

CORPORATE AND ACADEMIC SERVICES

MODULE SPECIFICATION

Part 1: Basic Data							
Module Title	Injury Assessment and Management 2						
Module Code	UZYS14-30-2		Level	2	Ver	rsion	1
UWE Credit Rating	30	ECTS Credit Rating	15	WBL modu	lle?	No	
Owning Faculty	HAS		Field	AHP			
Department	AHP		Module Type	Standard			
Contributes towards	BSc (Hons) Sport Rehabilitation						
Pre-requisites	UZYS1B-30-1 Injury assessment and management 1		Co- requisites	None			
Excluded Combinations	None		Module Entry requirements	N/A			
Valid From	Sept 2015		Valid to	2021			

CAP Approval Date	30 April 2015
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	Part 2: Learning and Teaching				
Learning Outcomes	On successful completion of this module students will be able to:				
	 Demonstrate knowledge and understanding of relevant anatomy, biomechanics, physiology, pathology and psychosocial/cultural factors impacting upon sporting populations. (Component A) 				
	 Undertake safe, effective and appropriate practice skills, including competent assessment procedures, with reference to a range of sports related injury and musculo- skeletal dysfunction (Component A) 				
	 Deliver safe, effective and appropriate treatment techniques in the management of musculo-skeletal and sports related cases (Component A) 				
	4. Produce evidence of well-supported clinical reasoning based on rational interpretation of available information, ensuring critical engagement with the evidence base in relation to the management of sports injury and musculo-skeletal dysfunction (Component A)				
	 Demonstrate reflective practice to underpin personal and professional development when working with patients with sports injury /musculo-skeletal conditions (Component A) 				
Syllabus Outline	Syllabus Outline:				
	Further development of anatomy and biomechanics of the spine, trunk and pelvis Specific sports related and musculo-skeletal dysfunction in relation to the lumbar				
	thoracic, cervical spine and pelvis.				
	Knowledge and understanding of diagnostic triage and recognition of serious spinal				
	Further development of knowledge of pain models e.g, Pain Gate and further explore				
	the multi- dimensional experience of pain e.g Neuromatrix theory .				

	Development of assessment skills with development of clinical reasoning reasoning in relation to musculoskeletal and sports injury practice e.g. Manual Therapy to include the Maitland Concept, Myofascial trigger point release Exercise prescription to include discussion of movement dysfunction in musculoskeletal problems to include use of motor control and stability exercises, typical recruitment patterns and postural re-education. Inclusion of the Mckenzie approach of repeated movements and group work Further development of assessment in the hand and foot Basic understanding of specific and relevant rheumatological conditions where relevant e.g Ankylosing Spondylitis and osteoporosis Introduction to hydrotherapy Further development of taping application – e.g. use of proprioceptive taping						
Contact Hours	Up to 72 contact hours to usually include up to two 2 hour sessions made up of lectures and practicals /seminars/group work per week over both semester 1 and 2 (17 weeks).						
Learning Methods	 Scheduled learning includes lectures, seminars, practical skills sessions. Lectures provide an introduction and summary of the topic area. Seminars/group work include discussion and use of information provided to support learning. Additionally, students are expected to engage in self study using the resources available on blackboard. A major part of their study time is taken up by preparation for teaching sessions and for the placement experience Independent learning includes hours engaged with essential reading, coursework preparation linking with the management approach selected for review. Use of practical experience gleaned whilst on placements will also be required to support discussion during the module. 						
- Key Information Sets Information	Key Information Sets (KIS) are produced at programme level for all programmes that this module contributes to, which is a requirement set by HESA/HEFCE. KIS are comparable sets of standardised information about undergraduate courses allowing prospective students to compare and contrast between programmes they are interested in applying for.						
	Key Inform	ation Set - Mo	odule data				
	Number of	credits for this	s module		30		
	Hours to be allocated	Scheduled learning and teaching study hours	Independent study hours	Placement study hours	Allocated Hours		
	300	72	228	0	300		
	Written Exam: I Coursework: W Practical Exam practical exam Please note that	Unseen writte ritten assignn : Oral Assess : this is the tot	n exam, open nent or essay, ment and/or pi al of various ty	book written e report, disser resentation, pr rpes of assess	exam, In-clas tation, portfo ractical skills sment and w	ss test lio, project assessment, ill not	

