



## CVPP Extended Case Study Guidelines

1. The case studies should involve patient care delivered during the five-year period preceding the application date. They may pertain to perioperative, major acute medical or traumatic, or chronic pain management. The cases must present different pain related scenarios and should employ a well-structured, balanced analgesic strategy. They should reflect a coherent, cogent thought process regarding pain management, and patient assessment and management. The case studies should be of the caliber that they could be considered for publication in a peer reviewed journal such as JAVA or other peer reviewed journals indexed in Pubmed. Grammar, punctuation and spelling should be on a level consistent with that of a professional journalist.
2. Cases will be scored by two (2) independent evaluators. The evaluations will be reviewed and compiled by an editor. The editor will also serve as the third evaluator in if the two evaluations have very divergent reviews. All evaluators and editors will be blinded. Cases will be graded numerically and scores below 80% will yield a “FAIL, SUBMIT NEW CASE” designation. Those scoring 80% and above will be designated as “PASS, PASS WITH CLARIFICATION (PWC) or PASS WITH REVISION (PWR)” at the discretion of the evaluator. The evaluators may also choose to allow revisions on a “FAILED” case if they feel that the case is salvageable. The review criteria is the same for all applicants.
3. Case report format (in order) is as follows:  
**Cases NOT following this format will not be accepted; failure to follow these guidelines is considered a “Fatal Flaw” and will be returned as such.**

The case studies must be in English, typed in 12-point font, Times New Roman, double spaced. Case studies are limited to 10 pages for the body of the report. There may be one (1) title page, up to two (2) pages for references and up to two (2) “appendix” pages beyond the 10 pages of the body of the report. Include the Applicant Registration Number in the upper right hand corner of the page (you can do this by inserting it into the “Header” of the document, found under the “Insert” tab in the Word document tool bar).

- a. **Cover Page:** To include the following:
  - Title
  - Case Number (1 or 2)
  - Applicant Registration Number
- b. **Introduction:** Should be on a separate page and state the type of pain management case featured in the report, a brief listing of therapeutic modalities and/or pharmaceuticals used and the outcome. The IVAPM looks favorably upon an integrated, multidisciplinary/multimodal approach to the management of pain This could include the use of physical modalities such as physical rehabilitation, physiotherapy, acupuncture, etc., in addition to pharmacologic interventions.
- c. **Clinical Report:** Should consist of signalment, clinical history, physical exam findings, subjective assessments, and objective assessments including measurements, diagnostic findings, etc. A detailed description of the pain management protocol employed including all therapeutic modalities and/or pharmaceuticals (to include dosages and references), and responses to therapy.

- i. All doses must be given in mg/kg, not mls
- ii. All laboratory data should be formatted in a table
- iii. Use of a pain or disability scale is required  
**Failure to include a subjective pain scale as a means of evaluating therapy is considered a "Fatal Flaw" and the case will not be accepted.** There are numerous scales to choose from, including but not limited to the following:
  1. Glasgow Composite Measures Pain Scale (GMPS)
  2. Canine Brief Pain Index (C-PBI)
  3. Colorado State University Acute Pain Assessment
  4. Feline Chronic Pain Index (FCPI)
- d. **Clinical Outcome:** Should be a subjective and objective response to therapy (use of a pain or disability scoring system required). In chronic pain patients include recommended long-term pain management.
- e. **Discussion:** This is the author's subjective critique. It can include rationale for use of analgesics and physical modalities based on the physiologic character of the pain being managed. Critical evaluation of patient care, deficiencies and areas of possible improvement in case management should be included here as well.
- f. **Summary:** Provide an interpretive summary of the case report.
- g. **References:** Must be included for all information derived from texts or search of pain related literature. They should be placed as endnotes to the document using numeric superscripts within the body of the report. References may include standard reference texts, online reference material (e.g. [www.ivis.org](http://www.ivis.org) , [www.vin.com](http://www.vin.com)), published conference proceedings and peer review literature as indexed in Pubmed ([www.pubmed.org](http://www.pubmed.org) ). References MUST include page numbers. Authors may not simply list a book or webpage for numerous references. List the pages (or section for webpages) for each reference. Evaluators should be able to follow a reference to its source to verify it.

These case studies are meant to give applicants the opportunity to showcase the superior knowledge of pain and the methods to manage/prevent it that would be expected of a Certified Veterinary Pain Practitioner. While medical or surgical management of a case is indeed important, it should not be the focus in this instance. The applicants should instead compose cases that represent multimodal pain management, perioperative pain minimization and/or evolving treatments to deal with progressive pain in chronic cases.