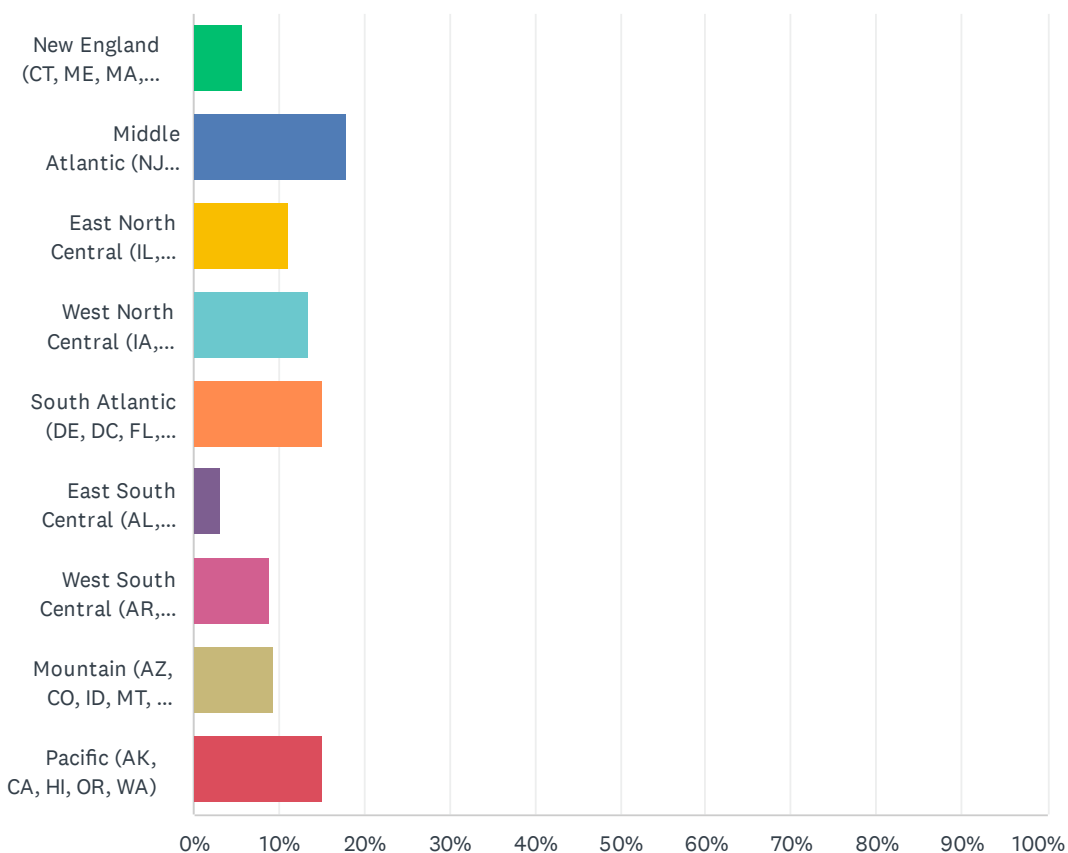
Importance					
	NOT IMPORTANT	LITTLE IMPORTANCE	MODERATELY IMPORTANT	VERY IMPORTANT	TOTAL
Choose answers from drop down menus.	5.80% 12	25.12% 52	45.89% 95	23.19% 48	207

Spine Validation Practice Analysis Survey 2022

Level of Mastery					
	ADVANCED BEGINNER SKILL LEVEL	COMPETENT SKILL LEVEL	PROFICIENT SKILL LEVEL	EXPERT SKILL LEVEL	TOTAL
Choose answers from drop down menus.	13.79% 28	32.51% 66	37.93% 77	15.76% 32	203

Q206 7.1 In which geographic region is the major portion of your practice?

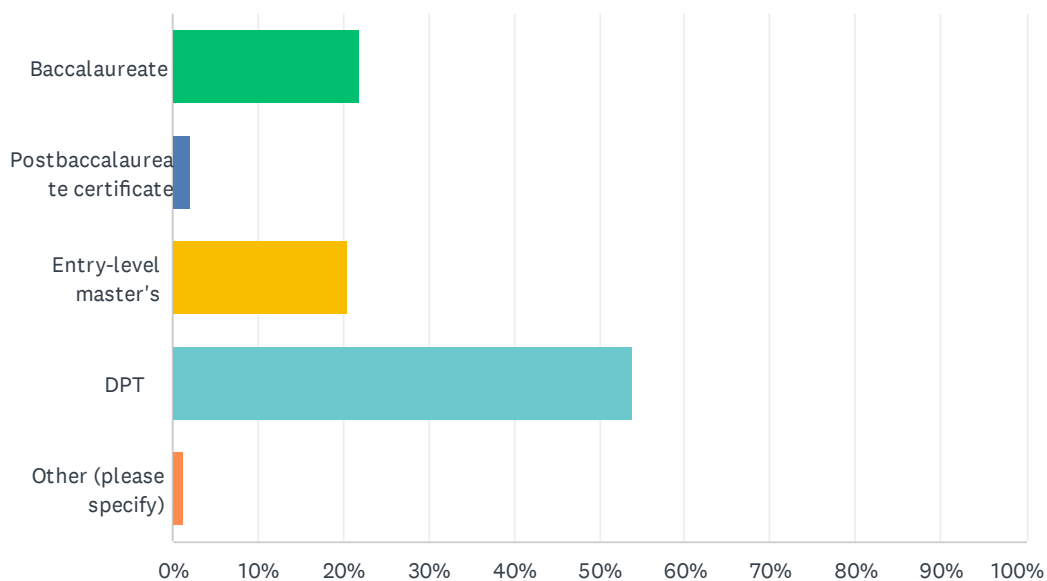
Answered: 224 Skipped: 986



ANSWER CHOICES	RESPONSES	
New England (CT, ME, MA, NH, RI, VT)	5.80%	13
Middle Atlantic (NJ, NY, PA)	17.86%	40
East North Central (IL, IN, MI, OH, WI)	11.16%	25
West North Central (IA, KS, MN, MO, NE, ND, SD)	13.39%	30
South Atlantic (DE, DC, FL, GA, MD, NC, PR, SC, VA, WV)	15.18%	34
East South Central (AL, KY, MS, TN)	3.13%	7
West South Central (AR, LA, OK, TX)	8.93%	20
Mountain (AZ, CO, ID, MT, NV, NM, UT, WY)	9.38%	21
Pacific (AK, CA, HI, OR, WA)	15.18%	34
TOTAL		224

Q207 7.2 What is your entry-level physical therapy education?

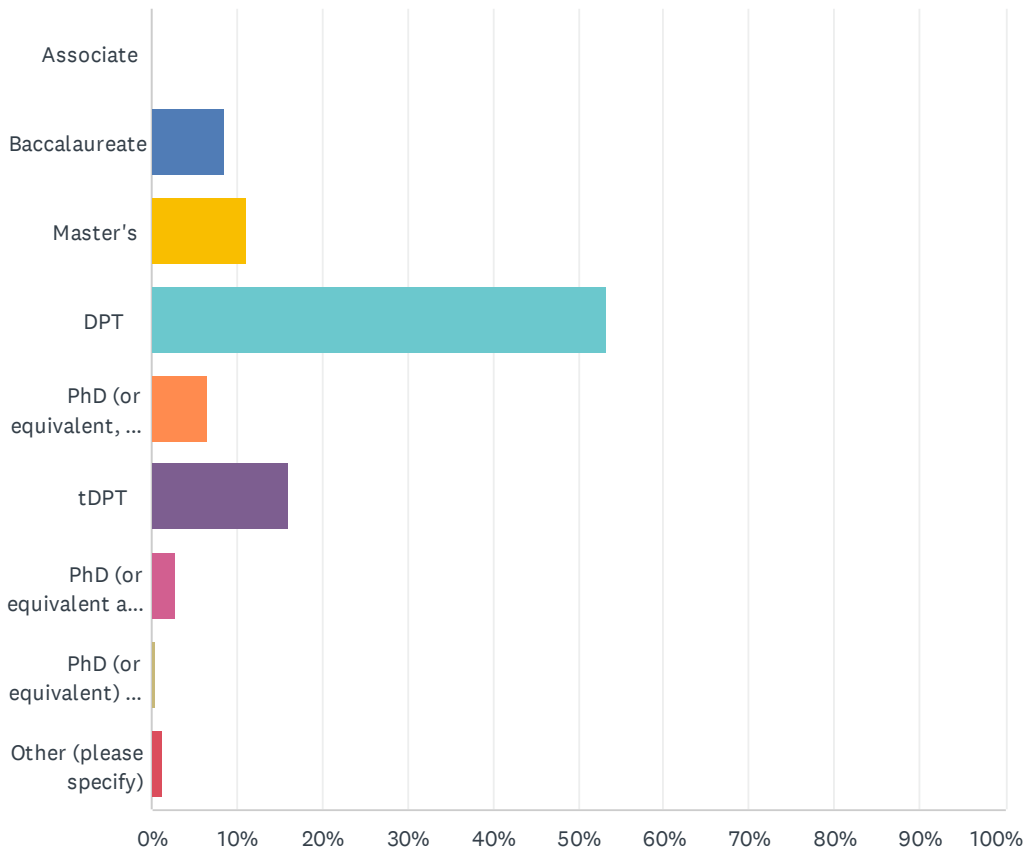
Answered: 224 Skipped: 986



ANSWER CHOICES	RESPONSES	
Baccalaureate	21.88%	49
Postbaccalaureate certificate	2.23%	5
Entry-level master's	20.54%	46
DPT	54.02%	121
Other (please specify)	1.34%	3
TOTAL		224

Q208 7.3 What is your highest earned academic degree in any area of study?

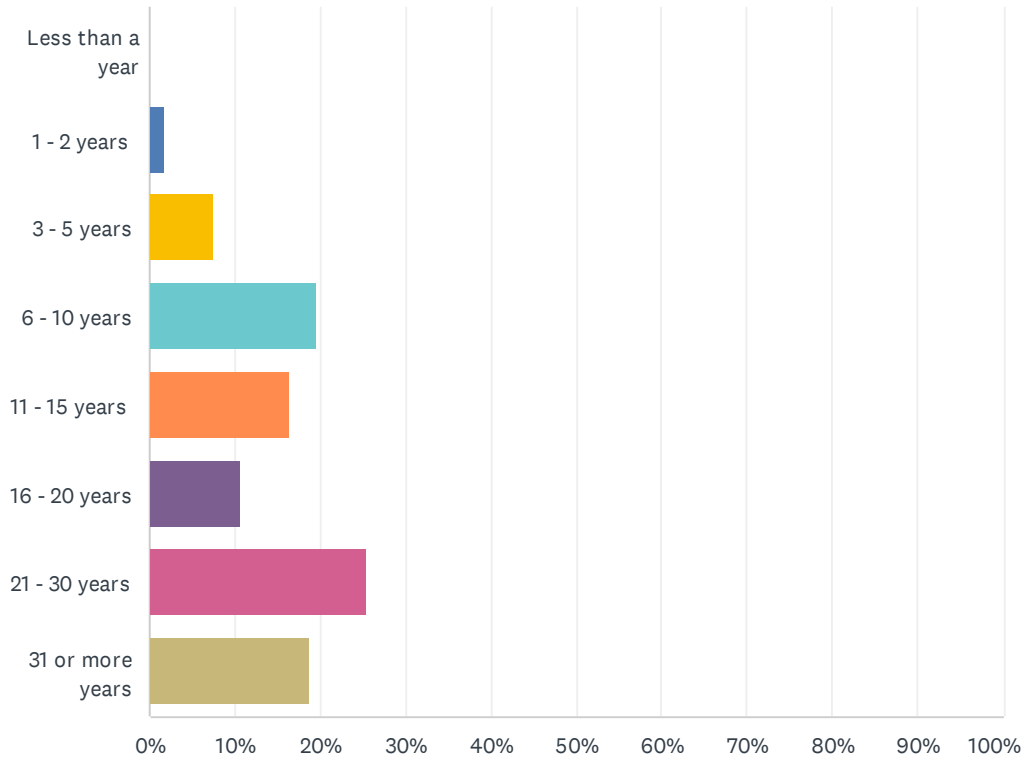
Answered: 225 Skipped: 985



ANSWER CHOICES	RESPONSES	
Associate	0.00%	0
Baccalaureate	8.44%	19
Master's	11.11%	25
DPT	53.33%	120
PhD (or equivalent, eg EdD or ScD)	6.67%	15
tDPT	16.00%	36
PhD (or equivalent and DPT)	2.67%	6
PhD (or equivalent) and tDPT	0.44%	1
Other (please specify)	1.33%	3
TOTAL		225

Q209 7.4 What is the total number of years you have been a practicing physical therapist?

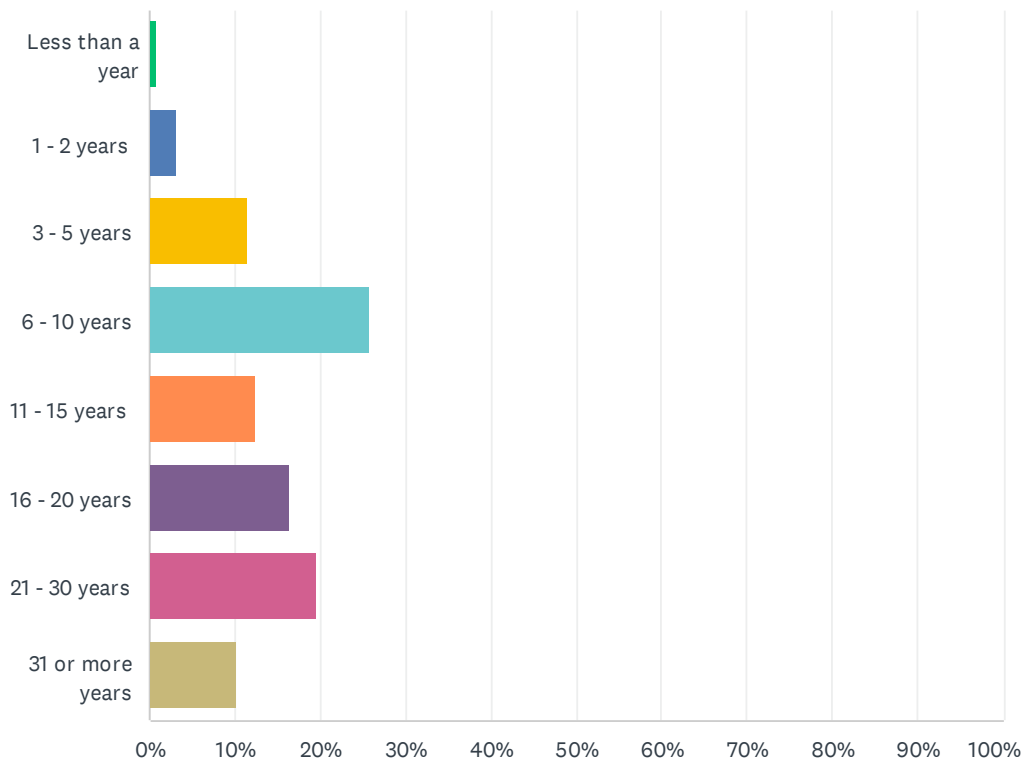
Answered: 225 Skipped: 985



ANSWER CHOICES	RESPONSES	
Less than a year	0.00%	0
1 - 2 years	1.78%	4
3 - 5 years	7.56%	17
6 - 10 years	19.56%	44
11 - 15 years	16.44%	37
16 - 20 years	10.67%	24
21 - 30 years	25.33%	57
31 or more years	18.67%	42
TOTAL		225

Q210 7.5 What is the total number of years you have primarily practiced in Orthopaedic Spine physical therapy?

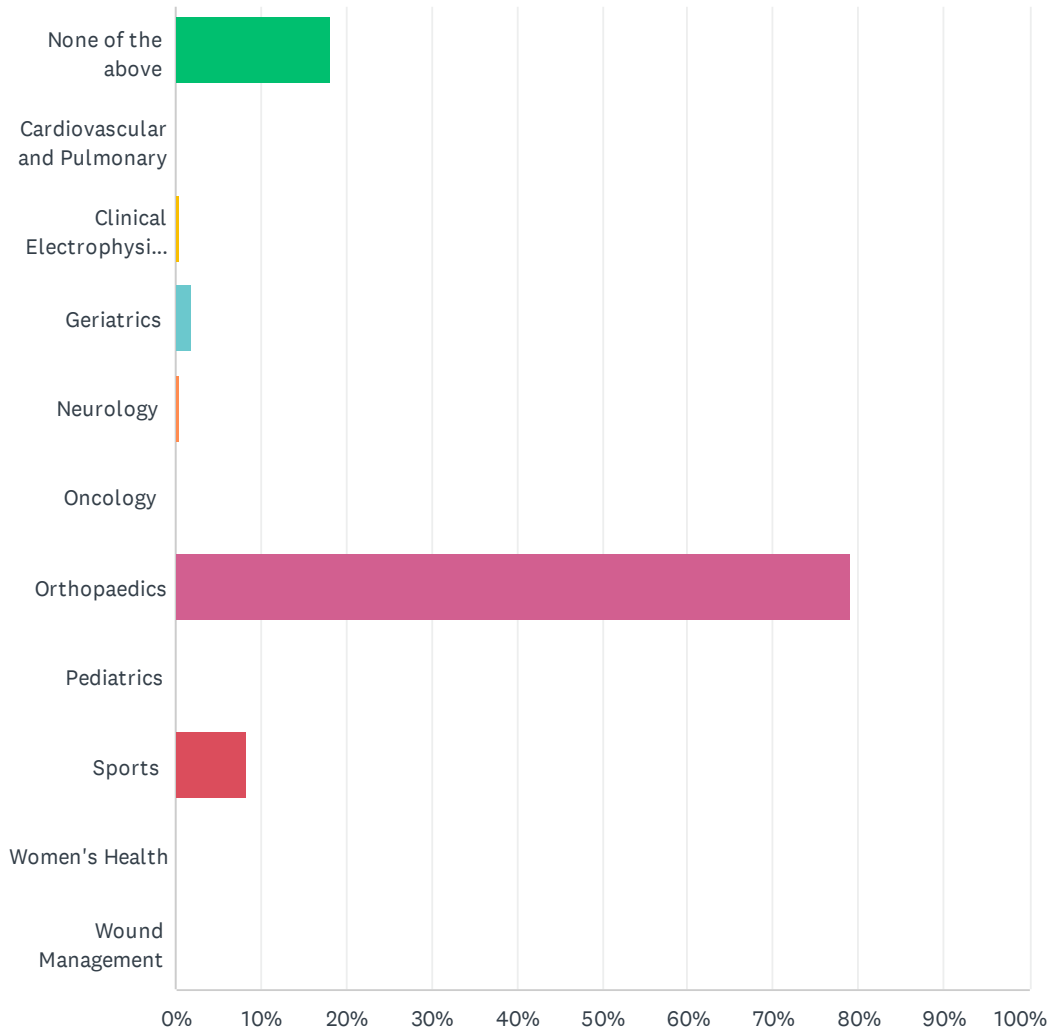
Answered: 225 Skipped: 985



ANSWER CHOICES	RESPONSES
Less than a year	0.89% 2
1 - 2 years	3.11% 7
3 - 5 years	11.56% 26
6 - 10 years	25.78% 58
11 - 15 years	12.44% 28
16 - 20 years	16.44% 37
21 - 30 years	19.56% 44
31 or more years	10.22% 23
TOTAL	225

Q211 7.6 Please indicate any ABPTS board certifications you currently hold (select all that apply):

Answered: 215 Skipped: 995

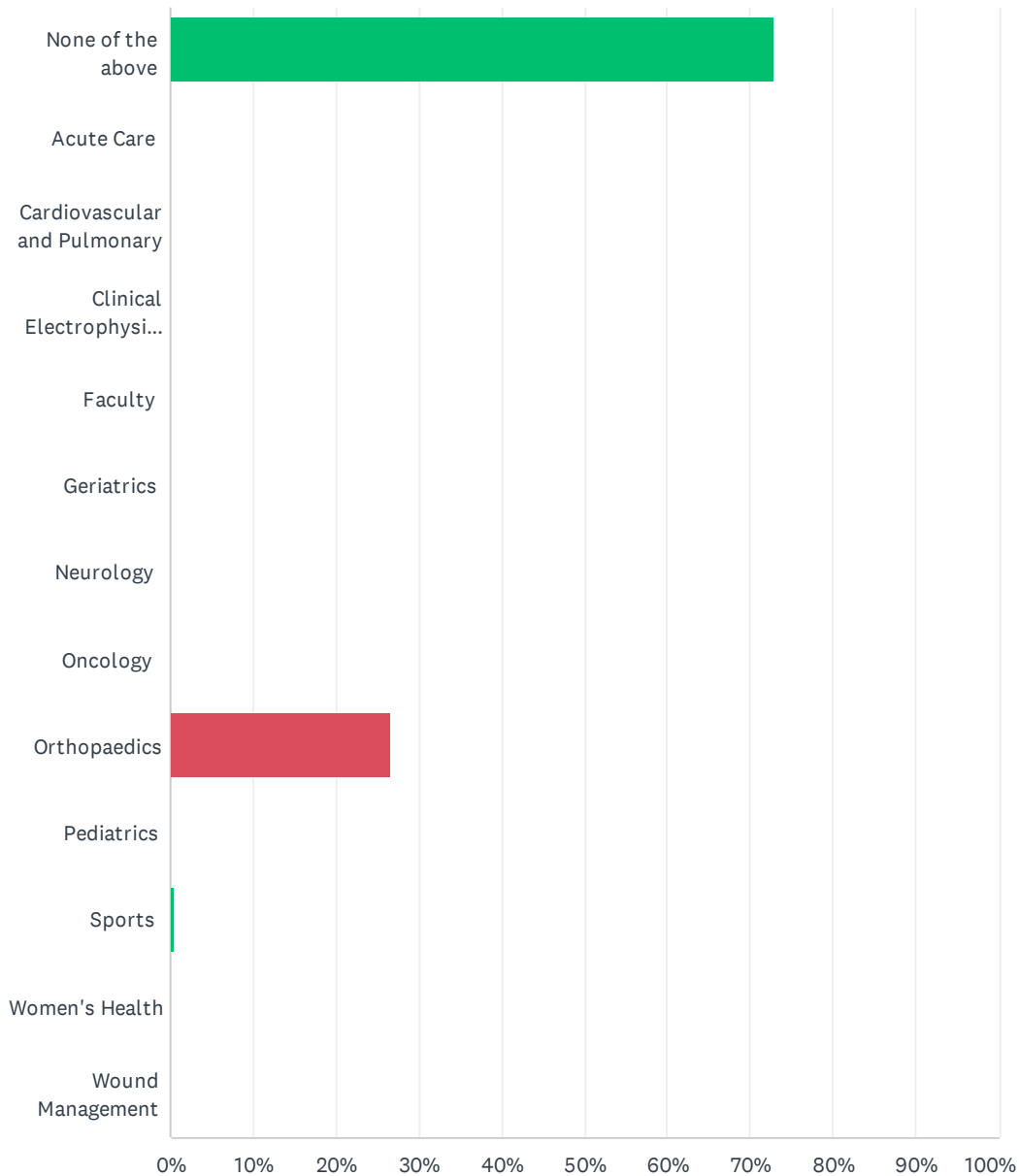


Spine Validation Practice Analysis Survey 2022

ANSWER CHOICES	RESPONSES	
None of the above	18.14%	39
Cardiovascular and Pulmonary	0.00%	0
Clinical Electrophysiology	0.47%	1
Geriatrics	1.86%	4
Neurology	0.47%	1
Oncology	0.00%	0
Orthopaedics	79.07%	170
Pediatrics	0.00%	0
Sports	8.37%	18
Women's Health	0.00%	0
Wound Management	0.00%	0
Total Respondents: 215		

Q212 7.7 Please indicate if you graduated from an ABPTRFE-accredited residency program in any of the following areas of specialty practice (select all that apply):

Answered: 188 Skipped: 1,022

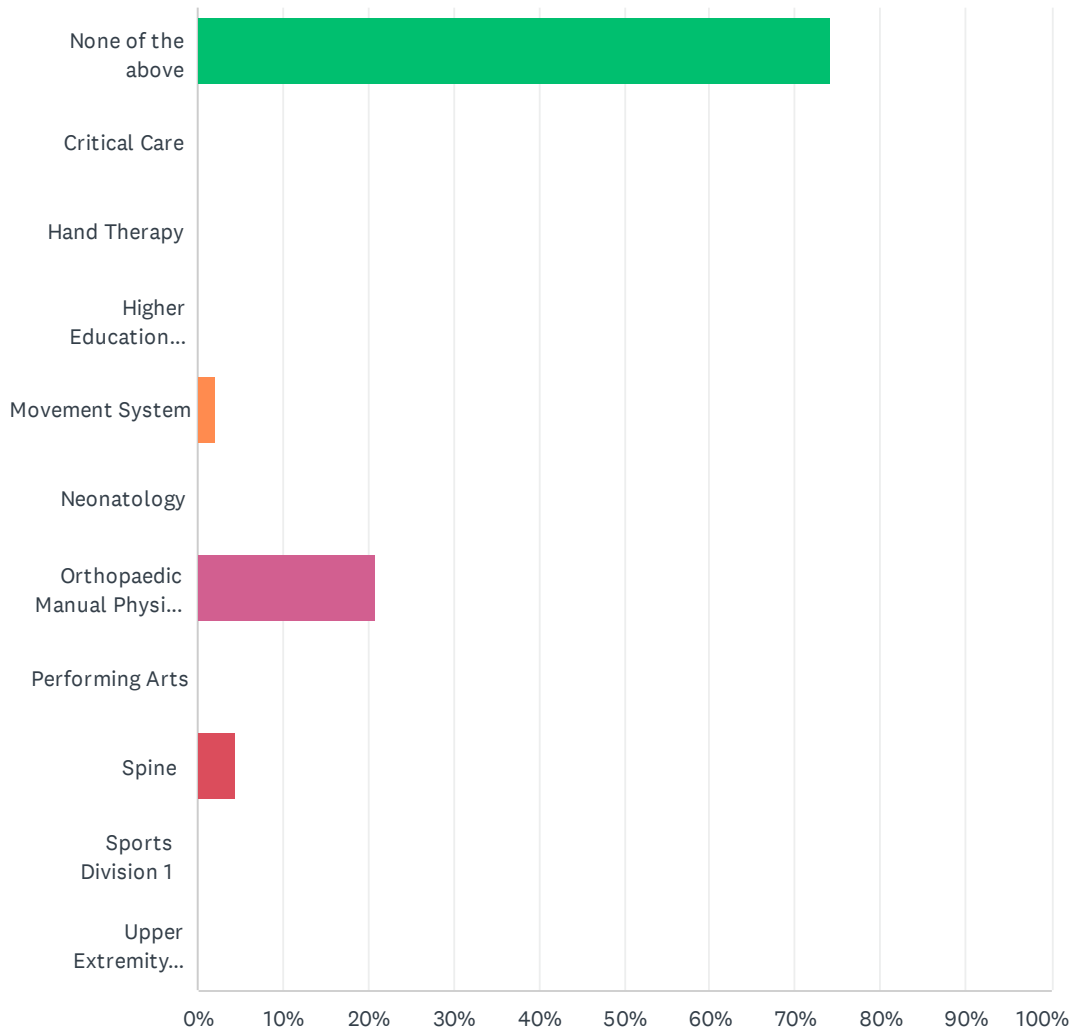


Spine Validation Practice Analysis Survey 2022

ANSWER CHOICES	RESPONSES	
None of the above	72.87%	137
Acute Care	0.00%	0
Cardiovascular and Pulmonary	0.00%	0
Clinical Electrophysiology	0.00%	0
Faculty	0.00%	0
Geriatrics	0.00%	0
Neurology	0.00%	0
Oncology	0.00%	0
Orthopaedics	26.60%	50
Pediatrics	0.00%	0
Sports	0.53%	1
Women's Health	0.00%	0
Wound Management	0.00%	0
Total Respondents: 188		

Q213 7.8 Please indicate if you graduated from an ABPTRFE-accredited fellowship program in any of the following areas of subspecialty practice (select all that apply):

Answered: 182 Skipped: 1,028

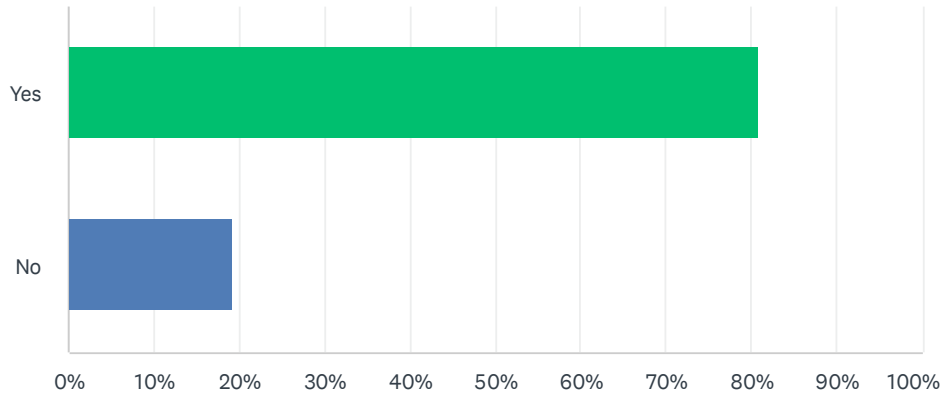


Spine Validation Practice Analysis Survey 2022

ANSWER CHOICES	RESPONSES	
None of the above	74.18%	135
Critical Care	0.00%	0
Hand Therapy	0.00%	0
Higher Education Leadership	0.00%	0
Movement System	2.20%	4
Neonatology	0.00%	0
Orthopaedic Manual Physical Therapy	20.88%	38
Performing Arts	0.00%	0
Spine	4.40%	8
Sports Division 1	0.00%	0
Upper Extremity Athlete	0.00%	0
Total Respondents: 182		

Q214 7.9 Based on state law and facility policies, do you evaluate and/or treat patients/clients without a physician referral?

