## Case report cover sheet – Advanced Training in Rehabilitation Medicine (adult)

This coversheet must be completed by a trainee and submitted with their completed case report to a rotation supervisor.

**Instructions for trainees**

1. Download the case report coversheet and template.
2. Save a local copy and complete the relevant fields.
3. Login to your [TMP account](https://tmp.racp.edu.au/) and upload the completed case report.

Refer to the [learning, teaching and assessment programs](https://elearning.racp.edu.au/mod/resource/view.php?id=36639) and [TMP instructions](https://elearning.racp.edu.au/pluginfile.php/113575/mod_resource/content/39/Case%20reports.pdf) for further information.

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| **Name of Trainee** |  |
| **Trainee MIN** |  |
| **Phase of training** |  |
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| **Name of Supervisor** |  |
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| **Title of case report** |  |
| **Submission type** |[ ]  **Submission** |[ ]  **Resubmission** |

**Learning goal/s related to this case report** *(tick as many as required)*:*Select the learning goal/s that best outline what skills and knowledge are demonstrated in the case report. This could include novel aspects of a patient condition (i.e. specific knowledge guide), or a comprehensive review of a complex medical history (i.e. clinical assessment and management).*

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| **Professional behavior (competencies learning goal)** |
|[ ]  Medical expertise |[ ]  Quality and safety |[ ]  Research |[ ]  Ethics and professional behaviour |
|[ ]  Judgement and decision making |  |  |  |  |  |  |
| **EPA learning goals**  |
|[ ]  Clinical assessment and management of function |[ ]  Longitudinal care |[ ]  Procedures |
| **Knowledge learning goals** |
|[ ]  Traumatic brain injury  |[ ]  Stroke management |[ ]  Neurological conditions |[ ]  Spinal cord dysfunction |
|[ ]  Amputation of limb and prosthetics  |[ ]  Musculoskeletal conditions  |[ ]  Cardiac and respiratory conditions  |[ ]  Adults with disabilities arising in childhood  |
|[ ]  Rehabilitation of older people  |[ ]  Rehabilitation of other specific conditions  |[ ]  Pain  |[ ]  Orthotics and footwear  |
|[ ]  Spasticity and its management |  |  |  |  |  |  |

**Trainee declaration***Please tick to indicate that you understand the following statements.*I declare that:

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| [ ]  | Patient, family, Whanāu and/or staff information has been de-identified. |
| [ ]  | This case report is my own original work, except where I have appropriately cited the original source. I have acknowledged where generative AI may have been used in my case report. |
| [ ]  | This case report has not been previously submitted as a requirement for an RACP training program. |
| [ ]  | This case report complies with the College’s [*Academic Integrity in Training*](https://www.racp.edu.au/docs/default-source/default-document-library/academic-integrity-in-training-policy.pdf?sfvrsn=6) policy. |

**Date of submission:**      /      /       **Trainee signature:** Click or tap here to enter text. |
| ***Trainee reflection on case study*** *What did you learn?* Click or tap here to enter text. |
| *How will you apply this learning in the future?*Click or tap here to enter text. |