PHYSICAL THERAPIST ASSISTANT PROGRAM
STUDENT HANDBOOK

Mount Wachusett Community College
Gardner, Massachusetts

August 2014
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INTRODUCTION

The PTA Student Handbook was created by the Mount Wachusett Community College Physical Therapist Assistant Program faculty. The purpose of the Handbook is to provide PTA students and the clinical staff affiliating with the MWCC Physical Therapist Assistant Program with the updated academic curriculum, clinical education curriculum, and all forms associated with, but not limited to, Clinical Practica I, II, and III.

The Mount Wachusett Community College administrators and PTA faculty share a commitment with all affiliating institutions to deliver an enriching learning experience for all developing PTA students. A strong clinical education component is essential to providing the necessary and required practical experience for an entry level Physical Therapist Assistant. The MWCC administration and PTA faculty recognize the magnitude of the commitment required of an affiliating institution when accepting students for their clinical practicums. We greatly appreciate this effort and thank you for helping to strengthen our clinical education component.

Notice of Non-discrimination:

Mount Wachusett Community College is an affirmative action/equal opportunity employer and does not discriminate on the basis of race, color, religious creed, age, physical or mental disability, sex, national origin or ancestry, marital status, sexual orientation, genetic information or veteran status. This policy incorporates by reference and where applicable, the requirements of Federal Executive Orders 11246 and 11375 as amended; the Civil Rights Act of 1964 as amended; the Civil Rights Restoration Act of 1988; the Civil Rights Act of 1991; Title IX of the Higher Education Amendments of 1972 as amended; Sections 503 and 504 of the Rehabilitation Act of 1973; the Americans with Disabilities Act of 1990; Section 402 of the Vietnam Era Veterans Readjustment Assistance Act of 1974; and pertinent laws, regulations and executive orders; directives of the Massachusetts Department of Higher Education, the Boards of Trustees of the Community Colleges and the Commonwealth of Massachusetts, and other applicable local, state and federal statutes.

The following persons have been designated for inquiries regarding non-discrimination programs and policies:
Diane M. Ruksnaitis, Affirmative Action Officer,
Coordinator of Student Disability Services 504 coordinator,
Ann McDonald, Executive Vice President & Senior Student Affairs Officer
Coordinator, Americans with Disabilities Act, 444 Green Street, Gardner, MA 01440
Telephone: Voice 978-632-6600; TTY: 978-632-4916

Inquiries concerning the application of non-discrimination policies may also be referred to the regional director, Office for Civil Rights, U.S. Department of Education, J. W. McCormack POCH, Room 222, Boston, MA 02109-4557. Telephone: 617-223-9662.

Higher Education Authorization Act (HEA) as amended by the Higher Education Opportunity Act (HEOA) of 2008 Disclosures

The College maintains compliance with disclosure requirements set forth under the Higher Education Opportunity Act (HEOA) of 2008. This information is intended to give prospective students, their families and current students valuable information on the opportunities to be attained by enrollment at the College. This content, as well as other information about graduation rates, the median debt of students who have completed certain programs and other
important information may be found at the Mount Wachusett Community College website: www.mwcc.edu

Información Sobre Política de No-discriminación

Las siguientes personas han sido designadas en caso de preguntas en relación a programas y políticas concernientes a prácticas no-discriminatorias.
Diane M. Ruksnaitis, oficial de Acción Afirmativa,
Coordinadora de Servicios Para Estudiantes Con Incapacidades, coordinadora de 504
Ann McDonald, vice presidenta ejecutiva coordinadora del incapacidad americana
444 Green Street, Gardner, MA 01440
Teléfono 978-632-6600; TTY: 978-632-4916

Preguntas relacionadas con la implementación de políticas no discriminatorias también pueden ser referidas al Director Regional, Oficina de Derechos Civiles, Departamento de Educación Federal, J.W. McCormack POCH, Oficina 222, Boston, MA 02109-4557. Teléfono 617-223-9662.
I. PTA COURSE/PROGRAM DESCRIPTION

The Physical Therapist Assistant (PTA) Program prepares individuals to work in the health care profession under the direct supervision of a Physical Therapist (PT) in a variety of settings including acute care and rehabilitation hospitals, long term care facilities, private practices, school systems, and home care/VNA. Primary responsibilities of the PTA include the implementation of treatment procedures in the rehabilitation of injured, ill, and debilitated individuals. While in the program, students will gain competence in: patient positioning and transfers; range of motion; therapeutic exercise; the safe application of therapeutic modalities such as heat, cold, electricity, ultrasound; measurement, adjustment, and instruction in the use of ambulatory aids; improving cardiopulmonary function and endurance; and measurements of joint range of motion, muscle strength, length, girth, and vital signs. Strict adherence to Standard Precautions is mandated throughout the curriculum. Upon successful completion of the PTA program, students will be able to demonstrate full understanding of the role of the PTA in the profession; perform all learned procedures safely and appropriately following the PT’s plan of care; demonstrate an understanding of ethical behavior integrating this knowledge; demonstrate awareness of the legal responsibilities in patient care; demonstrate a basic understanding of the psychological effect of disease or injury on an individual; and communicate effectively and competently within the Physical Therapy setting.

The PTA program is designed to prepare students to complete the PTA licensure examination in a student's respective state of practice.

II. CURRENT ACCREDITATION STATUS

The Mount Wachusett Community College PTA program is accredited by the Commission on Accreditation in Physical Therapy Education which is the functioning body for accrediting educational programs for the preparation of physical therapist assistants. The commission is an appointed group of the American Physical Therapy Association.

III. MWCC PTA PROGRAM MISSION STATEMENT, PHILOSOPHY, AND PROGRAM OBJECTIVES

The Physical Therapist Assistant Program at MWCC was established in 1995 to provide a unique and necessary educational opportunity for the citizens of North Central Massachusetts in the socially relevant and important profession of Physical Therapy. It is our mission to educate, train, and develop Physical Therapist Assistants who have entry-level competence in the field. Training does not end with the technical aspects of patient care. It is our purpose that our students be exposed to a variety of individuals and practice settings that will enable them to meet the psychological, social, and physical needs of their future patients.

In addition to the above, the College and the PTA program missions are complimentary; that is, “...to meet the education, training and lifelong needs of the educationally, economically and culturally diverse population living and working in North Central Worcester County.”
While entry-level competence, identification of the role of the PTA in working with other Physical Therapists and health care professions, sensitivity to a variety of needs of patients and awareness/responsibility to uphold the ethical and moral standards for PTAs are the main goals of the program, we also hope to emphasize the importance of continuing education long beyond their graduation. We hope to encourage our students to recognize the necessity to keep clinical skills updated and current in the field through attendance at continuing education seminars, reading, and practice/interaction with fellow practitioners.

PHYSICAL THERAPIST ASSISTANT PROGRAM OBJECTIVES:

Upon graduation from the PTA program at MWCC, students will be able to:

1. Consistently demonstrate appropriate role utilization of the Physical Therapist Assistant in the application of established treatment interventions as directed by the primary physical therapist.
2. Integrate into practice the Guidelines for Ethical Conduct/Standards of Practice for PTAs in an effort to assure safe and proper conduct for all interactions within the profession.
3. Demonstrate entry-level competence and skill in the implementation of a comprehensive treatment plan including appropriate modifications according to patient response, patient practitioner interactions, and participation in discharge planning and follow-up.
4. Report and communicate regularly with supervising Physical Therapists regarding patient progress and treatment modifications in accordance with changes in patient status.
5. Perform with entry-level competence data collection procedures integrating the findings of such procedures into the patient’s plan of care.
6. Identify and demonstrate consistent behavior of interactions and teaching with healthcare professionals, patients, and their families while providing the desired psychosocial support among diverse populations.
7. Demonstrate effective and accurate written and verbal communication skills in documenting the relevant aspects of patient care including patient response and progress.
8. Integrate information obtained from professional literature review into clinical practice as evidenced based practitioners of physical therapy invention in keeping with the intent of the APTA’s Vision 2020 statement.
9. Demonstrate consistent commitment to lifelong learning through regular participation in continuing education.
10. Demonstrate successful performance on state licensure examination.
11. Obtain employment as entry-level Physical Therapist Assistants.
IV. MWCC PTA CURRICULUM AND COURSE DESCRIPTIONS

ASSOCIATE IN SCIENCE DEGREE
PHYSICAL THERAPIST ASSISTANT PROGRAM
MOUNT WACHUSETT COMMUNITY COLLEGE

<table>
<thead>
<tr>
<th>COURSE CODE</th>
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<td>ENG101</td>
<td>English Composition I</td>
<td>3.0</td>
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<tr>
<td>PSY105</td>
<td>Introduction to Psychology</td>
<td>3.0</td>
</tr>
<tr>
<td>CIS 127</td>
<td>Computer Technologies (or a Business Elective)</td>
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<tr>
<td>BIO 199</td>
<td>Anatomy and Physiology I</td>
<td>4.0</td>
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<tr>
<td></td>
<td><strong>Total</strong></td>
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PTA Year I (FALL)