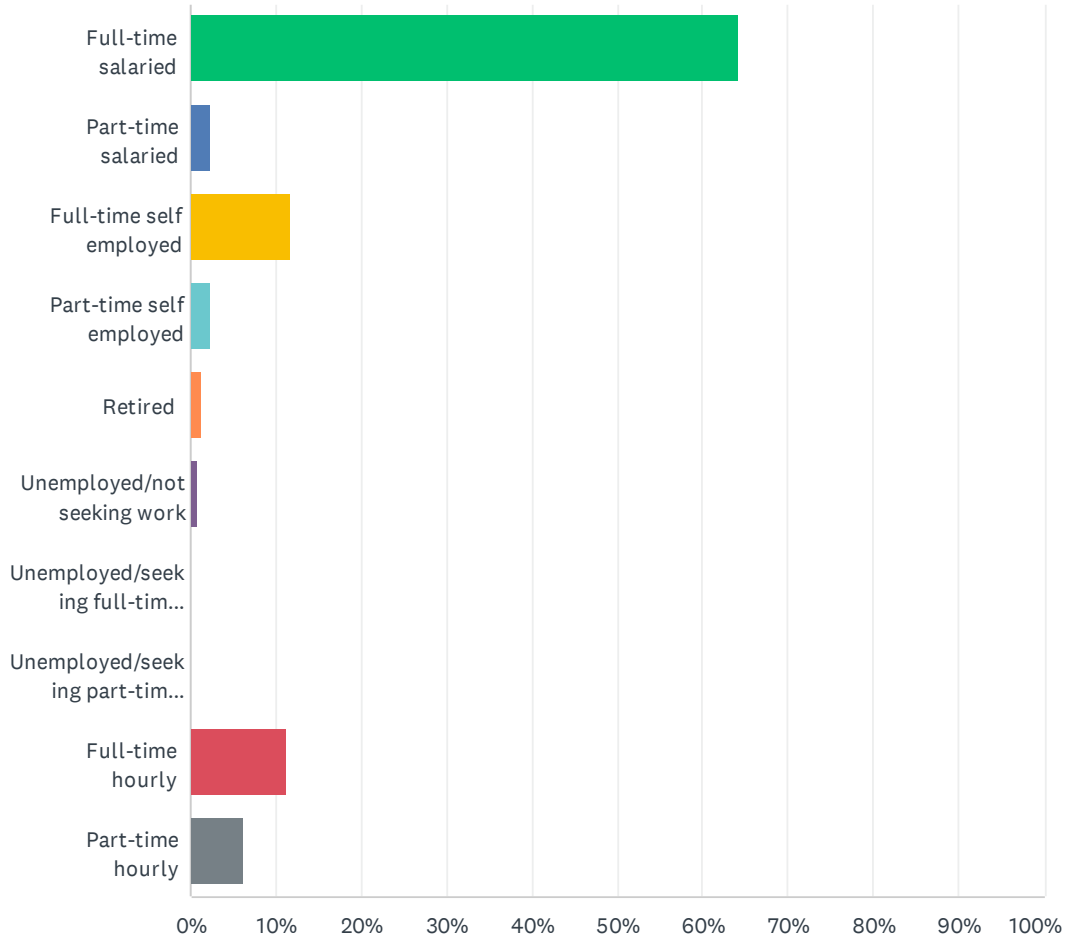
Answered: 223 Skipped: 987



ANSWER CHOICES	RESPONSES	
Yes	80.72%	180
No	19.28%	43
TOTAL		223

Q215 7.10 What is your current employment status at your primary position (35 or more hours per week is full-time)?

Answered: 223 Skipped: 987

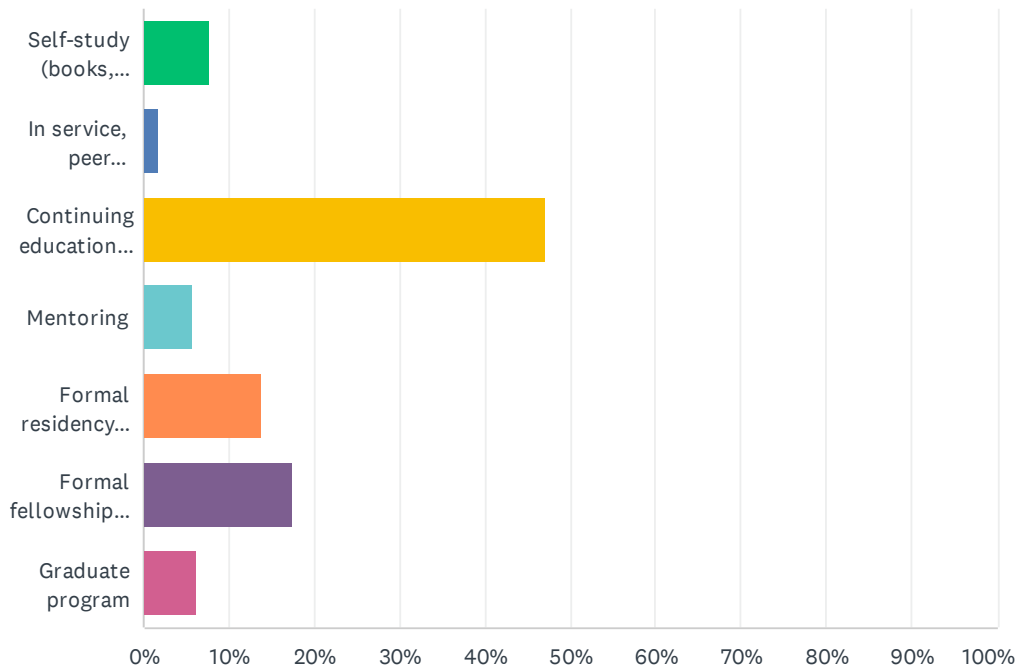


Spine Validation Practice Analysis Survey 2022

ANSWER CHOICES	RESPONSES	
Full-time salaried	64.13%	143
Part-time salaried	2.24%	5
Full-time self employed	11.66%	26
Part-time self employed	2.24%	5
Retired	1.35%	3
Unemployed/not seeking work	0.90%	2
Unemployed/seeking full-time employment	0.00%	0
Unemployed/seeking part-time employment	0.00%	0
Full-time hourly	11.21%	25
Part-time hourly	6.28%	14
TOTAL		223

Q216 7.11 What educational method has had the MOST influence on developing your present level of clinical skills? (Check one category only)

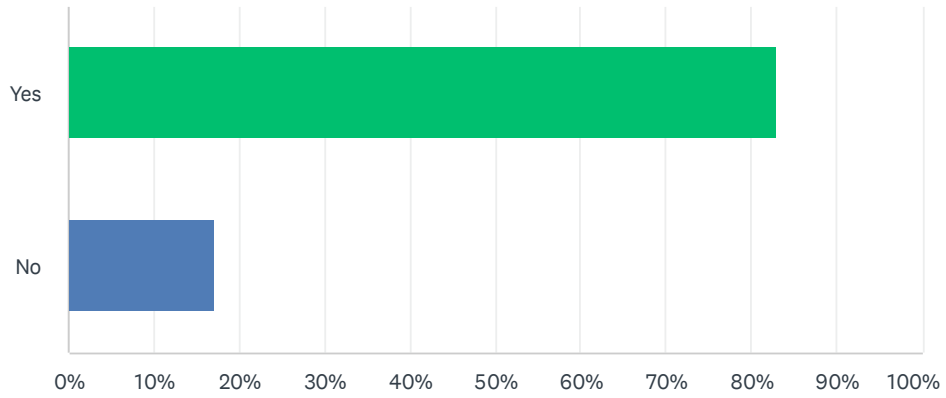
Answered: 223 Skipped: 987



ANSWER CHOICES	RESPONSES	
Self-study (books, articles, videotapes, home study courses)	7.62%	17
In service, peer interaction	1.79%	4
Continuing education courses, workshops, seminars, study groups	47.09%	105
Mentoring	5.83%	13
Formal residency program	13.90%	31
Formal fellowship program	17.49%	39
Graduate program	6.28%	14
TOTAL		223

Q217 7.12 Are you a member of the APTA?

Answered: 223 Skipped: 987

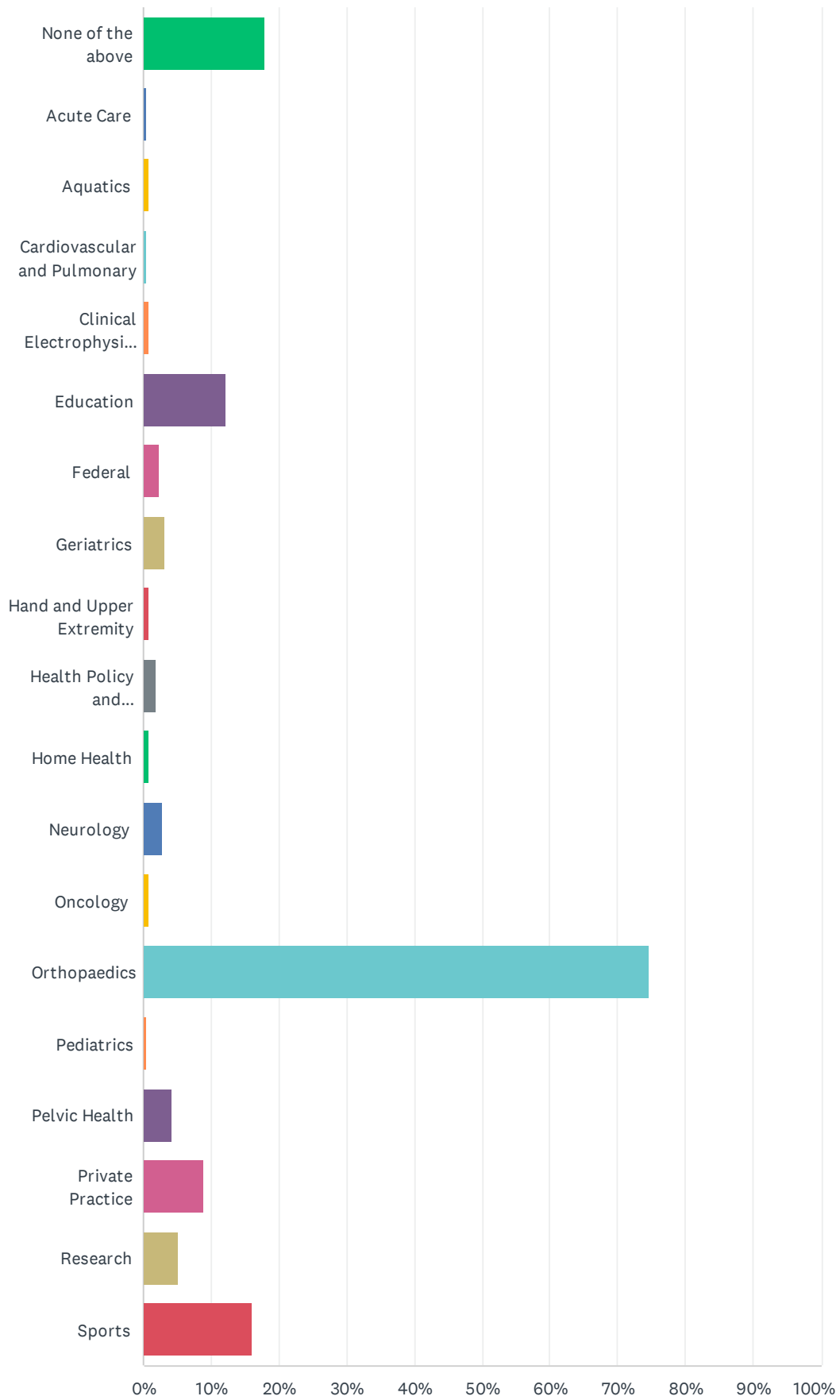


ANSWER CHOICES	RESPONSES	
Yes	82.96%	185
No	17.04%	38
TOTAL		223

Q218 7.13 Please indicate any APTA Section you are a member of (select all that apply):

Answered: 213 Skipped: 997

Spine Validation Practice Analysis Survey 2022

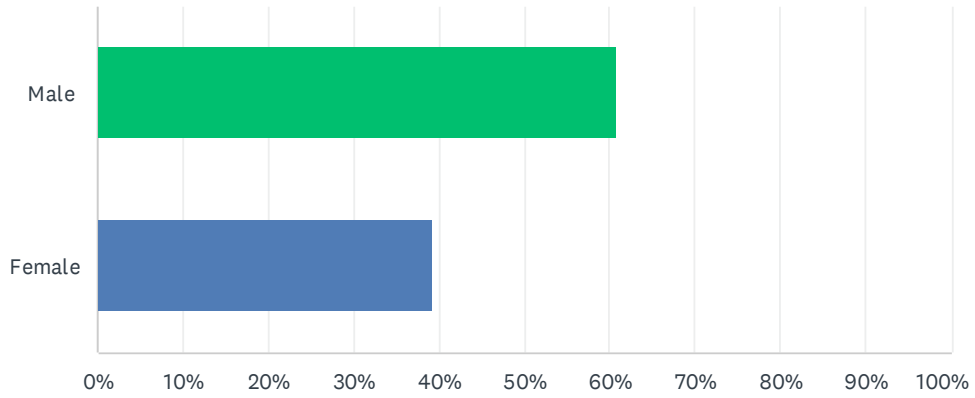


Spine Validation Practice Analysis Survey 2022

ANSWER CHOICES	RESPONSES	
None of the above	17.84%	38
Acute Care	0.47%	1
Aquatics	0.94%	2
Cardiovascular and Pulmonary	0.47%	1
Clinical Electrophysiology and Wound Management	0.94%	2
Education	12.21%	26
Federal	2.35%	5
Geriatrics	3.29%	7
Hand and Upper Extremity	0.94%	2
Health Policy and Administration	1.88%	4
Home Health	0.94%	2
Neurology	2.82%	6
Oncology	0.94%	2
Orthopaedics	74.65%	159
Pediatrics	0.47%	1
Pelvic Health	4.23%	9
Private Practice	8.92%	19
Research	5.16%	11
Sports	15.96%	34
Total Respondents: 213		

Q219 7.14 What is your sex?

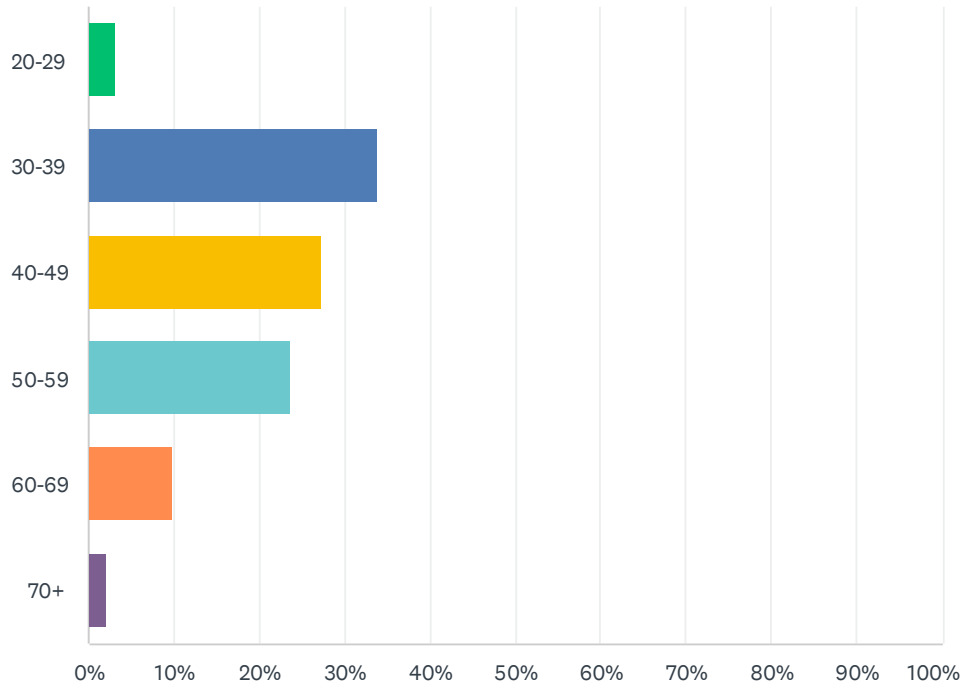
Answered: 224 Skipped: 986



ANSWER CHOICES	RESPONSES	
Male	60.71%	136
Female	39.29%	88
TOTAL		224

Q220 7.15 What is your age?

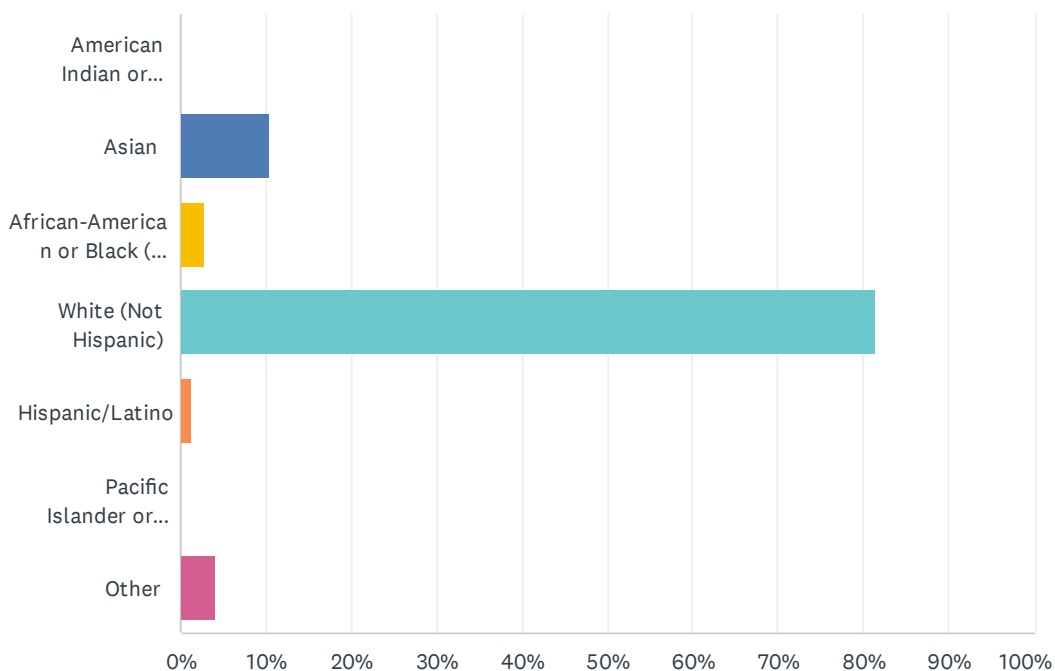
Answered: 224 Skipped: 986



ANSWER CHOICES	RESPONSES
20-29	3.13% 7
30-39	33.93% 76
40-49	27.23% 61
50-59	23.66% 53
60-69	9.82% 22
70+	2.23% 5
TOTAL	224

Q221 7.16 Which of the following best describes your race/ethnic origin?

Answered: 222 Skipped: 988



ANSWER CHOICES	RESPONSES	
American Indian or Alaskan Native	0.00%	0
Asian	10.36%	23
African-American or Black (Not Hispanic)	2.70%	6
White (Not Hispanic)	81.53%	181
Hispanic/Latino	1.35%	3
Pacific Islander or Native Hawaiian	0.00%	0
Other	4.05%	9
TOTAL		222

Descriptives in Survey Order

Key

High frequency (≥ 3.0), high importance (≥ 2.5) tasks. Very likely to be critical	# of items	
Low frequency (< 3.0), high importance (≥ 2.5) tasks. May be critical	95	
High frequency (≥ 3.0), low importance (< 2.5) tasks. Less likely to be critical	19	
Low frequency (< 3.0), low importance (< 2.5) tasks. Very unlikely to be critical	31	
	54	

Response Scales		
Frequency	Importance	Level of Judgment/Mastery
0. Never	0. Not important	0. Do not use/ Advanced beginner skill level
1. Less than monthly	1. Of little importance	1. Recall/ Competent skill level
2. Monthly	2. Moderately important	2. Application/ Proficient skill level
3. Weekly	3. Very important	3. Analysis/Expert skill level
4. Daily		

Survey

Item #	Survey Section	Item/Label	Frequency			Importance			Level of Judgment/Mastery		
			N	Mean	SD	N	Mean	SD	N	Mean	SD
2	1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system.	640	3.96	0.21	620	2.92	0.28	597	2.69	0.56
3	1.1 Foundation Sciences	1.1.1.2 Neuromuscular system.	635	3.91	0.31	614	2.91	0.28	592	2.73	0.51
4	1.1 Foundation Sciences	1.1.1.3 Cardiovascular and pulmonary systems.	636	2.89	0.97	615	2.21	0.63	593	2.03	0.72
5	1.1 Foundation Sciences	1.1.1.4 Integumentary system.	634	2.59	1.14	613	1.87	0.69	592	1.77	0.77
6	1.1 Foundation Sciences	1.1.1.5 Human growth and development across the lifespan.	634	2.66	1.14	613	2.08	0.71	591	1.95	0.82
7	1.1 Foundation Sciences	1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity).	631	3.07	1.08	609	2.20	0.71	589	2.07	0.78
8	1.1 Foundation Sciences	1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary).	634	2.48	1.12	612	1.95	0.67	591	1.83	0.85
9	1.1 Foundation Sciences	1.1.2.1 Kinesiology/biomechanics.	588	3.94	0.29	569	2.88	0.36	546	2.82	0.42
10	1.1 Foundation Sciences	1.1.2.2 Neural control of movement.	590	3.86	0.43	569	2.82	0.41	548	2.78	0.45
11	1.1 Foundation Sciences	1.1.2.3 Ergonomics.	589	3.54	0.67	569	2.51	0.60	549	2.46	0.59
12	1.1 Foundation Sciences	1.1.2.4 Locomotion.	589	3.78	0.52	569	2.67	0.54	549	2.65	0.55
13	1.2 Clinical Sciences	1.2.1.1 Signs and symptoms of disease/injury.	534	3.87	0.41	515	2.89	0.31	495	2.64	0.61
14	1.2 Clinical Sciences	1.2.1.2 Progression of disease/injury processes.	535	3.79	0.48	516	2.81	0.39	496	2.56	0.63
15	1.2 Clinical Sciences	1.2.1.3 Pathokinesiology.	534	3.70	0.57	516	2.66	0.54	497	2.59	0.64
16	1.2 Clinical Sciences	1.2.1.4 Tissue inflammation, healing, and repair.	536	3.81	0.44	517	2.79	0.41	497	2.49	0.65
17	1.2 Clinical Sciences	1.2.2.1 Imaging studies.	536	3.08	0.82	518	2.07	0.64	499	2.14	0.72
18	1.2 Clinical Sciences	1.2.2.2 Pharmacology.	535	3.08	0.91	517	2.10	0.60	498	1.73	0.74
19	1.2 Clinical Sciences	1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrophysiological exams).	534	2.37	1.03	516	1.87	0.66	496	1.70	0.81
20	1.2 Clinical Sciences	1.2.2.4 Nonsurgical interventional spine procedures (e.g., injections, radial ablation, denervation pro	533	2.95	0.90	514	2.33	0.63	497	2.06	0.77
21	1.2 Clinical Sciences	1.2.2.5 Spine surgical interventions and their indications, contraindications, and precautions for ortho	534	2.99	0.90	516	2.59	0.57	498	2.24	0.73
22	1.2 Clinical Sciences	1.2.2.6 Developments in genetics/regenerative medicine (e.g., genetic markers, stem cell application:	534	1.47	1.03	514	1.47	0.75	496	1.17	0.84
23	1.3 Behavioral Sciences	1.3.1.1 External environmental factors (e.g., expected behaviors and social pressures).	489	3.54	0.75	471	2.52	0.62	453	2.45	0.66
24	1.3 Behavioral Sciences	1.3.1.2 Personal factors (e.g., compliance, body awareness, pain perception, and related psychosocia	487	3.86	0.41	470	2.81	0.41	452	2.66	0.54
25	1.3 Behavioral Sciences	1.3.1.3 Psychological/emotional conditions (e.g., anxiety, depression, catastrophization).	488	3.70	0.60	471	2.75	0.44	452	2.58	0.58
26	1.3 Behavioral Sciences	1.3.1.4 Impact of behavioral health risk factors (e.g., smoking effects on healing rates).	488	3.37	0.80	471	2.48	0.58	452	2.11	0.72
27	1.3 Behavioral Sciences	1.3.2.1 Peripheral nociceptive pain physiology.	486	3.59	0.68	469	2.62	0.54	452	2.47	0.66
28	1.3 Behavioral Sciences	1.3.2.2 Peripheral neurogenic/neuropathic pain physiology.	487	3.48	0.73	470	2.62	0.53	451	2.47	0.64
29	1.3 Behavioral Sciences	1.3.2.3 Central nervous system/nociplastic pain physiology.	487	3.34	0.87	470	2.62	0.54	452	2.44	0.69
30	1.3 Behavioral Sciences	1.3.2.4 Output mechanisms and expressions (e.g., immune, endocrine, sympathetic, behavioral).	487	2.75	1.02	470	2.11	0.72	450	1.94	0.81
31	1.3 Behavioral Sciences	1.3.3.1 Biopsychosocial model.	451	3.41	0.94	440	2.50	0.69	424	2.38	0.77
32	1.3 Behavioral Sciences	1.3.3.2 Exercise physiology across the lifespan.	453	3.53	0.73	439	2.51	0.58	424	2.32	0.67
33	1.3 Behavioral Sciences	1.3.3.3 Manual therapy techniques.	452	3.84	0.48	442	2.73	0.53	426	2.69	0.49
34	1.3 Behavioral Sciences	1.3.3.4 Movement systems impairments.	452	3.80	0.60	440	2.72	0.56	425	2.69	0.55
35	1.3 Behavioral Sciences	1.3.3.5 Motor control and motor learning.	453	3.81	0.46	442	2.73	0.51	426	2.62	0.54
36	1.3 Behavioral Sciences	1.3.3.6 Theory and application of orthotic, protective, and supportive devices.	454	2.36	0.99	442	1.93	0.69	425	1.97	0.73
37	1.3 Behavioral Sciences	1.3.3.7 Therapeutic exercise.	453	3.99	0.09	442	2.96	0.24	427	2.74	0.45
38	1.3 Behavioral Sciences	1.3.3.8 Models of differential diagnosis and clinical reasoning (e.g., hypothesis-oriented algorithm fo	447	3.37	1.13	433	2.44	0.84	418	2.41	0.90
39	1.3 Behavioral Sciences	1.3.3.9 Principles of teaching and learning.	454	3.70	0.65	442	2.67	0.52	428	2.45	0.57
40	1.3 Behavioral Sciences	1.3.3.10 Principles of prevention and wellness.	454	3.57	0.69	443	2.63	0.55	428	2.31	0.61
41	1.4 Critical Inquiry for Evidence-I	1.4.1 Critical interpretation of research findings on orthopaedic spine physical therapy practice.	441	2.86	0.86	430	2.62	0.51	416	2.54	0.65
42	1.4 Critical Inquiry for Evidence-I	1.4.2 Application of research findings to orthopaedic spine physical therapy practice.	441	3.11	0.91	430	2.63	0.51	414	2.51	0.61
43	2.1 Professional Behavior	2.1.1 Consulting with and/or educating peers, colleagues, other health care professionals, communit	408	2.46	1.02	397	2.50	0.60	385	2.14	0.75
44	2.1 Professional Behavior	2.1.2 Using patient-centered ethics and values in complex clinical decision making.	407	3.70	0.65	396	2.79	0.46	382	2.14	0.90
45	2.1 Professional Behavior	2.1.3 Maintaining active participation in professional organizations that address issues related to ort	405	1.92	1.01	395	2.12	0.74	381	1.50	0.96
46	2.1 Professional Behavior	2.1.4 Maintaining state-of-the-art knowledge and skills by seeking own mentors and participating in c	407	2.11	0.95	397	2.60	0.58	383	1.94	0.96
47	2.2 Leadership	2.2.1 Representing orthopaedic spine physical therapy and interacting with other professionals and c	398	1.97	1.05	387	2.26	0.70	372	2.02	0.86
48	2.2 Leadership	2.2.2 Planning, directing, organizing, and managing human, technical, environmental, and financial re	396	2.35	1.30	383	2.00	0.86	369	1.68	0.91
49	2.2 Leadership	2.2.3 Modeling and facilitating the translation of evidence into clinical practice as it relates to orthop	397	3.07	1.04	386	2.62	0.58	373	2.21	0.77

