



How to pass the ABPTS Clinical Specialist Exam the First Time

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Board certified in Women's Health and Pelvic Floor Dysfunction Biofeedback



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Elizabeth "Beth" Shelly, PT, DPT, WCS, BCB-PMD

- In the field of women's health for over 35 years.
- 2004 Board Certified practitioners in Pelvic Muscle Dysfunction Biofeedback (PMD BCB)
- 2010 board certified in Women's Health Clinical Specialist (WCS) , renewed 2020
- Taught many long and short courses all over the world to PT, OT, RN, NP, and MD
- Authored over 15 chapters in text books in the field of pelvic therapy and women's health. Beth is the women's health editor for both "Pathology for Physical Therapists" and "Differential Diagnosis for Physical Therapists" text books.



**Elizabeth "Beth" Shelly,
PT, DPT, WCS, BCB-PMO**

- 2010 Beth started the Pelvic PT Distance Journal Club which now has over 1000 members all over the world and presents journal reviews monthly in English and Spanish.
- **Disclosure** - For many years Beth has mentored those studying for the WCS exam and has developed many recorded study and educational programs for WCS preparation.
- She has an active private practice in Moline, IL seeing all types of pelvic dysfunction and lymphedema.



**Elizabeth "Beth" Shelly,
PT, DPT, WCS, BCB-PMO**

- I do not and have never worked / volunteered for ABPTS or APTA
- I do not and have never written exam questions for any specialization exam
- I will not discuss any specific questions or test content
- And request everyone on the call follow the same mandate from ABPTS



Course Objectives

- Understand the expert practitioner thought process
- List the levels of exam questions and how to apply them to study techniques
- Describe techniques of study for specialist examination
- Introduce methods to create study schedule and study format for successful completion

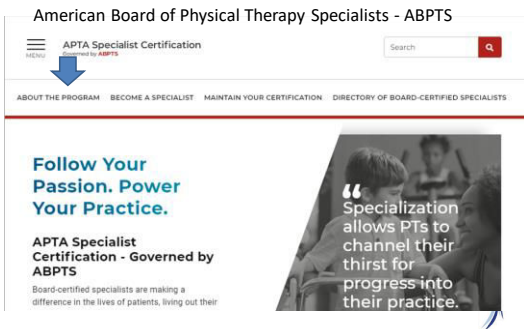


Outline

- ABPTS resources
- What does a clinical specialist look like?
- Level of test questions
- Qualities of expert thought process and differential diagnosis
- How to structure study and start a study group
- What to study and what not to study - articles, books, web sites
- How to study for Professional expectations section
- Panel discussion with other specialists



<https://specialization.apta.org/>



About the Program

- Mission
- Vision - The American Board of Physical Therapy Specialties will create, promote, and sustain a culture in which the highest-quality physical therapy is provided by therapists who attain and maintain certification in a specialty area.
- Purpose
- About Specialist Certification



About Specialist Certification

- <https://specialization.apta.org/about-specialist-certification>
- The specialist certification program was established to
- formally recognize physical therapists with advanced clinical knowledge, experience, and skills in a special area of practice
- and to help consumers and the health care community identify these physical therapists.
- Path to specialization – view slides



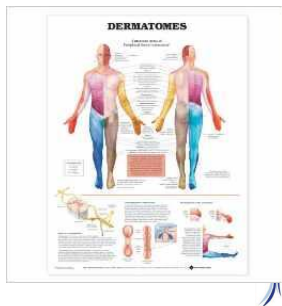
Clinical Specialization (1)

- American Physical Therapy Association (APTA) established a specialist certification program in 1978
- Recognizes a PT for their knowledge, skills, and experience in a specific field, beyond that of an entry-level PT



Wound Specialist

- Would need to know dermatomes and peripheral nerve distribution
- In order to answer a question about the possible origin of numbness in a case scenario



ABPTS Certification Recognizes (1)

- Broad based foundation of physical therapy education and clinical practice
- Depth and breadth of knowledge in a specialty area
- Advanced clinical expertise and skills