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<td>Introduction to Physical Therapist Assisting</td>
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<tr>
<td>PTA102</td>
<td>Basic Therapeutic Techniques</td>
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</tr>
<tr>
<td>PTA104</td>
<td>Applied Anatomy and Kinesiology</td>
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<tr>
<td></td>
<td>Humanities Elective</td>
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INTERSESSION

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<tr>
<td>PTA105</td>
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PTA Year I (SPRING)

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<tr>
<td>BIO204</td>
<td>Anatomy and Physiology II</td>
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<tr>
<td>PTA111</td>
<td>Clinical Orthopedics for the PTA</td>
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<tr>
<td>PTA139</td>
<td>Human Disease and Pathology</td>
<td>4.0</td>
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PTA Year I SUMMER SESSION

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<tr>
<td>PTA110</td>
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PTA Year II (FALL)

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<td>PTA112</td>
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<tr>
<td>PTA113</td>
<td>Advanced Rehabilitation Techniques</td>
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<tr>
<td>PTA114</td>
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SEMESTER IV (SPRING)

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<td>PTA117</td>
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<tr>
<td>PTA118</td>
<td>Clinical Management and Healthcare Issues</td>
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<tr>
<td>PTA119</td>
<td>Clinical Practicum III++</td>
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TOTAL CREDITS  81
+ 120 hours in a clinical setting
++ 240 hours in a clinical setting

A mathematics competency equal to at least MAT126 is required prior to/or with completion of Semester I coursework.

BIO 199 and 204 must be taken either prior to or concurrent with semester one and two PTA coursework. Students will not be allowed to participate in PTA 110 Clinical Practicum I if BIO 199 and 204 are not completed successfully (C+, 77% or better) by the end of semester two coursework.

**PHYSICAL THERAPIST ASSISTANT COURSE DESCRIPTIONS**

Please refer to the [MWCC College Catalog](https://www.mwcc.mass.edu) for more information on PTA course descriptions.

**PTA101 Introduction to Physical Therapist Assisting** 1 Credit
This course provides the student with an introduction to the profession of Physical Therapy and the role and utilization of the Physical Therapist Assistant in the profession. Professional and ethical behavior is emphasized throughout various course topics including documentation, patient/health-care provider interaction, legal issues, death and dying, and stress management.

**Prerequisites:** MAT096, RDG100, ENG100 or placement

**PTA102 Basic Therapeutic Techniques** 4 Credits
This course is designed to provide the student with an introduction to basic patient care skills such as: Patient and environment preparation, aseptic technique (standard/universal precautions, infection control, and hand sanitation), body mechanics, verbal commands, patient turning and positioning, wheelchair prescription and management, transfer techniques, ambulation with assistive devices, vital signs measurement, and traditional soft-tissue massage.

**Prerequisites:** MAT126, RDG100, ENG100 or placement, BIO 199 or concurrent

**PTA104 Applied Anatomy and Kinesiology** 4 Credits
Identification and detailed palpation of the bones and muscles of the human skeleton will be correlated with joint and muscle function. Introductory concepts concerning tissue organization, basic biomechanics, and the nervous system will also be studied. Basic concepts of musculoskeletal structure and function will be applied to a more complex analysis of human movement and skill.

**Prerequisites:** BIO199 or concurrent, MAT126, RDG100, ENG100 or placement

**PTA105 Assessment Techniques** 3 Credits
This course covers the theory and application of the assessment skills that are required to assure entry-level competence for physical therapist assistants. Data that is collected utilizing the assessment skills covered in this course will support the rationale for rehabilitative techniques, modalities, and exercises that will be employed in subsequent courses in the curriculum.

**Prerequisites:** PTA101, PTA102, PTA104, BIO 199
PTA111 Clinical Orthopedics for the PTA  
This course covers the assessment and treatment strategies that are applicable to an orthopedic patient that are part of entry-level practice as a PTA. Normal and pathomechanics of the neuromusculoskeletal systems are covered in detail via regional analysis of the major articulations of the extremities and spine. Etiology and physical therapy management of clinical dysfunctions commonly encountered in a general orthopedic patient population will be studied. Normal and pathological gait will be analyzed. The assessment skills of goniometry, manual muscle testing, and tests for muscle length including instructor demonstrations of special tests for the spine and extremities will be covered in the laboratory component of this course. This course also presents the theory and application of traditional therapeutic exercise including ROM, stretching, resistive exercise, balance and COORDINATION and cardiovascular/aerobic activity. Evidence-based practice guidelines regarding traditional exercise suggestions for selected musculoskeletal diagnoses and home exercise program instruction will also be covered.  
**Prerequisite:** PTA 105.

PTA110 Clinical Practicum I  
Clinical Practicum I is the first of three comprehensive clinical experiences in a Physical Therapy setting. The purpose of this initial experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. Basic patient care skills, anatomy/biomechanics, therapeutic exercise, selected assessment techniques, and human disease and pathology will be emphasized. Typical practice settings may include acute care hospitals, private practice, skilled nursing centers, out-patient rehabilitation centers.  
**Prerequisites:** PTA105, PTAXXX, PTA139, BIO 204

PTA112 Therapeutic Modalities  
This course is designed to present the physiological basis, clinical application and specific techniques of administration for the following modalities: infrared heating and cooling, ultraviolet light, deep heating, intermittent compression, mechanical traction, electrical stimulation for analgesia, muscle contraction and specialized currents, iontophoresis, biofeedback, and LASER. Emphasis will be placed on the indications and precautions and contraindications of each to assure patient safety and treatment effectiveness.  
**Prerequisites:** PTA110

PTA113 Advanced Rehabilitation Techniques  
This course presents an advanced view of rehabilitation. Specific patient populations and techniques associated with the treatment of these populations will be addressed. Topics include but will not be limited to cardiopulmonary, amputee, burn, spinal cord, traumatic brain injury, pediatric and geriatric rehabilitation.  
**Prerequisites:** PTA110
PTA114 Neurophysiological Techniques  
4 Credits  
This course presents the theoretical framework of neurodevelopmental and neurophysiological approaches to therapeutic exercise. Normal movement, motor development, and motor learning are emphasized. Sensorimotor dysfunctions, characteristic limitations, and abnormal motor movements are discussed. The basic approaches to neurophysiological techniques and their rationale are included. These traditional approaches will be compared to contemporary theories of motor development, motor learning, and motor control.  
Prerequisites: PTA110

PTA116 Clinical Practicum II  
5 Credits  
Clinical Practicum II is the second of three comprehensive clinical experiences in a physical therapy setting. The purpose of this intermediate experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, therapeutic modalities, advanced therapeutic techniques, and neurophysiological techniques into an established physical therapy program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, VNA, in-patient and out-patient rehabilitation centers, V.A. hospitals, and psychiatric centers.  
Prerequisites: PTA112, PTA113, PTA114

PTA117 Special Topics  
3 Credits  
This course covers specialty topic areas in the profession. Students will gain an introductory exposure to the theory and application of, women’s health issues, pediatrics, burn rehabilitation, chest physical therapy, amputation & prosthetics, and wound care. Key non-patient care-related topics concerning issues of importance to the physical therapist assistant are also presented including: Evidence-Based Research Project Presentation, basic study techniques/licensure examination preparation and a mock licensure examination are also included utilizing the Online Advantage software materials.  
Prerequisites: PTA112, 113, 114

PTA118 Clinical Management and Healthcare Issues  
1 Credit  
Key non-patient care-related topics are presented concerning issues of importance to the physical therapist assistant. Course topics include: PTA licensure; job search (cover letter, resume writing, and interviewing); the ADA; insurance regulations; supervision/delegation issues for the PTA; quality assurance; and risk management.  
Prerequisites: PTA112, PTA113, PTA114
PTA119 Clinical Practicum III 5 Credits
Clinical Practicum III is the third of three comprehensive clinical experiences in a physical therapy setting. The purpose of this final experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, special topics, and clinical management and health care issues into the delivery of a comprehensive physical therapy treatment program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, VNA, in-patient and out-patient rehabilitation centers, V.A. hospitals, and psychiatric centers.
Prerequisites: PTA116, PTA117, PTA118