50	2.2 Leadership	2.2.4 Acting as an expert resource for peers in the clinic and community for guidance on complex cas	397	2.76	1.08	387	2.59	0.61	373	2.55	0.71
51	2.3 Communication	2.3.1 Empowering patients with orthopaedic spine conditions in the management of their own health	381	3.83	0.45	371	2.92	0.30	359	2.19	0.88
52	2.3 Communication	2.3.2 Facilitating collaborative and multidisciplinary team management and transition of care for indi	382	2.85	0.98	372	2.50	0.64	360	2.04	0.79
53	2.4 Advocacy	2.4.1 Promoting the orthopaedic spine physical therapist as the first contact provider in musculoskel	381	2.88	1.16	371	2.59	0.62	357	2.14	0.91
54	2.4 Advocacy	2.4.2 Advocating for orthopaedic spine physical therapy practice with national organizations, healthc	381	1.47	1.09	369	2.30	0.71	354	1.80	1.00
55	2.5 Education	2.5.1 Contributing to the professional development of other physical therapists by teaching/mentorin	366	2.47	1.03	356	2.60	0.57	346	2.37	0.72
56	2.5 Education	2.5.2 Promoting awareness and benefits of fellowship programs in orthopaedic spine physical therap	367	1.46	1.09	355	1.93	0.87	339	1.78	0.97
57	2.5 Education	2.5.3 Educating the public regarding spine conditions, the role of orthopaedic spine physical therapis	366	2.24	1.22	356	2.42	0.67	346	1.92	0.90
58	2.5 Education	2.5.4 Educating other health care professionals and administrators as to the scope and role of orthop	362	2.03	1.01	351	2.46	0.64	342	1.98	0.89
59	2.6 Critical Inquiry and Evidence	2.6.1 Applying principles of evidence-based practice in patient/client management.	362	3.77	0.61	352	2.79	0.49	342	2.20	0.94
60	2.6 Critical Inquiry and Evidence	2.6.2 Contributing to the body of evidence in orthopaedic spine physical therapy (e.g., peer-reviewed	364	1.12	0.91	352	2.03	0.73	341	1.89	1.03
61	2.6 Critical Inquiry and Evidence	2.6.3 Evaluating the efficacy and effectiveness of examination tools, interventions, and technologies	363	2.23	1.19	353	2.34	0.72	343	1.99	0.91
62	2.6 Critical Inquiry and Evidence	2.6.4 Identifying research needs within the field of orthopaedic spine physical therapy, evaluating ou	364	1.38	0.97	352	2.11	0.75	340	1.84	1.03
63	3.1.1 History	3.1.1.1.1 Current and prior work.	331	3.54	0.85	321	2.54	0.61	311	1.83	1.04
64	3.1.1 History	3.1.1.1.2 Activity requirements/occupational demands.	331	3.60	0.77	321	2.67	0.56	312	1.86	1.03
65	3.1.1 History	3.1.1.1.3 Ergonomic considerations.	331	3.37	0.82	321	2.43	0.64	312	1.77	0.96
66	3.1.1 History	3.1.1.1.4 Utilization of adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthot	331	2.67	1.06	321	1.98	0.76	312	1.63	0.88
67	3.1.1 History	3.1.1.2.1 Recognition of contributions from multiple body regions.	326	3.80	0.50	317	2.81	0.42	310	2.27	0.86
68	3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms.	325	3.90	0.38	315	2.81	0.43	309	2.16	0.93
69	3.1.1 History	3.1.1.2.3 Symptom irritability (onset, offset, and overall baseline).	325	3.89	0.37	315	2.84	0.40	309	2.13	1.01
70	3.1.1 History	3.1.1.2.4 Onset of condition (e.g., mechanism of injury, insidious onset, potential contributing factor:	324	3.85	0.40	316	2.83	0.40	308	2.07	1.05
71	3.1.1 History	3.1.1.2.5 Current and previous therapeutic interventions.	326	3.77	0.50	316	2.62	0.52	309	2.03	1.05
72	3.1.1 History	3.1.1.2.6 Readiness for change.	326	3.65	0.66	317	2.66	0.51	310	2.01	0.92
73	3.1.1 History	3.1.1.2.7 Goals of the patient, family, and caregiver.	326	3.76	0.54	317	2.81	0.42	311	1.94	1.10
74	3.1.1 History	3.1.1.3 Obtaining data regarding functional status and activity level of daily living.	317	3.77	0.51	308	2.75	0.45	301	1.88	1.07
75	3.1.1 History	3.1.1.4.1 Physical function.	319	3.82	0.43	309	2.77	0.44	302	1.92	1.08
76	3.1.1 History	3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression, catastrophizing).	318	3.66	0.58	308	2.72	0.49	300	1.99	0.89
77	3.1.1 History	3.1.1.5 Obtaining data regarding social/health habits (past and current), including behavioral health r	298	3.54	0.72	288	2.53	0.57	280	1.73	0.99
78	3.1.1 History	3.1.1.6 Obtaining medical/surgical history data.	298	3.65	0.63	286	2.65	0.49	281	1.79	1.06
79	3.1.1 History	3.1.1.7 Obtaining data regarding medication usage patterns and effects of medications currently and	298	3.53	0.71	288	2.39	0.60	282	1.70	0.95
80	3.1.1 History	3.1.1.8 Obtaining data regarding social history (e.g., cultural beliefs and support systems).	298	3.39	0.83	289	2.35	0.67	281	1.65	0.98
81	3.1.1 History	3.1.1.9 Obtaining general demographic information.	298	3.42	0.89	288	2.05	0.78	281	1.43	1.06
82	3.1.1 History	3.1.1.10 Obtaining data on living environment and community characteristics.	298	3.35	0.92	288	2.18	0.70	281	1.51	1.07
83	3.1.2 Interpreting Data from Hist	3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis that includes, nature and s	274	3.88	0.36	266	2.90	0.32	260	2.31	0.87
84	3.1.2 Interpreting Data from Hist	3.1.2.2 Assessing "red flags" and determining need based upon whether patient demonstrates neuro	277	3.82	0.45	268	2.95	0.24	261	2.20	0.97
85	3.1.2 Interpreting Data from Hist	3.1.2.3 Identifying chief and secondary problems.	277	3.84	0.38	269	2.81	0.40	262	2.22	0.85
86	3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques with a high probability of changing (reproducing or relieving	276	3.90	0.31	267	2.88	0.34	260	2.42	0.79
87	3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and detail appropriate to the working hypothesis and the	274	3.86	0.37	266	2.81	0.43	258	2.37	0.78
88	3.1.3 Planning a Physical Exam	3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems.	275	3.92	0.30	267	2.83	0.38	260	2.22	0.92
89	3.1.3 Planning a Physical Exam	3.1.3.4 Prioritizes areas, movements, and functional activities to be examined as well as examination	275	3.90	0.31	267	2.81	0.41	258	2.33	0.83
90	3.1.4 Systems Review	3.1.4.1 Performing systems review to identify the impaired or unimpaired status of the: cardiovascul	266	3.61	0.65	258	2.62	0.54	251	1.95	0.93
91	3.1.5 Test and Measures	3.1.5.1 Ergonomics and body mechanics.	266	3.56	0.68	258	2.48	0.62	250	1.93	0.98
92	3.1.5 Test and Measures	3.1.5.2 Gait, locomotion, and balance.	265	3.76	0.52	257	2.66	0.54	250	1.97	0.99
93	3.1.5 Test and Measures	3.1.5.3 Work (job/school/play), community and leisure integration or reintegration (including IADL).	267	3.43	0.77	258	2.52	0.59	251	1.85	0.93
94	3.1.5 Test and Measures	3.1.5.4 Adaptive and supportive devices (e.g., taping, bracing, assistive devices, orthotics).	266	2.81	0.98	258	2.03	0.72	251	1.66	0.88
95	3.1.5 Test and Measures	3.1.5.5 Pain.	266	3.93	0.25	258	2.64	0.56	251	2.04	1.02
96	3.1.5 Test and Measures	3.1.5.6 Anthropometric characteristics (e.g., edema, body dimensions and composition).	267	3.01	1.00	258	2.03	0.69	251	1.51	0.96
97	3.1.5 Test and Measures	3.1.5.7 Circulation (e.g., vertebral artery examination, skin condition, thoracic outlet tests, and peripl	261	2.90	0.99	253	2.41	0.63	246	1.87	0.89
98	3.1.5 Test and Measures	3.1.5.8 Aerobic capacity and endurance (e.g., dyspnea perceived exertion, heart rate).	261	2.80	1.06	252	2.26	0.68	245	1.69	0.91
99	3.1.5 Test and Measures	3.1.5.9 Neurodynamics.	259	3.42	0.72	251	2.57	0.56	244	2.09	0.82
100	3.1.5 Test and Measures	3.1.5.10 Sensory integrity (e.g., assessment of superficial sensation, dermatomes, myotomes, proprioc	261	3.32	0.87	252	2.52	0.61	245	1.95	0.93
101	3.1.5 Test and Measures	3.1.5.11 Reflex integrity (e.g., assessment of normal and pathological reflexes).	260	3.35	0.83	252	2.54	0.61	245	1.90	1.01
102	3.1.5 Test and Measures	3.1.5.12 Motor control and coordination (e.g., assessment of timing of movements across segments,	261	3.49	0.89	252	2.55	0.62	244	2.15	0.80
103	3.1.5 Test and Measures	3.1.5.13 Biopsychosocial functioning (e.g., depression, impaired motivation, FABQ, STarT Back, Tamp	261	3.14	0.95	252	2.46	0.62	244	1.89	0.88
104	3.1.5 Test and Measures	3.1.5.14 Joint integrity (i.e., mobility assessment of joint hypermobility and hypomobility to include p	261	3.80	0.47	253	2.75	0.48	244	2.23	0.89
105	3.1.5 Test and Measures	3.1.5.15 Community, home, and work barriers.	249	3.18	0.89	243	2.35	0.65	235	1.72	0.92
106	3.1.5 Test and Measures	3.1.5.16 Integumentary integrity.	250	2.86	1.03	243	2.07	0.69	236	1.47	0.91
107	3.1.5 Test and Measures	3.1.5.17 Muscle performance (e.g., strength, power, and endurance).	251	3.79	0.47	243	2.72	0.47	237	1.97	1.01
108	3.1.5 Test and Measures	3.1.5.18 Neuromotor development and sensory integration (e.g., assessment of appropriate developm	251	3.18	0.93	243	2.37	0.63	236	1.95	0.86
109	3.1.5 Test and Measures	3.1.5.19 Posture (e.g., assessment of body or body segment(s) structure, alignment, changes in differ	253	3.68	0.61	246	2.43	0.67	239	1.92	1.03
110	3.1.5 Test and Measures	3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests).	252	3.55	0.72	245	2.39	0.71	238	2.07	0.90

111	3.1.5 Test and Measures	3.1.5.21 Flexibility (e.g., length, stiffness).	253	3.68	0.59	246	2.43	0.63	239	1.87	1.02
112	3.1.5 Test and Measures	3.1.5.22 Soft tissue quality (e.g., mobility, provocation).	251	3.74	0.58	244	2.53	0.60	237	2.04	0.96
113	3.1.5 Test and Measures	3.1.5.23 Task-specific activities (e.g., lifting, bending, reaching).	253	3.77	0.48	246	2.69	0.49	238	2.02	1.00
114	3.2 Evaluation	3.2.1 Using the International Classification of Functioning, Disability and Health (ICF) model to synthe	239	3.03	1.29	233	2.21	0.91	228	1.83	1.01
115	3.2 Evaluation	3.2.2 Developing a working diagnosis, including nature of complaint, probable cause, anatomical stru	241	3.83	0.44	235	2.88	0.35	231	2.40	0.80
116	3.2 Evaluation	3.2.3 Incorporating data from ancillary testing (e.g., imaging, labs, electrophysiological studies).	241	3.27	0.76	235	2.33	0.63	231	1.99	0.76
117	3.2 Evaluation	3.2.4 Referring patient/client to other health care professionals for further examination as appropria	241	2.80	0.93	235	2.73	0.48	229	2.17	0.85
118	3.2 Evaluation	3.2.5 Considering implications of exam findings on activity, quality of life, and wellness as establishec	238	3.19	1.10	231	2.37	0.73	227	1.95	0.91
119	3.3. Diagnosis	3.3.1 Organizing examination findings into clusters, syndromes, or categories to which physical thera	241	3.63	0.72	234	2.71	0.57	229	2.31	0.80
120	3.4 Prognosis	3.4.1 Accounting for the complexity of the patient/client's dysfunctions/conditions, the predicted	241	3.71	0.58	235	2.71	0.52	231	2.37	0.73
121	3.5 Intervention	3.5.1 Ergonomics (influences of environment and occupation on posture and movement).	235	3.41	0.81	228	2.40	0.63	225	1.92	0.90
122	3.5 Intervention	3.5.2 Education/training of functional activities.	234	3.77	0.47	228	2.70	0.51	225	2.04	1.00
123	3.5 Intervention	3.5.3 Education/training of activities of daily living (e.g., hygiene, stair climbing, sleeping postures).	235	3.61	0.64	229	2.56	0.61	225	1.93	0.99
124	3.5 Intervention	3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility, and self-management within plan	233	3.78	0.52	227	2.80	0.42	224	2.22	0.86
125	3.5 Intervention	3.5.4.2 Using the biopsychosocial/biomedical models.	233	3.43	0.89	227	2.45	0.69	224	2.06	0.87
126	3.5 Intervention	3.5.4.3 Addressing pain physiology and dose response.	233	3.70	0.57	228	2.65	0.54	225	2.15	0.83
127	3.5 Intervention	3.5.4.4 Addressing prevention and wellness.	234	3.41	0.79	228	2.54	0.57	224	1.97	0.91
128	3.5 Intervention	3.5.5 Injury prevention and wellness promotion (e.g., task adaptation, behavior modification, body m	231	3.52	0.71	225	2.62	0.52	222	2.09	0.87
129	3.5 Intervention	3.5.6 Sleep hygiene education (e.g., sleep schedules, technology usage, sleep habits, relationship bet	232	3.02	0.94	226	2.31	0.70	223	1.81	0.83
130	3.5 Intervention	3.5.7 Nutritional education.	232	2.46	0.98	226	2.03	0.70	222	1.58	0.88
131	3.5 Intervention	3.5.8 Pain neuroscience education.	231	3.41	0.81	225	2.60	0.57	223	2.19	0.78
132	3.5 Intervention	3.5.9 Graded exposure.	230	3.20	0.93	224	2.54	0.62	221	2.13	0.79
133	3.5 Intervention	3.5.10 Graded motor imagery.	231	2.22	1.18	223	2.04	0.76	220	1.88	0.89
134	3.5 Intervention	3.5.4.11 Graded activity/exercise.	232	3.71	0.62	226	2.77	0.44	223	2.26	0.84
135	3.5 Intervention	3.5.4.12 Protective, adaptive or supportive device or equipment (e.g., orthotics, taping).	231	2.52	1.01	224	1.92	0.71	221	1.67	0.83
136	3.5 Intervention	3.5.4.13 Neural mobilization (e.g., nerve gliding).	232	3.20	0.86	226	2.46	0.63	223	2.07	0.86
137	3.5 Intervention	3.5.14 Non-thrust mobilization/manipulation.	232	3.67	0.62	225	2.68	0.50	221	2.28	0.80
138	3.5 Intervention	3.5.15 Thrust mobilization/manipulation.	232	3.05	1.07	226	2.48	0.67	222	2.42	0.78
139	3.5 Intervention	3.5.16 Soft tissue mobilization (e.g., connective tissue, deep friction, cross friction massage, instrume	231	3.54	0.80	226	2.48	0.68	222	2.13	0.91
140	3.5 Intervention	3.5.17 Mobilization with movement.	230	3.31	0.81	224	2.41	0.66	221	2.12	0.80
141	3.5 Intervention	3.5.18 Muscle energy techniques.	232	2.88	1.16	226	2.14	0.79	222	1.95	0.88
142	3.5 Intervention	3.5.19 Traction/distraction.	231	2.97	0.97	225	2.20	0.75	221	1.92	0.97
143	3.5 Intervention	3.5.4.20 Directional preference exercises/activities.	230	3.47	0.73	224	2.58	0.57	221	2.10	0.92
144	3.5 Intervention	3.5.4.21 Electro-therapeutic modalities (e.g., TENS, NMES).	230	2.08	1.23	224	1.39	0.87	221	1.31	1.02
145	3.5 Intervention	3.5.4.22 Thermo-therapeutic modalities (e.g., heat, ice, ultrasound).	233	2.12	1.32	226	1.26	0.81	221	1.19	1.06
146	3.5 Intervention	3.5.23 Photo-therapeutic modalities (e.g., laser).	229	0.62	1.04	221	0.67	0.78	212	0.77	0.91
147	3.5 Intervention	3.5.24 Dry needling.	230	1.73	1.52	221	1.60	0.98	213	1.87	1.06
148	3.5 Intervention	3.5.25 Aerobic capacity and endurance exercises.	230	3.26	0.94	224	2.38	0.67	221	1.81	0.98
149	3.5 Intervention	3.5.26 Motor coordination.	229	3.54	0.75	222	2.57	0.56	219	2.01	0.88
150	3.5 Intervention	3.5.27 Muscle performance exercises (e.g., strength, muscle endurance).	230	3.84	0.40	224	2.79	0.43	220	2.06	0.98
151	3.5 Intervention	3.5.28.1 Meditation.	230	1.69	1.24	222	1.57	0.82	213	1.25	0.87
152	3.5 Intervention	3.5.28.2 Mindfulness.	230	2.25	1.31	221	1.84	0.82	215	1.34	0.88
153	3.5 Intervention	3.5.28.3 Hypnosis.	229	0.18	0.57	218	0.39	0.64	194	0.90	1.25
154	3.6 Re-assessment / re-evaluatio	3.6.1 Assessing intervention response.	227	3.89	0.44	221	2.93	0.32	218	2.21	0.97
155	3.6 Re-assessment / re-evaluatio	3.6.2 Analyzing significance of changes.	227	3.82	0.50	221	2.88	0.34	218	2.25	0.90
156	3.6 Re-assessment / re-evaluatio	3.6.3 Assessing change.	227	3.86	0.38	222	2.87	0.35	219	2.16	0.94
157	3.6 Re-assessment / re-evaluatio	3.6.4 Re-examining/implementing a modified plan of care.	228	3.48	0.71	222	2.82	0.39	219	2.26	0.85
158	3.6 Re-assessment / re-evaluatio	3.6.5 Confirming/modifying goals.	228	3.31	0.79	221	2.63	0.55	219	2.01	0.95
159	3.6 Re-assessment / re-evaluatio	3.6.6 Making referrals to other providers as needed.	228	2.54	0.93	222	2.64	0.51	218	2.07	0.86
160	3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity and participation limitations.	223	3.36	0.69	217	2.53	0.57	213	2.01	0.84
161	3.7 Outcomes Assessment	3.7.2 Assessing patient satisfaction.	225	3.36	0.86	219	2.61	0.59	216	1.77	0.99
162	3.7 Outcomes Assessment	3.7.3 Assessing promotion of primary and secondary prevention.	224	3.05	0.88	217	2.29	0.63	213	1.84	0.86
163	3.7 Outcomes Assessment	3.7.4 Assessing improvement of patient's/client's activities and participation based on best available	224	3.28	0.80	218	2.52	0.61	213	1.97	0.91
164	3.7 Outcomes Assessment	3.7.5 Using applicable, evidence-based outcomes measurement tools/questionnaires/scales (e.g., Os	223	3.25	0.88	217	2.45	0.63	214	1.74	1.05
192	6.1 Nervous System	6.1.1 Cervical Radiculopathy.	224	3.36	0.73	218	2.93	0.26	215	2.44	0.76
193	6.1 Nervous System	6.1.2 Lumbar Radiculopathy.	224	3.51	0.66	218	2.90	0.31	215	2.44	0.77
194	6.1 Nervous System	6.1.3 Thoracic Outlet Syndrome.	222	1.79	1.01	215	2.42	0.66	212	2.26	0.79
195	6.1 Nervous System	6.1.4 Other peripheral neural impingements (not including thoracic outlet syndrome; e.g., double cr	222	2.17	1.07	217	2.54	0.60	214	2.33	0.72
196	6.1 Nervous System	6.1.5 Meralgia paresthetica.	222	1.22	0.88	214	2.04	0.76	212	2.00	0.86
197	6.1 Nervous System	6.1.6 Cervical Myelopathy.	224	1.66	1.08	218	2.72	0.53	215	2.32	0.81
198	6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion, herniation).	222	3.45	0.75	215	2.81	0.45	213	2.34	0.82

199	6.2 Musculoskeletal System	6.2.2 Cervical Instability.	223	2.08	1.23	217	2.79	0.46	214	2.41	0.73
200	6.2 Musculoskeletal System	6.2.3 Cervical Sprain/Strain.	223	3.25	0.84	217	2.70	0.49	214	2.16	0.89
201	6.2 Musculoskeletal System	6.2.4 Cervicogenic Headache.	223	2.74	0.93	217	2.69	0.49	212	2.38	0.73
202	6.2 Musculoskeletal System	6.2.5 Chronic Pain Syndromes (e.g., central sensitization and/or nociplastic pain, other persistent pain).	223	2.88	0.96	215	2.70	0.50	212	2.37	0.70
203	6.2 Musculoskeletal System	6.2.6 Other Disorders of Cervical Spine.	223	2.67	1.10	216	2.48	0.61	212	2.15	0.77
204	6.2 Musculoskeletal System	6.2.7 Temporomandibular Dysfunction.	221	1.52	1.09	213	2.27	0.68	208	2.05	0.87
205	6.2 Musculoskeletal System	6.2.8 Disorders of the Hip.	222	3.30	0.73	216	2.74	0.47	213	2.25	0.81
206	6.2 Musculoskeletal System	6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion, herniation).	221	3.61	0.63	215	2.84	0.42	210	2.36	0.86
207	6.2 Musculoskeletal System	6.2.10 Lumbar Instability.	222	2.72	1.13	216	2.66	0.59	213	2.38	0.77
208	6.2 Musculoskeletal System	6.2.11 Lumbar Spondylosis / Spondylolisthesis.	222	2.98	0.98	216	2.69	0.54	213	2.32	0.83
209	6.2 Musculoskeletal System	6.2.12 Lumbar Strain.	222	3.35	0.77	216	2.62	0.57	213	2.11	1.00
210	6.2 Musculoskeletal System	6.2.13 Other Disorders of the Lumbar Spine.	220	2.90	1.00	212	2.55	0.57	209	2.21	0.84
211	6.2 Musculoskeletal System	6.2.14 Piriformis Syndrome.	221	2.10	1.06	213	2.18	0.82	209	1.99	0.94
212	6.2 Musculoskeletal System	6.2.15 Sacroiliac Dysfunction.	222	2.50	1.10	215	2.44	0.68	212	2.25	0.79
213	6.2 Musculoskeletal System	6.2.16 Other Disorders of the Pelvic Girdle.	222	2.11	1.14	213	2.31	0.69	207	2.07	0.77
214	6.2 Musculoskeletal System	6.2.17 Inflammatory Conditions (spondyloarthropathies such as ankylosing spondylitis, RA, etc.).	222	1.80	0.99	214	2.49	0.60	210	2.10	0.80
215	6.2 Musculoskeletal System	6.2.18 Rib Dysfunction.	220	1.96	1.07	213	2.32	0.75	209	2.19	0.77
216	6.2 Musculoskeletal System	6.2.19 Thoracic Sprain/Strain.	220	2.41	1.00	214	2.39	0.65	211	2.12	0.86
217	6.2 Musculoskeletal System	6.2.20 Thoracic Disc Pathologies (e.g., thoracic disc herniation, thoracic radiculopathy).	219	1.59	1.00	212	2.25	0.72	209	2.09	0.82
218	6.2 Musculoskeletal System	6.2.21 Other Disorders of the Thoracic Spine.	217	2.00	1.07	210	2.22	0.72	207	2.00	0.82
219	6.2 Musculoskeletal System	6.2.22 Curvature of the spine (e.g., adolescent idiopathic scoliosis, congenital muscular scoliosis, postural).	221	2.10	1.13	212	2.35	0.65	209	2.02	0.85
220	6.2 Musculoskeletal System	6.2.23 Diastasis recti.	220	1.35	1.01	211	2.04	0.83	206	1.71	0.85
221	6.2 Musculoskeletal System	6.2.24 Facet dysfunction (cervical, thoracic, lumbar).	221	3.20	0.88	214	2.65	0.57	212	2.31	0.82
222	6.2 Musculoskeletal System	6.2.25 Operative procedure on spinal structure.	220	2.45	1.02	214	2.65	0.53	210	2.20	0.83
223	6.2 Musculoskeletal System	6.2.26 Spinal stenosis.	220	3.10	0.91	213	2.67	0.52	211	2.19	0.89
224	6.2 Musculoskeletal System	6.2.27 Oncological Disorders (e.g., tumor, spine metastases, etc.).	220	1.28	0.92	208	2.50	0.73	206	2.00	0.88
225	6.2 Musculoskeletal System	6.2.28 Torticollis (e.g., atlanto axial rotary displacement, congenital muscular torticollis).	220	0.93	0.92	209	1.98	0.91	205	1.66	0.93
226	6.2 Musculoskeletal System	6.2.29 Klippel-Feil Syndrome.	220	0.59	0.79	200	1.74	0.93	199	1.49	1.02
227	6.2 Musculoskeletal System	6.2.30 Scheuermann's Disease.	220	0.95	0.84	207	1.86	0.84	203	1.56	0.92

Descriptives in Order of Importance and Frequency (High to Low)

Key	# of items
High frequency (≥ 3.0), high importance (≥ 2.5) tasks. Very likely to be critical	95
Low frequency (< 3.0), high importance (≥ 2.5) tasks. May be critical	19
High frequency (≥ 3.0), low importance (< 2.5) tasks. Less likely to be critical	31
Low frequency (< 3.0), low importance (< 2.5) tasks. Very unlikely to be critical	54

Response Scales		
Frequency	Importance	Level of Judgment/Mastery
0. Never	0. Not important	0. Do not use/ Advanced beginner skill level
1. Less than monthly	1. Of little importance	1. Recall/ Competent skill level
2. Monthly	2. Moderately important	2. Application/ Proficient skill level
3. Weekly	3. Very important	3. Analysis/Expert skill level
4. Daily		

