

## Dear finisher of the FDM Basic Certificate, dear friends of the FDM!

Since 2012, EFDMA has been offering the FDM International Certificate, the "**FDM IC**".

For this purpose, a commissional exam is to be taken in front of a jury of FDM Instructors with a theoretical and practical part.

With this review, the EFDMA confirms that the FDM Practitioner is highly qualified for FDM treatment according to the international guidelines of the curriculum and is therefore also recommended as "IC" on the list of FDM Practitioners on the EFDMA website.

### Preconditions for the application:

- **At least 1 year practical experience with the FDM after the FDM BC** ( see [EFDMA Curriculum](#))
- **Min. 1 Practical Training\***  
In the Practical Training, contents of the FDM Basic are practically repeated and deepened. The exact contents can be found in the [EFDMA Training calendar](#).
- **Min. 1 FDM Clinical Training\***  
Definition: Intensification of FDM and the Typlados Method to improve confident mastery of theory and practical application. Implementation of the clinical approach by means of practical examples. See [EFDMA Training calendar](#).
- **Min. 3 on-site visits**  
Definition: observe at 3 different FDM Instructors/ FDM IC/ FDM Practitioners from the [list](#) on the EFDMA Website. Watch and take an active part according to the possibilities and situation. For EFDMA members on-site visits are free of charge. Non-members can purchase a on-site-visit voucher in the value of € 50 for an on-site-visit. The amount is earmarked and will benefit scientific FDM projects within the EFDMA. Find the list & more informations at: <https://www.fdm-europe.com/training/on-site-visits/>
- **Min. 3 supervisions**  
Definition: independent, complete treatment of the patient by the candidate in the presence of the supervisor (=FDM instructors). In principle the patient pays the supervisor the same fee generally paid for treatment by the therapist. The supervision is free of charge for the candidate. In special situations (e.g. when the candidate has no possibility to bring a patient) special arrangements could be made. Supervisions can only be completed with [FDM instructors](#).  
The FDM supervisor will evaluate the candidate in a 4-face meeting, thereby also advising and possibly again demonstrate techniques. (If supervision is taken during Clinical Training, this can be counted as one Supervision).

\*The EFDMA is not itself a course organizer and does not offer FDM Basic and Advanced courses and therefore has no influence on the achievement of courses. In individual cases, courses, such as the Clinical Training, can not take place, due to low numbers of participants. **Therefore, please schedule the participation in courses that are required for the IC exam, on time.**

**Another recommendation:** The purpose of Clinical Training is above all the feedback which the participant receives there from the FDM Instructor. This feedback should then be implemented, practiced and consolidated in practice and that will certainly take some time. **It is therefore not useful to complete the Clinical Training shortly before the IC exam!**

## Exam dates 2023:

- **May 8<sup>th</sup>, 2023 in Austria (Goldegg near Salzburg)**
  - Time: follows
  - Language: English, German
  - Exam fee: € 300,-
  - Exam place\*: [Schloss Goldegg](#)
  - LIMITED NUMBER OF PARTICIPANTS!
  - [Application form May 8th](#)
  
- **September 14<sup>th</sup>, 2023 in Austria (Goldegg near Salzburg)**
  - During the FDM event "Back to the roots" Sept. 14-16<sup>th</sup>, 2023
  - Time: follows
  - Language: English, German
  - Exam fee: € 300,-
  - Exam place\*: [Schloss Goldegg](#)
  - LIMITED NUMBER OF PARTICIPANTS!
  - [Application form Sept. 14th](#)

\* Changes to the examination location reserved.

## Registration procedure

1. Please send the **application form** & the [confirmations](#) at least 4 weeks before the date of the exam. The registration form may also be sent in advance to reserve the place, but the confirmations must be forwarded no later than 4 weeks before the exam date.
2. Transfer the examination fee to the account of the EFDMA (IBAN: AT401200050030001405 BIC: BKAUATWW) **at least 4 weeks before the date of the exam**. The registration is only valid after the payment. Participants will be registered in order of the payment date (the number of participants is limited). Cancellation with 100% refund is only possible up to 4 weeks before the examination.
3. The examination takes place only with the corresponding minimum number of participants.

## Exam content

- **Theoretical knowledge** of the FDM, on the basis of the education curriculum of the EFDMA.
- **Practical knowledge**: Typaldos techniques on the basis of the education curriculum of the EFDMA
- **Related learning material**: „Das Faszien distortionsmodell (FDM)“ respectively the English version „The Fascial Distortion Model“. (see [FDM Literature](#))

**A graduate of the FDM International Certificate (FDM IC)  
must be able to master the Typaldos method.**

## **Exam procedure:**

### **1. Theory part (about 90 minutes)**

- **Patient videos** - interpretation of pain gestures and relating them to one or perhaps even more of the 6 Fascial Distortions according to the FDM (by ticking).
- **Theory questions** with possible answers to tick

Correction of the written exam, then announcement of the result. **The participation at the practical exam is only possible with a positive written exam.**

### **2. Practical part (30 minutes, each candidate individually)**

#### **2.1 Clinical part:** clinical case study:

- **The jury presents a patient case.** Either from a video sequence or represented by a jury member.
- **Taking a patient's medical past history**
- **Check-up and clinical tests** (on the jury member)
  - Patient-oriented mobility and loading test
- **Creating an FDM diagnosis based on:**
  - Pain gesture
  - Subjective examination
  - Physical examination
- **Therapy** (treatment will be performed on a jury member)

#### **2.2 Technical part:**

Presentation and efficient and effective performance of Typaldos techniques (these will be performed on a jury member).

