Clinic Case Study Guidelines

Formatting (10%): Reports must be typed (printed or electronically submitted), double-spaced (1.5 acceptable), use approximately a 12-point font, have numbered pages, and include intern name, date, and a title at the top of the first page. All sources must be properly cited, and the report must be checked for grammar, punctuation, & spelling. Information must be presented in the order provided in this rubric.

Case Summary (10%): Minimally includes: patient's sex, age, height, weight, blood pressure, pulse rate, temperature, the reason(s) they sought treatment (chief complaint), and all relevant subjective and objective health information acquired about this patient through inquiry, observation, palpation, listening, and smelling. This includes findings within normal limits (WNL). **DO NOT** include any personal identifying information (e.g., name, address) about the patient to protect confidentiality. You may need to summarize data from multiple patient intake records.

Chinese Medical Diagnosis & Analysis (25%): The diagnosis must be clearly and completely stated prior to the case analysis. The diagnosis should first specifically account for the chief complaint(s), and then comprehensively account for all other known signs and symptoms. The diagnosis you support does **NOT** need to be identical to the patient's clinic chart, since upon careful analysis and with time for reflection, you may form a slightly different or more comprehensive diagnosis. The analysis should detail how the data from the case summary supports the patterns identified, appropriately applying standard diagnostic systems, such as *zangfu* 臟腑 (solid & hollow organs), *jingluo* 經絡 (channels & collaterals), *wuxing* 五行 (five elemental-phases), *liujing* 六經 (six channel-stages), etc. The analysis must demonstrate the intern's ability to independently form a differential diagnosis, and to consider the etiology of the patient's condition (e.g., internal or external) and the relationships between the different patterns diagnosed.

Biomedical Impression (10%): Suggest a standard Biomedical diagnosis from the ICD-10 (include the code), and detail the standard of care including what diagnostic tests would be ordered (e.g., blood test, urinalysis, imaging) and why, treatment (e.g., pharmaceuticals, surgery), the likely outcomes of treatment with a risk-benefit analysis (e.g., potential for cure or adverse reactions), and whether the case is appropriate for referral to another health care provider.

Treatment & Analysis (25%): Summarize what treatments were performed in clinic, including number and frequency. Discuss how the treatments addressed the diagnosis used in clinic. Discuss the functions of the acupoints and medicinals as a prescription (rather than individually), and only detail information that is relevant to this specific case (e.g., don't state an acupoint is good for symptoms the patient doesn't have). REQUIRED: The first time an acupoint is mentioned it must include WHO number, *Pinyin* name, and an English translation, e.g.: LR-3 太沖 (*taichong*, great surging). The first time an herbal formula is mentioned, it must include the *Pinyin* name and an English translation, e.g.: *Mahuang Tang* 麻黃湯 (Ephedra Decoction). All medicinals in the formula (raw or prepared) must be listed with their dosage, and include the *Pinyin* and pharmaceutical name, e.g.: *Mahuang* 麻黃 (Ephedrae Herba), 9 grams. (Chinese characters are optional)

Outcomes & Prognosis (10%): Describe the patient's response to treatment(s) and degree(s) of improvement. Provide a reasonable prognosis for their condition with expectations for continuing treatment frequency and duration that should be communicated to the patient. Discuss any limiting factors to their improvement.

Recommendations & Conclusions (10%): If the patient's chief complaint remains unresolved, provide some suggestions for improving the effectiveness of treatments in the future, especially If the diagnosis supported in the analysis above is slightly different or more comprehensive than the one used in clinic. If the case was resolved, describe what this case taught you that you can apply to future treatments. If only acupuncture or herbal medicine were used in clinic, provide a recommended prescription for any unused modalities. Describe how this case supported your professional growth and developed your clinical skills.