10 Board Certifications (1)

- 1985 Cardiovascular Pulmonary
- 1986 Clinical electrophysiology, Pediatrics
- 1987 Neurological, Sports
- 1989 Orthopedics
- 1992 Geriatrics
- 2009 Women’s Health
- 2019 Oncology
- 2022 Wound management



10 Board Certifications (2020) (2)

- Cardiovascular and Pulmonary - 378
- Clinical Electrophysiology - 204
- Geriatrics – 3,316
- Neurology – 3,401
- Oncology - 105
- Orthopedics – 17,318
- Pediatrics – 2,205
- Sports – 2,564
- Women’s Health - 550
- Wound Management - 0



What PTs say they received from going through the process (1)

- Sense of personal achievement
- Increased credibility with patients & referral sources
- Recognition in clinical, academic and community settings
- Self-confidence & professional growth
- Patient care, including better outcomes



<https://specialization.apta.org/>

APTA Specialist Certification
Governed by ABPTS

ABOUT THE PROGRAM | BECOME A SPECIALIST | MAINTAIN YOUR CERTIFICATION | DIRECTORY OF BOARD-CERTIFIED SPECIALISTS

Follow Your Passion. Power Your Practice.

APTA Specialist Certification - Governed by ABPTS

Board-certified specialists are making a difference in the lives of patients, living out their

“Specialization allows PTs to channel their thirst for progress into their practice.”

Access to Specialty Specific Information

APTA Specialist Certification
Governed by ABPTS

Search

About the Program

- ABPTS Board
- ABPTS Specialty Councils
- ABPTS Certified-Specialists Statistics
- ABPTS Policies and Procedures
- APTA Specialization History
- Process for Establishing a New Specialty Area

Become a Specialist

- Specialist Certification Examination Resources
- Cardiovascular & Pulmonary
- Clinical Electrophysiology
- Geriatrics
- Neurology

Maintain Your Certification

Maintenance of Your Specialist Certification (MOSC)

- MOSC Requirement 1
- MOSC Requirement 2
- MOSC Requirement 3
- MOSC Requirement 4
- Recertification to MOSC Timeline
- Recertification for Certified Specialists
- Emeritus Designation Option

For Certified Specialists

- Volunteer
- Volunteer as a Specialty Council Member
- Volunteer as an ABPTS Board Member
- Promote Your Specialization

Exam Tutorial page - Test format

- Four blocks of questions
- 90 minutes each block with optional 50 min break for lunch
- Each block has 50 questions for a total of 200 questions
- Case scenarios, videos, and pictures
- Questions either stand alone or are part of a series related to a case study
- Multiple choice with 4 or 5 answers
- The testing session is 7 hrs



“Access the exam tutorial”

The American Board of Physical Therapy Specialties

The examination tutorials and sample questions are provided to help you familiarize yourself with the navigation and functionality of the ABPTS computerized examinations. The sample questions are not representative of exam difficulty, and the presentation of these practice examinations may have minor variations compared with the examination presentation on your testing day.

For best results, please launch this link in a Chrome browser.

Examination Orientation

- Cardiovascular and Pulmonary Sample Items
- Clinical Electrophysiologic Sample Items
- Geriatric Sample Items
- Neurologic Sample Items
- Oncologic Sample Items
- Orthopaedic Sample Items
- Pediatric Sample Items
- Sports Sample Items
- Womens Health Sample Items

January
Activity

Answer Strategy

- No penalty for incorrect responses
- Test scores are based on the actual number of questions answered correctly
- Do not leaving any question blank
- There is only one BEST answer for each question
- Become familiar with how to move around the software using the tutorial



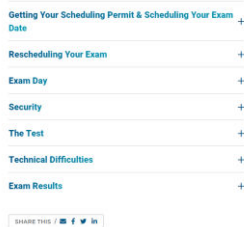
Test Development

- <https://specialization.apta.org/about-specialist-certification/exam-development>
- Takes about 1-2 years for a question to be placed on the exam
- Questions are continuously being evaluated and updated
- Exam scoring - not as simple as you would think



Important exam day tips and guidance

- <https://specialization.apta.org/become-a-specialist/exam-specialty-resources/exam-day>



Check ABPTS Site for Details

- Application submission deadline **July 1-31**
- Initial certification exam fee deadline **Nov 30**
- Scheduling Permits will be issued **January 1, 2022**
- Examination window is **February 26, 2022 through March 12, 2022**
- Results of Exam available **early July 2022**



