Podiatry Board Ahpra

HOW TO COMPLETE THE CLINICAL STUDY TEMPLATE

Read these tips to ensure that you answer each section adequately and completely.

Clinical setting description	This is the location of the observational clinical session related to this clinical study.
Presentation type	Click on the box and choose whether the case is podiatry related or non-podiatry related. At least 12 clinical studies must involve podiatric pathology and be related to a podiatric condition, intervention, or management. Clinical studies that don't involve podiatric pathology must deal with conditions that would allow the knowledge and skills to transfer to podiatry.
Case category	As required by the Podiatry Board's Guidelines: Endorsement for scheduled medicines (ESM guidelines) there are specific requirements for some clinical studies. For example: • at least five must be high risk cases • some must be about patients with a range of co-morbidities and at risk of adverse events related to polypharmacy • at least five must demonstrate complexity i.e., involve more than one class of medicines • at least five must report the actual outcome of the medicine(s) prescribed • at least five must include a de-identified sample of with other member(s) of the patient's healthcare team.
Patient details	This is where you enter the patent's age, sex, weight, relevant medical and social history, medication history (including non-prescription medications and consideration of adherence), allergies (type and nature), and the presenting complaint.
Subjective	Consider the presenting complaint, symptoms, observations noted by the patient, previously trialled treatments, and outcomes.
Objective	Consider the physical examination, relevant clinical findings, and any investigations such as laboratory test results etc.
Assessment	Describe the diagnosis/ differential diagnosis and any other issues.
Plan	Identify a recommended treatment plan that addresses the patient's needs related to each of the diagnoses and issues. The plan should include interventions that are evidence-based with rationale that target specific etiologies of illness or risk behaviors. The interventions should integrate the unique needs and goals of the patient.

Medications prescribed

Include dosage, route of administration, frequency, and duration of treatment.

relevant scheduling of the prescribed medication/s.

Scheduled medicines assessment and evaluation

The assessment should consider:

- indication/purpose for medicines prescribed (all medications which are prescribed in the clinical study must be discussed)
- evidence for use and effectiveness
- rationale for prescribing a particular agent supported by reference to evidence-based guidelines. Consideration of possible treatment alternatives and justification for the final recommended treatment plan should be shown and supported by appropriate references or guidelines with consideration of the patient's specific circumstances.
- pharmacodynamics and pharmacokinetics
- dosing and administration issues including justification for choice of dose, form, route, frequency, and duration of treatment.
- possible/likely adverse effects
- possible drug-drug, drug-patient interactions (including a discussion regarding their clinical significance and how they would be managed)
- contraindications and patient precautions, both generally and in the context of the specific patient circumstances
- overall appropriateness for the patient
- consideration of your ethical and legal obligations in relation to the prescribing of scheduled medicines, including the Board's ESM Guidelines and any additional requirements as specified in the National Podiatry Scheduled Medicines List
- consider the implications of prescribing to the wider community, e.g. antimicrobial stewardship, generic medicines, cost
- explanation of the cost implications for the patient of the medicines prescribed, and any alternatives
- outline of collaboration and/or communication with other health providers
- shared care protocols
- where treatment is ongoing, consideration of accessibility of the medicine/s in this patient context
- indicators of effectiveness, ineffectiveness, and harm.

Education

Consider the most important points to communicate to your patient.

- What do they need to know?
- Can they prevent this problem from occurring again?
- Are there any appropriate non-pharmacological interventions you would recommend?
- What information do you need to provide to the patient about the medicine(s) prescribed, including possible adverse effects, interactions, monitoring required, review timeframes etc?

The patient education should demonstrate the ability to convey relevant information to a patient using clear, simple language.

Review/ monitoring/ clinical outcome of medicine (where relevant)	When should the patient be reviewed and by whom? Does the patient need any monitoring? (e.g. any clinical test) When providing the outcome of treatment, specifically comment on • the results of the prescribed treatment using appropriate clinical indicators • whether further treatment is required • how outcomes were communicated to other health professionals involved in the patient's care.
Reflections on learnings relating to this case	Reflect on this clinical study and indicate how your knowledge has developed and grown.
Essential Prescribing Skills/code relevant to this case	List the essential prescribing skills that are demonstrated in this clinical study. For example, 1.2, 2.3, 3.4 etc. Include an explanation about how you have demonstrated the particular prescribing skill/(s).
Attachments	List all attachments for this case. Every clinical study must be accompanied by a sample prescription for the individual patient for each medicine prescribed. Careful consideration of the legal requirements relating to a complete and accurate prescription must be demonstrated. In addition, at least five clinical studies must include a sample of communication with members of the patient's healthcare team e.g. de-identified sample letter.