## Mapping of Sample Written Component Questions to the PCE Blueprint

Sample Questions Vignette for items 1 - 3		PCE Blueprint 2018 1		PCE Blueprint 2009	
		A 3-month-old baby boy with a diagnosis of congenital muscular torticollis requires physiotherapy in an out-patient department.			
1.	of the left sternocleidomastoid muscle. Which of the following positions would the baby most probably maintain his head in?	Area of Practice Condition	Musculoskeletal 01.01.14 Congenital malformations (e.g., talipes equinovarus, hip dysplasia)	Area of Practice Condition	Neuromusculoskeletal 01.01.14 Congenital malformations (e.g., talipes equinovarus, hip dysplasia)
	<ul> <li>A. Right lateral flexion and rotation to the right.</li> <li>B. Right lateral flexion and rotation to the left.</li> <li>C. Left lateral flexion and rotation to the left.</li> <li>D. Left lateral flexion and rotation to the right.</li> </ul>	Domain Entry-to-Practice Milestone	Physiotherapy Expertise 1.4.2 Identify client's body structure and function impairments, activity limitations and participation restrictions.	Function Code	Assessment & Evaluation 02.01.02.03 Examine and evaluate neuromusculoskeletal, neurological, cardiopulmonary-vascular, integumentary and other systems using appropriate tests and measures.
2.	<ul> <li>The physiotherapist teaches a home program to the baby's parents. Which of the following instructions should be emphasized?</li> <li>A. Incorporating the exercises into the child's daily routine.</li> <li>B. Pursuing the exercises intensively at frequent intervals during the day.</li> <li>C. Carrying out the exercises only when the child is awake and can participate.</li> <li>D. Doing the exercises only when the child is asleep.</li> </ul>	Area of Practice Condition	Musculoskeletal 01.01.14 Congenital malformations (e.g., talipes equinovarus, hip dysplasia)	Area of Practice Condition	Neuromusculoskeletal 01.01.14 Congenital malformations (e.g., talipes equinovarus, hip dysplasia)
		Domain	Scholarship	Function	Interpretation, Planning, Intervention and Re-Evaluation
		Entry-to-Practice Milestone	6.1.2 Incorporate client context into clinical decision-making.	Code	02.02.03.04 Select and justify treatments and procedures using the best available evidence considering environmental factors, safety factors, family/cultural factors, and client's impairments, activities, and participation levels.
3.	<ul> <li>The baby's torticollis improves with physiotherapy treatment. However, follow-up assessment at 8 months of age reveals a motor delay. Which of the following assessment tools should the physiotherapist use to determine the child's motor performance in relation to his peers?</li> <li>A. Alberta Infant Motor Scale (AIMS).</li> <li>B. Gross Motor Function Measure (GMFM).</li> <li>C. Ashworth Scale.</li> <li>D. Functional Independence Measure (FIM).</li> </ul>	Area of Practice	Musculoskeletal	Area of Practice	Neuromusculoskeletal
		Condition	01.01.12 Inflammatory/ infectious conditions of the musculoskeletal system (e.g., osteomyelitis)	Condition	01.01.12 Inflammatory/infectious conditions of the neuromusculoskeletal system (e.g., osteomyelitis)
		Domain	Physiotherapy Expertise	Function	Assessment & Evaluation
		Entry-to-Practice Milestone	1.3.7 Select and perform appropriate tests and measures.	Code	02.01.02.01 Select and justify evaluation/assessment procedures based on client needs and expectations, responses, and best available evidence.

<sup>&</sup>lt;sup>1</sup> The PCE Blueprint 2018 is based on the <u>Competency Profile for Physiotherapists in Canada (2017)</u> and the current <u>National Physiotherapy Entry-to-Practice Curriculum Guidelines</u>.

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		A 50-year-old man received full thickness burns to his face, upper body, and arms at work. He is admitted to an acute care facility. He has also been diagnosed with a restrictive pulmonary complication secondary to the burn.				
