

Case Report Procedures

THE RECOMMENDATIONS BELOW DO NOT CONSTITUTE LEGAL ADVICE AND SHOULD NOT BE RELIED UPON IN LIEU OF CONSULTATION WITH APPROPRIATE LEGAL ADVISORS IN YOUR OWN JURISDICTION.

1. Recommendations to Pilates Studios and Teachers for Rendering Exercise Instruction Services

Limited Liability Entities and Waivers & Releases

Before rendering exercise instruction services to Clients, studios and instructors should take appropriate steps to limit their liability by establishing a limited liability entity such as a corporation or LLC and by requiring each Client to sign a waiver of and release from liability. In general, a Waiver and Release must be clear, unambiguous and CONSPICUOUS, to be sure that the Client knows what s/he is signing. Waivers and Releases are contracts and need to be treated with the formality of a contract. Because they are contracts, they also need to show that some consideration (i.e. value) was received by the Client in exchange for the Waiver and Release. Thus, Waivers and Releases generally begin by stating something along the lines of “In consideration of receiving [X’s] exercise instruction services and participating in a Case Report, Client hereby ...”

Waivers and Releases must also warn of the full range of possible injuries, including “permanent disability or death.” It should provide that the Client assumes all risks, “known and unknown.” Waivers and Releases should not attempt to disclaim responsibility for “gross negligence” or “willful conduct,” but should disclaim responsibility for “negligence.”

Finally, Waivers and Releases should also provide that they are applicable “to the fullest extent permitted by law.” This prevents a Client with a claim from arguing that the Waiver and Release overreaches applicable state law.

Consult with your legal advisor to be sure you have a valid Waiver and Release for signature by your Clients. Remember that these must be signed *before* you render any exercise instruction services to the Client.

2. Obtaining Client Consent to Participate in Case Reports

Participation in Case Reports

When you want a Client to participate in a Case Report, you should inform the Client of the following:

- (i) the purpose(s) of the Case Report;
- (ii) the duration of your work with the Client for the purpose of the Case Report;
- (iii) who else may be participating in the Case Report, if known; and
- (iv) how the Client’s confidentiality will be maintained

In addition, you should advise the Client that s/he may cease participating in the Case Report at any time.

Finally, you must do the following:

1. Obtain the Client's consent to include information about the Client's age, weight, gender, ethnicity and physical condition, including the effect of any exercise protocol used by the teacher (but *not* to include "personally identifying information" such as name, address, telephone number, etc.). The Client consent form should be written in plain language and should not be a separate document from the Waiver and Release. An example is provided on Form 1, but again, consult with your legal advisor to be sure that you have a valid consent form for your jurisdiction.
2. Obtain the Client's signature on the Waiver and Release attached as Form 2 *if the Case Report is being done for or on behalf of the PMA or one of its initiatives*. This form does not replace or substitute for your own Waiver and Release form. It is for the PMA only.

At such time as you wish to submit your Case Report to the PMA so that it may be shared publicly (and with others participating in the Heroes in Motion® or Pilates 4 Youth™ initiatives), please submit Form 2 below, "WAIVER AND RELEASE FOR PARTICIPATION IN A CASE REPORT" along with your Case Report. Please send to Lolo Arrieta at loloa@pilatesmethodalliance.org. All Case Studies will be reviewed by the Chair of the PMA's Research Committee, Sherri Betz, PT, GCS, PMA®-CPT.

Writing Case Reports for the PMA

Case Reports are detailed reports of the management of an individual's unusual condition or a condition that is rare or poorly reported in the literature. A case report may also describe a novel or unique therapeutic approach to a particular condition. A case report is an anecdotal account, a relatively low level of evidence, and less scientifically rigorous due to its small sample size.

However, it is valuable as evidence to stimulate and share new ideas for further investigation.

Anyone can conduct and write a case report. There is no degree or credential required, however, credentials are helpful in increasing the likelihood of acceptance for publication in a peer-reviewed journal. To be accepted for publication, an article must be an original piece of work that has not been published elsewhere.

Questions to consider:

1. Has this information been published before?
2. Would this case report inform Pilates professionals and enhance the practice of teaching Pilates?
3. Would this case report include practical and repeatable applications?
4. Why is this particular client intervention suitable for a case report?