Two Important Documents – study in detail

Description of Specialty Practice (DSP)



Candidate Guide



Candidate Guide

- Application process
- Scheduling and preparing for the exam
- Sitting for the exam
- Sample questions
- <https://specialization.apta.org/become-a-specialist/candidate-guide>

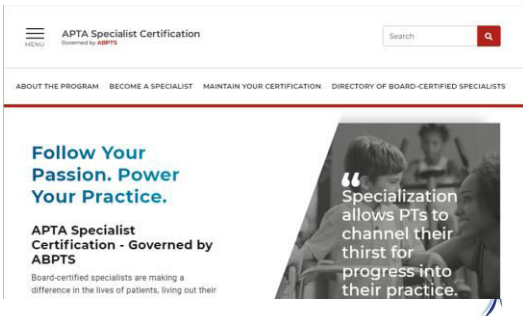


Description of Specialty Practice (DSP)

- The test is designed to objectively measure the application of advanced knowledge and skills required of physical therapy clinical specialists as described in the *Description of Specialty Practice (DSP)* for each specialty area.
- It will be sent to you for free when you are approved to sit for the exam.
- Can be purchased from APTA - in the store for \$30. Well worth having it now.



<https://specialization.apta.org/>



What Does a Specialist Look Like?

- The “go to” person for difficult patients.
- The person who "sees" the patient's problem quickly and is usually correct.
- They know a lot of basic science (ie bits of information). Can apply to patient care.
- They are usually involved in administration in some way - research, publications, marketing, mentoring, teaching.



Expert Practice in Physical Therapy – Jensen 2000 (3)

- Studied 12 experts
- Nonparticipant observation, interviews, review of documents, and analysis of structured tasks
- Four dimensions of an expert PT
- A dynamic, multidimensional knowledge base that is patient-centered and evolves through therapist reflection



Specialist / Specialty

- Specialty - a area of study, or skill to which someone has devoted much time and effort
- Specialist - a person who concentrates primarily on a particular subject or activity; AND has become highly skilled in a specific and restricted field
- You are treating in a specialty field but that does not make you a specialist.



The Process of Being a Better PT

- Diligent practice
- Continued study
- Clinical experience
- Skills increase and quality of care improves.



Informal Survey of WCS Candidates (4)

- How many years have you been working in the field of women's and pelvic health?
 - less than 3 years **7.5%**
 - 3.5 to 6 years **25%**
 - 6.5 to 10 years **30%**
 - 10.5 to 15 years **15%**
 - more than 15 years **22.5%**



Informal Survey of WCS Candidates (4)

- Do you have any other advanced certificates or training?
 - Other ABPTS board certifications (OCS, SCS, GCS, etc) **2%**
 - BCB PMD, CLT **10%**
 - CAPP, PRPC **55%**
 - Residency, master's, or doctoral work in women's health or pelvic therapy **7.5%**
 - **None 25%**



Informal Survey of WCS Candidates (4)

- What other activities have you participated in?
 - Teaching CEU or university courses in women's health **22.5%**
 - Supervising students in women's health **42.5%**
 - Volunteer position in professional organization in women's' health **10%**
 - Research or writing in women's health or pelvic therapy **5%**
 - Other activities outside patient treatment in women's health or pelvic therapy **20%**
- Most reported more than one



What Does a Specialist Look Like?

- Not the most significant for passing
 - Number of years you have been in the specialty
 - Other advanced certificates
- Specialists do participate in a number of activities outside patient care



This Test Designates

- Those with advanced knowledge and thought process. Analysis level
- Those who can practice independently, without referral safely and effectively.
- Those who can screen for diagnosis and conditions which should be referred to other professionals and then know what those professionals might do.