PTA139 Human Disease and Pathology
This course will cover the etiology, natural course, and termination of disease in order to assist the student in understanding the cause and effect relationship between disease and disability. Emphasis will be placed on the most common diseases and disabilities which the student will likely encounter in the practice of physical therapy.
Prerequisites: BIO 115 or BIO 199, BIO 204 or concurrent and instructor permission
<table>
<thead>
<tr>
<th>COURSE NAME</th>
<th>CREDITS</th>
<th>LECTURE/LAB HOURS</th>
<th>TOPICS</th>
</tr>
</thead>
</table>
| 101: INTRODUCTION TO PTA         | 1.0     | 2 hrs. lecture per week | • History & development of Physical Therapy  
• Role of a healthcare provider  
• Definition & role of the PTA  
• APTA  
• Guidelines for Ethical Conduct/Standards of Practice for PTAs  
• Professionalism  
• PTA licensure  
• Documentation  
• Abbreviations  
• Patient practitioner interactions  
• Death & dying  
• Stress management |
| 102: BASIC THERAPEUTIC TECHNIQUES | 4.0     | 2.5 hrs. lecture/2.75 hrs. lab per week | • Universal Precautions  
• OSHA standards  
• Body mechanics  
• Verbal commands  
• Patient care preparation  
• Positioning & draping  
• Vital Signs Assessment  
• Wheelchair management & prescription  
• Transfers  
• Ambulation with assistive devices  
• Traditional massage |
| 104: APPLIED ANATOMY AND KINESIOLOGY | 4.0     | 2.5 hr. lecture/2.75 hrs. lab per week | • Anatomical terminology  
• Anatomical position  
• Planes of motion  
• Tissues of the body  
• Joint structure & function  
• Muscle structure & function  
• Palpation  
• Bones & boney landmarks of extremities & vertebral column  
• Muscles of trunk/extremities  
• Arthokinematics  
• Basic biomechanics, levers, kinematics, & kinetics  
• Open & closed chain  
• Biomechanics of the extremities & spine |
| 105: ASSESSMENT TECHNIQUES        | 3.0     | 5 hrs./day for 9 days | • Introduction to assessment  
• Vital signs  
• Pain  
• Nerve root testing  
• Skin integrity  
• Sensation  
• Tone  
• Posture  
• Introduction to ROM & MMT  
• Segmental length, girth, & volume  
• Balance & coordination  
• Functional activities  
• Architectural barriers |
| 111: CLINICAL ORTHOPEDICS FOR THE PTA | 8.0     | 5.0 hrs. lecture/5.5 hrs. lab per week | • Intro. to therapeutic exercise  
• PROM  
• AAROM/ AROM  
• Stretching (active & passive)  
• RROM  
• Cardiovascular/aerobic exercise  
• Closed chain exercise-UE & LE  
• Selected exercise protocols (THR, TKR, frozen shoulder, ACL recon.)  
• Spinal exercise regimes (low back pain, posture, scoliosis)  
• Writing an HEP  
• Pathomechanics of musculoskeletal systems  
• Identification & basic treatment approaches to orthopedic dysfunctions  
• Gait (normal & intro. to pathological)  
• Goniometry & MMT of the extremities & spine  
• Special tests of the extremities & spine |
| 139: HUMAN DISEASE & PATHOLOGY   | 4.0     | 3.5 hrs. lecture/wk. | • Introduction to diseases  
• Immunity, Inflammation & Repair  
• Musculoskeletal Injury & Disease  
• Infection  
• Cancer  
• Hereditary Diseases & Disorders  
• Cardiovascular System Diseases & Disorders  
• Respiratory System Diseases & Disorders  
• Nervous System Diseases & Disorders  
• Cognitive Disorders  
• Endocrine System Diseases & Disorders |
<p>| 110: CLINICAL PRACTICUM I        | 3.0     | 120 hrs. in a clinical facility (3 weeks) |</p>
<table>
<thead>
<tr>
<th>COURSE NAME</th>
<th>CREDITS</th>
<th>LECTURE/LAB HOURS</th>
<th>TOPICS</th>
</tr>
</thead>
<tbody>
<tr>
<td>112: THERAPEUTIC MODALITIES</td>
<td>4.0</td>
<td>2.5 hrs. lecture/2.75 hrs. lab per week</td>
<td>Pain mechanisms, Infrared modalities (Superficial Heat &amp; Cold), Ultraviolet, Deep heating modalities, Intermittent compression, Traction, Electrical current, Iontophoresis, Phonophoresis, Biofeedback, LASER, Hydrotherapy</td>
</tr>
<tr>
<td>113: ADVANCED THERAPEUTIC TECHNIQUES</td>
<td>3.0</td>
<td>2 hr. lecture/2 hrs. lab per week</td>
<td>Amputees, Prosthetics &amp; orthotics, Cardiopulmonary rehab., Burns, TBI, SCI, Pediatrics, Geriatrics, Evidence-based Practice &amp; Research Project</td>
</tr>
<tr>
<td>114: NEUROPHYSIOLOGICAL TECHNIQUES</td>
<td>4.0</td>
<td>2.5 hrs. lecture/2.75 hrs. lab per week</td>
<td>Normal movement, Coordination, Righting/equilibrium reactions, Balance, Reflexes, Abnormal tone, Athetosis, Ataxia, PNF, Rood, Bobath, Brunnstrom, NDT, Developmental sequence</td>
</tr>
<tr>
<td>116: CLINICAL PRACTICUM II</td>
<td>5.0</td>
<td>240 hrs. over 6 weeks</td>
<td>(40 hrs./wk.);</td>
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</table>

<table>
<thead>
<tr>
<th>COURSE NAME</th>
<th>CREDITS</th>
<th>LECTURE/LAB HOURS</th>
<th>TOPICS</th>
</tr>
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<tbody>
<tr>
<td>117: SPECIAL TOPICS</td>
<td>3.0</td>
<td>4.5 hrs. lecture/lab per session; 3 days/week over 3 weeks.</td>
<td>Burn rehabilitation, Women's health issues, School-Based Pediatric Rehabilitation, Amputation &amp; Prosthetics, Chest Physical Therapy, Wound care, Evidenced based practice project results presented orally and submitted in a Powerpoint Presentation format, License Examination Preparation &amp; “Online Advantage” Mock License Examination, PTA licensure including mock exam utilizing PTA Online Advantage and basic study techniques, Job search (interviews, resume), ADA, Insurance regulations, Risk management, Supervision &amp; delegation issues for the PTA, Quality assurance</td>
</tr>
<tr>
<td>118: CLINICAL MGMT. &amp; HEALTHCARE ISSUES</td>
<td>1.0</td>
<td>1 hr. lecture per session/3 days per week as students concurrently participate in PTA 117</td>
<td></td>
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<tr>
<td>119: CLINICAL PRACTICUM III</td>
<td>5.0</td>
<td>240 hrs. in a clinical setting; 40 hrs./wk. over 6 wks.</td>
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<table>
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<tr>
<th>TOTAL PTA CREDITS:</th>
<th>SEMESTER 1</th>
<th>9.0</th>
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<tr>
<td>INTERSESSION</td>
<td>3.0</td>
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<tr>
<td>SEMESTER 2</td>
<td>12.0</td>
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<td>SUMMER</td>
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<td>SEMESTER 3</td>
<td>11.0</td>
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<td>SEMESTER 4</td>
<td>14.0</td>
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<tr>
<td></td>
<td>52.0</td>
<td></td>
</tr>
<tr>
<td>V. PTA ACADEMIC FACULTY NAME/TITLE</td>
<td>EDUCATION/DEGREE</td>
<td>YEARS OF PT EXPERIENCE</td>
</tr>
<tr>
<td>-------------------------------------</td>
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<td>------------------------</td>
</tr>
<tr>
<td>JACQUELINE J. SHAKAR, * DPT MS LAT OCS Program Chair Office: 294, Ext. 287</td>
<td>DPT, MGH Institute of Health Professions, 2010. MS, Boston University, 1983; Physical Therapy BA, Worcester State College, 1981; Psychology &amp; Sports Medicine</td>
<td>31</td>
</tr>
<tr>
<td>Kathleen M. McGinn, DPT, M.Ed.,PT,LMT Professor Office 376, Ext. 318</td>
<td>DPT, Simmons College, 2009. M.Ed., Worcester State College, 1988; Health Education BS, Quinnipiac College, 1985; Physical Therapy CMT, Bancroft School of Massage, 2001</td>
<td>29</td>
</tr>
<tr>
<td>QUERIDA MASTERS PTA, BA* Academic Coordinator Clinical Education Office 292, Ext. 307</td>
<td>AS, Becker College, PTA, 1991 BA, UMass, Community Service, 2008</td>
<td>22</td>
</tr>
<tr>
<td>Melissa DiLorenzo, PT DPT* Adjunct PTA Faculty Office 384, Ext. 287</td>
<td>DPT, MGH Institute of Health Professionals, 2008. BS, University of New England, 1985; Physical Therapy</td>
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</table>