4.	What results would the physiotherapist expect to find on assessment with respect to the client's	Area of Practice Condition	Cardiovascular-Respiratory 01.03.08 Restrictive pulmonary	Area of Practice Condition	Cardiopulmonary-vascular 01.03.10 Restrictive pulmonary disease (e.g.,	
	restrictive pulmonary complication?		disease (e.g., fibrosis, asthma)		fibrosis)	
	A. Decreased vital capacity and increased	Domain	Physiotherapy Expertise	Function	Assessment & Evaluation	
	pulmonary resistance.	Entry-to-Practice	1.4.2 Identify client's body	Code	02.01.02.03 Examine and evaluate	
	B. Decreased vital capacity and decreased	Milestone	structure and function		neuromusculoskeletal, neurological,	
	pulmonary resistance.		impairments, activity limitations		cardiopulmonary-vascular, integumentary	
	<ul> <li>Increased vital capacity and increased pulmonary resistance.</li> </ul>		and participation restrictions.		and other systems using appropriate tests and measures.	
	D. Increased vital capacity and decreased					
	pulmonary resistance.					
5.	The physiotherapist's caseload has doubled today	Area of Practice	Other	Area of Practice	Multisystem	
	because of the illness of a colleague. What should	Condition	01.04.08 Integumentary	Condition	01.04.08 Burns	
	the physiotherapist do?		disorders (e.g., burns, wounds,			
	A. Complete full treatment for all clients before		skin conditions)			
	leaving work.	Domain	Management	Function	Professional Responsibilities	
	B. Shorten all treatments in order to see all	Entry-to-Practice	4.2.2 Address issues related to	Code	02.03.04.08 Establish and manage a	
	clients within work hours.	Milestone	waitlists, caseloads, and access to		transparent prioritization process when	
	<ul> <li>See only the clients who were not seen yesterday.</li> </ul>		services.		demand exceeds ability to deliver services.	
	D. Prioritize the clients who would deteriorate					
	without treatment.					

Sample Questions	PCE Blueprint 2018		PCE Blueprint 2009		
Vignette for items 6 - 8	A 60-year-old man with post-polio syndrome is experiencing deterioration of his physical status. He is attending a rehabilitation centre as an out-patient for physiotherapy treatment.				
<ul> <li>6. During assessment, the physiotherapist notes weakness of the erector spinae muscle group. Which of the following postures is the physiotherapist likely to observe?</li> <li>A. Decreased thoracic kyphosis.</li> <li>B. Increased lumbar lordosis.</li> <li>C. Decreased lumbar lordosis.</li> <li>D. Thoracic scoliosis.</li> </ul>	Area of Practice Condition Domain Entry-to-Practice Milestone	Neurological 01.02.07 Post-polio syndrome Physiotherapy Expertise 1.4.1 Interpret assessment findings and other relevant information.	Area of Practice Condition Function Code	Neurological 01.02.08 Post-polio syndrome Assessment & Evaluation 02.01.02.03 Examine and evaluate neuromusculoskeletal, neurological, cardiopulmonary-vascular, integumentary and other systems using appropriate tests and measures.	
The client has greater paralysis of his left lower extremity. This may be contributing to right knee and ankle pain secondary to overuse. Which one of the following devices should the	Area of Practice Condition	Neurological 01.02.07 Post-polio syndrome	Area of Practice Condition	Neurological 01.02.08 Post-polio syndrome	
	Domain	Physiotherapy Expertise	Function	Interpretation, Planning, Intervention and Re-Evaluation	
<ul> <li>physiotherapist recommend for the left lower extremity?</li> <li>A. Neoprene knee sleeve.</li> <li>B. Ankle splint (air-cast splint).</li> <li>C. Hinged knee brace.</li> <li>D. Knee-ankle-foot orthosis.</li> </ul>	Entry-to-Practice Milestone	1.5.2 Determine an intervention plan.	Code	02.02.03.04 Select and justify treatments and procedures using the best available evidence considering environmental factors, safety factors, family/cultural factors, and client's impairments, activities, and participation levels.	
8. The client has used crutches for eight years. He	Area of Practice	Neurological	Area of Practice	Neurological	
states that his ambulation has slowed and longer distances are more fatiguing. Which one of the following aids should the physiotherapist	Condition	01.02.07 Post-polio syndrome	Condition	01.02.08 Post-polio syndrome	
	Domain	Physiotherapy Expertise	Function	Interpretation, Planning, Intervention and Re-Evaluation	
recommend for longer distances in the community? A. Four-wheeled walker. B. Two-wheeled walker. C. Manual wheelchair. D. <b>Power scooter.</b>	Entry-to-Practice Milestone	1.5.7 Modify intervention plan as indicated.	Code	02.02.04.01.19 Protective, adaptive or assistive devices (e.g., tape, splints, orthotics, prostheses)	

Sample Questions	PCE Blueprint 2018		PCE Blueprint 2009	
Vignette for items 9-11	Colles' fracture was	-	in a cast, her x-rays	experienced immediate hand and wrist pain. A showed poor callus formation and she was a private physiotherapy clinic.