### **4. Consulting of the Jury and announcement of the result**

## **4. AWARD OF THE FDM INTERNATIONAL CERTIFICATE**

## **A few words of advice regarding exam preparation**

We want to give you some advice so that you can prepare in the best possible way for the exam. For sure you will already have internalized the education and training criteria thus we want to discuss a few aspects that we noticed during the most recent exams.

### **Theory exam**

The theory part of the exam comprises the task to interpret pain body language demonstrated in patient videos and relate it to one or several fascial distortions as well as subsequent theory questions with single choice answers. Below you will find two examples:

**1. From experience we can say that iCDs (inverted continuum distortions) are often located at the ankle**

- *true*
- *false*

## **2. Which statement applies to the scissor technique?**

- a) A scissor technique or a variation of it can be applied to the SI joint and the sacrum but not to the lower back.
- b) A scissor technique or a variation of it can be applied to the SI joint, the sacrum and to the lower back.

Basis for the required theoretical knowledge is the EFDMA book, i.e. we presume that you have internalized the content of this book. **Only candidates who have successfully passed the theoretical exam are entitled to take the subsequent practical exam.**

### **Practical clinical exam**

What we want to see in the exams are FDM professionals! You should demonstrate your expertise as therapists in the exam, i.e. show us how you would carry out a convincing treatment of a patient – like in your own practice – under conditions that try to emulate reality as close as possible.

This means we are looking for FDM experts who are able to analyze patient videos in a clear and structured way – according to the 3 pillars of the FDM regarding the **diagnostic process** (pain body language, case history, examination findings) – to subsequently question the patient/model (= one of the examiners) and to examine the “patient” further using specific movement or static loading tests that are tailored to the case and needs of the individual patient.

The correct interpretation of the patient’s pain body language is only one important component when it comes to establishing a diagnosis and it goes hand in hand with the other two diagnostic tools (case history and examination).

You can expect that examiners may ask question at any time. Since it can happen in the diagnostic process that certain aspects are interpreted in different ways, your course of action should be plausible and you should be able to justify your actions (e.g. why you have decided follow a certain sequence in your treatment).

Questions about specific characteristics of particular fascial distortions also have to be coherently explained in the exam. (E.g. TB: runs fingers along a puling, burning line; initial pain, better with movement, restriction of movement in one/several axes...)

### **Clinical Setting**

After establishing an FDM diagnosis you should demonstrate the **treatment of a “patient”** on one of the examiners using convincing manual Typaldos techniques. The treatment should emulate the clinical setting in your own practice, i.e. it should include thorough information of the patient before the treatment and the actual treatment; during the treatment you should pay attention to the feedback of the “patient”; re-testing after individual techniques is also essential, as well as discussion of the further course of action after the treatment, including prognosis for the patient and the further treatment plan of the therapist. Of course, also contraindications have to be considered.

The sequence and choice of techniques have to clearly convey to the examiners why you are doing what you are doing!

### **Key aspects**

- Adequate patient handling: the patient/model (video with pain body language) has to be evaluated according to the 3 pillars of diagnosis; subsequently the patient has to be treated in a convincing way.
- Integration of medical diagnosis and auxiliary findings (valuation of significance of radiological findings ...)
- Indications and contraindications according to the FDM and possible recommendation of further therapies.

### **Presentation of FDM techniques**

It is essential that the techniques are **mastered completely!** Below a few key aspects regarding the safe and efficient application of the techniques.

#### **Key aspects**

- Very good TB technique (thumb position, right amount of force, adaptability...)
- Very good HTP technique (palpation, sequence of treatment ...)
- Very good CD technique (exact palpation and correct use of thumb)
- Understanding of folding technique (uFD und rFD) and efficient application of all manipulation techniques according to the Curriculum of the EFDMA
- Very good Cyd technique (all techniques without additional appliances)
- Understanding of the approach in case of TF and application of treatment including manipulation techniques

What is important to the EFDMA is that a clearly structured course of action is recognizable: e.g. treatment of a folding distortion: clear instructions to and information of the patient about the procedure, correct positioning of the patient, clean initial position, end-of-range wind-up, clearly recognizable direction of impulse, and effective and safe HVLA (high velocity low amplitude) thrust. Afterwards a neat re-test to check and further evaluate the clinical situation.

Don't be surprised if examiners ask about different variations of a folding treatment.

Individual adaptations of manual treatment techniques that are taught in the context of the EFDMA Curriculum are sometimes necessary due to different physical builds and abilities. However, these variations have to fulfil the above mentioned criteria and have to be understandable for the examiners.

For us it is very important that you pay attention to the "patient's" feedback and that you don't just deliver the techniques mechanically as if you were blinkered.

#### **Summary**

The exam has the objective to find out if a candidate is able to apply the FDM, i.e. to establish a conclusive diagnosis and to subsequently choose an appropriate manual treatment method according to Typaldos to achieve an effective and successful treatment of the individual fascial distortions. If the diagnostic process and the therapeutic intention are clearly recognizable and the technique can be felt as being effective by the examiner, you have done everything right and nothing will get in the way of a positive exam result!

Since the exam is an international exam it is absolutely advisable that you observe therapy sessions of and do supervisions with different instructors since there is always different emphasis in the training and interpretation of certain aspects. You should really seize the opportunity to experience the exciting diversity within the EFDMA!

The EFDMA wishes everybody good luck!