People-First Language: When referring to patients or clients, refer to them in "people-first" language. This type of language aims to avoid dehumanizing discussions regarding people with disabilities or pathologies. For example, use "people with disabilities" vs. "disabled people" or "person with diabetes" vs. "diabetic".

Title:

The title must include the words Case Report, i.e. "Case Report: Using Pilates as an Intervention for Total Shoulder Replacement"

Case Title Field: Background

and Purpose:

A literature review must be conducted to provide the rationale for sharing the information from the case report. If other articles have been published on this same topic, then the report may not be needed. If randomized controlled trials have been published, a case report on the same or similar topic would not be necessary and would unlikely be accepted for publication in a peer-reviewed journal.

Provide a scholarly discussion of the importance and necessity of the topic, noting what has been published on the topic. Summarize the assessment, findings and exercise interventions. State the main purpose of the report that is supported with background information.

Background and purpose:

Client History:

Report client's age, gender, weight, height, ethnicity and other pertinent characteristics. Include the reason why the client sought the intervention, relevant medical history, co-morbidities (all known diagnoses), chief complaints, prior services received related to the condition or episode, and client goals. Use relative dates instead of calendar dates) (e.g. years, months or days since onset of injury or start of intervention.) Be sure to follow HIPPA (Health Insurance Portability and Accountability Act) guidelines, keeping all personal information confidential and avoiding use of first or last name of the client. Obtain signed consent forms informing the client of his/her participation and permission to use the information from their interventions and outcomes in the case report.

Impression:

Explain the primary problem and any other conflicting variables that may confound the interventions and outcomes. Describe the overall plan of intervention (frequency of sessions, length of sessions, and general focus of exercises) Explain why this particular client is a good candidate for a case report.

Assessment:

Clearly describe the tests and measures that will be performed to obtain baseline or objective information to be used to select appropriate exercises as interventions. These same tests and measures will be used at the end of the intervention to determine progress and outcomes. All tests and measures must be described in detail so that others could replicate them. State the rationale for the selection of tests and measures. Cite available studies on reliability and validity of measurements. If not available, acknowledge this fact, and provide a presumptive argument for the selection of the test. Quality of life measures can also be included as pre and post assessments.

Intervention:

Describe the exercise intervention, including how it was selected and developed and how it was taught to the client in sufficient detail that others could replicate the exercises. Tables, figures, and appendixes to enhance the detailed description are suggested. Provide the parameters of the intervention (i.e., intensity, frequency, and duration) and rules for progression. State changes in exercises over time, along with the rationale for the changes. List any co-interventions that the patient may have received but that are not directly related to the purpose of the case.

Outcome:

Include outcome measures at the person level (e.g. outcomes related to activity or participation) in addition to any other relevant outcome measures. Priority is given to validated outcome measures. Compare follow-up outcomes to baseline. Use tables and figures to enhance the description. Discuss whether or not the client met their own goals.

Discussion:

Reflect back on how the intervention *may* have assisted in addressing the target problem. This should be done in the context of other co-interventions that may have been provided. The key points of development and application should be tied back to the rationale for the intervention and literature on previous treatment approaches for a similar problem. Discuss the client's satisfaction level with the outcome and plan for the future. Avoid any definitive cause-and-effect statements about interventions. Avoid making definitive generalizations to other patients. Speculate on potential implications for future exercise interventions. Offer suggestions for further research.

References:

Include at least 5 references published within the past 5 years. Use the format as in the example below:

Bansal, S., Katzman, W. B., & Giangregorio, L. M. (2014). Exercise for improving age-related hyperkyphotic posture: a systematic review. *Arch Phys Med Rehabil*, 95(1), 129-140.

REFERENCES for Writing Case Reports:

- APTA, Physical Therapy Journal: *Essentials of Writing Case Reports*, 2014.
http://ptjournal.apta.org/site/misc/ifora_author_assistance.xhtml#tips_tables
- Texas Women's University: *Evidence-Based Practice: Levels of Evidence*
<http://libguides.twu.edu/evidencebasedpractice>