<ul> <li>9. Before initiating treatment, the physiotherapist describes the proposed treatment and possible outcomes to the client. Why should the physiotherapist do this?</li> <li>A. To allow the client to make an informed decision about her treatment.</li> <li>B. To allow the physiotherapist to justify the treatment intervention.</li> </ul>	Area of Practice Condition Domain Entry-to-Practice Milestone	Musculoskeletal 01.01.07 Fractures, dislocations, subluxations Professionalism 7.1.2 Comply with regulatory requirements.	Area of Practice Condition Function Code	Neuromusculoskeletal         01.01.07 Fractures, dislocations,         subluxations         Professional Responsibilities         02.03.02.01 Secure informed consent for         evaluation/assessment and treatment
<ul><li>C. To prevent the client from asking too many questions during treatment.</li><li>D. To allow the physiotherapist to avoid litigation.</li></ul>				
10. The physiotherapy assessment of this client	Area of Practice	Musculoskeletal	Area of Practice	Neuromusculoskeletal
reveals pain and muscle guarding in the shoulder, pain from the shoulder to the elbow, and restricted elbow extension. The pain is disturbing the client's sleep. The physiotherapist is	Condition	01.01.06 Joint derangements/dysfunction (e.g., haemarthrosis/effusion, hyper/hypomobility)	Condition	01.01.06 Joint derangements/dysfunction (e.g., loose bodies, hypermobility, hypomobility)
concerned that the client may be developing	Domain	Physiotherapy Expertise	Function	Assessment & Evaluation
<ul> <li>adhesive capsulitis of the shoulder. Limitation in which movements would indicate that the client has a capsular pattern of restriction?</li> <li>A. External rotation &gt; adduction &gt; internal rotation.</li> <li>B. External rotation &gt; abduction &gt; internal rotation.</li> <li>C. Flexion &gt; abduction &gt; external rotation.</li> <li>D. Flexion &gt; abduction &gt; internal rotation.</li> </ul>	Entry-to-Practice Milestone	1.4.1 Interpret assessment findings and other relevant information.	Code	02.01.02.03 Examine and evaluate neuromusculoskeletal, neurological, cardiopulmonary-vascular, integumentary, and other systems using appropriate tests and measures.
11. Six weeks later, the client has had her cast	Area of Practice	Musculoskeletal	Area of Practice	Neuromusculoskeletal
removed. She has had a bone density study and has been diagnosed with osteoporosis. Which one	Condition	01.01.08 Osteoporosis/osteopenia	Condition	01.01.08 Osteoporosis/osteopenia
of the following interventions should the	Domain	Physiotherapy Expertise	Function	Assessment & Evaluation
<ul><li>physiotherapist use with caution in the treatment of this client's wrist and hand?</li><li>A. LASER.</li><li>B. Interferential current.</li><li>C. Joint mobilization.</li></ul>	Entry-to-Practice Milestone	1.2.1 Identify client-specific precautions; contraindications and risks.	Code	02.01.02.05 Screen for contraindications and precautions for treatment planning (e.g., medical issues, psychosocial issues, safety issues, language comprehension, educational needs, risk factors and mediators)
D. Soft tissue manipulation.				

Sample Questions	PCE Blueprint 2018		PCE Blueprint 2009		
Vignette for items 12 - 14	A 50-year-old man comes to a private physiotherapy clinic for an aerobic exercise program. He has a 10- year history of insulin-dependent diabetes.				
12. Which signs and symptoms of hypoglycemia	Area of Practice	Other	Area of Practice	Multisystem	
should the physiotherapist be aware of that the client may demonstrate while participating in an aerobic exercise program?	Condition	01.04.03 Metabolic disorders/conditions (e.g., diabetes)	Condition	01.04.02 Metabolic disorders/conditions (e.g., diabetes)	
<ul><li>A. Manic mood, increased energy level.</li><li>B. Increased temperature, flushed face.</li></ul>	Domain	Physiotherapy Expertise	Function	Interpretation, Planning, Intervention and Re-Evaluation	
<ul><li>C. Weakness, excessive sweating.</li><li>D. Nystagmus, ringing in the ears.</li></ul>	Entry-to-Practice Milestone	1.2.1 Identify client-specific precautions, contraindications and risks.	Code	02.02.03.04 Select and justify treatments and procedures using the best available evidence considering environmental factors, safety factors, family/cultural factors, and client's impairments, activities and participation levels.	