* CURRENT APTA MEMBER
<table>
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<tr>
<th>FACULTY NAME/TITLE</th>
<th>EDUCATION/DEGREE</th>
<th>YEARS OF PT EXPERIENCE</th>
<th>CURRENT CLINICAL PRACTICE</th>
<th>CAREER HIGHLIGHTS/ SPECIALTIES</th>
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</thead>
<tbody>
<tr>
<td>KIMBERLY SCHOLFIELD, PT*</td>
<td>BS, Daemen College, 1986; Physical Therapy</td>
<td>26</td>
<td>Health Alliance, Leominster Campus (acute care, trauma, burns)</td>
<td>• 3 years teaching experience in PTA curriculum</td>
</tr>
<tr>
<td>Adjunct PTA Faculty</td>
<td></td>
<td></td>
<td></td>
<td>• clinical specialties include acute care, trauma, burns</td>
</tr>
<tr>
<td>Office 384, Ext. 318</td>
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</tr>
<tr>
<td>RUTH WENTZELL, PT*</td>
<td>BS, Boston University, 1970; Physical Therapy, MA, Anna Maria College, 1985;</td>
<td>39</td>
<td>CAPS Collaborative (school based pediatrics)</td>
<td>• Clinical specialties include neurology &amp; pediatrics</td>
</tr>
<tr>
<td>Adjunct PTA Faculty</td>
<td>Counseling Psychology</td>
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<tr>
<td>Office 384, Ext. 287</td>
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<tr>
<td>Charlene Shaver, PTA*</td>
<td>AS, MWCC, PTA, 2006. Certificate, MWCC, Exercise Science and Fitness Leadership,</td>
<td>6</td>
<td>Ramsey Rehabilitation (Outpatient Private Practice)</td>
<td>• Certified personal trainer</td>
</tr>
<tr>
<td>PTA Lab Assistant</td>
<td>2006.</td>
<td></td>
<td></td>
<td>• Certified Spinning Instructor</td>
</tr>
<tr>
<td>Office 384, Ext. 287</td>
<td></td>
<td></td>
<td></td>
<td>• Credentialed Clinical Instructor</td>
</tr>
<tr>
<td>Joyce Coleman, PTA</td>
<td>AS, MWCC, PTA, 1997 BS, Fitchburg State, Human Services, 1984</td>
<td>15</td>
<td>Currently pursuing Masters Degree in Health Administration</td>
<td></td>
</tr>
<tr>
<td>PTA Lab Assistant</td>
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<td></td>
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<td></td>
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<tr>
<td>Office 384, Ext. 287</td>
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<tr>
<td>Fred Cackett, PTA*</td>
<td>AS, MWCC, PTA, 2008.</td>
<td>4</td>
<td>Seven Hills of Groton, Pediatric Center.</td>
<td></td>
</tr>
<tr>
<td>PTA Tutor</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office 384, Ext 287</td>
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</tr>
</tbody>
</table>
VI. MWCC PTA PROGRAM ACADEMIC POLICIES

A. ACADEMIC EVALUATION PROCEDURE

1. Grading Policy

The total number of points the student earns in a specific PTA course determines the final letter grade. Points are earned by the student in the following categories:

   a. Lecture: quizzes and tests
   b. Laboratory: quizzes and practical examinations
   c. Other work assigned in class such as term papers, case studies, clinical diaries, and laboratory reports
   d. Class and laboratory attendance and participation

In those courses that have both a lecture and a laboratory component, the student must pass both components independently in order to receive a passing grade of "C+" (77 percent) or better for the final course grade. (NOTE: The grade received from the Record’s Office will be a single average grade from both lecture and lab. If either component is less than 77 percent, the final grade will be the lowest.)

2. Grading Scale

The final letter grade for the course is determined by converting the total number of points earned by the student into a percentage of the total possible points. The percentage is then converted into a letter grade as follows:

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Letter Grade</th>
<th>GPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>93 - 100</td>
<td>A</td>
<td>4.00</td>
</tr>
<tr>
<td>90 - 92</td>
<td>A-</td>
<td>3.70</td>
</tr>
<tr>
<td>87 - 89</td>
<td>B+</td>
<td>3.30</td>
</tr>
<tr>
<td>83 - 86</td>
<td>B</td>
<td>3.00</td>
</tr>
<tr>
<td>80 - 82</td>
<td>B-</td>
<td>2.70</td>
</tr>
<tr>
<td>77 - 79</td>
<td>C+</td>
<td>2.30</td>
</tr>
<tr>
<td>73 - 76</td>
<td>C</td>
<td>2.00</td>
</tr>
<tr>
<td>70 - 72</td>
<td>C-</td>
<td>1.70</td>
</tr>
<tr>
<td>67 - 69</td>
<td>D+</td>
<td>1.30</td>
</tr>
<tr>
<td>63 - 66</td>
<td>D</td>
<td>1.00</td>
</tr>
<tr>
<td>60 – 62</td>
<td>D-</td>
<td>0.70</td>
</tr>
<tr>
<td>0 - 59</td>
<td>F</td>
<td>0.00</td>
</tr>
</tbody>
</table>
3. **Policy for Contesting a Grade (applicable to PTA courses only)**

Students may question a grade received in a PTA course by adhering to the following policy:

   a. Upon receipt of a test, assignment, quiz grade, etc., a student must petition the course instructor in writing. This written petition must include the score/grade in question, the course, and a detailed justification outlining why the student is questioning their current score/grade. If the answer to a test question is being petitioned, the student must provide the reference and documentation which substantiates their petition.

   b. Students may submit their written petition within seven (7) school days.

   c. Concerned course instructors must submit their response in writing to the involved student and PTA Program Director within seven (7) school days upon the receipt of the petition.

B. **QUALITY POINT AVERAGE**

   The College maintains a record of each student's semester grades as reported by his/her instructors. The Quality Point Average (QPA) is computed from the semester grades. The Cumulative Quality Point Average (CQPA) includes all courses taken in all semesters at the College. A Physical Therapist Assistant student must maintain an overall CQPA of 2.30 in order to remain in sequence in the Physical Therapist Assistant Program.

C. **ACADEMIC PROTOCOLS**

1. **Attendance**

   Regular attendance is mandatory in all Physical Therapist Assistant lectures and laboratories. PTA courses follow a predetermined weekly schedule of topics most of which are not repeated in subsequent class meetings. All missed laboratory sessions must be made up, if possible; and the student is responsible for the materials covered in class, lecture, or laboratory that he/she missed regardless of the reason. Poor attendance/participation will adversely affect your final grade in a given course as points are deducted from your final average for missed sessions.

   In general, in all PTA courses within the curriculum (refer to PTA105, PTA110, PTA116, and PTA119 for specific attendance policies), each unexcused absence from a lecture session will result in a 5 percent point reduction from the final lecture grade; each unexcused absence from a laboratory session will result in a 10 percent point reduction from the final laboratory grade.

   Excused absences are issued at the instructor's discretion. Students must contact each course instructor for the classes they will miss due to absences.
An unexcused absence will result in the event that a student misses a regularly scheduled lecture, laboratory, clinical education meeting, or clinical practicum day and fails to notify the appropriate PTA faculty (all have voice mail) and clinical instructor (if absence occurs during practicum), within a reasonable timeframe. Students should notify instructors in advance of an absence if possible and in the morning or prior to a scheduled session.

An excessive number of lecture and/or laboratory absences will result in automatic withdrawal. Students will be automatically withdrawn from a given course due to an excessive number of excused or unexcused absences. Refer to specific course syllabi for specific policies regarding course attendance.

It is the student's responsibility to initiate make-up work by contacting the instructor following the absence. Private paid tutoring is available should a student miss an entire 3 hour skills lab at the rate of $30 per hour.

2. Tardiness

Every student is expected to arrive to class and clinical experiences at the predetermined scheduled time. Tardiness will not be tolerated. Students who arrive for class after class begins will not be allowed to enter the room until a break in class occurs. If a student is tardy twice they will receive a written warning by the instructor. Each written warning will result in a (3) point reduction in their final grade for that course. (Please see Appendix Z for a copy of the written warning)

3. Part-Time Work

Because the Physical Therapist Assistant Program is designed as an intensive paraprofessional preparation, and because it will demand many hours of study and skills practice by the student, it is strongly advised that students do not hold more than minimal hours of part-time employment during the semester. Although the College recognizes that employment may be necessary, a full-time student is expected to put full-time effort into his/her studies. Please do not ask faculty to arrange classes or clinicals around your outside employment.

4. Missed Examinations, Tests, and Quizzes

If you know in advance that you will be absent, you must discuss your absence with your instructor. Examinations may be objective, essay, multiple choice, or short answer. Make-up examinations usually differ from the original. All make up exams will be taken within one week’s time, in a secure location as determined by the course instructor. It is a student’s responsibility to discuss their absence with their instructor as close to the actual absence. Instructors are not responsible for
approaching students to discuss make up examination arrangements. Students who do not meet this requirement should expect a zero (0) for the missed examination, test, or quiz.

The points assigned for various quizzes, written tests, practical and other examinations are left to the discretion of the instructor. Refer to the course syllabus for each course for the explanation of the point distribution for any individual course.

Final examinations are required in each lecture course and are given at a regularly scheduled time. Except for emergency circumstances, students may not be excused from these examinations. If a student is unable to appear, it is his/her responsibility to inform his/her instructor prior to the scheduled examination. The College schedules a Conflict Examination session during each final examination period which is used to schedule make up examinations.