Survey

Item #	Survey Section	Item/Label	Frequency			Importance			Level of Judgment/Mastery		
			N	Mean	SD	N	Mean	SD	N	Mean	SD
37	1.3 Behavioral Sciences	1.3.3.7 Therapeutic exercise	453	3.99	0.09	442	2.96	0.24	427	2.74	0.45
84	3.1.2 Interpreting Data from Hist	3.1.2.2 Assessing "red flags" and determining need	277	3.82	0.45	268	2.95	0.24	261	2.20	0.97
154	3.6 Re-assessment / re-evaluatio	3.6.1 Assessing intervention response	227	3.89	0.44	221	2.93	0.32	218	2.21	0.97
192	6.1 Nervous System	6.1.1 Cervical Radiculopathy	224	3.36	0.73	218	2.93	0.26	215	2.44	0.76
2	1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system	640	3.96	0.21	620	2.92	0.28	597	2.69	0.56
51	2.3 Communication	2.3.1 Empowering patients	381	3.83	0.45	371	2.92	0.30	359	2.19	0.88
3	1.1 Foundation Sciences	1.1.1.2 Neuromuscular system	635	3.91	0.31	614	2.91	0.28	592	2.73	0.51
193	6.1 Nervous System	6.1.2 Lumbar Radiculopathy	224	3.51	0.66	218	2.90	0.31	215	2.44	0.77
83	3.1.2 Interpreting Data from Hist	3.1.2.1 Developing a working hypothesis of the physical therapy diagnosis	274	3.88	0.36	266	2.90	0.32	260	2.31	0.87
13	1.2 Clinical Sciences	1.2.1.1 Signs and symptoms of disease/injury	534	3.87	0.41	515	2.89	0.31	495	2.64	0.61
155	3.6 Re-assessment / re-evaluatio	3.6.2 Analyzing significance of changes	227	3.82	0.50	221	2.88	0.34	218	2.25	0.90
115	3.2 Evaluation	3.2.2 Developing a working diagnosis	241	3.83	0.44	235	2.88	0.35	231	2.40	0.80
9	1.1 Foundation Sciences	1.1.2.1 Kinesiology/biomechanics	588	3.94	0.29	569	2.88	0.36	546	2.82	0.42
86	3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques	276	3.90	0.31	267	2.88	0.34	260	2.42	0.79
156	3.6 Re-assessment / re-evaluatio	3.6.3 Assessing change	227	3.86	0.38	222	2.87	0.35	219	2.16	0.94
69	3.1.1 History	3.1.1.2.3 Symptom irritability	325	3.89	0.37	315	2.84	0.40	309	2.13	1.01
206	6.2 Musculoskeletal System	6.2.9 Lumbar Disc Pathologies	221	3.61	0.63	215	2.84	0.42	210	2.36	0.86
88	3.1.3 Planning a Physical Exam	3.1.3.3 Considers the nature, severity, and irritability of the symptoms/problems	275	3.92	0.30	267	2.83	0.38	260	2.22	0.92
70	3.1.1 History	3.1.1.2.4 Onset of condition	324	3.85	0.40	316	2.83	0.40	308	2.07	1.05
157	3.6 Re-assessment / re-evaluatio	3.6.4 Re-examining/implementing a modified plan of care	228	3.48	0.71	222	2.82	0.39	219	2.26	0.85
10	1.1 Foundation Sciences	1.1.2.2 Neural control of movement	590	3.86	0.43	569	2.82	0.41	548	2.78	0.45
14	1.2 Clinical Sciences	1.2.1.2 Progression of disease/injury processes	535	3.79	0.48	516	2.81	0.39	496	2.56	0.63
67	3.1.1 History	3.1.1.2.1 Recognition of contributions from multiple body regions	326	3.80	0.50	317	2.81	0.42	310	2.27	0.86
89	3.1.3 Planning a Physical Exam	3.1.3.4 Prioritizes areas, movements, and functional activities	275	3.90	0.31	267	2.81	0.41	258	2.33	0.83
87	3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and detail appropriate	274	3.86	0.37	266	2.81	0.43	258	2.37	0.78
73	3.1.1 History	3.1.1.2.7 Goals of the patient, family, and caregiver	326	3.76	0.54	317	2.81	0.42	311	1.94	1.10
198	6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies	222	3.45	0.75	215	2.81	0.45	213	2.34	0.82
85	3.1.2 Interpreting Data from Hist	3.1.2.3 Identifying chief and secondary problems	277	3.84	0.38	269	2.81	0.40	262	2.22	0.85
24	1.3 Behavioral Sciences	1.3.1.2 Personal factors	487	3.86	0.41	470	2.81	0.41	452	2.66	0.54
68	3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms	325	3.90	0.38	315	2.81	0.43	309	2.16	0.93
124	3.5 Intervention	3.5.4.1 Concerning diagnosis, prognosis, treatment, responsibility	233	3.78	0.52	227	2.80	0.42	224	2.22	0.86
16	1.2 Clinical Sciences	1.2.1.4 Tissue inflammation, healing, and repair	536	3.81	0.44	517	2.79	0.41	497	2.49	0.65
44	2.1 Professional Behavior	2.1.2 Using patient-centered ethics and values	407	3.70	0.65	396	2.79	0.46	382	2.14	0.90
59	2.6 Critical Inquiry and Evidence	2.6.1 Applying principles of evidence-based practice in patient/client management	362	3.77	0.61	352	2.79	0.49	342	2.20	0.94
199	6.2 Musculoskeletal System	6.2.2 Cervical Instability	223	2.08	1.23	217	2.79	0.46	214	2.41	0.73
150	3.5 Intervention	3.5.27 Muscle performance exercises	230	3.84	0.40	224	2.79	0.43	220	2.06	0.98
134	3.5 Intervention	3.5.4.11 Graded activity/exercise	232	3.71	0.62	226	2.77	0.44	223	2.26	0.84
75	3.1.1 History	3.1.1.4.1 Physical function	319	3.82	0.43	309	2.77	0.44	302	1.92	1.08
104	3.1.5 Test and Measures	3.1.5.14 Joint integrity	261	3.80	0.47	253	2.75	0.48	244	2.23	0.89
25	1.3 Behavioral Sciences	1.3.1.3 Psychological/emotional conditions	488	3.70	0.60	471	2.75	0.44	452	2.58	0.58
74	3.1.1 History	3.1.1.3 Obtaining data regarding functional status	317	3.77	0.51	308	2.75	0.45	301	1.88	1.07
205	6.2 Musculoskeletal System	6.2.8 Disorders of the Hip	222	3.30	0.73	216	2.74	0.47	213	2.25	0.81
33	1.3 Behavioral Sciences	1.3.3.3 Manual therapy techniques	452	3.84	0.48	442	2.73	0.53	426	2.69	0.49
117	3.2 Evaluation	3.2.4 Referring patient/client to other health care	241	2.80	0.93	235	2.73	0.48	229	2.17	0.85
35	1.3 Behavioral Sciences	1.3.3.5 Motor control and motor learning	453	3.81	0.46	442	2.73	0.51	426	2.62	0.54
197	6.1 Nervous System	6.1.6 Cervical Myelopathy	224	1.66	1.08	218	2.72	0.53	215	2.32	0.81
107	3.1.5 Test and Measures	3.1.5.17 Muscle performance	251	3.79	0.47	243	2.72	0.47	237	1.97	1.01
76	3.1.1 History	3.1.1.4.2 Psychosocial factors	318	3.66	0.58	308	2.72	0.49	300	1.99	0.89

34	1.3 Behavioral Sciences	1.3.3.4 Movement systems impairments	452	3.80	0.60	440	2.72	0.56	425	2.69	0.55
120	3.4 Prognosis	3.4.1 Accounting for the complexity of the patient/client condition	241	3.71	0.58	235	2.71	0.52	231	2.37	0.73
119	3.3. Diagnosis	3.3.1 Organizing examination findings	241	3.63	0.72	234	2.71	0.57	229	2.31	0.80
122	3.5 Intervention	3.5.2 Education/training of functional activities	234	3.77	0.47	228	2.70	0.51	225	2.04	1.00
200	6.2 Musculoskeletal System	6.2.3 Cervical Sprain/Strain	223	3.25	0.84	217	2.70	0.49	214	2.16	0.89
202	6.2 Musculoskeletal System	6.2.5 Chronic Pain Syndromes	223	2.88	0.96	215	2.70	0.50	212	2.37	0.70
201	6.2 Musculoskeletal System	6.2.4 Cervicogenic Headache	223	2.74	0.93	217	2.69	0.49	212	2.38	0.73
113	3.1.5 Test and Measures	3.1.5.23 Task-specific activities	253	3.77	0.48	246	2.69	0.49	238	2.02	1.00
208	6.2 Musculoskeletal System	6.2.11 Lumbar Spondylosis / Spondylolisthesis	222	2.98	0.98	216	2.69	0.54	213	2.32	0.83
137	3.5 Intervention	3.5.14 Non-thrust mobilization/manipulation	232	3.67	0.62	225	2.68	0.50	221	2.28	0.80
39	1.3 Behavioral Sciences	1.3.3.9 Principles of teaching and learning	454	3.70	0.65	442	2.67	0.52	428	2.45	0.57
64	3.1.1 History	3.1.1.1.2 Activity requirements/occupational demands	331	3.60	0.77	321	2.67	0.56	312	1.86	1.03
12	1.1 Foundation Sciences	1.1.2.4 Locomotion	589	3.78	0.52	569	2.67	0.54	549	2.65	0.55
223	6.2 Musculoskeletal System	6.2.26 Spinal stenosis	220	3.10	0.91	213	2.67	0.52	211	2.19	0.89
92	3.1.5 Test and Measures	3.1.5.2 Gait, locomotion, and balance	265	3.76	0.52	257	2.66	0.54	250	1.97	0.99
15	1.2 Clinical Sciences	1.2.1.3 Pathokinesiology	534	3.70	0.57	516	2.66	0.54	497	2.59	0.64
72	3.1.1 History	3.1.1.2.6 Readiness for change	326	3.65	0.66	317	2.66	0.51	310	2.01	0.92
207	6.2 Musculoskeletal System	6.2.10 Lumbar Instability	222	2.72	1.13	216	2.66	0.59	213	2.38	0.77
221	6.2 Musculoskeletal System	6.2.24 Facet dysfunction	221	3.20	0.88	214	2.65	0.57	212	2.31	0.82
222	6.2 Musculoskeletal System	6.2.25 Operative procedure on spinal structure	220	2.45	1.02	214	2.65	0.53	210	2.20	0.83
78	3.1.1 History	3.1.1.6 Obtaining medical/surgical history data	298	3.65	0.63	286	2.65	0.49	281	1.79	1.06
126	3.5 Intervention	3.5.4.3 Addressing pain physiology and dose response	233	3.70	0.57	228	2.65	0.54	225	2.15	0.83
159	3.6 Re-assessment / re-evaluatio	3.6.6 Making referrals to other providers as needed	228	2.54	0.93	222	2.64	0.51	218	2.07	0.86
95	3.1.5 Test and Measures	3.1.5.5 Pain	266	3.93	0.25	258	2.64	0.56	251	2.04	1.02
42	1.4 Critical Inquiry for Evidence-I	1.4.2 Application of research findings	441	3.11	0.91	430	2.63	0.51	414	2.51	0.61
158	3.6 Re-assessment / re-evaluatio	3.6.5 Confirming/modifying goals	228	3.31	0.79	221	2.63	0.55	219	2.01	0.95
40	1.3 Behavioral Sciences	1.3.3.10 Principles of prevention and wellness	454	3.57	0.69	443	2.63	0.55	428	2.31	0.61
90	3.1.4 Systems Review	3.1.4.1 Performing systems review	266	3.61	0.65	258	2.62	0.54	251	1.95	0.93
28	1.3 Behavioral Sciences	1.3.2.2 Peripheral neurogenic/neuropathic pain physiology	487	3.48	0.73	470	2.62	0.53	451	2.47	0.64
27	1.3 Behavioral Sciences	1.3.2.1 Peripheral nociceptive pain physiology	486	3.59	0.68	469	2.62	0.54	452	2.47	0.66
49	2.2 Leadership	2.2.3 Modeling and facilitating the translation of evidence into clinical practice	397	3.07	1.04	386	2.62	0.58	373	2.21	0.77
41	1.4 Critical Inquiry for Evidence-I	1.4.1 Critical interpretation of research findings	441	2.86	0.86	430	2.62	0.51	416	2.54	0.65
128	3.5 Intervention	3.5.5 Injury prevention and wellness promotion	231	3.52	0.71	225	2.62	0.52	222	2.09	0.87
71	3.1.1 History	3.1.1.2.5 Current and previous therapeutic interventions	326	3.77	0.50	316	2.62	0.52	309	2.03	1.05
29	1.3 Behavioral Sciences	1.3.2.3 Central nervous system/nociplastic pain physiology	487	3.34	0.87	470	2.62	0.54	452	2.44	0.69
209	6.2 Musculoskeletal System	6.2.12 Lumbar Strain	222	3.35	0.77	216	2.62	0.57	213	2.11	1.00
161	3.7 Outcomes Assessment	3.7.2 Assessing patient satisfaction	225	3.36	0.86	219	2.61	0.59	216	1.77	0.99
131	3.5 Intervention	3.5.8 Pain neuroscience education	231	3.41	0.81	225	2.60	0.57	223	2.19	0.78
55	2.5 Education	2.5.1 Contributing to the professional development of other physical therapists	366	2.47	1.03	356	2.60	0.57	346	2.37	0.72
46	2.1 Professional Behavior	2.1.4 Maintaining state-of-the-art knowledge and skills	407	2.11	0.95	397	2.60	0.58	383	1.94	0.96
50	2.2 Leadership	2.2.4 Acting as an expert resource	397	2.76	1.08	387	2.59	0.61	373	2.55	0.71
21	1.2 Clinical Sciences	1.2.2.5 Spine surgical interventions	534	2.99	0.90	516	2.59	0.57	498	2.24	0.73
53	2.4 Advocacy	2.4.1 Promoting the orthopaedic spine physical therapist	381	2.88	1.16	371	2.59	0.62	357	2.14	0.91
143	3.5 Intervention	3.5.4.20 Directional preference exercises/activities	230	3.47	0.73	224	2.58	0.57	221	2.10	0.92
99	3.1.5 Test and Measures	3.1.5.9 Neurodynamics	259	3.42	0.72	251	2.57	0.56	244	2.09	0.82
149	3.5 Intervention	3.5.26 Motor coordination	229	3.54	0.75	222	2.57	0.56	219	2.01	0.88
123	3.5 Intervention	3.5.3 Education/training of activities of daily living	235	3.61	0.64	229	2.56	0.61	225	1.93	0.99
102	3.1.5 Test and Measures	3.1.5.12 Motor control and coordination	261	3.49	0.89	252	2.55	0.62	244	2.15	0.80
210	6.2 Musculoskeletal System	6.2.13 Other Disorders of the Lumbar Spine	220	2.90	1.00	212	2.55	0.57	209	2.21	0.84
127	3.5 Intervention	3.5.4.4 Addressing prevention and wellness	234	3.41	0.79	228	2.54	0.57	224	1.97	0.91
101	3.1.5 Test and Measures	3.1.5.11 Reflex integrity	260	3.35	0.83	252	2.54	0.61	245	1.90	1.01
195	6.1 Nervous System	6.1.4 Other peripheral neural impingements	222	2.17	1.07	217	2.54	0.60	214	2.33	0.72
63	3.1.1 History	3.1.1.1.1 Current and prior work	331	3.54	0.85	321	2.54	0.61	311	1.83	1.04
132	3.5 Intervention	3.5.9 Graded exposure	230	3.20	0.93	224	2.54	0.62	221	2.13	0.79
77	3.1.1 History	3.1.1.5 Obtaining data regarding social/health habits	298	3.54	0.72	288	2.53	0.57	280	1.73	0.99
112	3.1.5 Test and Measures	3.1.5.22 Soft tissue quality	251	3.74	0.58	244	2.53	0.60	237	2.04	0.96
160	3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity and participation limitations	223	3.36	0.69	217	2.53	0.57	213	2.01	0.84
100	3.1.5 Test and Measures	3.1.5.10 Sensory integrity	261	3.32	0.87	252	2.52	0.61	245	1.95	0.93
23	1.3 Behavioral Sciences	1.3.1.1 External environmental factors	489	3.54	0.75	471	2.52	0.62	453	2.45	0.66
163	3.7 Outcomes Assessment	3.7.4 Assessing improvement	224	3.28	0.80	218	2.52	0.61	213	1.97	0.91
93	3.1.5 Test and Measures	3.1.5.3 Work (job/school/play), community and leisure integration	267	3.43	0.77	258	2.52	0.59	251	1.85	0.93

32	1.3 Behavioral Sciences	1.3.3.2 Exercise physiology across the lifespan	453	3.53	0.73	439	2.51	0.58	424	2.32	0.67
11	1.1 Foundation Sciences	1.1.2.3 Ergonomics	589	3.54	0.67	569	2.51	0.60	549	2.46	0.59
224	6.2 Musculoskeletal System	6.2.27 Oncological Disorders	220	1.28	0.92	208	2.50	0.73	206	2.00	0.88
31	1.3 Behavioral Sciences	1.3.3.1 Biopsychosocial model	451	3.41	0.94	440	2.50	0.69	424	2.38	0.77
52	2.3 Communication	2.3.2 Facilitating collaborative and multidisciplinary team management	382	2.85	0.98	372	2.50	0.64	360	2.04	0.79
43	2.1 Professional Behavior	2.1.1 Consulting with and/or educating peers, colleagues, other	408	2.46	1.02	397	2.50	0.60	385	2.14	0.75
214	6.2 Musculoskeletal System	6.2.17 Inflammatory Conditions	222	1.80	0.99	214	2.49	0.60	210	2.10	0.80
91	3.1.5 Test and Measures	3.1.5.1 Ergonomics and body mechanics	266	3.56	0.68	258	2.48	0.62	250	1.93	0.98
26	1.3 Behavioral Sciences	1.3.1.4 Impact of behavioral health risk factors	488	3.37	0.80	471	2.48	0.58	452	2.11	0.72
138	3.5 Intervention	3.5.15 Thrust mobilization/manipulation	232	3.05	1.07	226	2.48	0.67	222	2.42	0.78
139	3.5 Intervention	3.5.16 Soft tissue mobilization	231	3.54	0.80	226	2.48	0.68	222	2.13	0.91
203	6.2 Musculoskeletal System	6.2.6 Other Disorders of Cervical Spine	223	2.67	1.10	216	2.48	0.61	212	2.15	0.77
58	2.5 Education	2.5.4 Educating other health care professionals	362	2.03	1.01	351	2.46	0.64	342	1.98	0.89
103	3.1.5 Test and Measures	3.1.5.13 Biopsychosocial functioning	261	3.14	0.95	252	2.46	0.62	244	1.89	0.88
136	3.5 Intervention	3.5.4.13 Neural mobilization	232	3.20	0.86	226	2.46	0.63	223	2.07	0.86
125	3.5 Intervention	3.5.4.2 Using the biopsychosocial/biomedical models	233	3.43	0.89	227	2.45	0.69	224	2.06	0.87
164	3.7 Outcomes Assessment	3.7.5 Using applicable, evidence-based outcomes measurement tools	223	3.25	0.88	217	2.45	0.63	214	1.74	1.05
38	1.3 Behavioral Sciences	1.3.3.8 Models of differential diagnosis and clinical reasoning	447	3.37	1.13	433	2.44	0.84	418	2.41	0.90
212	6.2 Musculoskeletal System	6.2.15 Sacroiliac Dysfunction	222	2.50	1.10	215	2.44	0.68	212	2.25	0.79
111	3.1.5 Test and Measures	3.1.5.21 Flexibility	253	3.68	0.59	246	2.43	0.63	239	1.87	1.02
65	3.1.1 History	3.1.1.1.3 Ergonomic considerations	331	3.37	0.82	321	2.43	0.64	312	1.77	0.96
109	3.1.5 Test and Measures	3.1.5.19 Posture	253	3.68	0.61	246	2.43	0.67	239	1.92	1.03
57	2.5 Education	2.5.3 Educating the public regarding spine conditions	366	2.24	1.22	356	2.42	0.67	346	1.92	0.90
194	6.1 Nervous System	6.1.3 Thoracic Outlet Syndrome	222	1.79	1.01	215	2.42	0.66	212	2.26	0.79
140	3.5 Intervention	3.5.17 Mobilization with movement	230	3.31	0.81	224	2.41	0.66	221	2.12	0.80
97	3.1.5 Test and Measures	3.1.5.7 Circulation	261	2.90	0.99	253	2.41	0.63	246	1.87	0.89
121	3.5 Intervention	3.5.1 Ergonomics	235	3.41	0.81	228	2.40	0.63	225	1.92	0.90
79	3.1.1 History	3.1.1.7 Obtaining data regarding medication usage	298	3.53	0.71	288	2.39	0.60	282	1.70	0.95
216	6.2 Musculoskeletal System	6.2.19 Thoracic Sprain/Strain	220	2.41	1.00	214	2.39	0.65	211	2.12	0.86
110	3.1.5 Test and Measures	3.1.5.20 Tissue-specific diagnostic tests	252	3.55	0.72	245	2.39	0.71	238	2.07	0.90
148	3.5 Intervention	3.5.25 Aerobic capacity and endurance exercises	230	3.26	0.94	224	2.38	0.67	221	1.81	0.98
108	3.1.5 Test and Measures	3.1.5.18 Neuromotor development and sensory integration	251	3.18	0.93	243	2.37	0.63	236	1.95	0.86
118	3.2 Evaluation	3.2.5 Considering implications of exam findings	238	3.19	1.10	231	2.37	0.73	227	1.95	0.91
219	6.2 Musculoskeletal System	6.2.22 Curvature of the spine	221	2.10	1.13	212	2.35	0.65	209	2.02	0.85
80	3.1.1 History	3.1.1.8 Obtaining data regarding social history	298	3.39	0.83	289	2.35	0.67	281	1.65	0.98
105	3.1.5 Test and Measures	3.1.5.15 Community, home, and work barriers	249	3.18	0.89	243	2.35	0.65	235	1.72	0.92
61	2.6 Critical Inquiry and Evidence	2.6.3 Evaluating the efficacy and effectiveness of tools	363	2.23	1.19	353	2.34	0.72	343	1.99	0.91
116	3.2 Evaluation	3.2.3 Incorporating data from ancillary testing	241	3.27	0.76	235	2.33	0.63	231	1.99	0.76
20	1.2 Clinical Sciences	1.2.2.4 Nonsurgical interventional spine procedures	533	2.95	0.90	514	2.33	0.63	497	2.06	0.77
215	6.2 Musculoskeletal System	6.2.18 Rib Dysfunction	220	1.96	1.07	213	2.32	0.75	209	2.19	0.77
129	3.5 Intervention	3.5.6 Sleep hygiene education	232	3.02	0.94	226	2.31	0.70	223	1.81	0.83
213	6.2 Musculoskeletal System	6.2.16 Other Disorders of the Pelvic Girdle	222	2.11	1.14	213	2.31	0.69	207	2.07	0.77
54	2.4 Advocacy	2.4.2 Advocating for orthopaedic spine physical therapy practice	381	1.47	1.09	369	2.30	0.71	354	1.80	1.00
162	3.7 Outcomes Assessment	3.7.3 Assessing promotion of primary and secondary prevention	224	3.05	0.88	217	2.29	0.63	213	1.84	0.86
204	6.2 Musculoskeletal System	6.2.7 Temporomandibular Dysfunction	221	1.52	1.09	213	2.27	0.68	208	2.05	0.87
98	3.1.5 Test and Measures	3.1.5.8 Aerobic capacity and endurance	261	2.80	1.06	252	2.26	0.68	245	1.69	0.91
47	2.2 Leadership	2.2.1 Representing orthopaedic spine physical therapy	398	1.97	1.05	387	2.26	0.70	372	2.02	0.86
217	6.2 Musculoskeletal System	6.2.20 Thoracic Disc Pathologies	219	1.59	1.00	212	2.25	0.72	209	2.09	0.82
218	6.2 Musculoskeletal System	6.2.21 Other Disorders of the Thoracic Spine	217	2.00	1.07	210	2.22	0.72	207	2.00	0.82
4	1.1 Foundation Sciences	1.1.1.3 Cardiovascular and pulmonary systems	636	2.89	0.97	615	2.21	0.63	593	2.03	0.72
114	3.2 Evaluation	3.2.1 Using the ICF model	239	3.03	1.29	233	2.21	0.91	228	1.83	1.01
7	1.1 Foundation Sciences	1.1.1.6 Histology (e.g., connective tissue, muscle fiber type, immunity)	631	3.07	1.08	609	2.20	0.71	589	2.07	0.78
142	3.5 Intervention	3.5.19 Traction/distraction	231	2.97	0.97	225	2.20	0.75	221	1.92	0.97
82	3.1.1 History	3.1.1.10 Obtaining data on living environment and community characteristics	298	3.35	0.92	288	2.18	0.70	281	1.51	1.07
211	6.2 Musculoskeletal System	6.2.14 Piriformis Syndrome	221	2.10	1.06	213	2.18	0.82	209	1.99	0.94
141	3.5 Intervention	3.5.18 Muscle energy techniques	232	2.88	1.16	226	2.14	0.79	222	1.95	0.88
45	2.1 Professional Behavior	2.1.3 Maintaining active participation in professional organizations	405	1.92	1.01	395	2.12	0.74	381	1.50	0.96
62	2.6 Critical Inquiry and Evidence	2.6.4 Identifying research needs within the field	364	1.38	0.97	352	2.11	0.75	340	1.84	1.03
30	1.3 Behavioral Sciences	1.3.2.4 Output mechanisms and expressions	487	2.75	1.02	470	2.11	0.72	450	1.94	0.81
18	1.2 Clinical Sciences	1.2.2.2 Pharmacology	535	3.08	0.91	517	2.10	0.60	498	1.73	0.74
6	1.1 Foundation Sciences	1.1.1.5 Human growth and development across the lifespan	634	2.66	1.14	613	2.08	0.71	591	1.95	0.82

106	3.1.5 Test and Measures	3.1.5.16 Integumentary integrity	250	2.86	1.03	243	2.07	0.69	236	1.47	0.91
17	1.2 Clinical Sciences	1.2.2.1 Imaging studies	536	3.08	0.82	518	2.07	0.64	499	2.14	0.72
81	3.1.1 History	3.1.1.9 Obtaining general demographic information	298	3.42	0.89	288	2.05	0.78	281	1.43	1.06
196	6.1 Nervous System	6.1.5 Meralgia paresthetica	222	1.22	0.88	214	2.04	0.76	212	2.00	0.86
133	3.5 Intervention	3.5.10 Graded motor imagery	231	2.22	1.18	223	2.04	0.76	220	1.88	0.89
220	6.2 Musculoskeletal System	6.2.23 Diastasis recti	220	1.35	1.01	211	2.04	0.83	206	1.71	0.85
96	3.1.5 Test and Measures	3.1.5.6 Anthropometric characteristics	267	3.01	1.00	258	2.03	0.69	251	1.51	0.96
130	3.5 Intervention	3.5.7 Nutritional education	232	2.46	0.98	226	2.03	0.70	222	1.58	0.88
60	2.6 Critical Inquiry and Evidence	2.6.2 Contributing to the body of evidence in orthopaedic spine	364	1.12	0.91	352	2.03	0.73	341	1.89	1.03
94	3.1.5 Test and Measures	3.1.5.4 Adaptive and supportive devices	266	2.81	0.98	258	2.03	0.72	251	1.66	0.88
48	2.2 Leadership	2.2.2 Planning, directing, organizing, and managing resources	396	2.35	1.30	383	2.00	0.86	369	1.68	0.91
66	3.1.1 History	3.1.1.1.4 Utilization of adaptive and supportive devices	331	2.67	1.06	321	1.98	0.76	312	1.63	0.88
225	6.2 Musculoskeletal System	6.2.28 Torticollis	220	0.93	0.92	209	1.98	0.91	205	1.66	0.93
8	1.1 Foundation Sciences	1.1.1.7 Other systems (e.g., endocrine, digestive, genitourinary)	634	2.48	1.12	612	1.95	0.67	591	1.83	0.85
56	2.5 Education	2.5.2 Promoting awareness and benefits of fellowship programs	367	1.46	1.09	355	1.93	0.87	339	1.78	0.97
36	1.3 Behavioral Sciences	1.3.3.6 Theory and application of orthotic, protective, and supportive devices	454	2.36	0.99	442	1.93	0.69	425	1.97	0.73
135	3.5 Intervention	3.5.4.12 Protective, adaptive or supportive device or equipment	231	2.52	1.01	224	1.92	0.71	221	1.67	0.83
5	1.1 Foundation Sciences	1.1.1.4 Integumentary system	634	2.59	1.14	613	1.87	0.69	592	1.77	0.77
19	1.2 Clinical Sciences	1.2.2.3 Ancillary tests	534	2.37	1.03	516	1.87	0.66	496	1.70	0.81
227	6.2 Musculoskeletal System	6.2.30 Scheuermann's Disease	220	0.95	0.84	207	1.86	0.84	203	1.56	0.92
152	3.5 Intervention	3.5.28.2 Mindfulness	230	2.25	1.31	221	1.84	0.82	215	1.34	0.88
226	6.2 Musculoskeletal System	6.2.29 Klippel-Feil Syndrome	220	0.59	0.79	200	1.74	0.93	199	1.49	1.02
147	3.5 Intervention	3.5.24 Dry needling	230	1.73	1.52	221	1.60	0.98	213	1.87	1.06
151	3.5 Intervention	3.5.28.1 Meditation	230	1.69	1.24	222	1.57	0.82	213	1.25	0.87
22	1.2 Clinical Sciences	1.2.2.6 Developments in genetics/regenerative medicine	534	1.47	1.03	514	1.47	0.75	496	1.17	0.84
144	3.5 Intervention	3.5.4.21 Electro-therapeutic modalitie	230	2.08	1.23	224	1.39	0.87	221	1.31	1.02
145	3.5 Intervention	3.5.4.22 Thermo-therapeutic modalities	233	2.12	1.32	226	1.26	0.81	221	1.19	1.06
146	3.5 Intervention	3.5.23 Photo-therapeutic modalities	229	0.62	1.04	221	0.67	0.78	212	0.77	0.91
153	3.5 Intervention	3.5.28.3 Hypnosis	229	0.18	0.57	218	0.39	0.64	194	0.90	1.25

