Text

Description automatically generated with medium confidence

Medical Conditions – Clinical Electrophysiology

for Initial Accreditation and Notification of Change in Patient Population

For programs applying for candidate status, or for accredited programs submitting a notification of change in patient population, please provide the patient population that will be available to the resident by providing a summary of the practice site data from the last year.

Please complete the chart below by filling in those medical conditions seen by the practice site during the last year. The patient’s medical condition is only counted during the first patient encounter. **Patient encounters beyond the initial visit should not be included in the frequency count.**

|  |  |
| --- | --- |
| **Name of Practice Site:** | |
| **Number of Practicing PTs at Practice Site Data Represents:** | |
| Medical Conditions **Clinical Electrophysiology** | **Number of Patients Seen by Practice Site within Last Year** |
| **Nervous System** | |
| Entrapment Neuropathy (carpal tunnel syndrome, cubital tunnel syndrome) |  |
| Motor neuron disease |  |
| Neuromuscular junction defect (myasthenia gravis, botulism) |  |
| Polyneuropathy (demyelinating, axonal, hereditary) |  |
| Radiculopathy |  |
| **Musculoskeletal System** | |
| Myopathy (muscular dystrophy, myositis) |  |
| **Other** | |
| Insert additional conditions not reflected above |  |