Practical examinations (skills check-offs) are given in laboratory courses. The practical is based on procedures learned in the course and is given in a problem situation which requires role-playing. All practicals must be passed with a "C+" (77 percent) or better. If the student fails to achieve a 77% or better on their first attempt, they may retake one practical per course, per semester. On the retake, the student can only received a grade of 77%. Should the student fail (to obtain a 77%) on the practical retake, they will not be eligible to retake an additional practical within the same semester and will receive a failure for that particular course. (Students are then eligible to explore readmission to the PTA program during the next year. Student may only readmit to the PTA program once.)

Any missed practical examination, for any reason, must be made up the next available class day. PTA Faculty may choose to videotape practicals to enhance learning. (Please see student consent form regarding consent to videotaping.)

5. Incomplete Grades (I)

An incomplete grade (I) means that a student has not completed course requirements because of circumstances JUDGED BY THE INSTRUCTOR to be beyond the student's control. The student must personally REQUEST AN INCOMPLETE GRADE (I). It is not granted automatically.

Incomplete grades must be removed no later than the fourth week of the next semester. FAILURE TO DO SO WILL RESULT IN AN "F" (FAILURE) GRADE FOR THE COURSE.

6. Withdrawal From Courses or From the Program

A student may formally withdraw from a course through the end of the ninth week of a full semester or fourth week of a cycle. A grade of “W” will be recorded on
the student’s transcript. Students are required to speak to their instructor or assigned advisor before withdrawing from any course. The procedure for course withdrawal includes obtaining the proper form from the Enrollment Center in Gardner, bringing the form to their instructor or assigned adviser, and returning the signed form to the Enrollment Center.

Any student withdrawing from a required course, Physical Therapy course or otherwise, should first speak with the Program Director. Although the course in question may be offered in a subsequent semester, the class schedule for Physical Therapist Assistant students usually precludes them from taking it. Failure to check with the Program Director may necessitate additional time at the College since all course work must be completed prior to the full-time clinical placements. Students who wish to withdraw from the Physical Therapist Assistant Program should speak initially with the Program Director.

7. Readmission Policy

Students are readmitted to the PTA curriculum on a selected basis only once. Students who re-apply to the PTA program within one year of their withdrawal (academic or personal) will be re-admitted as long as there is available space in the cohort of students that they will be joining. Re-accepted students will re-enter the program at the point that they withdrew and will be required to complete all courses in the curriculum with a minimum passing grade of 77% = C+ or better. In addition, each course in the PTA curriculum is sequential and students are personally responsible for maintaining competence in PTA courses previously completed.

Students who re-apply to the PTA Program when greater than one academic year has passed will re-enter the program as first semester students and will enter the applicant pool of the current cohort of students that are applying to the program for that particular year.

a. All students interested in readmission must submit a written letter of intention to the Director of Admissions by March 1st or October 1st based on the semester of the year they intend to readmit.

b. Once received, the letter will be forwarded to the PTA Program Director.

c. A personal interview may be scheduled between the prospective student and an appropriate PTA faculty member. At the time of interview, the faculty will review with the student the student’s prior attempt in the program, progress in non-PTA courses at the College, related work experience, and career goals. This information is shared with the PTA faculty, and recommendations are made to the Director of Admissions. Please note that decisions can often not be made until the end or immediately after the end of a given semester as we often learn of space availability following the close of a semester. Students with academic deficiencies
are encouraged to complete all non-PTA courses before reapplying. Students who have had difficulty with clinical PTA experiences are encouraged to work in a health care setting before reapplying.

d. The faculty member conducting the interview will make a recommendation to the total PTA faculty.

e. The PTA faculty will make a recommendation to the Director of Admissions in regard to readmission of the prospective student.

f. Re-admittance into the PTA Program is not automatic. It is dependent on the following factors:

   Space availability within the current class of students which includes an adequate number of clinical sites for each student. (Each PTA student must participate in three separate practicums at three different clinical facilities.)

   The circumstances surrounding a student’s dismissal/withdrawal from the PTA program.

   Prior performance of the student, both academically and clinically, prior to his/her dismissal/withdrawal.

   Students will be readmitted to the PTA program only if their re-application is made within 3 years of their original withdrawal.

8. Promotion Policy

   In order to continue in the Physical Therapist Assistant Program, the student must meet the following requirements:

   a. The student must have an annual physical examination and any laboratory tests, inoculations, or x-rays as directed by the College Health Wellness Office. The requirements are based on current institutional regulations for students in the clinical area.

   b. The student must successfully complete all course prerequisites as stated in the Physical Therapist Assistant course descriptions in the College Academic Catalog.

      1) No student may take a PTA course in the PTA program for which another PTA course is a prerequisite unless the student has earned a grade of "C+" or better in the prerequisite course (i.e., PTA105 must be passed with a "C+" or better before taking PTA107).
2) If the student does not earn a "C+" or better in Anatomy and Physiology I and II, he may not register for further PTA courses. **Anatomy and Physiology I and II must be taken prior to or concurrent with semester I and II PTA coursework.**

c. The student must earn a grade of "C+" or better in each of the PTA courses. The grade of "C+" is interpreted as "student meets the minimum standards for competency." A student who does not meet the standards shall be required to retake the course in question before continuing in the PTA program.

Once a student fails a PTA course, he/she will automatically be enrolled in General Studies-Allied Health (GSAH) for the subsequent semester. He/she is encouraged to enroll in non-PTA required courses and must apply for readmission into the PTA program prior to retaking the failed PTA course. (Refer to previous information on Readmission Policy.)

d. In a course which has both a lecture and laboratory component, the student must earn a grade of "C+" or better in both the lecture and laboratory components in order to receive a passing grade in the course. Should a student fail either the lecture or lab component of a class, their final course grade will reflect the lower of the two grades.

e. Matriculating PTA students are allowed to retake a PTA core course (courses with PTA prefix) one time only. In the event that the course is not passed with a 77% or better on the second attempt, the student will be withdrawn from the PTA program without the opportunity for readmission at a later date. Additionally, PTA students are allowed to retake a total one course only as they matriculate through the program.

f. The student's attendance and behavior must be adequate and appropriate. A student may be withdrawn from the program for excessive absences. (See "Attendance" in section C.1.) A student may withdraw or be withdrawn from the program if the faculty identifies a behavioral problem which, in the opinion of the faculty, will interfere with the student's successful, ethical, or legal performance of the duties of a Physical Therapist Assistant.

g. A PTA student’s overall QPA must be at least a 2.30 (C+) or better.

9. **Degree Requirements**

In order to graduate from MWCC with an Associate in Science Degree in the Physical Therapist Assistant Program, a student must pass all the courses required in the PTA program (at least eight-one [81] credit hours) with a minimum quality point average of 2.30 ("C+"). Twenty-six (26) of the required eighty-one (81) credits must be in the area of general studies.
10. **Transfer Credits**

   Students who transfer into the College may be given up to thirty (30) credits for course work completed at another accredited, postsecondary institution. No transfer credit will be computed in the student's quality point average. Transfer credit must be pre-approved by the Program Director and the Dean of Health Science and Community Service Programs. Do not assume that, if you take a course at another institution, it will automatically be accepted for transfer! Refer to the MWCC Catalog for specific information regarding transfer credits.

11. **Financial Aid**

   Financial aid in the form of loans, grants, scholarships, and combinations thereof are available. Contact the Financial Aid Office for specific information. Apply EARLY! If you have a particular problem with financial aid that may preclude your continuation in the program, make an appointment to speak with the Program Director as soon as possible.

12. **Counseling and Advising**

   Personal counseling is handled by the College's professional counseling staff. All problems and circumstances, personal and otherwise that affect a student's academic performance can be discussed with the Program Director or faculty advisor. All such discussions are confidential.

   A faculty advisor will be assigned to each student at the beginning of each academic year. Plan to see your faculty advisor or the Program Director at least once each semester for assistance and support. Problems, complaints, and concerns should be shared with your faculty advisor. The faculty advisor will confer with his/her assigned students each semester to review academic progress in the classroom and clinic and to offer program advising and career counseling.

   Special problems and unforeseen circumstances relative to graduation should be called to the attention of the Program Director.

13. **Laboratory Dress**

   The Physical Therapist Assistant Program includes several skills laboratory courses. Unless otherwise instructed, PROPER LABORATORY DRESS MEANS SHORTS FOR MALES AND BATHING SUIT TOP/HALTER WITH SHORTS FOR FEMALES so as to properly expose appropriate body parts. Students may be required to wear name tags to certain laboratory sessions. Students may also be asked to dress professionally (see dress code item #15 below) for certain designated practical examinations.
14. **Complaints Policy**

Complaints about the PTA Program regarding the general performance of students or staff or the general quality of the curriculum and practical preparation of the student participants should first be addressed to the PTA Program Director. Should the complaints include the behavior or performance of this individual, the complaints should be addressed to the Dean of Health Science and Community Service Programs or alternately, the Vice President of Academic Affairs. The person receiving the complaint will be responsible for conducting a thorough investigation of the complaint and evaluation of the problem as it has been described. Any personnel on campus will be involved in this process to the extent that their input would aid in the resolution of the concern. The complaining party will be kept apprised of the process as it evolves and will be notified of the ultimate resolution of the concern in a timely fashion. A record of the complaint, the ensuing evaluation and investigation process and the ultimate resolution of the complaint will be retained in the Program Director’s files with a copy send to the Dean of Health Science and Community Service Programs.