Level of Questions

Difficulty for Specialization exam (5)

- In order of increasing difficulty
 - Knowledge
 - Comprehension
 - Application
 - Analysis / synthesis



Knowledge (5)

- Lowest level of question difficulty (easiest)
 - Requires recall of specific bits of information
 - Questions assume competency in knowledge base
 - Learned by rote memory, flash cards, acronyms, etc
 - Dermatomes / peripheral nerve distributions, physiological changes of pregnancy
 - Very limited knowledge questions will be on the exam
 - Knowledge questions will generally be asked within patient scenario



Knowledge - JM

- JM is a 18 yo female who arrives for a athletic screening of anterior shin pain
- She is a skilled ballet dancer and has been dancing for 10 years
- Anterior skin pain could be:
- Tibialis anterior strain – shin splints
- Tibial stress fracture
- Compartment syndrome



Comprehension (5)

- An ability to understand the **meaning** or importance of something
- Understand significance of facts, terminology, or knowledge
- What are the implications of the information?
- Why is this information relevant?
- Example – what is the importance of the age in the example JM



Comprehension - JM

- No numbness or decreased strength – except pain limited resisted dorsiflexion
- Palpation of the leg shows sharp pain at the tibial bone with minimal tenderness at the muscle
- No neurological signs
 - Not compartment syndrome
- No myalgia
 - Not shin splints
- Sharp bone pain
 - Signs of tibial stress fracture



Application (5)

- Slightly higher thinking skills required
- The real-world implications of what you learned in class or read in a book.
- How that information can be used in clinical practice.
- Questions based on relevance, implications, or significance applied to familiar or unfamiliar scenarios - problem solving
- Application of rules, theories, or guidelines to clinical situations
- Comprehended knowledge must be manipulated, altered to fit case
- Clinical guideline of PGP in pregnancy in a patient with MS



Application - JM

- Possible tibial stress fracture in a young dancer
- Request X-Ray and orthopedic assessment
- Provide crutches to decrease weight bearing
- Decreasing weight bearing exercises – swimming



Analysis / Synthesis (5)

- Highest level of question difficulty
 - Interpretation of variety of factors and understanding of differences, similarities, and interrelationships among concepts
 - Require analysis of anatomical, physiological, pathological, psychological, pharmacological, administrative, etc.
 - Factors must be examined in light of the scenario



Analysis / Synthesis - JM

- On further questioning; patient has not had a menstrual cycle for 2 years
- She is visibly underweight
- Her mother accompanies her and says all "this" will have to be discussed with her dance coach
- Female athlete triad should be considered with more assessment of other components and consultation with other providers
- Loads of education for patient, mother, and coach



Level of Questions

Difficulty for Specialization exam (5)

- Application to Study
 - Knowledge – flash cards, outlines, charts

- Be purposeful to practice in the clinic
- Comprehension – what does information mean
 - Application – how to apply it to a patient
 - Analysis / synthesis – manipulating many factors



Overall success in passing the Clinical Specialist examination requires

- Knowledge - breadth, depth and organization
- Advanced thought process - analysis and synthesis



Clinical Reasoning in PT - Huhn 2018 (6)

- “The complex, contextual, and evolving nature of clinical reasoning limits our ability to define it”.
- Working description of concepts
 - **Cognitive**
 - Psychomotor
 - Affective
 - **Reasoning Strategies (Adaptive, Iterative, and Collaborative)**
 - Biopsychosocial Approach to Patient Management



How to Achieve Advanced Thought Process

- Collaborative and reflective clinical reasoning
- Differential diagnosis (7)
- Metacognition (8)



Collaborative and Reflective Clinical Reasoning

- Forward reasoning – pattern recognition and altered the evaluation in response to patient needs.
- Backward reasoning – systematic negating or supporting hypothesis



Purpose of Differential Diagnosis (7)

- Rule out serous pathology - red flags, referral to other professionals
- Identify conditions that require caution - yellow flags
- Identify the specific tissue involved and the stage of the condition - for treatment planning and prognosis



Metacognition (8)

- Awareness of one's own thinking process – thinking about your thinking
- Internal reflection leading to external articulation
- Student and the mentor think out loud during clinical assessment and treatment
- Challenge yourself as an instructor would to justify each thought



How to Achieve Advanced Thought Process

- Collaborative and reflective clinical reasoning
- Differential diagnosis (7)
- Metacognition (8)



Where to Start

- Document of Specialty Practice (DSP) / self assessment guides - lists all knowledge and skill expected of an expert in the field.
- The list is very long and it is easy to become overwhelmed.
- Start in the section you feel most prepared and notate where you feel you have a good knowledge.
- Gradually work through the document and identify which topics you need the most work on and which can be briefly reviewed.



