IMPLEMENTING THE APTA CLINICAL PRACTICE GUIDELINES:
FOR PERIPHERAL VESTIBULAR HYPOFUNCTION:
PRELIMINARY RESULTS OF A MULTICENTER MIXED-METHODS CASE SERIES

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**Background:** The APTA established Knowledge Translation taskforces for each published clinical practice guideline (CPG) to facilitate successful implementation.

**Purpose:** Improve clinician adherence to Academy of Neurologic Physical Therapy (ANPT) published CPG for peripheral vestibular hypofunction (PVH).

**Methods:**
- **Design:** Multi-center mixed-methods case series implementation study.
- Each site selected action statements to address using The Consolidated Framework for Implementation Research (CFIR) and the Knowledge to Action Cycle.
- Sites currently implementing 4-5 interventions to enhance CPG adherence (Table).

**Results:**
- Sites currently implementing 4-5 interventions include:
  - **Our Lady of the Lake (Batun Rouge, LA):**
    - Number of therapists treating PVH: 2
    - PVH Patient Visits/Month: 5 to 10
  - **Mid-America Balance Institute (Kanssi City, MO):**
    - Number of therapists treating PVH: 5
    - PVH Patient Visits/Month: 50 to 100
  - **University of Southern California (Los Angeles, CA):**
    - Number of therapists treating PVH: 11
    - PVH Patient Visits/Month: 20 to 30
  - **Shirley Ryan AbilityLab (Chicago, IL):**
    - Number of therapists treating PVH: 1
    - PVH Patient Visits/Month: 10 to 20
  - **James A. Haley Veterans Hospital (Tampa, FL):**
    - Number of therapists treating PVH: 2
    - PVH Patient Visits/Month: 200 to 300

**Conclusions:**
- The multi-center mixed-methods case series study design provides insight into site specific interventions and adherence rates.
- Sharing monthly adherence data with therapists supports real-time optimization of interventions for knowledge translation.
- Interventions include updated compliance tools and changes to documentation procedures.
- A limitation of the data set is small sample size for each month’s chart audit.

**References:**