Par 2	2.1 Professional Behavior	2.1.1 Consulting with and/or educating patients	# Responses	Importance / Level of Mastery					2.1.2 Using patient-centered ethics and values	2.1.3 Maintaining active participation in patient care	2.1.4 Maintaining state-of-the-art knowledge
				Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Beginner	Never / Adv.			
		Frequency	408	72	129	124	79	4			
		Importance	397	218	160	18	1				
		Level of Mastery	385	132	181	66	6				
		Frequency	407	315	70	15	5	2			
		Importance	396	322	67	6	1				
		Level of Mastery	382	161	137	61	23				
		Frequency	405	40	52	169	125	19			
		Importance	395	130	189	71	5				
		Level of Mastery	381	63	128	127	63				
		Frequency	407	48	60	192	104	3			
		Importance	397	252	133	9	3				
		Level of Mastery	383	123	155	64	41				
	2.2 Leadership	2.2.1 Representing orthopaedic spine patients	398	38	80	135	124	21			
		Importance	387	153	188	40	6				
		Level of Mastery	372	121	157	74	20				
		Frequency	396	100	90	91	78	37			
		Importance	383	122	159	83	19				
		Level of Mastery	369	69	155	103	42				
		Frequency	397	183	103	72	35	4			
		Importance	386	257	112	16	1				
		Level of Mastery	373	152	157	56	8				
		Frequency	397	125	117	96	54	5			
		Importance	387	251	117	16	3				
		Level of Mastery	373	245	93	29	6				
	2.3 Communication	2.3.1 Empowering patients with orthopaedic spine patients	381	326	45	9	1				
		Importance	371	343	25	3					
		Level of Mastery	359	157	136	43	23				
		Frequency	382	105	164	71	36	6			
		Importance	372	211	140	17	4				
		Level of Mastery	360	108	170	70	12				
	2.4 Advocacy	2.4.1 Promoting the orthopaedic spine patients	381	151	103	70	44	13			
		Importance	371	240	114	12	5				
		Level of Mastery	357	150	131	51	25				
		Frequency	381	31	24	102	161	63			
		Importance	369	160	162	43	4				
		Level of Mastery	354	101	128	79	46				
	2.5 Education	2.5.1 Contributing to the professional development of patients	366	69	105	127	58	7			
		Importance	356	228	117	9	2				
		Level of Mastery	346	173	135	32	6				
		Frequency	367	23	35	99	141	69			
		Importance	355	98	157	77	23				
		Level of Mastery	339	92	120	89	38				
		Frequency	366	89	49	99	118	11			
		Importance	356	184	143	25	4				
		Level of Mastery	346	105	132	87	22				
		Frequency	362	36	71	135	109	11			
		Importance	351	188	140	21	2				
		Level of Mastery	342	110	135	76	21				
	2.6 Critical Inquiry and Evidence-Based Practice	2.6.1 Applying principles of evidence-based practice	362	302	44	11	2	3			
		Importance	352	288	57	4	3				
		Level of Mastery	342	162	116	35	29				
		Frequency	364	18	8	44	225	69			
		Importance	352	85	206	47	14				
		Level of Mastery	341	120	110	66	45				
		Frequency	363	73	73	98	102	17			
		Importance	353	163	154	28	8				
		Level of Mastery	343	116	131	73	23				
		Frequency	364	18	23	90	183	50			
		Importance	352	108	187	45	12				
		Level of Mastery	340	114	99	85	42				
Part 3	3.1.1 History	3.1.1.1.1 Current and prior work.	331	234	62	18	14	3			
		Importance	321	191	112	17	1				
		Level of Mastery	311	98	110	56	47				
		Frequency	331	242	59	19	9	2			
		Importance	321	228	81	11	1				
		Level of Mastery	312	103	105	60	44				

3.1.1.1.3 Ergonomic considerations.	Frequency	331	181	105	31	14	54.7%	31.7%	9.4%	4.2%
	Importance	321	166	128	27		51.7%	39.9%	8.4%	
	Level of Mastery	312	84	104	93	31	26.9%	33.3%	29.8%	9.9%
3.1.1.1.4 Utilization of adaptive and sup	Frequency	331	86	107	87	45	26.0%	32.3%	26.3%	13.6%
	Importance	321	84	155	75	7	26.2%	48.3%	23.4%	2.2%
	Level of Mastery	312	51	125	104	32	16.3%	40.1%	33.3%	10.3%
3.1.1.2.1 Recognition of contributions fr	Frequency	326	271	47	6	1	83.1%	14.4%	1.8%	0.3%
	Importance	317	262	51	4		82.6%	16.1%	1.3%	
	Level of Mastery	310	150	111	31	18	48.4%	35.8%	10.0%	5.8%
3.1.1.2.2 Quality and behavior of symptc	Frequency	325	299	20	5	1	92.0%	6.2%	1.5%	0.3%
	Importance	315	258	53	4		81.9%	16.8%	1.3%	
	Level of Mastery	309	138	105	42	24	44.7%	34.0%	13.6%	7.8%
3.1.1.2.3 Symptom irritability (onset, off	Frequency	325	294	29	1	1	90.5%	8.9%	0.3%	0.3%
	Importance	315	268	45	1	1	85.1%	14.3%	0.3%	0.3%
	Level of Mastery	309	148	86	42	33	47.9%	27.8%	13.6%	10.7%
3.1.1.2.4 Onset of condition (e.g., mecha	Frequency	324	281	39	3	1	86.7%	12.0%	0.9%	0.3%
	Importance	316	265	48	3		83.9%	15.2%	0.9%	
	Level of Mastery	308	144	82	43	39	46.8%	26.6%	14.0%	12.7%
3.1.1.2.5 Current and previous therapeu	Frequency	326	261	54	11		80.1%	16.6%	3.4%	
	Importance	316	201	109	6		63.6%	34.5%	1.9%	
	Level of Mastery	309	133	91	45	40	43.0%	29.4%	14.6%	12.9%
3.1.1.2.6 Readiness for change.	Frequency	326	242	58	22	4	74.2%	17.8%	6.7%	1.2%
	Importance	317	215	96	6		67.8%	30.3%	1.9%	
	Level of Mastery	310	110	116	62	22	35.5%	37.4%	20.0%	7.1%
3.1.1.2.7 Goals of the patient, family, an	Frequency	326	265	47	12	2	81.3%	14.4%	3.7%	0.6%
	Importance	317	260	54	3		82.0%	17.0%	0.9%	
	Level of Mastery	311	129	82	52	48	41.5%	26.4%	16.7%	15.4%
3.1.1.3 Obtaining data regarding functio	Frequency	317	256	52	7	2	80.8%	16.4%	2.2%	0.6%
	Importance	308	232	74	2		75.3%	24.0%	0.6%	
	Level of Mastery	301	112	86	59	44	37.2%	28.6%	19.6%	14.6%
3.1.1.4.1 Physical function.	Frequency	319	269	45	4	1	84.3%	14.1%	1.3%	0.3%
	Importance	309	239	68	2		77.3%	22.0%	0.6%	
	Level of Mastery	302	118	86	53	45	39.1%	28.5%	17.5%	14.9%
3.1.1.4.2 Psychosocial factors (e.g., anxie	Frequency	318	227	77	12	2	71.4%	24.2%	3.8%	0.6%
	Importance	308	226	78	3	1	73.4%	25.3%	1.0%	0.3%
	Level of Mastery	300	98	119	64	19	32.7%	39.7%	21.3%	6.3%
3.1.1.5 Obtaining data regarding social/f	Frequency	298	190	86	16	4	63.8%	28.9%	5.4%	1.3%
	Importance	288	163	117	7	1	56.6%	40.6%	2.4%	0.3%
	Level of Mastery	280	72	98	73	37	25.7%	35.0%	26.1%	13.2%
3.1.1.6 Obtaining medical/surgical histor	Frequency	298	215	67	11	5	72.1%	22.5%	3.7%	1.7%
	Importance	286	189	95	2		66.1%	33.2%	0.7%	
	Level of Mastery	281	89	87	61	44	31.7%	31.0%	21.7%	15.7%
3.1.1.7 Obtaining data regarding medica	Frequency	298	189	84	22	1	63.4%	28.2%	7.4%	0.3%
	Importance	288	128	145	14	1	44.4%	50.3%	4.9%	0.3%
	Level of Mastery	282	62	110	74	36	22.0%	39.0%	26.2%	12.8%
3.1.1.8 Obtaining data regarding social h	Frequency	298	170	85	32	10	57.0%	28.5%	10.7%	3.4%
	Importance	289	131	128	29	1	45.3%	44.3%	10.0%	0.3%
	Level of Mastery	281	63	98	80	40	22.4%	34.9%	28.5%	14.2%
3.1.1.9 Obtaining general demographic i	Frequency	298	185	70	28	12	62.1%	23.5%	9.4%	4.0%
	Importance	288	89	129	64	6	30.9%	44.8%	22.2%	2.1%
	Level of Mastery	281	60	65	92	64	21.4%	23.1%	32.7%	22.8%
3.1.1.10 Obtaining data on living environ	Frequency	298	172	77	31	16	57.7%	25.8%	10.4%	5.4%
	Importance	288	102	137	49		35.4%	47.6%	17.0%	
	Level of Mastery	281	67	65	92	57	23.8%	23.1%	32.7%	20.3%
3.1.2 Interpreting Data from History	3.1.2.1 Developing a working hypothesis	Frequency	274	243	28	3	88.7%	10.2%	1.1%	
		Importance	266	242	22	2	91.0%	8.3%	0.8%	
		Level of Mastery	260	138	79	29	14	53.1%	30.4%	11.2%
3.1.2.2 Assessing "red flags" and determ	Frequency	277	235	34	8		84.8%	12.3%	2.9%	
	Importance	268	255	12	1		95.1%	4.5%	0.4%	
	Level of Mastery	261	133	70	36	22	51.0%	26.8%	13.8%	8.4%
3.1.2.3 Identifying chief and secondary p	Frequency	277	236	39	2		85.2%	14.1%	0.7%	
	Importance	269	218	50	1		81.0%	18.6%	0.4%	
	Level of Mastery	262	119	91	42	10	45.4%	34.7%	16.0%	3.8%
3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques	Frequency	276	250	25	1	90.6%	9.1%	0.4%	
		Importance	267	236	30	1	88.4%	11.2%	0.4%	
		Level of Mastery	260	148	82	20	10	56.9%	31.5%	7.7%
3.1.3.2 Is comprehensive but has the foc	Frequency	274	238	34	2		86.9%	12.4%	0.7%	
	Importance	266	220	42	4		82.7%	15.8%	1.5%	
	Level of Mastery	258	135	93	21	9	52.3%	36.0%	8.1%	3.5%
3.1.3.3 Considers the nature, severity, ar	Frequency	275	254	19	2		92.4%	6.9%	0.7%	
	Importance	267	223	43	1		83.5%	16.1%	0.4%	

	Importance	244	142	91	10	1				58.2%	37.3%	4.1%	0.4%		
	Level of Mastery	237	95	76	47	19				40.1%	32.1%	19.8%	8.0%		
	3.1.5.23 Task-specific activities (e.g., lifting)	Frequency	253	200	47	6				79.1%	18.6%	2.4%			
		Importance	246	171	74					69.5%	30.1%			0.4%	
		Level of Mastery	238	95	77	41	25			39.9%	32.4%	17.2%	10.5%		
3.2 Evaluation	3.2.1 Using the ICF model	Frequency	239	125	52	24	19	19		52.3%	21.8%	10.0%	7.9%	7.9%	
		Importance	233	111	72	37	13			47.6%	30.9%	15.9%	5.6%		
		Level of Mastery	228	69	81	48	30			30.3%	35.5%	21.1%	13.2%		
	3.2.2 Developing a working diagnosis, including	Frequency	241	208	26	7				86.3%	10.8%	2.9%			
		Importance	235	209	24	2				88.9%	10.2%	0.9%			
		Level of Mastery	231	131	69	24	7			56.7%	29.9%	10.4%	3.0%		
	3.2.3 Incorporating data from ancillary tests	Frequency	241	102	108	25	5	1		42.3%	44.8%	10.4%	2.1%	0.4%	
		Importance	235	97	120	17	1			41.3%	51.1%	7.2%	0.4%		
		Level of Mastery	231	56	125	41	9			24.2%	54.1%	17.7%	3.9%		
	3.2.4 Referring patient/client to other health	Frequency	241	65	82	75	19			27.0%	34.0%	31.1%	7.9%		
		Importance	235	176	55	4				74.9%	23.4%	1.7%			
		Level of Mastery	229	95	88	36	10			41.5%	38.4%	15.7%	4.4%		
	3.2.5 Considering implications of examination	Frequency	238	125	68	21	13	11		52.5%	28.6%	8.8%	5.5%	4.6%	
		Importance	231	114	94	17	6			49.4%	40.7%	7.4%	2.6%		
		Level of Mastery	227	70	93	46	18			30.8%	41.0%	20.3%	7.9%		
3.3. Diagnosis	3.3.1 Organizing examination findings into	Frequency	241	174	52	10	2	3		72.2%	21.6%	4.1%	0.8%	1.2%	
		Importance	234	175	52	4	3			74.8%	22.2%	1.7%	1.3%		
		Level of Mastery	229	111	86	24	8			48.5%	37.6%	10.5%	3.5%		
	3.4 Prognosis	3.4.1 Accounting for the complexity of the	Frequency	241	182	50	7	1	1		75.5%	20.7%	2.9%	0.4%	0.4%
		Importance	235	172	58	4	1			73.2%	24.7%	1.7%	0.4%		
		Level of Mastery	231	117	87	23	4			50.6%	37.7%	10.0%	1.7%		
3.5 Intervention	3.5.1 Ergonomics (influences of environment)	Frequency	235	138	64	25	8			58.7%	27.2%	10.6%	3.4%		
		Importance	228	110	100	18				48.2%	43.9%	7.9%			
		Level of Mastery	225	69	84	58	14			30.7%	37.3%	25.8%	6.2%		
	3.5.2 Education/training of functional activities	Frequency	234	185	46	2	1			79.1%	19.7%	0.9%	0.4%		
		Importance	228	166	56	6				72.8%	24.6%	2.6%			
		Level of Mastery	225	94	70	38	23			41.8%	31.1%	16.9%	10.2%		
	3.5.3 Education/training of activities of daily	Frequency	235	159	64	8	4			67.7%	27.2%	3.4%	1.7%		
		Importance	229	141	76	11	1			61.6%	33.2%	4.8%	0.4%		
		Level of Mastery	225	80	71	52	22			35.6%	31.6%	23.1%	9.8%		
	3.5.4.1 Concerning diagnosis, prognosis, and	Frequency	233	192	32	8	1			82.4%	13.7%	3.4%	0.4%		
		Importance	227	183	42	2				80.6%	18.5%	0.9%			
		Level of Mastery	224	104	76	34	10			46.4%	33.9%	15.2%	4.5%		
	3.5.4.2 Using the biopsychosocial/biomechanical	Frequency	233	147	54	22	6	4		63.1%	23.2%	9.4%	2.6%	1.7%	
		Importance	227	126	80	19	2			55.5%	35.2%	8.4%	0.9%		
		Level of Mastery	224	81	87	45	11			36.2%	38.8%	20.1%	4.9%		
	3.5.4.3 Addressing pain physiology and clinical	Frequency	233	176	46	10	1			75.5%	19.7%	4.3%	0.4%		
		Importance	228	156	65	7				68.4%	28.5%	3.1%			
		Level of Mastery	225	89	88	40	8			39.6%	39.1%	17.8%	3.6%		
	3.5.4.4 Addressing prevention and wellness	Frequency	234	134	68	26	6			57.3%	29.1%	11.1%	2.6%		
		Importance	228	133	86	9				58.3%	37.7%	3.9%			
		Level of Mastery	224	76	79	56	13			33.9%	35.3%	25.0%	5.8%		
	3.5.5 Injury prevention and wellness promotion	Frequency	231	145	67	14	5			62.8%	29.0%	6.1%	2.2%		
		Importance	225	143	78	4				63.6%	34.7%	1.8%			
		Level of Mastery	222	83	86	42	11			37.4%	38.7%	18.9%	5.0%		
	3.5.6 Sleep hygiene education (e.g., sleep	Frequency	232	81	95	38	15	3		34.9%	40.9%	16.4%	6.5%	1.3%	
		Importance	226	97	107	18	4			42.9%	47.3%	8.0%	1.8%		
		Level of Mastery	223	49	92	72	10			22.0%	41.3%	32.3%	4.5%		
	3.5.7 Nutritional education.	Frequency	232	36	76	83	33	4		15.5%	32.8%	35.8%	14.2%	1.7%	
		Importance	226	56	124	43	3			24.8%	54.9%	19.0%	1.3%		
		Level of Mastery	222	33	88	76	25			14.9%	39.6%	34.2%	11.3%		
	3.5.8 Pain neuroscience education.	Frequency	231	134	66	23	8			58.0%	28.6%	10.0%	3.5%		
		Importance	225	146	69	10				64.9%	30.7%	4.4%			
		Level of Mastery	223	87	97	33	6			39.0%	43.5%	14.8%	2.7%		
	3.5.9 Graded exposure.	Frequency	230	105	85	24	13	3		45.7%	37.0%	10.4%	5.7%	1.3%	
		Importance	224	134	77	12	1			59.8%	34.4%	5.4%	0.4%		
		Level of Mastery	221	78	99	38	6			35.3%	44.8%	17.2%	2.7%		
	3.5.10 Graded motor imagery.	Frequency	231	39	59	63	54	16		16.9%	25.5%	27.3%	23.4%	6.9%	
		Importance	223	63	111	44	5			28.3%	49.8%	19.7%	2.2%		
		Level of Mastery	220	58	93	53	16			26.4%	42.3%	24.1%	7.3%		
	3.5.4.11 Graded activity/exercise.	Frequency	232	177	48	3	2	2		76.3%	20.7%	1.3%	0.9%	0.9%	
		Importance	226	177	47	2				78.3%	20.8%	0.9%			
		Level of Mastery	223	106	77	32	8			47.5%	34.5%	14.3%	3.6%		
	3.5.4.12 Protective, adaptive or supportive	Frequency	231	40	85	63	40	3		17.3%	36.8%	27.3%	17.3%	1.3%	
		Importance	224	44	124	51	5			19.6%	55.4%	22.8%	2.2%		
		Level of Mastery	221	39	82	87	13			17.6%	37.1%	39.4%	5.9%		

3.5.4.13 Neural mobilization (e.g., nerve	Frequency	232	101	90	28	13				43.5%	38.8%	12.1%	5.6%	
	Importance	226	120	89	17					53.1%	39.4%	7.5%		
	Level of Mastery	223	80	88	45	10				35.9%	39.5%	20.2%	4.5%	
3.5.14 Non-thrust mobilization/manipul	Frequency	232	171	50	7	4				73.7%	21.6%	3.0%	1.7%	
	Importance	225	157	64	4					69.8%	28.4%	1.8%		
	Level of Mastery	221	100	91	21	9				45.2%	41.2%	9.5%	4.1%	
3.5.15 Thrust mobilization/manipulation	Frequency	232	99	79	26	22	6			42.7%	34.1%	11.2%	9.5%	2.6%
	Importance	226	129	80	14	3				57.1%	35.4%	6.2%	1.3%	
	Level of Mastery	222	128	65	23	6				57.7%	29.3%	10.4%	2.7%	
3.5.16 Soft tissue mobilization (e.g., con	Frequency	231	156	53	15	4	3			67.5%	22.9%	6.5%	1.7%	1.3%
	Importance	226	130	76	18	2				57.5%	33.6%	8.0%	0.9%	
	Level of Mastery	222	91	84	31	16				41.0%	37.8%	14.0%	7.2%	
3.5.17 Mobilization with movement.	Frequency	230	111	88	24	5	2			48.3%	38.3%	10.4%	2.2%	0.9%
	Importance	224	112	93	18	1				50.0%	41.5%	8.0%	0.4%	
	Level of Mastery	221	77	103	32	9				34.8%	46.6%	14.5%	4.1%	
3.5.18 Muscle energy techniques.	Frequency	232	91	68	35	31	7			39.2%	29.3%	15.1%	13.4%	3.0%
	Importance	226	81	102	36	7				35.8%	45.1%	15.9%	3.1%	
	Level of Mastery	222	66	94	48	14				29.7%	42.3%	21.6%	6.3%	
3.5.19 Traction/distraction.	Frequency	231	79	90	40	20	2			34.2%	39.0%	17.3%	8.7%	0.9%
	Importance	225	86	100	36	3				38.2%	44.4%	16.0%	1.3%	
	Level of Mastery	221	76	72	53	20				34.4%	32.6%	24.0%	9.0%	
3.5.4.20 Directional preference exercises	Frequency	230	136	71	20	2	1			59.1%	30.9%	8.7%	0.9%	0.4%
	Importance	224	139	76	9					62.1%	33.9%	4.0%		
	Level of Mastery	221	95	64	51	11				43.0%	29.0%	23.1%	5.0%	
3.5.4.21 Electro-therapeutic modalities (Frequency	230	35	54	58	60	23			15.2%	23.5%	25.2%	26.1%	10.0%
	Importance	224	26	67	99	32				11.6%	29.9%	44.2%	14.3%	
	Level of Mastery	221	34	58	72	57				15.4%	26.2%	32.6%	25.8%	
3.5.4.22 Thermo-therapeutic modalities	Frequency	233	45	55	41	66	26			19.3%	23.6%	17.6%	28.3%	11.2%
	Importance	226	14	68	106	38				6.2%	30.1%	46.9%	16.8%	
	Level of Mastery	221	35	44	70	72				15.8%	19.9%	31.7%	32.6%	
3.5.23 Photo-therapeutic modalities (e.g	Frequency	229	6	15	15	43	150			2.6%	6.6%	6.6%	18.8%	65.5%
	Importance	221	6	25	81	109				2.7%	11.3%	36.7%	49.3%	
	Level of Mastery	212	14	26	69	103				6.6%	12.3%	32.5%	48.6%	
3.5.24 Dry needling.	Frequency	230	32	60	35	19	84			13.9%	26.1%	15.2%	8.3%	36.5%
	Importance	221	42	86	55	38				19.0%	38.9%	24.9%	17.2%	
	Level of Mastery	213	74	70	36	33				34.7%	32.9%	16.9%	15.5%	
3.5.25 Aerobic capacity and endurance e	Frequency	230	120	66	28	15	1			52.2%	28.7%	12.2%	6.5%	0.4%
	Importance	224	105	101	15	3				46.9%	45.1%	6.7%	1.3%	
	Level of Mastery	221	61	83	50	27				27.6%	37.6%	22.6%	12.2%	
3.5.26 Motor coordination.	Frequency	229	151	57	15	5	1			65.9%	24.9%	6.6%	2.2%	0.4%
	Importance	222	134	80	8					60.4%	36.0%	3.6%		
	Level of Mastery	219	70	97	37	15				32.0%	44.3%	16.9%	6.8%	
3.5.27 Muscle performance exercises (e.	Frequency	230	197	30	3					85.7%	13.0%	1.3%		
	Importance	224	178	44	2					79.5%	19.6%	0.9%		
	Level of Mastery	220	92	69	39	20				41.8%	31.4%	17.7%	9.1%	
3.5.28.1 Meditation.	Frequency	230	16	52	58	53	51			7.0%	22.6%	25.2%	23.0%	22.2%
	Importance	222	24	103	71	24				10.8%	46.4%	32.0%	10.8%	
	Level of Mastery	213	14	72	80	47				6.6%	33.8%	37.6%	22.1%	
3.5.28.2 Mindfulness.	Frequency	230	49	59	50	45	27			21.3%	25.7%	21.7%	19.6%	11.7%
	Importance	221	46	107	55	13				20.8%	48.4%	24.9%	5.9%	
	Level of Mastery	215	18	79	77	41				8.4%	36.7%	35.8%	19.1%	
3.5.28.3 Hypnosis.	Frequency	229	1	3	5	18	202			0.4%	1.3%	2.2%	7.9%	88.2%
	Importance	218	2	13	53	150				0.9%	6.0%	24.3%	68.8%	
	Level of Mastery	194	43	14	17	120				22.2%	7.2%	8.8%	61.9%	
3.6.1 Assessing intervention response.	Frequency	227	211	10	5		1			93.0%	4.4%	2.2%		0.4%
	Importance	221	209	10	1	1				94.6%	4.5%	0.5%	0.5%	
	Level of Mastery	218	113	54	35	16				51.8%	24.8%	16.1%	7.3%	
3.6.2 Analyzing significance of changes.	Frequency	227	197	22	6	2				86.8%	9.7%	2.6%	0.9%	
	Importance	221	196	24	1					88.7%	10.9%	0.5%		
	Level of Mastery	218	111	63	32	12				50.9%	28.9%	14.7%	5.5%	
3.6.3 Assessing change.	Frequency	227	199	25	3					87.7%	11.0%	1.3%		
	Importance	222	194	27	1					87.4%	12.2%	0.5%		
	Level of Mastery	219	102	64	39	14				46.6%	29.2%	17.8%	6.4%	
3.6.4 Re-examining/implementing a mod	Frequency	228	137	63	28					60.1%	27.6%	12.3%		
	Importance	222	184	37	1					82.9%	16.7%	0.5%		
	Level of Mastery	219	104	76	30	9				47.5%	34.7%	13.7%	4.1%	
3.6.5 Confirming/modifying goals.	Frequency	228	114	72	40	2				50.0%	31.6%	17.5%	0.9%	
	Importance	221	146	68	7					66.1%	30.8%	3.2%		
	Level of Mastery	219	81	77	43	18				37.0%	35.2%	19.6%	8.2%	
3.6.6 Making referrals to other providers	Frequency	228	38	79	79	32				16.7%	34.6%	34.6%	14.0%	
	Importance	222	146	73	3					65.8%	32.9%	1.4%		

3.6 Re-assessment / re-evaluation

	Level of Mastery	218	80	81	49	8	
3.7 Outcomes Assessment	3.7.1 Assessing remediation of activity at	Frequency	223	105	95	21	2
		Importance	217	121	90	5	1
		Level of Mastery	213	65	95	43	10
3.7.2 Assessing patient satisfaction.	Frequency	225	128	61	26	10	
	Importance	219	144	65	9	1	
	Level of Mastery	216	61	69	61	25	
3.7.3 Assessing promotion of primary an	Frequency	224	78	92	43	9	2
	Importance	217	82	116	18	1	
	Level of Mastery	213	56	76	72	9	
3.7.4 Assessing improvement of patient	Frequency	224	106	79	36	2	1
	Importance	218	125	82	10	1	
	Level of Mastery	213	72	75	53	13	
3.7.5 Using applicable, evidence-based o	Frequency	223	115	53	50	5	
	Importance	217	114	87	16		
	Level of Mastery	214	63	68	48	35	

36.7%	37.2%	22.5%	3.7%	
47.1%	42.6%	9.4%	0.9%	
55.8%	41.5%	2.3%	0.5%	
30.5%	44.6%	20.2%	4.7%	
56.9%	27.1%	11.6%	4.4%	
65.8%	29.7%	4.1%	0.5%	
28.2%	31.9%	28.2%	11.6%	
34.8%	41.1%	19.2%	4.0%	0.9%
37.8%	53.5%	8.3%	0.5%	
26.3%	35.7%	33.8%	4.2%	
47.3%	35.3%	16.1%	0.9%	0.4%
57.3%	37.6%	4.6%	0.5%	
33.8%	35.2%	24.9%	6.1%	
51.6%	23.8%	22.4%	2.2%	
52.5%	40.1%	7.4%		
29.4%	31.8%	22.4%	16.4%	