Informal Survey of WCS Candidates (4)

- Scope of the test
 - So much to cover
 - Definitely look at the DSP for all content covered
 - Be well rounded
 - Variety of clinical experience in the specialty
 - Understand how to read a research paper



Next Step

- Creating a schedule of topics to study.
- Set aside a number of hours every week to read and study - stick with it.
- Having a study buddy or a group helps many to stay focused and support each other.
- Meet together in person or virtual 1 or 2 times per week.
- Purchase a structured study program



Informal Survey of WCS Candidates (4)

- Passes on the first sitting - 87.5%
- When did you BEGIN studying for the exam?
 - Before Aug 1 20%
 - Between Aug 1 and Sept 30 30% - 7 m, 28 weeks
 - Between Oct 1 and Dec 31 42.5% - 5 m, 20 weeks
 - After Dec 31 7.5%



Informal Survey of WCS Candidates (4)

- How often did you study on average? include all methods
 - 1 to 3 hrs per week 32%
 - 4 to 8 hrs per week 50%
 - 9 to 12 hrs per week 10%
 - More than 13 hrs per week 7.5%



Informal Survey of WCS Candidates (4)

- How did you study?
 - Most combined group and individual study
- What did you study?
 - Most mention course work, text books and articles
 - Review of previous course manuals – 7
 - Mentor – 8



Informal Survey of WCS Candidates (4)

- Timing
 - Start early
 - Recommend starting one year in advance - 2
 - Start months in advance and leave yourself enough time
- Schedule
 - Studying two weekends a month with a partner
 - Weekly phone meeting
 - Stick to a schedule, setting aside specific times for studying, an organized group is a great way to stay disciplined



Your Study Style

- Everybody learns differently.
- Discover your learning style (auditory, visual, kinesthetic).
- Use as many different techniques as possible.
- ABPTS site has some resources on learning style and study habit in general.
- <https://specialization.apta.org/become-a-specialist/exam-specialty-resources>



Informal Survey of WCS Candidates (4)

- Study process
 - Assign topics for the next meeting and then teach them to each other - 3
 - Study group or study partner - 4
 - Discuss patient care scenarios with another specialist PT's
 - Complete the self assessment and read a lot
 - Just use what study habits worked for you in school and give yourself time to go through the material twice fully
- Mentor
 - Pursue study resources from a mentor
 - Worth having a mentor - 2
 - Review test taking skills, and get practice questions when able



Study Methods

- Only reading articles rarely leads to success. Here are some ideas
- Teach - critical thinking improves with teaching and mentoring others.
 - Teach a class at the local University.
 - Teach rounds at your hospital.
 - Mentor one of the other PTs in your specialty.
 - Mentor students in any aspect of PT.



Study Methods

- For knowledge topics make
 - Charts
 - Lists
 - Outlines
 - Flash cards
 - quizlet.com - online quiz

Patient number	Age	Year	Reason for referral	Drug history	Treatment changes	Treatment at discharge
1	42	2010	decreased oxygen saturation	no cardiac Rx 10mg fentanyl 10mg lorazepam	increased to 10mg fentanyl 10mg lorazepam 10mg morphine 10mg lorazepam	no cardiac Rx 10mg fentanyl 10mg lorazepam
		2011	decreased oxygen saturation decreased oxygen saturation decreased oxygen saturation	no cardiac Rx 10mg fentanyl 10mg lorazepam	increased to 10mg fentanyl 10mg lorazepam 10mg morphine	no cardiac Rx 10mg fentanyl 10mg lorazepam



Study Methods

- Have discussions with other specialists about clinical decision making - journal club, study buddy or college, facebook
- Treat as many patients with different diagnosis as you can
- Observe other PTs treating diagnoses you do not have a lot of skill with.
- Study groups