13. In designing the aerobic cycling program for this	Area of Practice	Other	Area of Practice	Multisystem	
<ul> <li>client, which of the following parameters of exercise should the physiotherapist recommend?</li> <li>A. 4 - 7 days a week for 20 - 60 minutes'</li> </ul>	Condition	01.04.03 Metabolic disorders/conditions (e.g., diabetes)	Condition	01.04.02 Metabolic disorders/conditions (e.g., diabetes)	
duration. B. Daily at 20 - 40% of maximum heart rate.	Domain	Scholarship	Function	Interpretation, Planning, Intervention and Re-Evaluation	
<ul> <li>C. Daily at 80 - 90% of maximum heart rate.</li> <li>D. 3 - 5 days a week for 60 - 90 minutes' duration.</li> </ul>	Entry-to-Practice Milestone	6.1.1 Incorporate best available evidence into clinical decision- making.	Code	02.02.03.07 Schedule treatments to optimize client's response (e.g., time of day, medication timing).	
14. What part of this client's intervention could the	Area of Practice	Other	Area of Practice	Multisystem	
physiotherapist assign to the physiotherapist assistant? A. Progression of the exercise program.	Condition	01.04.03 Metabolic disorders/conditions (e.g., diabetes)	Condition	01.04.02 Metabolic disorders/conditions (e.g., diabetes)	
B. Examination of the feet.	Domain	Management	Function	Professional Responsibilities	
<ul><li>C. Assessment of the fitness level.</li><li>D. Monitoring of the exercise program.</li></ul>	Entry-to-Practice Milestone	4.5.2 Assign care to personnel involved in physiotherapy service delivery; and monitor delivery.	Code	02.03.04.03 Assign tasks, guide, and supervise activities of support personnel as needed.	

Sample Questions	<u>PC</u>	E Blueprint 2018	PCE Blueprint 2009			
Vignette for items 15-17	A 62-year-old man presents to the emergency room at an acute care facility with chest pain and shortness of breath. An electrocardiogram (ECG) reveals that he has sustained a myocardial infarction. Once the client has been medically stabilized and transferred to the cardiac care unit, the physiotherapist is asked to assess him and provide treatment.					
<ul> <li>15. As a part of the treatment process the physiotherapist discusses risk factor reduction with the client. The client explains that he is unwilling to consider quitting smoking or changing his diet. How should the physiotherapist respond?</li> <li>A. Discuss the need for change with the client's family.</li> <li>B. Discuss the client's reluctance to change with the physician.</li> <li>C. Explain the risks of these behaviours, but</li> </ul>	Area of Practice Condition Domain Entry-to-Practice Milestone	Cardiovascular-Respiratory 01.03.02 Myocardial ischaemia and infarction Professionalism 7.2.1 Use an ethical framework to guide decision-making.	Area of Practice Condition Function Code	Cardiopulmonary-vascular O1.03.02 Myocardial ischaemia and infarction (including surgical interventions) Professional Responsibilities O2.03.01.01 Respect the knowledge, rights, confidentiality, and dignity of client and family.		
<ul> <li>respect the client's decision.</li> <li>D. Explain to the client that change is essential, or his health will deteriorate.</li> <li>16. The client is concerned about the effect of his myocardial infarction on his planned vacation in</li> </ul>	Area of Practice Condition	Cardiovascular-Respiratory 01.03.02 Myocardial ischaemia	Area of Practice Condition	Cardiopulmonary-vascular 01.03.02 Myocardial ischaemia and		
<ul> <li>six months' time. Which of the following factors should the physiotherapist discuss that might affect the client's exercise tolerance on his vacation?</li> <li>A. Altitude and change in diet.</li> <li>B. Altitude and cold temperature.</li> <li>C. Change in diet and time change.</li> <li>D. Cold temperature and time change.</li> </ul>	Domain	and infarction Scholarship	Function	infarction (including surgical interventions) Interpretation, Planning, Intervention and Re-Evaluation		
	Entry-to-Practice Milestone	6.1.1 Incorporate best available evidence into clinical decision- making.	Code	02.02.05.04 Educate the client, family/significant others about the condition, self-management, coping and prevention strategies.		