Part 6. Medical Conditions

		# Responses	Frequency					
			Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never	
6.1 Nervous System	6.1.1 Cervical Radiculopathy	Frequency	224	112	81	30	1	
		Importance	218	202	16			
		Level of Mastery	215	125	64	21	5	
	6.1.2 Lumbar Radiculopathy	Frequency	224	134	72	17	1	
		Importance	218	198	19	1		
		Level of Mastery	215	126	64	19	6	
	6.1.3 Thoracic Outlet Syndrome	Frequency	222	20	30	60	108	4
		Importance	215	110	88	15	2	
		Level of Mastery	212	96	82	28	6	
	6.1.4 Other peripheral neural impingem	Frequency	222	30	54	64	71	3
		Importance	217	129	76	12		
		Level of Mastery	214	101	85	26	2	
	6.1.5 Meralgia paresthetica.	Frequency	222	9	9	34	140	30
		Importance	214	63	101	46	4	
		Level of Mastery	212	67	91	42	12	
6.1.6 Cervical Myelopathy.	Frequency	224	22	24	50	112	16	
	Importance	218	166	43	9			
	Level of Mastery	215	106	80	20	9		
6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDC	Frequency	222	131	65	22	4	
		Importance	215	179	31	5		
		Level of Mastery	213	113	67	26	7	
	6.2.2 Cervical Instability	Frequency	223	46	31	49	89	8
		Importance	217	175	39	2	1	
		Level of Mastery	214	116	71	25	2	
	6.2.3 Cervical Sprain/Strain	Frequency	223	109	66	43	5	
		Importance	217	155	59	3		
		Level of Mastery	214	95	69	40	10	
	6.2.4 Cervicogenic Headache	Frequency	223	51	87	61	24	
		Importance	217	153	61	3		
		Level of Mastery	212	110	74	26	2	
	6.2.5 Chronic Pain Syndromes	Frequency	223	67	85	51	18	2
		Importance	215	153	60	1	1	
		Level of Mastery	212	104	85	21	2	
6.2.6 Other Disorders of Cervical Spine	Frequency	223	64	64	55	37	3	
	Importance	216	115	90	10	1		
	Level of Mastery	212	77	93	38	4		
6.2.7 Temporomandibular Dysfunction	Frequency	221	17	22	50	102	30	
	Importance	213	85	102	25	1		
	Level of Mastery	208	71	88	37	12		
6.2.8 Disorders of the Hip	Frequency	222	97	99	21	5		
	Importance	216	163	50	3			
	Level of Mastery	213	96	81	29	7		
6.2.9 Lumbar Disc Pathologies (e.g., DDD	Frequency	221	150	59	9	3		
	Importance	215	184	27	4			
	Level of Mastery	210	118	60	21	11		
6.2.10 Lumbar Instability	Frequency	222	69	66	48	34	5	

	Percentage				
	Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never
50.0%	36.2%	13.4%	0.4%		
92.7%	7.3%				
58.1%	29.8%	9.8%	2.3%		
59.8%	32.1%	7.6%	0.4%		
90.8%	8.7%	0.5%			
58.6%	29.8%	8.8%	2.8%		
9.0%	13.5%	27.0%	48.6%	1.8%	
51.2%	40.9%	7.0%	0.9%		
45.3%	38.7%	13.2%	2.8%		
13.5%	24.3%	28.8%	32.0%	1.4%	
59.4%	35.0%	5.5%			
47.2%	39.7%	12.1%	0.9%		
4.1%	4.1%	15.3%	63.1%	13.5%	
29.4%	47.2%	21.5%	1.9%		
31.6%	42.9%	19.8%	5.7%		
9.8%	10.7%	22.3%	50.0%	7.1%	
76.1%	19.7%	4.1%			
49.3%	37.2%	9.3%	4.2%		
59.0%	29.3%	9.9%	1.8%		
83.3%	14.4%	2.3%			
53.1%	31.5%	12.2%	3.3%		
20.6%	13.9%	22.0%	39.9%	3.6%	
80.6%	18.0%	0.9%	0.5%		
54.2%	33.2%	11.7%	0.9%		
48.9%	29.6%	19.3%	2.2%		
71.4%	27.2%	1.4%			
44.4%	32.2%	18.7%	4.7%		
22.9%	39.0%	27.4%	10.8%		
70.5%	28.1%	1.4%			
51.9%	34.9%	12.3%	0.9%		
30.0%	38.1%	22.9%	8.1%	0.9%	
71.2%	27.9%	0.5%	0.5%		
49.1%	40.1%	9.9%	0.9%		
28.7%	28.7%	24.7%	16.6%	1.3%	
53.2%	41.7%	4.6%	0.5%		
36.3%	43.9%	17.9%	1.9%		
7.7%	10.0%	22.6%	46.2%	13.6%	
39.9%	47.9%	11.7%	0.5%		
34.1%	42.3%	17.8%	5.8%		
43.7%	44.6%	9.5%	2.3%		
75.5%	23.1%	1.4%			
45.1%	38.0%	13.6%	3.3%		
67.9%	26.7%	4.1%	1.4%		
85.6%	12.6%	1.9%			
56.2%	28.6%	10.0%	5.2%		
31.1%	29.7%	21.6%	15.3%	2.3%	

	Importance	216	153	54	7	2		
	Level of Mastery	213	113	72	23	5		
6.2.11 Lumbar Spondylosis / Spondylolisis	Frequency	222	83	72	48	18	1	
	Importance	216	155	55	5	1		
	Level of Mastery	213	110	69	26	8		
6.2.12 Lumbar Strain	Frequency	222	115	73	31	3		
	Importance	216	142	65	9			
	Level of Mastery	213	100	57	36	20		
6.2.13 Other Disorders of the Lumbar Sp	Frequency	220	76	68	54	21	1	
	Importance	212	124	80	8			
	Level of Mastery	209	93	73	36	7		
6.2.14 Piriformis Syndrome	Frequency	221	26	49	75	63	8	
	Importance	213	88	81	38	6		
	Level of Mastery	209	72	81	38	18		
6.2.15 Sacroiliac Dysfunction	Frequency	222	52	59	62	47	2	
	Importance	215	115	81	17	2		
	Level of Mastery	212	94	80	34	4		
6.2.16 Other Disorders of the Pelvic Gird	Frequency	222	34	48	56	76	8	
	Importance	213	91	99	21	2		
	Level of Mastery	207	66	93	45	3		
6.2.17 Inflammatory Conditions	Frequency	222	17	32	69	97	7	
	Importance	214	116	86	12			
	Level of Mastery	210	75	85	46	4		
6.2.18 Rib Dysfunction	Frequency	220	24	40	67	81	8	
	Importance	213	100	86	22	5		
	Level of Mastery	209	81	90	34	4		
6.2.19 Thoracic Sprain/Strain	Frequency	220	35	68	70	46	1	
	Importance	214	103	91	20			
	Level of Mastery	211	83	79	40	9		
6.2.20 Thoracic Disc Pathologies	Frequency	219	14	26	49	116	14	
	Importance	212	84	101	23	4		
	Level of Mastery	209	72	92	37	8		
6.2.21 Other Disorders of the Thoracic S	Frequency	217	27	39	64	82	5	
	Importance	210	81	95	33	1		
	Level of Mastery	207	61	94	44	8		
6.2.22 Curvature of the spine (e.g., scoliosis)	Frequency	221	33	42	70	65	11	
	Importance	212	93	101	17	1		
	Level of Mastery	209	68	86	46	9		
6.2.23 Diastasis recti.	Frequency	220	9	19	51	101	40	
	Importance	211	70	86	48	7		
	Level of Mastery	206	37	88	65	16		
6.2.24 Facet dysfunction (cervical, thoracic)	Frequency	221	102	72	37	10		
	Importance	214	150	55	8	1		
	Level of Mastery	212	107	71	27	7		
6.2.25 Operative procedure on spinal str	Frequency	220	38	69	70	40	3	
	Importance	214	146	62	6			
	Level of Mastery	210	91	77	35	7		
6.2.26 Spinal stenosis.	Frequency	220	88	82	36	13	1	
	Importance	213	146	64	2	1		
	Level of Mastery	211	96	72	31	12		
6.2.27 Oncological Disorders	Frequency	220	9	14	35	133	29	
	Importance	208	130	57	17	4		
	Level of Mastery	206	67	85	41	13		
6.2.28 Torticollis	Frequency	220	7	8	19	115	71	
	Importance	209	69	83	41	16		
	Level of Mastery	205	39	83	57	26		
6.2.29 Klippel-Feil Syndrome	Frequency	220	3	5	8	86	118	
	Importance	200	44	81	53	22		
	Level of Mastery	199	37	65	55	42		
6.2.30 Scheuermann's Disease	Frequency	220	6	5	22	127	60	
	Importance	207	48	95	52	12		
	Level of Mastery	203	32	77	66	28		

	70.8%	25.0%	3.2%	0.9%			
	53.1%	33.8%	10.8%	2.3%			
	37.4%	32.4%	21.6%	8.1%	0.5%		
	71.8%	25.5%	2.3%	0.5%			
	51.6%	32.4%	12.2%	3.8%			
	51.8%	32.9%	14.0%	1.4%			
	65.7%	30.1%	4.2%				
	46.9%	26.8%	16.9%	9.4%			
	34.5%	30.9%	24.5%	9.5%	0.5%		
	58.5%	37.7%	3.8%				
	44.5%	34.9%	17.2%	3.3%			
	11.8%	22.2%	33.9%	28.5%	3.6%		
	41.3%	38.0%	17.8%	2.8%			
	34.4%	38.8%	18.2%	8.6%			
	23.4%	26.6%	27.9%	21.2%	0.9%		
	53.5%	37.7%	7.9%	0.9%			
	44.3%	37.7%	16.0%	1.9%			
	15.3%	21.6%	25.2%	34.2%	3.6%		
	42.7%	46.5%	9.9%	0.9%			
	31.9%	44.9%	21.7%	1.4%			
	7.7%	14.4%	31.1%	43.7%	3.2%		
	54.2%	40.2%	5.6%				
	35.7%	40.5%	21.9%	1.9%			
	10.9%	18.2%	30.5%	36.8%	3.6%		
	46.9%	40.4%	10.3%	2.3%			
	38.8%	43.1%	16.3%	1.9%			
	15.9%	30.9%	31.8%	20.9%	0.5%		
	48.1%	42.5%	9.3%				
	39.3%	37.4%	19.0%	4.3%			
	6.4%	11.9%	22.4%	53.0%	6.4%		
	39.6%	47.6%	10.8%	1.9%			
	34.4%	44.0%	17.7%	3.8%			
	12.4%	18.0%	29.5%	37.8%	2.3%		
	38.6%	45.2%	15.7%	0.5%			
	29.5%	45.4%	21.3%	3.9%			
	14.9%	19.0%	31.7%	29.4%	5.0%		
	43.9%	47.6%	8.0%	0.5%			
	32.5%	41.1%	22.0%	4.3%			
	4.1%	8.6%	23.2%	45.9%	18.2%		
	33.2%	40.8%	22.7%	3.3%			
	18.0%	42.7%	31.6%	7.8%			
	46.2%	32.6%	16.7%	4.5%			
	70.1%	25.7%	3.7%	0.5%			
	50.5%	33.5%	12.7%	3.3%			
	17.3%	31.4%	31.8%	18.2%	1.4%		
	68.2%	29.0%	2.8%				
	43.3%	36.7%	16.7%	3.3%			
	40.0%	37.3%	16.4%	5.9%	0.5%		
	68.5%	30.0%	0.9%	0.5%			
	45.5%	34.1%	14.7%	5.7%			
	4.1%	6.4%	15.9%	60.5%	13.2%		
	62.5%	27.4%	8.2%	1.9%			
	32.5%	41.3%	19.9%	6.3%			
	3.2%	3.6%	8.6%	52.3%	32.3%		
	33.0%	39.7%	19.6%	7.7%			
	19.0%	40.5%	27.8%	12.7%			
	1.4%	2.3%	3.6%	39.1%	53.6%		
	22.0%	40.5%	26.5%	11.0%			
	18.6%	32.7%	27.6%	21.1%			
	2.7%	2.3%	10.0%	57.7%	27.3%		
	23.2%	45.9%	25.1%	5.8%			
	15.8%	37.9%	32.5%	13.8%			

Frequency of Responses in Order of Importance and Frequency (High to Low)

Part 1. Foundation Sciences

				Frequency					Percentage				
				Daily / Very Important / Analysis	Weekly / Moderately Important / Application	Monthly / Little Importance / Recall	Less than once a month / Not Important / Do not use		Daily / Very Important / Analysis	Weekly / Moderately Important / Application	Monthly / Little Importance / Recall	Less than once a month / Not Important / Do not use	
			# Responses										
1.3 Behavioral Sciences	1.3.3.7 Therapeutic exercise.	Frequency	453	449	4				99.1%	0.9%			
		Importance	442	426	14	1	1		96.4%	3.2%	0.2%	0.2%	
		Level of Judgment	427	315	111	1			73.8%	26.0%	0.2%		
1.1 Foundation Sciences	1.1.2.1 Kinesiology/biomechanics.	Frequency	588	557	27	2	2		94.7%	4.6%	0.3%	0.3%	
		Importance	569	507	56	6			89.1%	9.8%	1.1%		
		Level of Judgment	546	457	80	9			83.7%	14.7%	1.6%		
1.1 Foundation Sciences	1.1.1.1 Musculoskeletal system.	Frequency	640	618	20	2			96.6%	3.1%	0.3%		
		Importance	620	572	46	2			92.3%	7.4%	0.3%		
		Level of Judgment	597	440	127	30			73.7%	21.3%	5.0%		
1.1 Foundation Sciences	1.1.1.2 Neuromuscular system.	Frequency	635	585	45	5			92.1%	7.1%	0.8%		
		Importance	614	561	53				91.4%	8.6%			
		Level of Judgment	592	454	119	19			76.7%	20.1%	3.2%		
1.2 Clinical Sciences	1.2.1.1 Signs and symptoms of disease/injury.	Frequency	534	480	44	7	3		89.9%	8.2%	1.3%	0.6%	
		Importance	515	458	57				88.9%	11.1%			
		Level of Judgment	495	350	110	35			70.7%	22.2%	7.1%		
1.1 Foundation Sciences	1.1.2.2 Neural control of movement.	Frequency	590	518	63	6	2	1	87.8%	10.7%	1.0%	0.3%	0.2%
		Importance	569	469	96	3	1		82.4%	16.9%	0.5%	0.2%	
		Level of Judgment	548	432	110	5	1		78.8%	20.1%	0.9%	0.2%	
1.3 Behavioral Sciences	1.3.1.2 Personal factors (e.g., compliance, body awareness).	Frequency	487	428	48	11			87.9%	9.9%	2.3%		
		Importance	470	382	85	3			81.3%	18.1%	0.6%		
		Level of Judgment	452	315	122	15			69.7%	27.0%	3.3%		
1.3 Behavioral Sciences	1.3.3.4 Movement systems impairments.	Frequency	452	394	35	17	3	3	87.2%	7.7%	3.8%	0.7%	0.7%
		Importance	440	338	81	19	2		76.8%	18.4%	4.3%	0.5%	
		Level of Judgment	425	309	101	13	2		72.7%	23.8%	3.1%	0.5%	
1.3 Behavioral Sciences	1.3.3.3 Manual therapy techniques.	Frequency	452	394	50	3	4	1	87.2%	11.1%	0.7%	0.9%	0.2%
		Importance	442	341	85	15	1		77.1%	19.2%	3.4%	0.2%	
		Level of Judgment	426	297	126	2	1		69.7%	29.6%	0.5%	0.2%	
1.2 Clinical Sciences	1.2.1.2 Progression of disease/injury processes.	Frequency	535	436	87	10	2		81.5%	16.3%	1.9%	0.4%	
		Importance	516	421	94	1			81.6%	18.2%	0.2%		
		Level of Judgment	496	312	148	36			62.9%	29.8%	7.3%		
1.3 Behavioral Sciences	1.3.3.5 Motor control and motor learning.	Frequency	453	380	61	11	1		83.9%	13.5%	2.4%	0.2%	
		Importance	442	335	96	10	1		75.8%	21.7%	2.3%	0.2%	
		Level of Judgment	426	276	141	8	1		64.8%	33.1%	1.9%	0.2%	
1.1 Foundation Sciences	1.1.2.4 Locomotion.	Frequency	589	482	92	8	7		81.8%	15.6%	1.4%	1.2%	
		Importance	569	399	153	16	1		70.1%	26.9%	2.8%	0.2%	
		Level of Judgment	549	378	153	17	1		68.9%	27.9%	3.1%	0.2%	
1.2 Clinical Sciences	1.2.1.4 Tissue inflammation, healing, and repair.	Frequency	536	446	80	10			83.2%	14.9%	1.9%		
		Importance	517	411	105	1			79.5%	20.3%	0.2%		
		Level of Judgment	497	284	171	42			57.1%	34.4%	8.5%		
1.3 Behavioral Sciences	1.3.1.3 Psychological/emotional conditions (e.g., anxiety).	Frequency	488	370	94	18	6		75.8%	19.3%	3.7%	1.2%	
		Importance	471	355	114	2			75.4%	24.2%	0.4%		
		Level of Judgment	452	285	145	22			63.1%	32.1%	4.9%		
1.2 Clinical Sciences	1.2.1.3 Pathokinesiology.	Frequency	534	403	108	19	4		75.5%	20.2%	3.6%	0.7%	
		Importance	516	356	146	13	1		69.0%	28.3%	2.5%	0.2%	
		Level of Judgment	497	334	123	39	1		67.2%	24.7%	7.8%	0.2%	
1.3 Behavioral Sciences	1.3.3.9 Principles of teaching and learning.	Frequency	454	356	71	19	6	2	78.4%	15.6%	4.2%	1.3%	0.4%
		Importance	442	309	121	12			69.9%	27.4%	2.7%		
		Level of Judgment	428	211	200	17			49.3%	46.7%	4.0%		
1.3 Behavioral Sciences	1.3.3.8 Models of differential diagnosis and clinical reasoning.	Frequency	447	305	75	21	21	25	68.2%	16.8%	4.7%	4.7%	5.6%
		Importance	433	270	102	42	19		62.4%	23.6%	9.7%	4.4%	
		Level of Judgment	418	264	86	43	25		63.2%	20.6%	10.3%	6.0%	
1.3 Behavioral Sciences	1.3.2.1 Peripheral nociceptive pain physiology.	Frequency	486	331	123	23	8	1	68.1%	25.3%	4.7%	1.6%	0.2%
		Importance	469	303	156	8	2		64.6%	33.3%	1.7%	0.4%	

		Level of Judgment	452	253	160	37	2			56.0%	35.4%	8.2%	0.4%	
1.3 Behavioral Sciences	1.3.2.2 Peripheral neurogenic/neuropathic pain phys	Frequency	487	290	156	28	12	1		59.5%	32.0%	5.7%	2.5%	0.2%
		Importance	470	302	160	7	1			64.3%	34.0%	1.5%	0.2%	
		Level of Judgment	451	247	170	33	1			54.8%	37.7%	7.3%	0.2%	
1.3 Behavioral Sciences	1.3.3.1 Biopsychosocial model.	Frequency	451	288	95	38	25	5		63.9%	21.1%	8.4%	5.5%	1.1%
		Importance	440	268	130	38	4			60.9%	29.5%	8.6%	0.9%	
		Level of Judgment	424	226	140	50	8			53.3%	33.0%	11.8%	1.9%	
1.3 Behavioral Sciences	1.3.1.1 External environmental factors (e.g., expecte	Frequency	489	324	118	33	13	1		66.3%	24.1%	6.7%	2.7%	0.2%
		Importance	471	274	172	22	3			58.2%	36.5%	4.7%	0.6%	
		Level of Judgment	453	241	175	35	2			53.2%	38.6%	7.7%	0.4%	
1.3 Behavioral Sciences	1.3.2.3 Central nervous system/nociplastic pain phys	Frequency	487	266	151	45	22	3		54.6%	31.0%	9.2%	4.5%	0.6%
		Importance	470	302	158	8	2			64.3%	33.6%	1.7%	0.4%	
		Level of Judgment	452	250	156	43	3			55.3%	34.5%	9.5%	0.7%	
1.3 Behavioral Sciences	1.3.3.10 Principles of prevention and wellness.	Frequency	454	302	119	24	9			66.5%	26.2%	5.3%	2.0%	
		Importance	443	293	134	16				66.1%	30.2%	3.6%		
		Level of Judgment	428	166	229	32	1			38.8%	53.5%	7.5%	0.2%	
1.1 Foundation Sciences	1.1.2.3 Ergonomics.	Frequency	589	365	185	31	7	1		62.0%	31.4%	5.3%	1.2%	0.2%
		Importance	569	321	218	29	1			56.4%	38.3%	5.1%	0.2%	
		Level of Judgment	549	279	246	23	1			50.8%	44.8%	4.2%	0.2%	
1.4 Critical Inquiry for Evidence-Based Practice	1.4.2 Application of research findings to orthopaedic	Frequency	441	191	128	102	20			43.3%	29.0%	23.1%	4.5%	
		Importance	430	279	145	6				64.9%	33.7%	1.4%		
		Level of Judgment	414	235	155	23	1			56.8%	37.4%	5.6%	0.2%	
1.3 Behavioral Sciences	1.3.3.2 Exercise physiology across the lifespan.	Frequency	453	292	123	27	10	1		64.5%	27.2%	6.0%	2.2%	0.2%
		Importance	439	245	176	17	1			55.8%	40.1%	3.9%	0.2%	
		Level of Judgment	424	182	198	42	2			42.9%	46.7%	9.9%	0.5%	
1.4 Critical Inquiry for Evidence-Based Practice	1.4.1 Critical interpretation of research findings	Frequency	441	114	174	132	20	1		25.9%	39.5%	29.9%	4.5%	0.2%
		Importance	430	272	152	6				63.3%	35.3%	1.4%		
		Level of Judgment	416	258	127	29	2			62.0%	30.5%	7.0%	0.5%	
1.3 Behavioral Sciences	1.3.1.4 Impact of behavioral health risk factors (e.g.,	Frequency	488	263	160	49	16			53.9%	32.8%	10.0%	3.3%	
		Importance	471	247	205	19				52.4%	43.5%	4.0%		
		Level of Judgment	452	145	213	94				32.1%	47.1%	20.8%		
1.2 Clinical Sciences	1.2.2.5 Spine surgical interventions and their indicati	Frequency	534	175	211	117	28	3		32.8%	39.5%	21.9%	5.2%	0.6%
		Importance	516	324	173	18	1			62.8%	33.5%	3.5%	0.2%	
		Level of Judgment	498	204	212	79	3			41.0%	42.6%	15.9%	0.6%	
1.1 Foundation Sciences	1.1.1.6 Histology (e.g., connective tissue, muscle fibre	Frequency	631	286	193	74	66	12		45.3%	30.6%	11.7%	10.5%	1.9%
		Importance	609	218	302	82	7			35.8%	49.6%	13.5%	1.1%	
		Level of Judgment	589	196	246	141	6			33.3%	41.8%	23.9%	1.0%	
1.2 Clinical Sciences	1.2.2.4 Nonsurgical interventional spine procedures	Frequency	533	158	228	113	29	5		29.6%	42.8%	21.2%	5.4%	0.9%
		Importance	514	214	258	40	2			41.6%	50.2%	7.8%	0.4%	
		Level of Judgment	497	157	219	116	5			31.6%	44.1%	23.3%	1.0%	
1.1 Foundation Sciences	1.1.1.3 Cardiovascular and pulmonary systems.	Frequency	636	190	262	113	67	4		29.9%	41.2%	17.8%	10.5%	0.6%
		Importance	615	200	348	66	1			32.5%	56.6%	10.7%	0.2%	
		Level of Judgment	593	159	296	134	4			26.8%	49.9%	22.6%	0.7%	
1.2 Clinical Sciences	1.2.2.1 Imaging studies.	Frequency	536	170	266	76	20	4		31.7%	49.6%	14.2%	3.7%	0.7%
		Importance	518	121	317	76	4			23.4%	61.2%	14.7%	0.8%	
		Level of Judgment	499	166	242	88	3			33.3%	48.5%	17.6%	0.6%	
1.1 Foundation Sciences	1.1.1.5 Human growth and development across the l	Frequency	634	190	176	142	115	11		30.0%	27.8%	22.4%	18.1%	1.7%
		Importance	613	176	319	111	7			28.7%	52.0%	18.1%	1.1%	
		Level of Judgment	591	169	238	170	14			28.6%	40.3%	28.8%	2.4%	
1.3 Behavioral Sciences	1.3.2.4 Output mechanisms and expressions (e.g., in	Frequency	487	130	179	113	58	7		26.7%	36.8%	23.2%	11.9%	1.4%
		Importance	470	140	248	74	8			29.8%	52.8%	15.7%	1.7%	
		Level of Judgment	450	121	193	124	12			26.9%	42.9%	27.6%	2.7%	
1.2 Clinical Sciences	1.2.2.2 Pharmacology.	Frequency	535	201	215	83	32	4		37.6%	40.2%	15.5%	6.0%	0.7%
		Importance	517	119	334	62	2			23.0%	64.6%	12.0%	0.4%	
		Level of Judgment	498	80	212	200	6			16.1%	42.6%	40.2%	1.2%	
1.1 Foundation Sciences	1.1.1.7 Other systems (e.g., endocrine, digestive, ger	Frequency	634	139	191	149	143	12		21.9%	30.1%	23.5%	22.6%	1.9%
		Importance	612	116	356	132	8			19.0%	58.2%	21.6%	1.3%	
		Level of Judgment	591	155	197	223	16			26.2%	33.3%	37.7%	2.7%	
1.1 Foundation Sciences	1.1.1.4 Integumentary system.	Frequency	634	162	208	124	125	15		25.6%	32.8%	19.6%	19.7%	2.4%
		Importance	613	103	339	162	9			16.8%	55.3%	26.4%	1.5%	
		Level of Judgment	592	110	250	218	14			18.6%	42.2%	36.8%	2.4%	
1.3 Behavioral Sciences	1.3.3.6 Theory and application of orthotic, protective	Frequency	454	55	161	138	92	8		12.1%	35.5%	30.4%	20.3%	1.8%
		Importance	442	83	250	102	7			18.8%	56.6%	23.1%	1.6%	
		Level of Judgment	425	91	243	77	14			21.4%	57.2%	18.1%	3.3%	

1.2 Clinical Sciences	1.2.2.3 Ancillary tests (e.g., lab studies, EKG, electrof	Frequency	534	67	193	167	85	22
		Importance	516	72	314	120	10	
		Level of Judgment	496	91	186	200	19	
1.2 Clinical Sciences	1.2.2.6 Developments in genetics/regenerative med	Frequency	534	17	71	153	198	95
		Importance	514	33	226	207	48	
		Level of Judgment	496	37	115	240	104	

12.5%	36.1%	31.3%	15.9%	4.1%
14.0%	60.9%	23.3%	1.9%	
18.3%	37.5%	40.3%	3.8%	
3.2%	13.3%	28.7%	37.1%	17.8%
6.4%	44.0%	40.3%	9.3%	
7.5%	23.2%	48.4%	21.0%	

Part 2. Professional Behavior and Part 3. Examination

			# Responses	Frequency				
				Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never
3.6 Re-assessment / re-evaluation	3.6.1 Assessing intervention response.	Frequency	227	211	10	5		1
		Importance	221	209	10	1	1	
		Level of Mastery	218	113	54	35	16	
3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques with a high	Frequency	276	250	25	1		
		Importance	267	236	30	1		
		Level of Mastery	260	148	82	20	10	
3.1.2 Interpreting Data from History	3.1.2.1 Developing a working hypothesis of the phys	Frequency	274	243	28	3		
		Importance	266	242	22	2		
		Level of Mastery	260	138	79	29	14	
3.2 Evaluation	3.2.2 Developing a working diagnosis, including natu	Frequency	241	208	26	7		
		Importance	235	209	24	2		
		Level of Mastery	231	131	69	24	7	
3.1.2 Interpreting Data from History	3.1.2.2 Assessing "red flags" and determining need t	Frequency	277	235	34	8		
		Importance	268	255	12	1		
		Level of Mastery	261	133	70	36	22	
3.6 Re-assessment / re-evaluation	3.6.2 Analyzing significance of changes.	Frequency	227	197	22	6	2	
		Importance	221	196	24	1		
		Level of Mastery	218	111	63	32	12	
3.1.3 Planning a Physical Exam	3.1.3.4 Prioritizes areas, movements, and functional	Frequency	275	249	25	1		
		Importance	267	219	46	2		
		Level of Mastery	258	136	82	30	10	
3.1.3 Planning a Physical Exam	3.1.3.3 Considers the nature, severity, and irritability	Frequency	275	254	19	2		
		Importance	267	223	43	1		
		Level of Mastery	260	126	85	30	19	
3.1.1 History	3.1.1.2.3 Symptom irritability (onset, offset, and ove	Frequency	325	294	29	1		1
		Importance	315	268	45	1	1	
		Level of Mastery	309	148	86	42	33	
3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and deta	Frequency	274	238	34	2		
		Importance	266	220	42	4		
		Level of Mastery	258	135	93	21	9	
2.3 Communication	2.3.1 Empowering patients with orthopaedic spine c	Frequency	381	326	45	9	1	
		Importance	371	343	25	3		
		Level of Mastery	359	157	136	43	23	
3.6 Re-assessment / re-evaluation	3.6.3 Assessing change.	Frequency	227	199	25	3		
		Importance	222	194	27	1		
		Level of Mastery	219	102	64	39	14	
3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms.	Frequency	325	299	20	5	1	
		Importance	315	258	53	4		
		Level of Mastery	309	138	105	42	24	
3.1.1 History	3.1.1.2.4 Onset of condition (e.g., mechanism of inju	Frequency	324	281	39	3	1	
		Importance	316	265	48	3		
		Level of Mastery	308	144	82	43	39	
3.1.1 History	3.1.1.2.1 Recognition of contributions from multiple	Frequency	326	271	47	6	1	1
		Importance	317	262	51	4		
		Level of Mastery	310	150	111	31	18	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.1 Applying principles of evidence-based practice	Frequency	362	302	44	11	2	3
		Importance	352	288	57	4	3	
		Level of Mastery	342	162	116	35	29	
3.1.2 Interpreting Data from History	3.1.2.3 Identifying chief and secondary problems.	Frequency	277	236	39	2		

