

Subject Description Form

Subject Code	BME42135
Subject Title	Spinal Orthotics
Credit Value	3
Level	4
Prerequisite and Co-Requisite	<p><u>Prerequisites</u> ABCT2331 Human Biology for Biomedical Engineering I; and ABCT2332 Human Biology for Biomedical Engineering II; and BME21119 Fundamentals of Biomechanics</p> <p><u>Co-Requisite</u> BME31125 Biomechanics</p>
Objectives	<p>This provides students with the principles and practical laboratory experiences in the prescription, design, fabrication, fitting, and evaluation of orthotic devices. The series progressively integrate the health and engineering studies, which the students have taken as part of their academic studies. Those academic studies will form the basis for the derivation of the scientific principles used in the practice of spinal orthotics.</p>
Intended Learning Outcomes	<p>Upon completion of the subject, students will be able to carry out the following procedures, in a safe manner, according to the patients' conditions.</p> <ol style="list-style-type: none"> a. To assess the patients b. To prescribe orthotic interventions c. To take measurement on the patients d. To design appropriate orthotic devices e. To perform the technical process f. To fit the orthoses g. To evaluate the interventions h. To communicate with the patients effectively
Contribution to Programme	<ul style="list-style-type: none"> ▪ Programme Outcome 1: Demonstrate an ability to apply knowledge of mathematics, science, and engineering appropriate to the Biomedical Engineering (BME) discipline. (Teach, Practice and Measure)

<p>Outcomes (Refer to Part I Section 10)</p>	<ul style="list-style-type: none"> ▪ Programme Outcome 3: Demonstrate an ability to design a system, component, or process relevant to BME to meet desired needs within realistic constraints, such as economic, environmental, social, political, ethical, health and safety, manufacturability and sustainability. (Teach and Practice) ▪ Programme Outcome 4: Demonstrate an ability to identify, formulate, and solve BME problems. (Teach, Practice and Measure) ▪ Programme Outcome 9: Demonstrate an ability to function in multi-disciplinary teams. (Teach, Practice and Measure) ▪ Programme Outcome 10: Demonstrate an understanding of professional and ethical responsibility. (Teach, Practice and Measure)
<p>Subject Synopsis/ Indicative Syllabus</p>	<ul style="list-style-type: none"> ▪ Review of the anatomy, biomechanics and pathomechanics of the spine and trunk; ▪ Principles and concepts of clinical assessments of the spine; ▪ Use of assessment tools for recognizing normal and abnormal findings of the spine; ▪ Clinical reasoning in assessment, diagnosis, planning, implementation and evaluation of the spine disorder and management; ▪ Introduction to spinal orthotics; materials and components; biomechanics of spinal orthotics; spinal orthoses for different levels, disorders and clinical conditions; ▪ The clinical assessment, documentation, measurements, moulding, cast rectification, fabrication, fitting, checkout and outcome measure of spinal orthoses are included.
<p>Teaching and Learning Methodology</p>	<p>The 21 hours of lectures and tutorials will be supported by 39 hours of demonstrations and laboratory teaching. The subject is to integrate the theoretical knowledge and the technical skills in a way that is important to patient care and management. Students will need to go through step by step the clinical process of patient assessment, patient measurement, casting, cast rectification, fabrication, patient fitting, and patient evaluation. Besides the development of technical skills, emphasis is placed on the development of clinical judgement and the process of clinical problem solving. Direct feedback from the patients/subjects at various stages, as well as from the instructors throughout the process, would constitute important inputs to the learning experience. In the process, students will also learn how to interact with the patients. At the end of a practical series, students will be guided to critique the work of other fellow students under the facilitation of the instructor. This is done to maximize the learning experience by learning not only from one's own mistakes but also from those of the fellow students.</p>

Assessment Methods in Alignment with Intended Learning Outcomes	Specific assessment methods/tasks	% weighting	Intended subject learning outcomes to be assessed (Please tick as appropriate)							
			a	b	c	d	e	f	g	h
	Student presentations	10%	√	√		√			√	
	Practical assignments	30%	√	√	√	√	√	√	√	√
	Quizzes	20%	√	√	√	√			√	
	Final examination	40%	√	√	√	√			√	
	Total	100%								
<p>Note: To pass this subject, students must obtain grade D or above in both continuous assessment and final examination.</p> <p><i>Explanation of the appropriateness of the assessment methods in assessing the intended learning outcomes:</i></p> <p>Each of the individual learning outcomes will be assessed as part of the integrated outcome demonstrated by the student in patient care. Individual orthotics design and fitting projects will be assessed with direct feedback from the model patients/subjects at various stages, as well as from the instructors throughout the process. In the process, students will also learn how to interact with the patients. At the completion of assigned individual projects, students will be guided to critique the work of other fellow students under the facilitation of the instructor. This is done to maximize the learning experience by learning not only from one's own experience but also from those of the fellow students. A final examination will be used to establish that the student has understood and can integrate the factual materials required to provide spinal orthotic services.</p>										
Student Study Effort Expected	Class contact:									
	▪ Lecture		18 Hrs.							
	▪ Tutorial		3 Hrs.							
	▪ Demonstration and laboratory		39 Hrs.							
	Other student study effort:									
	▪ Open laboratory practice		39 Hrs.							
	▪ Written assignment and revision		39 Hrs.							

	Total student study effort	138 Hrs.
Reading List and References	<ul style="list-style-type: none"> ▪ Berger N., Edelman J., Fishman S., Krebs D. and Springer W., Spinal Orthotics Manual (NYU), 1983. ▪ Blount W.P., The Milwaukee Brace, Williams and Wilkins, 1980. ▪ Bowker P., Condie D.N., Bader D.L. and Pratt D.J., Biomechanical Basis of Orthotic Management, 1993. ▪ Bradford D.S., Lonstein J.E., Moe J.H., Ogilvie J.W. and Winter R.B., Moe's Textbook of Scoliosis and Other Spinal Deformities, 1987. ▪ Cailliet R., Scoliosis: Diagnosis and Management, 1975. ▪ Hsu J.D. and Goldberg B. Atlas of Orthoses and Assistive Devices, 2008. ▪ James J.I.P., Scoliosis, 1976. ▪ Lusardi M. M. and Nielsen C. C., Orthotics and Prosthetics in Rehabilitation, Butterworth Heinemann, 2000. ▪ McRae R., Clinical Orthopaedic Examination, 1990. ▪ Redford J.B., Basmajian J.V. and Trautman P., Orthotics: Clinical Practice and Rehabilitation Technology, 1995. ▪ Patwardhan A.G., Scoliosis: Making Clinical Decisions, 1989. ▪ Seymour R., Prosthetics and Orthotics: lower limb and spinal, Churchill Livingstone, 2002. ▪ Shurr D.G, Michael J.W., Prosthetics and Orthotics, Prentice Hall, 2002. ▪ Spinal Orthotics for Orthotists, Prosthetic-Orthotic Center, Northwestern University Medical School, 1996. ▪ Sponseller P.D. and Stevens H.M., Handbook of Paediatric Orthopaedic, 1996. ▪ White III A.A. and Panjabi M.M., Clinical Biomechanics of the Spine, 1990. 	
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