	necessarily reflect the component and module weightings in the Assessment section of this module description:						
	The table below indicates as a percentage the total assessment of the module which constitutes a –						
		Total assessment of the module:					
		Practical exam 100%					
						100%	
Strategy	Petty, N. J. (2 for therapists/ It is also esse functional ana For example: Cael, C. (2010 palpation for r Wilkins Further readir All students a variety of bibli can be access will be given in expected to re Access and si	 I. (2011) Neuromusculoskeletal Examination and Assessment: A Handbook ists4th Ed. London: Churchill Livingstone ssential that students read one of the many texts available in the library on anatomy. ble: 2010) Functional Anatomy: musculoskeletal anatomy , kinesiology and for manual therapists. Oxford: Wolters Kluwer/ Lippincott Williams and ading: ts are encouraged to be able to read widely using the library search, a bibliographic and full text databases and internet resources. Many resources cessed remotely. Guidance to some key authors and journal titles available en in the module handbook and updated. Assignment reference lists are to reflect the range of reading carried out. 					
	Students and si Students are of is available via and journals, offered by the	expected to be able to identify and retrieve appropriate reading. Support ia the library web pages, including interactive tutorials, on finding books evaluating information and referencing. Sign up workshops are also e library.					
Indicative Reading List	The following type and level currency may indicted above updated mech	list is offered on informat wane during current adv nanisms:	d to provide ion students g the lifetime vice on reac	validation p s maybe exp e of the moc lings will be	anels/ accre bected to co lule specific available vi	editing bodie nsult. As sur ation. Howe a other more	es with the ch its ver as e frequently
	Brukner, P. and Khan, K. (2012) <i>Clinical Sports Medicine</i> 4 th Ed. London: McGraw-Hill Medical.						: McGraw-Hill
	 Butler, D. S. and Moseley, G. L. (2013) <i>Explain Pain</i> 2nd Ed. London: Noigroup Comerford, M. and Mottram, S. (2012) <i>Kinetic Control: the management of uncontrolled movement</i>. Edinburgh: Churchill Livingston. Hengeveld, E., Banks, K. and Maitland, G. D. (2005) <i>Maitland's Vertebral Manipulation</i>. 7th Ed. London: Elsevier Butterworth Heinemann. 						
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	Higgs, J., Jon <i>Health Profes</i> November 20	ggs, J., Jones, M., Loftus, S. and Christensen, N. (2008) <i>Clinical Reasoning in the ealth Professions</i> . 3 rd Ed. [Online] London: Butterworth Heinemann. [Accessed 21 povember 2014].					
	Hudson, Z. (2 <i>to play</i> . [Onlin	011) <i>Mana</i> g e] London: (<i>ing the Injul</i> Churchill Liv	red athlete: ingstone. [A	assessmen accessed 21	<i>t, rehabilitati</i> November :	on and return 2014].
	Sahrmann, S. Oxford: Mosb	(2002) Diag y.	gnosis and t	reatment of	Movement	Impairment	Syndromes.
	Vicenzino, B.,	Hing, W., R	livett, D. and	d Hall <u>, T. (</u> 20	011) <u>Mobi</u> lis	ation with M	ovement: The

art and the science. London: Churchill Livingstone. Elsevier
Professional codes of conduct are available via the BASRaT
website:www.basrat.org

Part 3: Assessment					
Assessment Strategy	Strategy: Integration of theory and practice is an essential part of this module, both aspects are requirements for the module assessment. Ability to problem solve and decision make under pressure will be tested in the practical examination. Component A: Practical exam under controlled conditions - maximum time of 40 minutes - A 'seen' scenario (related to the spine) where assessment and treatment skills will be assessed to include both manual therapy and exercise prescription skills by a single examiner as in clinical practice. Equity and parity will be achieved as students will have access to the same 'scenarios' and will have an opportunity to perform a formative assessment where documented feedback will be available.				

Identify final assessment component and element	Compone	ent A				
% weighting between components A and B (Standard modules only)			B:			
First Sit						
Component A Description of each element		Element v	veighting			
Practical Assessment – 40 minutes maximum			00			

Resit (further attendance at taught classes is not required)				
Component A	Element weighting			
Description of each element				
Practical Assessment – 40 minutes maximum	100			
If a student is permitted a retake of the module under the University Regulations and Procedures, the				

assessment will be that indicated by the Module Description at the time that retake commences.