					Percentage				
					Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never
3.6 Re-assessment / re-evaluation	3.6.1 Assessing intervention response.	Frequency	227	211	10	5		1	
		Importance	221	209	10	1	1		0.4%
		Level of Mastery	218	113	54	35	16		
3.1.3 Planning a Physical Exam	3.1.3.1 Includes examination techniques with a high	Frequency	276	250	25	1			
		Importance	267	236	30	1			
		Level of Mastery	260	148	82	20	10		
3.1.2 Interpreting Data from History	3.1.2.1 Developing a working hypothesis of the phys	Frequency	274	243	28	3			
		Importance	266	242	22	2			
		Level of Mastery	260	138	79	29	14		
3.2 Evaluation	3.2.2 Developing a working diagnosis, including natu	Frequency	241	208	26	7			
		Importance	235	209	24	2			
		Level of Mastery	231	131	69	24	7		
3.1.2 Interpreting Data from History	3.1.2.2 Assessing "red flags" and determining need t	Frequency	277	235	34	8			
		Importance	268	255	12	1			
		Level of Mastery	261	133	70	36	22		
3.6 Re-assessment / re-evaluation	3.6.2 Analyzing significance of changes.	Frequency	227	197	22	6	2		
		Importance	221	196	24	1			
		Level of Mastery	218	111	63	32	12		
3.1.3 Planning a Physical Exam	3.1.3.4 Prioritizes areas, movements, and functional	Frequency	275	249	25	1			
		Importance	267	219	46	2			
		Level of Mastery	258	136	82	30	10		
3.1.3 Planning a Physical Exam	3.1.3.3 Considers the nature, severity, and irritability	Frequency	275	254	19	2			
		Importance	267	223	43	1			
		Level of Mastery	260	126	85	30	19		
3.1.1 History	3.1.1.2.3 Symptom irritability (onset, offset, and ove	Frequency	325	294	29	1			0.3%
		Importance	315	268	45	1	1		
		Level of Mastery	309	148	86	42	33		
3.1.3 Planning a Physical Exam	3.1.3.2 Is comprehensive but has the focus and deta	Frequency	274	238	34	2			
		Importance	266	220	42	4			
		Level of Mastery	258	135	93	21	9		
2.3 Communication	2.3.1 Empowering patients with orthopaedic spine c	Frequency	381	326	45	9	1		
		Importance	371	343	25	3			
		Level of Mastery	359	157	136	43	23		
3.6 Re-assessment / re-evaluation	3.6.3 Assessing change.	Frequency	227	199	25	3			
		Importance	222	194	27	1			
		Level of Mastery	219	102	64	39	14		
3.1.1 History	3.1.1.2.2 Quality and behavior of symptoms.	Frequency	325	299	20	5	1		
		Importance	315	258	53	4			
		Level of Mastery	309	138	105	42	24		
3.1.1 History	3.1.1.2.4 Onset of condition (e.g., mechanism of inju	Frequency	324	281	39	3	1		
		Importance	316	265	48	3			
		Level of Mastery	308	144	82	43	39		
3.1.1 History	3.1.1.2.1 Recognition of contributions from multiple	Frequency	326	271	47	6	1	1	
		Importance	317	262	51	4			
		Level of Mastery	310	150	111	31	18		
2.6 Critical Inquiry and Evidence-Based Practice	2.6.1 Applying principles of evidence-based practice	Frequency	362	302	44	11	2	3	
		Importance	352	288	57	4	3		
		Level of Mastery	342	162	116	35	29		
3.1.2 Interpreting Data from History	3.1.2.3 Identifying chief and secondary problems.	Frequency	277	236	39	2			

		Importance	269	218	50	1				81.0%	18.6%	0.4%	
		Level of Mastery	262	119	91	42	10			45.4%	34.7%	16.0%	3.8%
3.5 Intervention	3.5.4.1 Concerning diagnosis, prognosis, treatment,	Frequency	233	192	32	8	1			82.4%	13.7%	3.4%	0.4%
		Importance	227	183	42	2				80.6%	18.5%	0.9%	
		Level of Mastery	224	104	76	34	10			46.4%	33.9%	15.2%	4.5%
3.1.5 Test and Measures	3.1.5.14 Joint integrity (i.e., mobility assessment of j	Frequency	261	217	38	5	1			83.1%	14.6%	1.9%	0.4%
		Importance	253	196	53	3	1			77.5%	20.9%	1.2%	0.4%
		Level of Mastery	244	114	88	26	16			46.7%	36.1%	10.7%	6.6%
3.5 Intervention	3.5.27 Muscle performance exercises (e.g., strength,	Frequency	230	197	30	3				85.7%	13.0%	1.3%	
		Importance	224	178	44	2				79.5%	19.6%	0.9%	
		Level of Mastery	220	92	69	39	20			41.8%	31.4%	17.7%	9.1%
3.1.1 History	3.1.1.2.7 Goals of the patient, family, and caregiver.	Frequency	326	265	47	12	2			81.3%	14.4%	3.7%	0.6%
		Importance	317	260	54	3				82.0%	17.0%	0.9%	
		Level of Mastery	311	129	82	52	48			41.5%	26.4%	16.7%	15.4%
3.1.5 Test and Measures	3.1.5.5 Pain.	Frequency	266	248	18					93.2%	6.8%		
		Importance	258	174	75	8	1			67.4%	29.1%	3.1%	0.4%
		Level of Mastery	251	105	80	36	30			41.8%	31.9%	14.3%	12.0%
3.5 Intervention	3.5.4.11 Graded activity/exercise.	Frequency	232	177	48	3	2	2		76.3%	20.7%	1.3%	0.9%
		Importance	226	177	47	2				78.3%	20.8%	0.9%	
		Level of Mastery	223	106	77	32	8			47.5%	34.5%	14.3%	3.6%
2.1 Professional Behavior	2.1.2 Using patient-centered ethics and values in cor	Frequency	407	315	70	15	5	2		77.4%	17.2%	3.7%	1.2%
		Importance	396	322	67	6	1			81.3%	16.9%	1.5%	0.3%
		Level of Mastery	382	161	137	61	23			42.1%	35.9%	16.0%	6.0%
3.1.1 History	3.1.1.4.1 Physical function.	Frequency	319	269	45	4	1			84.3%	14.1%	1.3%	0.3%
		Importance	309	239	68	2				77.3%	22.0%	0.6%	
		Level of Mastery	302	118	86	53	45			39.1%	28.5%	17.5%	14.9%
3.4 Prognosis	3.4.1 Accounting for the complexity of the patient/cl	Frequency	241	182	50	7	1	1		75.5%	20.7%	2.9%	0.4%
		Importance	235	172	58	4	1			73.2%	24.7%	1.7%	0.4%
		Level of Mastery	231	117	87	23	4			50.6%	37.7%	10.0%	1.7%
3.3. Diagnosis	3.3.1 Organizing examination findings into clusters, s	Frequency	241	174	52	10	2	3		72.2%	21.6%	4.1%	0.8%
		Importance	234	175	52	4	3			74.8%	22.2%	1.7%	1.3%
		Level of Mastery	229	111	86	24	8			48.5%	37.6%	10.5%	3.5%
3.5 Intervention	3.5.2 Education/training of functional activities.	Frequency	234	185	46	2	1			79.1%	19.7%	0.9%	0.4%
		Importance	228	166	56	6				72.8%	24.6%	2.6%	
		Level of Mastery	225	94	70	38	23			41.8%	31.1%	16.9%	10.2%
3.1.1 History	3.1.1.3 Obtaining data regarding functional status an	Frequency	317	256	52	7	2			80.8%	16.4%	2.2%	0.6%
		Importance	308	232	74	2				75.3%	24.0%	0.6%	
		Level of Mastery	301	112	86	59	44			37.2%	28.6%	19.6%	14.6%
3.1.5 Test and Measures	3.1.5.17 Muscle performance (e.g., strength, power,	Frequency	251	204	42	4	1			81.3%	16.7%	1.6%	0.4%
		Importance	243	177	64	2				72.8%	26.3%	0.8%	
		Level of Mastery	237	88	82	39	28			37.1%	34.6%	16.5%	11.8%
3.6 Re-assessment / re-evaluation	3.6.4 Re-examining/implementing a modified plan of	Frequency	228	137	63	28				60.1%	27.6%	12.3%	
		Importance	222	184	37	1				82.9%	16.7%	0.5%	
		Level of Mastery	219	104	76	30	9			47.5%	34.7%	13.7%	4.1%
3.5 Intervention	3.5.14 Non-thrust mobilization/manipulation.	Frequency	232	171	50	7	4			73.7%	21.6%	3.0%	1.7%
		Importance	225	157	64	4				69.8%	28.4%	1.8%	
		Level of Mastery	221	100	91	21	9			45.2%	41.2%	9.5%	4.1%
3.1.5 Test and Measures	3.1.5.23 Task-specific activities (e.g., lifting, bending,	Frequency	253	200	47	6				79.1%	18.6%	2.4%	
		Importance	246	171	74			1		69.5%	30.1%		0.4%
		Level of Mastery	238	95	77	41	25			39.9%	32.4%	17.2%	10.5%
3.1.1 History	3.1.1.2.5 Current and previous therapeutic intervent	Frequency	326	261	54	11				80.1%	16.6%	3.4%	
		Importance	316	201	109	6				63.6%	34.5%	1.9%	
		Level of Mastery	309	133	91	45	40			43.0%	29.4%	14.6%	12.9%
3.1.5 Test and Measures	3.1.5.2 Gait, locomotion, and balance.	Frequency	265	210	49	3	3			79.2%	18.5%	1.1%	1.1%
		Importance	257	177	74	5	1			68.9%	28.8%	1.9%	0.4%
		Level of Mastery	250	92	84	48	26			36.8%	33.6%	19.2%	10.4%
3.5 Intervention	3.5.4.3 Addressing pain physiology and dose respons	Frequency	233	176	46	10	1			75.5%	19.7%	4.3%	0.4%
		Importance	228	156	65	7				68.4%	28.5%	3.1%	
		Level of Mastery	225	89	88	40	8			39.6%	39.1%	17.8%	3.6%
3.1.5 Test and Measures	3.1.5.22 Soft tissue quality (e.g., mobility, provocatic	Frequency	251	200	39	9	3			79.7%	15.5%	3.6%	1.2%
		Importance	244	142	91	10	1			58.2%	37.3%	4.1%	0.4%
		Level of Mastery	237	95	76	47	19			40.1%	32.1%	19.8%	8.0%
3.1.1 History	3.1.1.2.6 Readiness for change.	Frequency	326	242	58	22	4			74.2%	17.8%	6.7%	1.2%
		Importance	317	215	96	6				67.8%	30.3%	1.9%	

		Level of Mastery	310	110	116	62	22			35.5%	37.4%	20.0%	7.1%	
3.1.1 History	3.1.1.4.2 Psychosocial factors (e.g., anxiety, depression)	Frequency	318	227	77	12	2			71.4%	24.2%	3.8%	0.6%	
		Importance	308	226	78	3	1			73.4%	25.3%	1.0%	0.3%	
		Level of Mastery	300	98	119	64	19			32.7%	39.7%	21.3%	6.3%	
3.1.1 History	3.1.1.1.2 Activity requirements/occupational demands	Frequency	331	242	59	19	9	2		73.1%	17.8%	5.7%	2.7%	0.6%
		Importance	321	228	81	11	1			71.0%	25.2%	3.4%	0.3%	
		Level of Mastery	312	103	105	60	44			33.0%	33.7%	19.2%	14.1%	
3.1.1 History	3.1.1.6 Obtaining medical/surgical history data.	Frequency	298	215	67	11	5			72.1%	22.5%	3.7%	1.7%	
		Importance	286	189	95	2				66.1%	33.2%	0.7%		
		Level of Mastery	281	89	87	61	44			31.7%	31.0%	21.7%	15.7%	
3.1.5 Test and Measures	3.1.5.12 Motor control and coordination (e.g., assessment)	Frequency	261	177	53	16	12	3		67.8%	20.3%	6.1%	4.6%	1.1%
		Importance	252	155	80	17				61.5%	31.7%	6.7%		
		Level of Mastery	244	93	102	42	7			38.1%	41.8%	17.2%	2.9%	
3.1.4 Systems Review	3.1.4.1 Performing systems review to identify the impact	Frequency	266	182	67	13	4			68.4%	25.2%	4.9%	1.5%	
		Importance	258	168	83	7				65.1%	32.2%	2.7%		
		Level of Mastery	251	82	93	57	19			32.7%	37.1%	22.7%	7.6%	
3.5 Intervention	3.5.16 Soft tissue mobilization (e.g., connective tissue)	Frequency	231	156	53	15	4	3		67.5%	22.9%	6.5%	1.7%	1.3%
		Importance	226	130	76	18	2			57.5%	33.6%	8.0%	0.9%	
		Level of Mastery	222	91	84	31	16			41.0%	37.8%	14.0%	7.2%	
3.5 Intervention	3.5.3 Education/training of activities of daily living (e.g., self-management)	Frequency	235	159	64	8	4			67.7%	27.2%	3.4%	1.7%	
		Importance	229	141	76	11	1			61.6%	33.2%	4.8%	0.4%	
		Level of Mastery	225	80	71	52	22			35.6%	31.6%	23.1%	9.8%	
3.1.5 Test and Measures	3.1.5.19 Posture (e.g., assessment of body or body systems)	Frequency	253	187	55	7	4			73.9%	21.7%	2.8%	1.6%	
		Importance	246	130	91	25				52.8%	37.0%	10.2%		
		Level of Mastery	239	90	70	50	29			37.7%	29.3%	20.9%	12.1%	
3.5 Intervention	3.5.4.20 Directional preference exercises/activities.	Frequency	230	136	71	20	2	1		59.1%	30.9%	8.7%	0.9%	0.4%
		Importance	224	139	76	9				62.1%	33.9%	4.0%		
		Level of Mastery	221	95	64	51	11			43.0%	29.0%	23.1%	5.0%	
3.5 Intervention	3.5.5 Injury prevention and wellness promotion (e.g., ergonomics)	Frequency	231	145	67	14	5			62.8%	29.0%	6.1%	2.2%	
		Importance	225	143	78	4				63.6%	34.7%	1.8%		
		Level of Mastery	222	83	86	42	11			37.4%	38.7%	18.9%	5.0%	
2.2 Leadership	2.2.4 Acting as an expert resource for peers in the clinical setting	Frequency	397	125	117	96	54	5		31.5%	29.5%	24.2%	13.6%	1.3%
		Importance	387	251	117	16	3			64.9%	30.2%	4.1%	0.8%	
		Level of Mastery	373	245	93	29	6			65.7%	24.9%	7.8%	1.6%	
3.5 Intervention	3.5.8 Pain neuroscience education.	Frequency	231	134	66	23	8			58.0%	28.6%	10.0%	3.5%	
		Importance	225	146	69	10				64.9%	30.7%	4.4%		
		Level of Mastery	223	87	97	33	6			39.0%	43.5%	14.8%	2.7%	
3.1.1 History	3.1.1.1.1 Current and prior work.	Frequency	331	234	62	18	14	3		70.7%	18.7%	5.4%	4.2%	0.9%
		Importance	321	191	112	17	1			59.5%	34.9%	5.3%	0.3%	
		Level of Mastery	311	98	110	56	47			31.5%	35.4%	18.0%	15.1%	
3.1.5 Test and Measures	3.1.5.21 Flexibility (e.g., length, stiffness).	Frequency	253	189	49	14	1			74.7%	19.4%	5.5%	0.4%	
		Importance	246	125	103	18				50.8%	41.9%	7.3%		
		Level of Mastery	239	80	80	48	31			33.5%	33.5%	20.1%	13.0%	
3.5 Intervention	3.5.26 Motor coordination.	Frequency	229	151	57	15	5	1		65.9%	24.9%	6.6%	2.2%	0.4%
		Importance	222	134	80	8				60.4%	36.0%	3.6%		
		Level of Mastery	219	70	97	37	15			32.0%	44.3%	16.9%	6.8%	
3.5 Intervention	3.5.15 Thrust mobilization/manipulation.	Frequency	232	99	79	26	22	6		42.7%	34.1%	11.2%	9.5%	2.6%
		Importance	226	129	80	14	3			57.1%	35.4%	6.2%	1.3%	
		Level of Mastery	222	128	65	23	6			57.7%	29.3%	10.4%	2.7%	
3.1.5 Test and Measures	3.1.5.1 Ergonomics and body mechanics.	Frequency	266	173	73	16	4			65.0%	27.4%	6.0%	1.5%	
		Importance	258	142	99	17				55.0%	38.4%	6.6%		
		Level of Mastery	250	88	80	59	23			35.2%	32.0%	23.6%	9.2%	
3.5 Intervention	3.5.4.2 Using the biopsychosocial/biomedical model.	Frequency	233	147	54	22	6	4		63.1%	23.2%	9.4%	2.6%	1.7%
		Importance	227	126	80	19	2			55.5%	35.2%	8.4%	0.9%	
		Level of Mastery	224	81	87	45	11			36.2%	38.8%	20.1%	4.9%	
2.2 Leadership	2.2.3 Modeling and facilitating the translation of evidence into practice	Frequency	397	183	103	72	35	4		46.1%	25.9%	18.1%	8.8%	1.0%
		Importance	386	257	112	16	1			66.6%	29.0%	4.1%	0.3%	
		Level of Mastery	373	152	157	56	8			40.8%	42.1%	15.0%	2.1%	
3.1.5 Test and Measures	3.1.5.20 Tissue-specific diagnostic tests (i.e., special tests)	Frequency	252	165	66	16	4	1		65.5%	26.2%	6.3%	1.6%	0.4%
		Importance	245	124	95	23	3			50.6%	38.8%	9.4%	1.2%	
		Level of Mastery	238	88	94	40	16			37.0%	39.5%	16.8%	6.7%	
3.6 Re-assessment / re-evaluation	3.6.5 Confirming/modifying goals.	Frequency	228	114	72	40	2			50.0%	31.6%	17.5%	0.9%	
		Importance	221	146	68	7				66.1%	30.8%	3.2%		
		Level of Mastery	219	81	77	43	18			37.0%	35.2%	19.6%	8.2%	

		Importance	224	105	101	15	3			46.9%	45.1%	6.7%	1.3%	
		Level of Mastery	221	61	83	50	27			27.6%	37.6%	22.6%	12.2%	
3.1.1 History	3.1.1.8 Obtaining data regarding social history (e.g.,	Frequency	298	170	85	32	10	1		57.0%	28.5%	10.7%	3.4%	0.3%
		Importance	289	131	128	29	1			45.3%	44.3%	10.0%	0.3%	
		Level of Mastery	281	63	98	80	40			22.4%	34.9%	28.5%	14.2%	
3.1.5 Test and Measures	3.1.5.13 Biopsychosocial functioning (e.g., depressio	Frequency	261	114	91	39	13	4		43.7%	34.9%	14.9%	5.0%	1.5%
		Importance	252	133	104	14	1			52.8%	41.3%	5.6%	0.4%	
		Level of Mastery	244	67	98	64	15			27.5%	40.2%	26.2%	6.1%	
3.6 Re-assessment / re-evaluation	3.6.6 Making referrals to other providers as needed.	Frequency	228	38	79	79	32			16.7%	34.6%	34.6%	14.0%	
		Importance	222	146	73	3				65.8%	32.9%	1.4%		
		Level of Mastery	218	80	81	49	8			36.7%	37.2%	22.5%	3.7%	
3.1.5 Test and Measures	3.1.5.18 Neuromotor development and sensory inte	Frequency	251	114	88	32	15	2		45.4%	35.1%	12.7%	6.0%	0.8%
		Importance	243	110	114	19				45.3%	46.9%	7.8%		
		Level of Mastery	236	64	113	42	17			27.1%	47.9%	17.8%	7.2%	
3.1.1 History	3.1.1.10 Obtaining data on living environment and cr	Frequency	298	172	77	31	16	2		57.7%	25.8%	10.4%	5.4%	0.7%
		Importance	288	102	137	49				35.4%	47.6%	17.0%		
		Level of Mastery	281	67	65	92	57			23.8%	23.1%	32.7%	20.3%	
3.1.1 History	3.1.1.9 Obtaining general demographic information.	Frequency	298	185	70	28	12	3		62.1%	23.5%	9.4%	4.0%	1.0%
		Importance	288	89	129	64	6			30.9%	44.8%	22.2%	2.1%	
		Level of Mastery	281	60	65	92	64			21.4%	23.1%	32.7%	22.8%	
2.3 Communication	2.3.2 Facilitating collaborative and multidisciplinary t	Frequency	382	105	164	71	36	6		27.5%	42.9%	18.6%	9.4%	1.6%
		Importance	372	211	140	17	4			56.7%	37.6%	4.6%	1.1%	
		Level of Mastery	360	108	170	70	12			30.0%	47.2%	19.4%	3.3%	
3.1.5 Test and Measures	3.1.5.15 Community, home, and work barriers.	Frequency	249	108	95	31	14	1		43.4%	38.2%	12.4%	5.6%	0.4%
		Importance	243	105	119	17	2			43.2%	49.0%	7.0%	0.8%	
		Level of Mastery	235	53	85	75	22			22.6%	36.2%	31.9%	9.4%	
3.2 Evaluation	3.2.3 Incorporating data from ancillary testing (e.g., i	Frequency	241	102	108	25	5	1		42.3%	44.8%	10.4%	2.1%	0.4%
		Importance	235	97	120	17	1			41.3%	51.1%	7.2%	0.4%	
		Level of Mastery	231	56	125	41	9			24.2%	54.1%	17.7%	3.9%	
2.1 Professional Behavior	2.1.4 Maintaining state-of-the-art knowledge and sk	Frequency	407	48	60	192	104	3		11.8%	14.7%	47.2%	25.6%	0.7%
		Importance	397	252	133	9	3			63.5%	33.5%	2.3%	0.8%	
		Level of Mastery	383	123	155	64	41			32.1%	40.5%	16.7%	10.7%	
3.1.5 Test and Measures	3.1.5.7 Circulation (e.g., vertebral artery examinatio	Frequency	261	84	95	57	22	3		32.2%	36.4%	21.8%	8.4%	1.1%
		Importance	253	123	110	20				48.6%	43.5%	7.9%		
		Level of Mastery	246	65	102	61	18			26.4%	41.5%	24.8%	7.3%	
2.1 Professional Behavior	2.1.1 Consulting with and/or educating peers, collea	Frequency	408	72	129	124	79	4		17.6%	31.6%	30.4%	19.4%	1.0%
		Importance	397	218	160	18	1			54.9%	40.3%	4.5%	0.3%	
		Level of Mastery	385	132	181	66	6			34.3%	47.0%	17.1%	1.6%	
3.5 Intervention	3.5.19 Traction/distraction.	Frequency	231	79	90	40	20	2		34.2%	39.0%	17.3%	8.7%	0.9%
		Importance	225	86	100	36	3			38.2%	44.4%	16.0%	1.3%	
		Level of Mastery	221	76	72	53	20			34.4%	32.6%	24.0%	9.0%	
2.5 Education	2.5.3 Educating the public regarding spine condition	Frequency	366	89	49	99	118	11		24.3%	13.4%	27.0%	32.2%	3.0%
		Importance	356	184	143	25	4			51.7%	40.2%	7.0%	1.1%	
		Level of Mastery	346	105	132	87	22			30.3%	38.2%	25.1%	6.4%	
3.5 Intervention	3.5.18 Muscle energy techniques.	Frequency	232	91	68	35	31	7		39.2%	29.3%	15.1%	13.4%	3.0%
		Importance	226	81	102	36	7			35.8%	45.1%	15.9%	3.1%	
		Level of Mastery	222	66	94	48	14			29.7%	42.3%	21.6%	6.3%	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.3 Evaluating the efficacy and effectiveness of ex	Frequency	363	73	73	98	102	17		20.1%	20.1%	27.0%	28.1%	4.7%
		Importance	353	163	154	28	8			46.2%	43.6%	7.9%	2.3%	
		Level of Mastery	343	116	131	73	23			33.8%	38.2%	21.3%	6.7%	
3.5 Intervention	3.5.6 Sleep hygiene education (e.g., sleep schedules,	Frequency	232	81	95	38	15	3		34.9%	40.9%	16.4%	6.5%	1.3%
		Importance	226	97	107	18	4			42.9%	47.3%	8.0%	1.8%	
		Level of Mastery	223	49	92	72	10			22.0%	41.3%	32.3%	4.5%	
3.7 Outcomes Assessment	3.7.3 Assessing promotion of primary and secondary	Frequency	224	78	92	43	9	2		34.8%	41.1%	19.2%	4.0%	0.9%
		Importance	217	82	116	18	1			37.8%	53.5%	8.3%	0.5%	
		Level of Mastery	213	56	76	72	9			26.3%	35.7%	33.8%	4.2%	
2.5 Education	2.5.4 Educating other health care professionals and	Frequency	362	36	71	135	109	11		9.9%	19.6%	37.3%	30.1%	3.0%
		Importance	351	188	140	21	2			53.6%	39.9%	6.0%	0.6%	
		Level of Mastery	342	110	135	76	21			32.2%	39.5%	22.2%	6.1%	
3.1.5 Test and Measures	3.1.5.8 Aerobic capacity and endurance (e.g., dyspne	Frequency	261	81	87	57	32	4		31.0%	33.3%	21.8%	12.3%	1.5%
		Importance	252	96	130	22	4			38.1%	51.6%	8.7%	1.6%	
		Level of Mastery	245	51	93	76	25			20.8%	38.0%	31.0%	10.2%	
2.2 Leadership	2.2.1 Representing orthopaedic spine physical theraj	Frequency	398	38	80	135	124	21		9.5%	20.1%	33.9%	31.2%	5.3%
		Importance	387	153	188	40	6			39.5%	48.6%	10.3%	1.6%	