After five days of successful treatment in the	Area of Practice	Cardiovascular-Respiratory	Area of Practice	Cardiopulmonary-vascular		
acute care facility, the client is ready to be discharged home. Prior to the discharge, which of	Condition	01.03.02 Myocardial ischaemia and infarction	Condition	01.03.02 Myocardial ischaemia and infarction (including surgical interventions)		
the following should the physiotherapist complete?	Domain	Physiotherapy Expertise	Function	Interpretation, Planning, Intervention and Re-Evaluation		
<ul> <li>A. Graded exercise testing and complete VO2 Max test.</li> <li>B. Review home exercise program and complete VO2 Max test.</li> <li>C. Graded exercise testing and complete a referral to occupational therapy.</li> <li>D. Review home exercise program and encourage participation in an out-patient rehabilitation program.</li> </ul>	Entry-to-Practice Milestone	1.6.3 Prepare client for discharge or transition of care.	Code	02.02.05.07 Educate client, family, and healthcare and other service providers about transitions (e.g., change in level of care, care provider or care funder), other services, and discharge plans.		

Sample Questions – Stand alone	PCE	Blueprint 2018		PCE Blueprint 2009
18. An 8-month-old baby girl is referred to a	Area of Practice	Cardiovascular-Respiratory	Area of Practice	Cardiopulmonary-vascular
physiotherapy out-patient clinic for treatment of her poor head control. Physiotherapy evaluation demonstrates abnormal muscle tone and strong	Condition	01.03.06 Acute lung injury (e.g., adult/infant respiratory distress syndrome, pneumothorax)	Condition	01.03.07 Adult/infant respiratory distress syndrome (e.g., acute lung injury)
primitive reflexes. When asked by the parents about her diagnosis, what should the	Domain	Collaboration	Function	Interpretation, Planning, Intervention and Re-Evaluation
<ul> <li>physiotherapist reply?</li> <li>A. The child has symptoms of cerebral palsy.</li> <li>B. The child has symptoms of Werdnig- Hoffmann disease.</li> <li>C. It is too early to discuss a diagnosis for this child.</li> <li>D. They should seek this information from the treating doctor.</li> </ul>	Entry-to-Practice Milestone	3.1.1 Identify practice situations that may benefit from collaborative care.	Code	02.02.01.03 Determine need for physiotherapy treatment, collaboration, consultation, or referral.
19. A physiotherapist in a rehabilitation center is	Area of Practice	Neurological	Area of Practice	Neurological
treating a 58-year-old male who has sustained a cerebrovascular accident with mild receptive aphasia. To help the client better understand	Condition	01.02.01 Cerebral vascular accident/transient ischemic attack	Condition	01.02.01 Cerebral Vascular Accident/transient ischemic attack
commands, what is the most effective method of communication that the physiotherapist should	Domain	Communication	Function	Interpretation, Planning, Intervention and Re-Evaluation
use? A. Speak louder emphasizing key words. B. Give details to clarify commands. C. <b>Provide written and visual cues.</b> D. Repeat detailed commands.	Entry-to-Practice Milestone	2.3.3 Adjust communication based on level of understanding of recipient.	Code	02.02.05.02 Use teaching and communication strategies with clients and family members.
20. An 85-year-old man has been transferred to a	Area of Practice	Other	Area of Practice	Multisystem
<ul> <li>long-term care facility shortly after his wife's death. He is demonstrating signs of depression. His mobility is progressively deteriorating and he has been referred to physiotherapy for treatment. How should the physiotherapist proceed?</li> <li>A. Suggest that he increase his hours of sleep and provide a bed exercise program.</li> <li>B. Address what he perceives as his problems and develop an activity program.</li> <li>C. Encourage him not to focus on his losses and start making new friends in his new home.</li> <li>D. Provide an activity program to assist with mobility and then discharge.</li> </ul>	Condition	01.04.10 Complex conditions (multiple systems/diagnoses)	Condition	01.04.01 Episodic disease (e.g., oncology, HIV/AIDS, autoimmune disorders, rheumatic diseases, haemophilia)
	Domain	Leadership	Function	Interpretation, Planning, Intervention and Re-Evaluation
	Entry-to-Practice Milestone	5.1.2 Foster client engagement in finding solutions to address health needs.	Code	02.02.03.04 Select and justify treatments and procedures using the best available evidence considering environmental factors, safety factors, family/cultural factors, and client's impairments, activities and participation levels.