15. **Dress Code**

Students are expected to dress professionally during all college sponsored activities. Professional dress consists of solid color polo top and chino/khaki slacks. Students are expected to have a watch with a second hand. Students are expected to adhere to this dress code when performing practicals during laboratory sessions, when completing clinical practicum hours and when representing the PTA Department during any school related event. Warm-up pants, sweats, spandex and shorts are not permitted. Caps or hats are not to be worn in the classroom, laboratory or while on practicum. Closed-toe shoes and socks must be worn at all times when participating in class, lab or a school sponsored event. Sandals are not allowed.

Provocative clothing (as deemed so by PTA Faculty) is not allowed. Students must avoid wearing dangling jewelry, wristwatches, rings, and bracelets when providing care. Each individual student is responsible for securing his/her valuables, while at the college. Secure facilities are not provided at the college. Students are expected to maintain the highest standards of hygiene; clothing worn should be neat and clean. Nails should be clean and trimmed. Excessive body piercings should be removed.

**STUDENTS WHO FAIL TO ABIDE BY THE ABOVE POLICIES WILL NOT BE ALLOWED TO PARTICIPATE IN CLASS, PRACTICUM, OR ANY SPONSORED EVENT.**

16. **APTA Membership**

All PTA students enrolled in an accredited PTA program are eligible for student
affiliate membership with the American Physical Therapy Association (APTA). Student membership is voluntary but highly encouraged. Students receive detailed information concerning the APTA, member benefits, and privileges in PTA101 Introduction to PTA.

17. Cheating

Cheating will not be tolerated by the College. Both cheating and plagiarism may lead to expulsion from the College. (Please refer to the MWCC College Catalog for details.)

18. Background Investigation

PTA students will be required to subject to a CORI/SORI check each semester. It must be understood that certain convictions in a court of law may prevent them from completing the clinical portion of the PTA program and may prohibit them from being eligible to take the PTA licensure examination. Also some clinical agencies may require drug testing as part of their preclinical requirements.

19. Service Learning

All PTA students will be required to participate in a 20 to 25 hour service learning project during their first academic year. The details of this project will be discussed during PTA 101 and all agency contracts will be completed and submitted as a requirement of PTA 101 in the fall semester. Student will then complete 10 hours of the service learning project during the fall semester and must complete the remaining hours in the spring semester. The time sheets and reflection papers are due at the end of the spring semester. Failure to do so will jeopardize their ability to participate in PTA 110 Clinical Practicum I during the summer.

20. Plagiarism Policy (republished from the MWCC Catalog)

Plagiarism: is defined as the unauthorized use of another individual’s ideas, thoughts or opinions, and expressing them as one’s own without attribution to the individual as the source of those ideas or expressions. It also includes the use of facts, charts and other graphic representations or information that is not common knowledge, and presenting them without acknowledging the source when they are in printed form or in an electronic format. Plagiarism not only includes direct quotes but also paraphrasing. Each course syllabus may address specific procedures and penalties associate with the violation of the plagiarism policy for that course.

Plagiarism is a serious breach of academic honesty and is not tolerated at MWCC. If a faculty member suspects that a student has engaged in plagiarism, it is the student’s responsibility to provide the sources the student used in preparing his/her project. If the faculty member suspects that plagiarism is involved he/she will follow this procedure:
Stage One

- The faculty member will notify the student within 10 days of the alleged incident and arrange for a meeting with the student.

- If, after an informal meeting the faculty member and the student cannot reach a resolution of the incident, the faculty member will fill out a student plagiarism report available from the division dean.

- Once the plagiarism report has been issued, to overcome the accusation of plagiarism, the student must provide proof of his/her sources.

- If, upon investigation by the faculty member, the student has been found to be not responsible, the student will be notified by the faculty member in writing by means of the student plagiarism report. If the student has been found not responsible, the report will be expunged.

- If the student is found responsible, the student will be offered an opportunity to sign the report. If the student does not accept the finding of responsibility, the student has the option of accepting the reports finding and appealing the decision to the appropriate division dean. The student should sign the report indicating receipt only.

- The student receives a copy of the report and the faculty member keeps a copy of the report as part of the class record and forwards the report to the vice president of academic affairs and a copy to the appropriate division dean.

Students found to have engaged in plagiarism based on the evidence may be subject to but not limited to the following sanctions that are to be imposed by the faculty member:

- Receive a grade of zero for the assignment

- Receive a grade of “F” for the course

- Refer the case to the Division Dean for further action through the student disciplinary procedures

- At the faculty member’s discretion a temporary file will be maintained in the vice president of academic affairs’ office outlining the facts of the incident and its resolution

- This record will be maintained for the duration of the student’s enrollment not to exceed two years

- If the student drops out and does not enroll for the succeeding semester, the student retains the right to appeal the decision for a period not to exceed 12 months.
Stage Two

Upon referring the case for student disciplinary action, the faculty member agrees that the disposition of the case including the imposition of any sanctions or actions will be determined by the committee.

D. INSTRUCTOR'S RESPONSIBILITY TO STUDENTS

The instructor is expected to:

1. Be on time for all classes and hold classes for the required, scheduled periods of time. (A complete listing of PTA program faculty, offices, and telephone extensions appears on pages 9 and 10.) Canceled classes are usually made up at a mutually convenient time. You are asked to be flexible in the scheduling of make-up sessions.

2. Be prepared with significant lecture and/or discussion material and well-organized laboratory procedures.

3. Remain in the classroom or laboratory during the scheduled lecture or laboratory session, except in the case of an obvious emergency.

4. Prepare a syllabus for each course, listing office hours, assignments, lecture and laboratory topics, text and related resource materials, and requirements for the course.

5. Be fair and impartial in his/her treatment of students.

6. Be available during scheduled office hours. (It is best to make appointments to schedule office hour time with an instructor.)

7. Be familiar with, and adhere to, all College policies and procedures.

8. Be familiar with, and adhere to, all American Physical Therapy Association accreditation guidelines.

9. Be familiar with, and adhere to, all PTA program policies and procedures.

10. Hold individual conferences with all assigned students each semester to discuss scheduling and student progress in the classroom and in the clinic.

11. Attend all program meetings and other College sponsored meetings.


E. GUIDELINES FOR ADDRESSING STUDENT CONCERNS/APPEAL PROCEDURE

Refer to the MWCC College Catalog for the policy and procedures in place for addressing student concerns/appeals.

VII. MWCC PTA CLINICAL EDUCATION PROGRAM

A. PLACING STUDENT ON CLINICAL PRACTICUM

Each fall semester, students complete a “Clinical Practicum Preference Information Form” which is submitted to the ACCE prior to determining clinical selections. This form will be used to place students in a variety of clinical settings while taking individual interests and experiences into consideration. The “Clinical Practicum Preference Information Form” (Appendix A) also requires the student to document any potential conflict of interest in affiliating at any specific site.

As the student progresses through the PTA program, it is necessary to be aware of his/her previous experiences in order to assign the student to a facility that will offer a challenge and variety of new experiences. This information is determined in several ways: (1) meeting with student; (2) observing the student during his/her practicum; (3) reading the evaluation of the student by the clinical instructors and academic faculty; and (4) completion of the “Clinical Practicum Student Introduction Form.” (See Appendix B.)

The ACCE will consider a center coordinator’s recommendation for a student to attend a similar clinical affiliation (similar to the one just attended) for reinforcement of skills.

B. STUDENT REQUIREMENTS TO PARTICIPATE IN CLINICAL PRACTICUMS
(Appendix C)

1. Grade Point Average
   In order to qualify for placement in a health care facility, the student must have a cumulative grade point average of 77% ("C+") in all Physical Therapy courses and must have a sophomore standing in the College in order to participate in PTA110, PTA116, and PTA119 (Clinical Practica I, II, III).

2. Health Requirements
   Students are required to have a complete physical examination after acceptance into the Physical Therapist Assistant Program. Details pertaining to health requirements, such as tuberculosis screening, immunizations, and laboratory tests, are available from the College nurse and must be met prior to the first clinical assignment, PTA110. In addition, many clinics now require a medical examination immediately prior to placement in Clinical Practicums II and III (PTA116 and PTA119).
3. **Liability Insurance**
Each student is required to carry a $1,000,000 liability insurance policy at the cost of approximately $15.00 per year. This fee must be paid prior to the student's participation in PTA110, PTA116, and PTA119. Students who fail to meet this requirement will not be allowed to intern in Physical Therapy departments until premiums are paid. Absence because of non-payment of an insurance premium is considered an unauthorized absence, and the student may be dropped from the course.