WCS Study Schedule - long

- General Ortho – tests, evidence for treatment, neuropathies, fibro – 2 weeks
- Pelvic pain - 2 weeks
- Female athlete, ACL - 1 week
- Obstetrics (ante- and post-partum) - 2 weeks
- Menopause - 1 week
- Osteoporosis - 2 weeks
- Lymphedema - 2 weeks
- Breast cancer and surgeries, Wound healing - 1 week
- Urinary Incontinence, male, pedi, neuro, elderly - 1 week
- Colon/rectal - 1 week
- Pelvic organ prolapse - 1 week
- Surgeries (pelvic), Pelvic cancers - 1 week
- Administrative, professional expectations – 1 week
- Case study questions, review - 4 weeks

• 22 weeks



WCS Study Schedule - short

- Obstetrics – 3 wks
- Pelvic Floor – 1 wk
- Chronic Pelvic Pain – 3 wks
- Incontinence – 3 wks
- Osteoporosis - 2 wks
- Lymphedema – 3 wks
- 15 weeks



Courses

- Remember that there is not a require course set or course process to sit for specialist exam
- More than just a course series is needed
- Adjunctive course work covering a large range of topics is needed
- Allied Health Education and others have a large bank of course for a very reasonable price - OCS study courses can help also



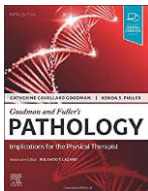
Courses

- Attend large meetings and take courses live, on line, home study
- Residency and formal advanced clinical practice mentoring are also a good option where available
- Consider courses when there is a large section you have little experience or knowledge in



Text Books

- Pathology: Implications for the Physical Therapist (9)
- By Goodman and Fuller
- Differential Diagnosis for Physical Therapists: Screening for Referral
- by Goodman, Heick and Lazaro (7)



Individual Papers, Articles

- It takes about 1-2 years to create a question. This means that a cutting edge idea or technique is not likely to be on the test. Reading current research is always helpful but if you want to maximize your study time should not spend all your time reading individual articles.
- Meta analysis, systematic reviews, literature reviews
- Position statements, clinical guidelines



Parts of the Test

- Each Candidate guide outlines them slightly differently
- Most common
 - Knowledge - background
 - Practice – patient and client management
 - Professional roles and responsibilities / Professional expectations



Section Three of the Test

- Professional roles and responsibilities
- Professional practice expectations
- WCS 25% of the test



Professional Expectations

- Communication with all groups, PT, patient, other medical professionals
- Education - patient classes, mentor other specialist PT, teach other professionals
- Consultation - act as a consultant for others in the practice
- Professional development - stay current with practice



Professional Expectations

- Evidence based practice - must know research terms, how to read a research paper and apply to clinical practice
- Critical inquiry and clinical decision making
- Prevention / wellness/ health promotion - develop and implement wellness classes and treatments



Professional Expectations

- Ethics and Professionalism - APTA
 - <https://www.apta.org/your-practice/ethics-and-professionalism>
 - APTA professional standards of practice
 - APTA code of conduct
 - Read APTA PT in motion
- Legal issues in specialty area



Professional Expectations

- Abuse courses (search of APTA site) – social reasonability
 - <https://www.apta.org/search?q=abuse>
- Cultural sensitivity course - cultural differences, religion, sexuality
 - <https://www.apta.org/article/2021/01/15/race-and-ethnicity-resources>



Professional Expectations

- Administration - Hiring and supervising issues, Infection control
- Risk management - informed consent, PTA issues, staffing, reimbursement, marketing
- Leadership



Overall success in passing the Clinical Specialist examination requires

- Knowledge - breadth, depth and organization
- Advanced thought process - analysis and synthesis



Summary



- Review ABPTS website, DSP, and candidate guide
- Apply/Renew APTA membership for discount courses and free web content
- Use DSP to identify strengths and weaknesses
- Set realistic timeline and goals – stick to them
- Don't forget Professional Expectations section





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Clinical Specialist Panel

- Jeb Helms PT, SCS, OCS
- Chad Swank PT, PhD, NCS
- Stacey Millar PT, DPT, GCS



Clinical Specialist Panel

- Please share any study resources you know of for your specialization exam.
- Do you know of any statistics on study process for your specialty?
- Do you know percentage of pass / fail?
- Name one broad category that you feel should be included in study for your specialty and please share any general helpful tips that you may have for practitioners in preparation for the exam.