		Level of Mastery	372	121	157	74	20	
3.1.5 Test and Measures	3.1.5.6 Anthropometric characteristics (e.g., edema, Frequency		267	108	79	58	20	2
		Importance	258	62	147	45	4	
		Level of Mastery	251	42	85	83	41	
2.4 Advocacy	2.4.2 Advocating for orthopaedic spine physical ther. Frequency		381	31	24	102	161	63
		Importance	369	160	162	43	4	
		Level of Mastery	354	101	128	79	46	
3.1.5 Test and Measures	3.1.5.16 Integumentary integrity. Frequency		250	84	79	57	28	2
		Importance	243	68	125	50		
		Level of Mastery	236	34	75	94	33	
2.2 Leadership	2.2.2 Planning, directing, organizing, and managing h Frequency		396	100	90	91	78	37
		Importance	383	122	159	83	19	
		Level of Mastery	369	69	155	103	42	
3.1.5 Test and Measures	3.1.5.4 Adaptive and supportive devices (e.g., taping Frequency		266	71	107	58	27	3
		Importance	258	67	135	52	4	
		Level of Mastery	251	49	88	94	20	
3.5 Intervention	3.5.10 Graded motor imagery. Frequency		231	39	59	63	54	16
		Importance	223	63	111	44	5	
		Level of Mastery	220	58	93	53	16	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.4 Identifying research needs within the field of o Frequency		364	18	23	90	183	50
		Importance	352	108	187	45	12	
		Level of Mastery	340	114	99	85	42	
3.1.1 History	3.1.1.1.4 Utilization of adaptive and supportive devic Frequency		331	86	107	87	45	6
		Importance	321	84	155	75	7	
		Level of Mastery	312	51	125	104	32	
3.5 Intervention	3.5.24 Dry needling. Frequency		230	32	60	35	19	84
		Importance	221	42	86	55	38	
		Level of Mastery	213	74	70	36	33	
2.6 Critical Inquiry and Evidence-Based Practice	2.6.2 Contributing to the body of evidence in orthop Frequency		364	18	8	44	225	69
		Importance	352	85	206	47	14	
		Level of Mastery	341	120	110	66	45	
2.5 Education	2.5.2 Promoting awareness and benefits of fellowshi Frequency		367	23	35	99	141	69
		Importance	355	98	157	77	23	
		Level of Mastery	339	92	120	89	38	
2.1 Professional Behavior	2.1.3 Maintaining active participation in professional Frequency		405	40	52	169	125	19
		Importance	395	130	189	71	5	
		Level of Mastery	381	63	128	127	63	
3.5 Intervention	3.5.7 Nutritional education. Frequency		232	36	76	83	33	4
		Importance	226	56	124	43	3	
		Level of Mastery	222	33	88	76	25	
3.5 Intervention	3.5.4.12 Protective, adaptive or supportive device or Frequency		231	40	85	63	40	3
		Importance	224	44	124	51	5	
		Level of Mastery	221	39	82	87	13	
3.5 Intervention	3.5.28.2 Mindfulness. Frequency		230	49	59	50	45	27
		Importance	221	46	107	55	13	
		Level of Mastery	215	18	79	77	41	
3.5 Intervention	3.5.4.21 Electro-therapeutic modalities (e.g., TENS, n Frequency		230	35	54	58	60	23
		Importance	224	26	67	99	32	
		Level of Mastery	221	34	58	72	57	
3.5 Intervention	3.5.4.22 Thermo-therapeutic modalities (e.g., heat, i Frequency		233	45	55	41	66	26
		Importance	226	14	68	106	38	
		Level of Mastery	221	35	44	70	72	
3.5 Intervention	3.5.28.1 Meditation. Frequency		230	16	52	58	53	51
		Importance	222	24	103	71	24	
		Level of Mastery	213	14	72	80	47	
3.5 Intervention	3.5.28.3 Hypnosis. Frequency		229	1	3	5	18	202
		Importance	218	2	13	53	150	
		Level of Mastery	194	43	14	17	120	
3.5 Intervention	3.5.23 Photo-therapeutic modalities (e.g., laser). Frequency		229	6	15	15	43	150
		Importance	221	6	25	81	109	
		Level of Mastery	212	14	26	69	103	

			32.5%	42.2%	19.9%	5.4%	
			40.4%	29.6%	21.7%	7.5%	0.7%
			24.0%	57.0%	17.4%	1.6%	
			16.7%	33.9%	33.1%	16.3%	
			8.1%	6.3%	26.8%	42.3%	16.5%
			43.4%	43.9%	11.7%	1.1%	
			28.5%	36.2%	22.3%	13.0%	
			33.6%	31.6%	22.8%	11.2%	0.8%
			28.0%	51.4%	20.6%		
			14.4%	31.8%	39.8%	14.0%	
			25.3%	22.7%	23.0%	19.7%	9.3%
			31.9%	41.5%	21.7%	5.0%	
			18.7%	42.0%	27.9%	11.4%	
			26.7%	40.2%	21.8%	10.2%	1.1%
			26.0%	52.3%	20.2%	1.6%	
			19.5%	35.1%	37.5%	8.0%	
			16.9%	25.5%	27.3%	23.4%	6.9%
			28.3%	49.8%	19.7%	2.2%	
			26.4%	42.3%	24.1%	7.3%	
			4.9%	6.3%	24.7%	50.3%	13.7%
			30.7%	53.1%	12.8%	3.4%	
			33.5%	29.1%	25.0%	12.4%	
			26.0%	32.3%	26.3%	13.6%	1.8%
			26.2%	48.3%	23.4%	2.2%	
			16.3%	40.1%	33.3%	10.3%	
			13.9%	26.1%	15.2%	8.3%	36.5%
			19.0%	38.9%	24.9%	17.2%	
			34.7%	32.9%	16.9%	15.5%	
			4.9%	2.2%	12.1%	61.8%	19.0%
			24.1%	58.5%	13.4%	4.0%	
			35.2%	32.3%	19.4%	13.2%	
			6.3%	9.5%	27.0%	38.4%	18.8%
			27.6%	44.2%	21.7%	6.5%	
			27.1%	35.4%	26.3%	11.2%	
			9.9%	12.8%	41.7%	30.9%	4.7%
			32.9%	47.8%	18.0%	1.3%	
			16.5%	33.6%	33.3%	16.5%	
			15.5%	32.8%	35.8%	14.2%	1.7%
			24.8%	54.9%	19.0%	1.3%	
			14.9%	39.6%	34.2%	11.3%	
			17.3%	36.8%	27.3%	17.3%	1.3%
			19.6%	55.4%	22.8%	2.2%	
			17.6%	37.1%	39.4%	5.9%	
			21.3%	25.7%	21.7%	19.6%	11.7%
			20.8%	48.4%	24.9%	5.9%	
			8.4%	36.7%	35.8%	19.1%	
			15.2%	23.5%	25.2%	26.1%	10.0%
			11.6%	29.9%	44.2%	14.3%	
			15.4%	26.2%	32.6%	25.8%	
			19.3%	23.6%	17.6%	28.3%	11.2%
			6.2%	30.1%	46.9%	16.8%	
			15.8%	19.9%	31.7%	32.6%	
			7.0%	22.6%	25.2%	23.0%	22.2%
			10.8%	46.4%	32.0%	10.8%	
			6.6%	33.8%	37.6%	22.1%	
			0.4%	1.3%	2.2%	7.9%	88.2%
			0.9%	6.0%	24.3%	68.8%	
			22.2%	7.2%	8.8%	61.9%	
			2.6%	6.6%	6.6%	18.8%	65.5%
			2.7%	11.3%	36.7%	49.3%	
			6.6%	12.3%	32.5%	48.6%	

Part 6. Medical Conditions

Frequency

Percentage

			# Responses	Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never	Daily / Very Important / Expert	Weekly / Moderately Important / Proficient	Monthly / Little Importance / Competent	Less than once a month / Adv. Beginner	Never
6.2 Musculoskeletal System	6.2.9 Lumbar Disc Pathologies (e.g., DDD, protrusion)	Frequency	221	150	59	9	3		67.9%	26.7%	4.1%	1.4%	
		Importance	215	184	27	4			85.6%	12.6%	1.9%		
		Level of Mastery	210	118	60	21	11		56.2%	28.6%	10.0%	5.2%	
6.1 Nervous System	6.1.2 Lumbar Radiculopathy	Frequency	224	134	72	17	1		59.8%	32.1%	7.6%	0.4%	
		Importance	218	198	19	1			90.8%	8.7%	0.5%		
		Level of Mastery	215	126	64	19	6		58.6%	29.8%	8.8%	2.8%	
6.1 Nervous System	6.1.1 Cervical Radiculopathy	Frequency	224	112	81	30	1		50.0%	36.2%	13.4%	0.4%	
		Importance	218	202	16				92.7%	7.3%			
		Level of Mastery	215	125	64	21	5		58.1%	29.8%	9.8%	2.3%	
6.2 Musculoskeletal System	6.2.1 Cervical Disc Pathologies (e.g., DDD, protrusion)	Frequency	222	131	65	22	4		59.0%	29.3%	9.9%	1.8%	
		Importance	215	179	31	5			83.3%	14.4%	2.3%		
		Level of Mastery	213	113	67	26	7		53.1%	31.5%	12.2%	3.3%	
6.2 Musculoskeletal System	6.2.24 Facet dysfunction (cervical, thoracic, lumbar)	Frequency	221	102	72	37	10		46.2%	32.6%	16.7%	4.5%	
		Importance	214	150	55	8	1		70.1%	25.7%	3.7%	0.5%	
		Level of Mastery	212	107	71	27	7		50.5%	33.5%	12.7%	3.3%	
6.2 Musculoskeletal System	6.2.3 Cervical Sprain/Strain	Frequency	223	109	66	43	5		48.9%	29.6%	19.3%	2.2%	
		Importance	217	155	59	3			71.4%	27.2%	1.4%		
		Level of Mastery	214	95	69	40	10		44.4%	32.2%	18.7%	4.7%	
6.2 Musculoskeletal System	6.2.12 Lumbar Strain	Frequency	222	115	73	31	3		51.8%	32.9%	14.0%	1.4%	
		Importance	216	142	65	9			65.7%	30.1%	4.2%		
		Level of Mastery	213	100	57	36	20		46.9%	26.8%	16.9%	9.4%	
6.2 Musculoskeletal System	6.2.8 Disorders of the Hip	Frequency	222	97	99	21	5		43.7%	44.6%	9.5%	2.3%	
		Importance	216	163	50	3			75.5%	23.1%	1.4%		
		Level of Mastery	213	96	81	29	7		45.1%	38.0%	13.6%	3.3%	
6.2 Musculoskeletal System	6.2.11 Lumbar Spondylosis / Spondylolisthesis	Frequency	222	83	72	48	18	1	37.4%	32.4%	21.6%	8.1%	0.5%
		Importance	216	155	55	5	1		71.8%	25.5%	2.3%	0.5%	
		Level of Mastery	213	110	69	26	8		51.6%	32.4%	12.2%	3.8%	
6.2 Musculoskeletal System	6.2.2 Cervical Instability	Frequency	223	46	31	49	89	8	20.6%	13.9%	22.0%	39.9%	3.6%
		Importance	217	175	39	2	1		80.6%	18.0%	0.9%	0.5%	
		Level of Mastery	214	116	71	25	2		54.2%	33.2%	11.7%	0.9%	
6.2 Musculoskeletal System	6.2.10 Lumbar Instability	Frequency	222	69	66	48	34	5	31.1%	29.7%	21.6%	15.3%	2.3%
		Importance	216	153	54	7	2		70.8%	25.0%	3.2%	0.9%	
		Level of Mastery	213	113	72	23	5		53.1%	33.8%	10.8%	2.3%	
6.2 Musculoskeletal System	6.2.26 Spinal stenosis.	Frequency	220	88	82	36	13	1	40.0%	37.3%	16.4%	5.9%	0.5%
		Importance	213	146	64	2	1		68.5%	30.0%	0.9%	0.5%	
		Level of Mastery	211	96	72	31	12		45.5%	34.1%	14.7%	5.7%	
6.2 Musculoskeletal System	6.2.5 Chronic Pain Syndromes	Frequency	223	67	85	51	18	2	30.0%	38.1%	22.9%	8.1%	0.9%
		Importance	215	153	60	1	1		71.2%	27.9%	0.5%	0.5%	
		Level of Mastery	212	104	85	21	2		49.1%	40.1%	9.9%	0.9%	
6.2 Musculoskeletal System	6.2.4 Cervicogenic Headache	Frequency	223	51	87	61	24		22.9%	39.0%	27.4%	10.8%	
		Importance	217	153	61	3			70.5%	28.1%	1.4%		
		Level of Mastery	212	110	74	26	2		51.9%	34.9%	12.3%	0.9%	
6.2 Musculoskeletal System	6.2.13 Other Disorders of the Lumbar Spine	Frequency	220	76	68	54	21	1	34.5%	30.9%	24.5%	9.5%	0.5%
		Importance	212	124	80	8			58.5%	37.7%	3.8%		
		Level of Mastery	209	93	73	36	7		44.5%	34.9%	17.2%	3.3%	
6.1 Nervous System	6.1.6 Cervical Myelopathy.	Frequency	224	22	24	50	112	16	9.8%	10.7%	22.3%	50.0%	7.1%
		Importance	218	166	43	9			76.1%	19.7%	4.1%		
		Level of Mastery	215	106	80	20	9		49.3%	37.2%	9.3%	4.2%	
6.2 Musculoskeletal System	6.2.25 Operative procedure on spinal structure.	Frequency	220	38	69	70	40	3	17.3%	31.4%	31.8%	18.2%	1.4%
		Importance	214	146	62	6			68.2%	29.0%	2.8%		
		Level of Mastery	210	91	77	35	7		43.3%	36.7%	16.7%	3.3%	
6.2 Musculoskeletal System	6.2.15 Sacroiliac Dysfunction	Frequency	222	52	59	62	47	2	23.4%	26.6%	27.9%	21.2%	0.9%
		Importance	215	115	81	17	2		53.5%	37.7%	7.9%	0.9%	
		Level of Mastery	212	94	80	34	4		44.3%	37.7%	16.0%	1.9%	
6.1 Nervous System	6.1.4 Other peripheral neural impingements (not inc)	Frequency	222	30	54	64	71	3	13.5%	24.3%	28.8%	32.0%	1.4%
		Importance	217	129	76	12			59.4%	35.0%	5.5%		
		Level of Mastery	214	101	85	26	2		47.2%	39.7%	12.1%	0.9%	
6.2 Musculoskeletal System	6.2.6 Other Disorders of Cervical Spine	Frequency	223	64	64	55	37	3	28.7%	28.7%	24.7%	16.6%	1.3%
		Importance	216	115	90	10	1		53.2%	41.7%	4.6%	0.5%	

6.1 Nervous System	6.1.3 Thoracic Outlet Syndrome	Level of Mastery	212	77	93	38	4	
		Frequency	222	20	30	60	108	4
		Importance	215	110	88	15	2	
6.2 Musculoskeletal System	6.2.19 Thoracic Sprain/Strain	Level of Mastery	212	96	82	28	6	
		Frequency	220	35	68	70	46	1
		Importance	214	103	91	20		
6.2 Musculoskeletal System	6.2.27 Oncological Disorders	Level of Mastery	211	83	79	40	9	
		Frequency	220	9	14	35	133	29
		Importance	208	130	57	17	4	
6.2 Musculoskeletal System	6.2.17 Inflammatory Conditions	Level of Mastery	206	67	85	41	13	
		Frequency	222	17	32	69	97	7
		Importance	214	116	86	12		
6.2 Musculoskeletal System	6.2.18 Rib Dysfunction	Level of Mastery	210	75	85	46	4	
		Frequency	220	24	40	67	81	8
		Importance	213	100	86	22	5	
6.2 Musculoskeletal System	6.2.22 Curvature of the spine (e.g., scoliosis, kyphosis)	Level of Mastery	209	81	90	34	4	
		Frequency	221	33	42	70	65	11
		Importance	212	93	101	17	1	
6.2 Musculoskeletal System	6.2.16 Other Disorders of the Pelvic Girdle	Level of Mastery	209	68	86	46	9	
		Frequency	222	34	48	56	76	8
		Importance	213	91	99	21	2	
6.2 Musculoskeletal System	6.2.14 Piriformis Syndrome	Level of Mastery	207	66	93	45	3	
		Frequency	221	26	49	75	63	8
		Importance	213	88	81	38	6	
6.2 Musculoskeletal System	6.2.7 Temporomandibular Dysfunction	Level of Mastery	209	72	81	38	18	
		Frequency	221	17	22	50	102	30
		Importance	213	85	102	25	1	
6.2 Musculoskeletal System	6.2.21 Other Disorders of the Thoracic Spine	Level of Mastery	208	71	88	37	12	
		Frequency	217	27	39	64	82	5
		Importance	210	81	95	33	1	
6.2 Musculoskeletal System	6.2.20 Thoracic Disc Pathologies	Level of Mastery	207	61	94	44	8	
		Frequency	219	14	26	49	116	14
		Importance	212	84	101	23	4	
6.1 Nervous System	6.1.5 Meralgia paresthetica.	Level of Mastery	209	72	92	37	8	
		Frequency	222	9	9	34	140	30
		Importance	214	63	101	46	4	
6.2 Musculoskeletal System	6.2.23 Diastasis recti.	Level of Mastery	212	67	91	42	12	
		Frequency	220	9	19	51	101	40
		Importance	211	70	86	48	7	
6.2 Musculoskeletal System	6.2.28 Torticollis	Level of Mastery	206	37	88	65	16	
		Frequency	220	7	8	19	115	71
		Importance	209	69	83	41	16	
6.2 Musculoskeletal System	6.2.29 Klippel-Feil Syndrome	Level of Mastery	205	39	83	57	26	
		Frequency	220	3	5	8	86	118
		Importance	200	44	81	53	22	
6.2 Musculoskeletal System	6.2.30 Scheuermann's Disease	Level of Mastery	199	37	65	55	42	
		Frequency	220	6	5	22	127	60
		Importance	207	48	95	52	12	
		Level of Mastery	203	32	77	66	28	

36.3%	43.9%	17.9%	1.9%	
9.0%	13.5%	27.0%	48.6%	1.8%
51.2%	40.9%	7.0%	0.9%	
45.3%	38.7%	13.2%	2.8%	
15.9%	30.9%	31.8%	20.9%	0.5%
48.1%	42.5%	9.3%		
39.3%	37.4%	19.0%	4.3%	
4.1%	6.4%	15.9%	60.5%	13.2%
62.5%	27.4%	8.2%	1.9%	
32.5%	41.3%	19.9%	6.3%	
7.7%	14.4%	31.1%	43.7%	3.2%
54.2%	40.2%	5.6%		
35.7%	40.5%	21.9%	1.9%	
10.9%	18.2%	30.5%	36.8%	3.6%
46.9%	40.4%	10.3%	2.3%	
38.8%	43.1%	16.3%	1.9%	
14.9%	19.0%	31.7%	29.4%	5.0%
43.9%	47.6%	8.0%	0.5%	
32.5%	41.1%	22.0%	4.3%	
15.3%	21.6%	25.2%	34.2%	3.6%
42.7%	46.5%	9.9%	0.9%	
31.9%	44.9%	21.7%	1.4%	
11.8%	22.2%	33.9%	28.5%	3.6%
41.3%	38.0%	17.8%	2.8%	
34.4%	38.8%	18.2%	8.6%	
7.7%	10.0%	22.6%	46.2%	13.6%
39.9%	47.9%	11.7%	0.5%	
34.1%	42.3%	17.8%	5.8%	
12.4%	18.0%	29.5%	37.8%	2.3%
38.6%	45.2%	15.7%	0.5%	
29.5%	45.4%	21.3%	3.9%	
6.4%	11.9%	22.4%	53.0%	6.4%
39.6%	47.6%	10.8%	1.9%	
34.4%	44.0%	17.7%	3.8%	
4.1%	4.1%	15.3%	63.1%	13.5%
29.4%	47.2%	21.5%	1.9%	
31.6%	42.9%	19.8%	5.7%	
4.1%	8.6%	23.2%	45.9%	18.2%
33.2%	40.8%	22.7%	3.3%	
18.0%	42.7%	31.6%	7.8%	
3.2%	3.6%	8.6%	52.3%	32.3%
33.0%	39.7%	19.6%	7.7%	
19.0%	40.5%	27.8%	12.7%	
1.4%	2.3%	3.6%	39.1%	53.6%
22.0%	40.5%	26.5%	11.0%	
18.6%	32.7%	27.6%	21.1%	
2.7%	2.3%	10.0%	57.7%	27.3%
23.2%	45.9%	25.1%	5.8%	
15.8%	37.9%	32.5%	13.8%	

Responses to Demographic Questions

1. Please select one of the following survey options

	Frequency	Percent
I am a graduate of an ABPTRFE-accredited orthopaedic or sports residency program, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	63	5.2
I am actively involved in orthopaedic spine physical therapy practice at the "subspecialist" level, but am unable to participate in this survey at this time.	75	6.2
I am an ABPTS board-certified clinical specialist in orthopaedic or sports physical therapy, and have practice a minimum of 1,000 hours in orthopaedic spine in the last two (2) years.	754	62.3
I am not a board-certified clinical specialist, or residency graduate, in orthopaedic or sports physical therapy but I am a member of the APTA Academy of Orthopaedic Physical Therapy or Academy of Sports Physical Therapy and have a minimum of 5 years of experience of practice in orthopaedic spine, with at least 1,000 hours in the last two (2) years.	197	16.3
I am not actively involved in orthopaedic spine physical therapy practice and therefore I am not eligible to participate in this survey at this time.	121	10.0

4.1 Please indicate the percentage of time you spend in the following settings as an orthopaedic spine physical

	Counts within Percentage Bands
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	M %	SD %	0 to 5%	6 to 25%	26 to 50%	51 to 75%	76 to 100%
Acute Care Hospital	4.1	13.9	98	14	1	0	2
Hospital-based outpatient facility or clinic	53.0	46.1	63	5	8	6	80
Private outpatient office or group practice	62.9	43.5	38	12	14	3	92
Skilled nursing facility (SNF)/long-term care	1.2	10.3	94	1	0	0	1
Patient's home/home care	2.9	12.4	96	3	3	0	1
School system (preschool/primary/secondary)	0.2	1.1	96	1	0	0	0
Academic institution (postsecondary)	18.1	32.5	79	13	5	4	15
Health and wellness facility	3.5	15.5	94	5	2	0	2
Research center	0.8	4.7	93	3	1	0	0
Industry	0.9	5.4	93	3	1	0	0
Inpatient rehab facility (IRF)	0.4	2.3	96	2	0	0	0
Other	9.8	26.5	70	7	2	0	7

5.1 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following age groups? (total

Age group	Mean %	SD %
Pediatrics (0-21 years of age)	14.9	12.4
Adults (22-59 years of age)	49.6	16.8
Geriatrics (60 years of age to end of life)	37.6	16.4

5.2 In the past year, what percentage of patients/clients have you provided physical therapy services for in the following sex groups? (total must equal 100%)

Sex	Mean %	SD %
Male	47.7	10.6
Female	51.2	10.7
Ambiguous	3.6	10.4

5.3 Please indicate your referral sources by percentages below (total must equal 100%)

	Mean %	SD %
Self-referral	26.2	27.3
Chiropractic	3.1	6.0
Family practice physicians or other physician primary care p	32.3	18.9
Physician specialists (e.g. geriatrics physician)	30.6	19.9
Physician assistants	13.8	8.8
Podiatrist	4.4	4.3
Nurse practitioners	11.8	12.7
Other	9.5	22.2

<- e.g., "on average, 26% of referrals are from self-referral"

Note. Other were...

7.1 In which geographic region is the major portion of your practice?

	frequency	percent
East North Central (IL, IN, MI, OH, WI)	24	2.0
East South Central (AL, KY, MS, TN)	7	0.6
Middle Atlantic (NJ, NY, PA)	40	3.3
Mountain (AZ, CO, ID, MT, NV, NM, UT, WY)	21	1.7
New England (CT, ME, MA, NH, RI, VT)	13	1.1
Pacific (AK, CA, HI, OR, WA)	34	2.8
South Atlantic (DE, DC, FL, GA, MD, NC, PR, SC, VA, WV)	34	2.8
West North Central (IA, KS, MN, MO, NE, ND, SD)	30	2.5
West South Central (AR, LA, OK, TX)	20	1.7
None Selected	987	81.6

7.2 What is your entry-level physical therapy education?

frequency percent

Baccalaureate	48	4.0
DPT	121	10.0
Entry-level master's	46	3.8
Other (please specify)	3	0.2
Postbaccalaureate certificate	5	0.4
None Selected	987	81.6

7.3 What is your highest earned academic degree in any area of study?

	frequency	percent
Baccalaureate	19	1.6
DPT	120	9.9
Master's	24	2.0
Other (please specify)	3	0.2
PhD (or equivalent and DPT	6	0.5
PhD (or equivalent) and tDPT	1	0.1
PhD (or equivalent, eg EdD or ScD)	15	1.2
tDPT	36	3.0
None Selected	986	81.5

Note. Other were Doctor of Chiropractic (n=2) and Post Graduate Diploma in Rehabilitation (n=1).

7.4 What is the total number of years you have been a practicing physical therapist?

	Frequency	Percent
31 or more years	41	3.4
21 - 30 years	57	4.7
16 - 20 years	24	2.0
11 - 15 years	37	3.1
6 - 10 years	44	3.6
3 - 5 years	17	1.4
1 - 2 years	4	0.3
None Selected	986	81.5

7.5 What is the total number of years you have primarily practiced in Orthopaedic Spine physical therapy?

	Frequency	Percent
31 or more years	22	1.8
21 - 30 years	44	3.6
16 - 20 years	37	3.1
11 - 15 years	28	2.3
6 - 10 years	58	4.8
3 - 5 years	26	2.1
1 - 2 years	7	0.6
Less than a year	2	0.2
None Selected	986	81.5

7.6 Please indicate any ABPTS board certifications you currently hold (select all that apply)

	Frequency	Percent
Cardiovascular and Pulmonary	0	0.0
Clinical Electrophysiology	1	0.1
Geriatrics	4	0.3
Neurology	1	0.1
Oncology	0	0.0
Orthopaedics	169	14.0
Pediatrics	0	0.0
Sports	18	1.5
Women's Health	0	0.0
Wound Management	0	0.0
None of the above	39	3.2
None Selected	996	82.3

7.7 Please indicate if you graduated from an ABPTRFE-accredited residency program in any of the following areas of specialty practice (select all that apply)

	Frequency	Percent
Acute Care	0	0.0
Cardiovascular and Pulmonary	0	0.0
Clinical Electrophysiology	0	0.0
Faculty	0	0.0
Geriatrics	0	0.0
Neurology	0	0.0
Oncology	0	0.0
Orthopaedics	50	4.1
Pediatrics	0	0.0
Sports	1	0.1
Women's Health	0	0.0
Wound Management	0	0.0
None of the above	136	11.2
None Selected	1023	84.5

7.8 Please indicate if you graduated from an ABPTRFE-accredited fellowship program in any of the following areas of subspecialty practice (select all that apply)

	Frequency	Percent
Critical Care	0	0.0
Hand Therapy	0	0.0
Higher Education Leadership	0	0.0
Movement System	4	0.3
Neonatology	0	0.0
Orthopaedic Manual Physical Therapy	38	3.1
Performing Arts	0	0.0
Spine	8	0.7
Sports Division 1	0	0.0
Upper Extremity Athlete	0	0.0

None of the above	134	11.1
None Selected	1029	85.0

7.9 Based on state law and facility policies, do you evaluate and/or treat patients/clients without a physician referral?

	Frequency	Percent
Yes	179	14.8
No	43	3.6
None Selected	988	81.7

7.10 What is your current employment status at your primary position? (35 or more hours/wk is full-time)

	Frequency	Percent
Full-time hourly	25	2.1
Full-time salaried	143	11.8
Full-time self employed	26	2.1
Part-time hourly	14	1.2
Part-time salaried	5	0.4
Part-time self employed	5	0.4
Retired	2	0.2
Unemployed/not seeking work	2	0.2
None Selected	988	81.7

7.11 What educational method has had the MOST influence on developing your present level of clinical skills?

	Frequency	Percent
Continuing education courses, workshops, seminars, study	104	8.6
Formal fellowship program	39	3.2
Formal residency program	31	2.6
Graduate program	14	1.2
In service, peer interaction	4	0.3
Mentoring	13	1.1
Self-study (books, articles, videotapes, home study courses)	17	1.4
None Selected	988	81.7

7.12 Are you a member of the APTA

	Frequency	Percent
Yes	184	15.2
No	38	3.1
None Selected	988	81.7

7.13 Please indicate any APTA Section you are member of (select all that apply)

	Frequency	Percent
Acute Care	1	0.1
Aquatics	2	0.2
Cardiovascular and Pulmonary	1	0.1
Clinical Electrophysiology and Wound Management	2	0.2
Education	26	2.1
Federal	5	0.4
Geriatrics	7	0.6
Hand and Upper Extremity	2	0.2
Health Policy and Administration	4	0.3
Home Health	2	0.2
Neurology	6	0.5
Oncology	2	0.2
Orthopaedics	158	13.1
Pediatrics	1	0.1
Pelvic Health	8	0.7
Private Practice	19	1.6
Research	11	0.9
Sports	34	2.8
None of the above	38	3.1
None Selected	988	81.7

7.14 What is your sex?

	Frequency	Percent
Male	136	11.2
Female	87	7.2
None Selected	987	81.6

7.15 What is your age?

	Frequency	Percent
20-29	7	0.6
30-39	76	6.3
40-49	61	5.0
50-59	53	4.4
60-69	21	1.7
70+	5	0.4
None Selected	987	81.6

7.16 Which of the following best describes your race/ethnic origin?

	Frequency	Percent
African-American or Black (Not Hispanic)	6	0.5
Asian	23	1.9
Hispanic/Latino	3	0.2
Other	9	0.7
White (Not Hispanic)	180	14.9
None Selected	989	81.7