

## CASE STUDIES

### Case Study Outline for Diplomates:

- ❖ Avoid the use of any language that may be construed as diagnostic or indicating treatment of disease. Keep the focus within the mandated approval of Biofeedback practice, namely Stress Reduction and Relaxation Enhancement.
- ❖ In order to track progression of change, it is suggested you keep data and observations over a series of a minimum of three sessions with the subject.
- ❖ The goal of a Case Study is not to affirm your therapy goals or expected outcome. It is simply to record, observe, and learn what did or did not make a difference. It is viable research to disprove your predicted goals, or discover something new in the process. Your results may simply lead to new questions and directions for further research.
- ❖ Please note, that all case studies must be typed. Hand written case studies will be declined.

#### 1. **Title Page:**

You may decide to do this last to avoid 'writing to the title.' Make your title appealing and thought provoking. You want to engage the reader. (The Title Page must be 3-5 pages of written text in addition to any charts or graphs.)

#### 2. **Purpose Statement:**

Choose one of the following modes:

- a) **Explanatory** - Explain causal links. Suggest theoretical basis for the study as well as proposed techniques and interventions.
- b) **Descriptive** - Straightforward explanation of real life scenario for intervention. Use when Study may not lead to conclusions but to further research questions.
- c) **Exploratory** - When the proposed intervention has no expected clear outcome. A 'let's see what happens' approach.



*By learning you will teach; by teaching you will learn.*

### 3. **Biographic and Demographic Information:**

a) **Social History** - Name (may be anonymous)

- Family Medical History
- Any relevant social/cultural data  
(Age, gender, occupation, education level)

b) **Disabling Stressors**

Note all diagnostic issues, medications, prior treatments or interventions. Note symptoms of stress. Precipitating events (if any) traumas, and history of present concern(s).

c) **State proposed therapy/goals**

### 3. **Case Content:**

a) **Evaluation**

- Did the client have any present concerns?
- Did the Test and Assessment affirm or disaffirm the client's complaint?
- Did the assessment point to other areas of concern related to or unrelated to the presenting concern(s)?

b) **Interventions**

- Record all therapies, times, rectifications.
- What facilitation techniques were used (i.e.: stress reduction)?
- What specific lifestyle adjustments, supplements, homeopathic were suggested?
- What VARHOPE improvements were noted per session (you may want to chart these)?
- What was the percentage of improvement per session (you may want to chart these)?

### 5. **Author's Comments:**

What are your thoughts, feelings, and insights? What do you feel positive about? What would you improve or have done differently? What conclusions might you draw about applying this particular protocol or approach to future clients? What advice would you offer other practitioners in regards to your conclusions?

Summarize your perceptions of physical, emotional or other change in your client. Summarize your client's perception of change, new insights, lifestyle changes, and behavioral changes.



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How did you arrive at your therapy/stress reduction plan?

Did you achieve your goals?

Was there any compliance with your suggestions between sessions? If not, why?

Did you change or modify the suggestions between sessions?

What was the general outcome and what did the goal attainment measured (i.e.; subject report, medical tests, self evaluation on a scale of 1 to 10.)

List any further comments as to what was learned or valuable as an outcome of this Study.

Best Wishes,

Director of Education  
The Quantum Academies  
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