PTNow is the site clinicians can trust to help them move physical therapy knowledge into action, provide evidence-informed care, and improve their clinical decision making.

**Clinical Summaries**
- **JUST POSTED!** Asthma, Concussion, MS
- **IN 2015:** Dementia, Neck pain, Femoro-acetabular impingement, Urinary incontinence
- **IN DEVELOPMENT:** Adhesive capsulitis, Cervicogenic headache, Guillain-Barré syndrome, Pediatric SCI, Total hip arthroplasty, Unilateral vestibular disorders, and many more
- **Clinicians:** Review in-progress Clinical Summaries for ease of application. Email ptnow@apta.org with “REVIEWER” in the subject line.

**Guidelines**
- 350+ posted, continually updated
- **NEW!** CPG+, a knowledge application aid that provides a guideline rating, highlights, and “Check Your Practice” tips
- **Faculty and Clinicians:** Conduct formal appraisals of clinical practice guidelines, and develop easy-to-apply highlights and tips. Email ptnow@apta.org with “CPG+” in the subject line.

**Systematic Reviews**
- 300+ posted, continually updated
- Cochrane reviews are the “gold standard” for systematic reviews

**Tests & Measures**
- 125+ posted, with more on the way
- Replaces the Catalog of Tests & Measures
- Links to the new, online-only Guide to Physical Therapist Practice 3.0
- **Educators:** An ideal student project could include developing and reviewing summaries of tests and measures. Email ptnow@apta.org with “T&M” in the subject line.

**Measuring PTNow Impact**
- Preliminary usability, face and content validity established
- Ongoing usability studies to help guide decisions about most effective formats and functionality

**How PTNow Can Lead PTs to Section Resources**
PTNow can increase your section’s visibility by linking directly to your website. Go to this link to see PTNow’s pilot landing page created by the Neurology Section: [http://www.neuropt.org/about-us/welcome-to-the-neurology-section](http://www.neuropt.org/about-us/welcome-to-the-neurology-section)

Email ptnow@apta.org for more information.