4. **Clinical Education Meetings**
*All students are required to attend mandatory meetings held once or twice per month with the Academic Coordinator of Clinical Education (ACCE). Announcements as to time, date, and place of the meetings will be made by the ACCE at the beginning of each semester. Attendance will be taken. Attendance and ON-TIME completion of required forms and assignments will render student eligible for clinical placement. Failure to complete assignments on time will result in a student being ineligible for clinical placement. Students will be held responsible for all information given during these meetings.*

5. **Current healthcare provider CPR** (No online training accepted)

6. **Name tag and white lab coat**
Each student must purchase an MWCC student PTA name tag through the ACCE. The ACCE will provide information concerning where lab coats may be purchased.

7. **Background Investigation**
Every student will be required to undergo a CORI/SORI evaluation each semester. This will be mandatory based on a direct contact student have with children, elderly and disabled individuals. CORI checks will be done through certified CORI coordinators and will be held confidentially. Also some clinical agencies may require drug testing as part of their preclinical requirements.

* Excessive absences and/or failure to meet requirements of these clinical education meetings will result in the student being ineligible to participate in clinical practicum and therefore unable to continue in sequence in the program.

C. **CLINICAL PRACTICUM EXPERIENCE**

1. **Purpose**
The clinical practicum experience provides the physical therapist assistant student with the opportunity to integrate academic knowledge with the application of skills, attitudes, and interpersonal skills in a physical therapy setting.
2. **Levels of Clinical Practicum Experience**

   a. *PTA110 Clinical Practicum I:*
   This first clinical experience provides the student with basic experiences in observation and hands-on techniques in selected settings. These experiences are an integral part of the course work, are necessary to enhance initial learning of basic material, and are not to be considered substitutes for Clinical Practicum II or III. Types of facilities used include: private practices, hospitals, community health agencies, extended care facilities, assisted living facilities and skilled nursing facilities.

   b. *PTA116 Clinical Practicum II:*
   Clinical Practicum II is the second of three comprehensive clinical experiences in a physical therapy setting. The purpose of this intermediate experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, therapeutic modalities, advanced therapeutic techniques and neurophysiological techniques into an established physical therapy program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing facilities, geriatrics, pediatrics, home health agencies, in-patient and out-patient rehabilitation centers.

   c. *PTA119 Clinical Practicum III:*
   Clinical Practicum III is the third of three comprehensive clinical experiences in a physical therapy setting. The purpose of this final experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, special topics, and clinical management and health care issues into the delivery of a comprehensive physical therapy treatment program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing facilities, geriatrics, pediatrics, home health agencies, in-patient and out-patient rehabilitation centers.

3. **Attendance**

   a. *PTA110 Clinical Practicum I:*
   Students are expected to attend daily, during the clinical settings regular hours for three consecutive weeks, totaling 120 hours. Missed days for illness/personal reasons must be made up to meet the requirements of the experience.
b. **PTA116 Clinical Practicum II:**
   Students are expected to attend daily, during the clinical settings’ regular hours, for 6 consecutive weeks totaling 240 hours. *Missed days for illness and/or personal reasons must be made up to meet the requirements of the experience.*

c. **PTA119 Clinical Practicum III:**
   Students are expected to attend daily, during the clinical settings’ regular hours, for 6 consecutive weeks totaling 240 hours. *Missed days for illness and/or personal reasons must be made up to meet the requirements of the experience.*

4. **Failure/Termination**
   If a student fails or is terminated for any reason (academic, health, or other) in either PTA110, PTA116, or PTA119, there is NO automatic guarantee that he/she will be allowed to repeat the practicum. In order to repeat the internship, the student must make a request in writing within 10 days to the Program Director and ACCE.

   If the decision is made to allow the student to be reassigned to a clinic, the placement will depend on several prerequisites:
   a. *Availability of a clinic in the local area.*
   b. The student's signing a Release of Information form allowing MWCC to share relevant information with the clinic to which the student is reassigned. Upon review of that information, the clinic will have the option to accept or reject that student.
   c. When MWCC feels it is necessary, the student must seek and receive medical clearance and/or psychological counseling, during and/or prior to the student's assignment to the clinic.
   d. Upon failure/termination of PTA110, PTA116 or PTA119, a student (with approval as discussed above) will be allowed to repeat a total of one failed clinical. If the student fails to pass at this point, they will be automatically dismissed from the program.

* Housing and transportation are the responsibility of the student. PTA116 and PTA119 must be taken in sequence. Students may be asked to travel up to (1) hour and 15 minutes to/from their current place of residence to any given clinical location.

5. **Clinical Practicum Written/Oral Assignments**
   a. **Format for Clinical Practicum I Written Assignment (PTA110 only):**
      There is a written requirement for PTA 110 Clinical Practicum 1. This assignment will be in the form of a 1-2 page paper on a Clinical Performance Instrument skill level criteria that was the most challenging for you. Include “why” you felt it was challenging to meet the required skill level and “what” your plan is for improvement in this area.
b. Format for Clinical Reflection Paper assignment (PTA 119):
The student will:
Describe how they felt at the beginning of their clinical experiences and what the transition from classroom to clinical was like. To answer the following questions:
   a. What were the areas of greatest improvement?
   b. What were the areas of greatest challenge?
   c. What were the areas of greatest strength?
   d. What would you do differently a second time around?
In addition:
1. Include 2 of the APTA “Core Values of Professionalism” that were demonstrated by the CI or other PT professionals during the clinical experiences. Give Specific Examples.
2. Student to address whether their individual goals were met during the clinical experiences and what specific goals they will set for their future careers as PTA’s.

*Papers must be submitted to the ACCE within the first seven days after completion of the clinical experience. Failure to complete and return the paper by the due date will result in an “I” grade.

c. Format for In-Service Presentation (PTA116 and PTA119 only):
The student is responsible for a formal oral presentation to the clinical staff during Clinical Practica II and III. The topic of the presentation and the size of the audience are left up to the discretion of the Clinical Instructor (CI). The student is not allowed to use a previous oral presentation. The CI will be provided with an evaluation form for rating the student’s presentation performance.

d. Format for Case Study Assignment (PTA110):
The student is responsible for completing a case study assignment during Clinical Practica I. The purpose of this assignment is to present an overview and rationale for the physical therapy treatment provided to a selected patient. In addition, the student is to determine if the treatment selected and rendered provided satisfactory outcomes by attaining the patient’s established physical therapy goals. The case study must include five sections: PERSONAL HISTORY, INITIAL EVALUATIVE PHYSICAL THERAPY FINDINGS, COURSE OF PHYSICAL THERAPY, CURRENT PHYSICAL THERAPY FINDINGS, and a DISCUSSION section.

e. Format for Case Study Assignment (PTA 116):
The student will:
1. Identify a patient that they have been able to see for an initial evaluation & treatment and critically analyze their exercise program.
2. Write up the individual patient profile include the following information specific to students case study patient;
   a. Describe the patient, diagnoses, evaluation findings, treatment goals, approach and outcomes.
   b. Student then to research the diagnoses in the literature and the treatment approach in the literature.
c. Student to compare and discuss what was seen versus what has been reported in the literature.
d. Must have a minimum of 3 journal articles (published within the past 5 years) from scholarly peer-reviewed journals.
e. Discuss the similarities and differences (in regards to the exercise program or PT interventions) with the rationale for what was observed.

The case study assignment must be submitted to the MWCC ACCE within one week of the conclusion of Clinical Practicum I and II. Failure to submit this assignment by the due date will result in an “I” and may prevent the student from participating further in the MWCC PTA Program.

6. Standards for Clinical Experience
American Physical Therapy Association guidelines state that clinical experiences must be consistent with APTA standards of ethical practice and with the philosophy of the College's PTA program. They must be in facilities with measurable objectives to be accomplished by the student under the direction of qualified supervisors.

A written agreement, which defines the rights and responsibilities of the College, student, and clinical facility, is completed prior to all practicum assignments.

A licensed Physical Therapist or Physical Therapist Assistant with a minimum of one year of experience in direct service will be appointed by each clinical facility to supervise each affiliating MWCC student. In this supervisory relationship, both student and supervisor assume responsibility for: (1) identifying the student's specific learning needs and goals, and (2) formulating a plan of growth which leads to achievement of technical competencies. (Refer to Appendix J for a copy of the MWCC PTA Weekly Assessment Form. This form is used during clinical practicums to set goals and growth plans on a weekly basis.)

7. Information Sent to Clinical Facility Prior to Arrival of Student
The following information is sent to each CCCE to be forwarded to the CI for completion during each clinical practicum. Upon completion of the practicum, all forms are to be forwarded immediately to the ACCE so that grading can be done on a timely basis:
a. Student Liability Insurance Binder
b. Student Introduction Form (Appendix B)
c. Requirements to Participate in Clinical Practica Form (Appendix C)
d. Blood Borne Pathogens Exposure Worksheet (Appendix Q)
e. Student Weekly Assessment Forms (Appendix G)
f. Appropriate Clinical Practicum Course Syllabus (Appendix D, E, F)
g. Physical Therapist Assistant Clinical Performance Instrument
h. Student Critique of Clinical Facility (Appendix I)
i. Evaluation of PTA Program and ACCE (Appendix J)
j. In-Service Presentation Form (Appendix K)

The student will contact the CCCE and/or CI two weeks prior to the start of the practicum to confirm dates, dress code, hours of practicum, and/or to request additional information if necessary.
D. EVALUATION POLICIES AND PROCEDURES FOR CLINICAL EDUCATION

1. Evaluation of the Student

a. PTA110 Clinical Practicum I:
   A letter grade for this course is determined through evaluation by the clinical instructor(s) and the Mount Wachusett Community College ACCE based on the following:

   Course Evaluation:

   Grading:

<table>
<thead>
<tr>
<th>%</th>
<th>Activity</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Case Study</td>
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</tr>
<tr>
<td>10</td>
<td>Skill Criteria paper</td>
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</tr>
<tr>
<td>70</td>
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Grading of clinical affiliation PTA 110

<table>
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<tr>
<th>Content</th>
<th>Possible Points</th>
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</thead>
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<tr>
<td>Timely completion Service Learning Project</td>
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<tr>
<td>Timely completion of Final CPI</td>
<td>5</td>
</tr>
<tr>
<td>Weekly Progress Notes</td>
<td>5</td>
</tr>
<tr>
<td>Communication with ACCE (verbal &amp; written)</td>
<td>10</td>
</tr>
<tr>
<td>Meeting MWCC PTA/CPI grading rubric</td>
<td>75*</td>
</tr>
</tbody>
</table>

1. converting the total number of points earned by the student into a percentage of the total possible points. The percentage is then converted into a letter grade as follows:
   A 93 -100,  A- 90-92,  B+ 87-89,  B 83-86,  C+ 77-79,  C 70-76,  D 60-69,  F less than 59

*student must achieve a minimum of 57 of the available 75 points on the final CPI grading rubric to pass clinical.

Failure to meet the requirement for all “Red Flagg Items” may result in failing clinical. Students who do not turn in the Case study and Reflection Paper will receive a grade of ‘I’
*Students must achieve a minimum grade of “C+” or higher in order to continue in sequence in the PTA Program.

1) Successful completion of all course objectives based on patient availability and clinical education sites.

2) Regular attendance, enthusiasm, motivation, interest, professionalism, and performance of learned PTA skills during clinical Practicum I per the evaluation completed by the assigned clinical instructor.

3) Timely and quality completion of the clinical Practicum I Written Assignment.

4) Timely and quality completion of the Case Study Assignment.

_Students who do not turn in the Written Assignment and Case Study will receive a grade of “I”._

The Web Based Physical Therapist Assistant Clinical Performance Instrument (WEB PTA CPI) is the assessment tool and will be completed at the conclusion of the practicum by the clinical instructor(s). All students, CI’s and CCCE’s are required to complete the APTA tutorial prior to gaining access to the Web Based CPI.

b. _PTA 116 Clinical Practicum II and 119 Clinical Practicum III:_
A letter grade for these courses is determined through evaluation by the clinical instructor(s) and the Mount Wachusett Community College ACCE based on the following:

**Course Evaluation:**

**Grading:**

<table>
<thead>
<tr>
<th>%</th>
<th>Activity</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Assigned Paper</td>
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<tr>
<td>10</td>
<td>In-Service Presentation</td>
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<tr>
<td>70</td>
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Grading of clinical affiliation PTA 116 and 119

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<tr>
<th>Content</th>
<th>Possible Points</th>
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<td>Timely completion of Final CPI</td>
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<tr>
<td>Weekly Progress Notes</td>
<td>5</td>
</tr>
<tr>
<td>Communication with ACCE (verbal &amp; written)</td>
<td>10</td>
</tr>
<tr>
<td>Meeting MWCC PTA/CPI grading rubric</td>
<td>75*</td>
</tr>
</tbody>
</table>

1. Converting the total number of points earned by the student into a percentage of the total possible points. The percentage is then converted into a letter grade as follows:
   A 93 -100  A- 90-92  B+ 87-89  B 83-86  C+ 77-79  C 70-76  D 60-69  F less than 59

*Students must achieve a minimum of 57 of the available 75 points on the final CPI grading rubric to pass clinical. **Failure to meet the requirement for all “Red Flag Items” may result in failing clinical. Students who do not turn in the Paper assignments will receive a grade of ‘I’”

*Students must achieve a minimum grade of “C+” or higher in order to continue in sequence in the PTA Program.

1) Successful completion of all course objectives based on patient availability and clinical education sites.

2) Regular attendance, enthusiasm, motivation, interest, professionalism, and performance of learned PTA skills during Clinical Practicum II per assigned clinical instructor’s completion of assessment tool .

3) Timely and quality completion of the Clinical Practicum II Case Study Assignment.

4) Timely completion, presentation, and content of the Clinical Practicum II In-Service Presentation Assignment as evaluated using inservice presentation evaluation form.

Students who do not turn in an evaluation of their inservice as well as their case study will receive a grade of “I”.

The Web Based Physical Therapist Assistant Clinical Performance Instrument (WEB PTA CPI) is the assessment tool and will be completed at midterm and at the conclusion of the practicum by the clinical instructor(s). All students,
CI’s and CCCE’s are required to complete the APTA tutorial prior to gaining access to the Web Based CPI.

c. **PTA119 Clinical Practicum III:**
A pass/fail grade for this course is determined by through evaluation by the clinical instructor(s) and the Mount Wachusett Community College ACCE based on the following:

1) Successful completion of all course objectives based on patient availability and clinical education sites.

2) Regular attendance, enthusiasm, motivation, interest, professionalism, and performance of learned PTA skills during Clinical Practicum III as evaluated by clinical instructor’s completion of clinical practicum III evaluation form.

3) Timely and quality completion of the Clinical Practicum III Case Study Assignment.

4) Timely completion, presentation, and content of the Clinical Practicum III In-Service Presentation Assignment.

*Students who do not turn in an evaluation of their inservice as well as their case study will receive a grade of “I”.*

The Web Based Physical Therapist Assistant Clinical Performance Instrument (WEB PTA CPI) is the assessment tool and will be completed at midterm and at the conclusion of the practicum by the clinical instructor(s). All students, CI’s and CCCE’s are required to complete the APTA tutorial prior to gaining access to the Web Based CPI.

You will not be allowed to continue in sequence in the PTA program if you fail Clinical Practicum III.

2. **Evaluation of Each Clinical Facility**
Regular evaluation of each clinical facility is critical to the success of the clinical education program. During each clinical practicum, affiliating students complete the PTA Student Critique of Clinical Facility Form (Appendix I) which will be forwarded to MWCC’s ACCE for review upon completion/termination of the practicum. Each clinical facility will also be evaluated by: regular review of completed Clinical Center Information Forms (Appendix M); during on-site visits performed by the MWCC ACCE during each clinical practicum; and upon review of Clinical Performance Instrument of student performance. The ACCE and PTA faculty will use the results of these evaluations in planning for future practicums and to provide feedback to individual facilities for future experiences. A clinical facility may request a copy of the student critique of their facility from the ACCE.
3. **Evaluation of the MWCC PTA Program and ACCE**

Regular evaluation of the ACCE and the MWCC PTA Program is critical to the success of the Physical Therapist Assistant Program. After each clinical practicum, the CCCE, CI, and/or other clinical faculty complete the Evaluation of the MWCC PTA Program and ACCE Form (Appendix J) which will be forwarded to the MWCC’s ACCE for review by the PTA faculty. PTA faculty will use the results of these evaluations to update and improve the existing academic and clinical education programs. Clinical faculty are also encouraged to offer feedback during the Clinical Educators’ Meeting held each semester which provides a forum for all MWCC faculty, both academic and clinical, to interact, share ideas, and facilitate program growth and development.

E. **RESPONSIBILITIES OF THE MWCC ACADEMIC COORDINATOR OF CLINICAL EDUCATION (ACCE)**

1. Assigns all eligible students to clinical education placements, confirms the assignment (in writing) with each clinical supervisor, notifies each student of his/her placements. (Refer to Criteria for Placing Students on Clinical Practica, page 20, for additional information.)

2. Assures that all written contracts and letters of agreement between the College and the facility are signed and reviewed annually. Forwards all appropriate forms/information on a timely basis.

3. Makes regular contacts, by phone or in person, with each clinical facility in which students are placed. Conducts on-site visits for each student during Clinical Practica I, II, and III. Emergency on-site visits by the ACCE can be requested at any time at the discretion of the clinical facility.

4. Maintains a current file of information on each facility.

5. Maintains a current file of information on each PTA student.

6. Identifies and investigates new sites for clinical education.

7. Orients students to the purpose of clinical education and provides regularly scheduled monthly meetings.

8. Provides the students with forms needed to plan for clinical placements and reviews their content with each student.

9. Is available at scheduled times to meet with students concerning any of the clinical placements. (Scheduled office hours will be posted prior to the start of each semester.)
10. Assigns a final grade to PTA110, PTA116, and PTA119, Clinical Practica I, II, and III.

11. Attends monthly PTA academic faculty meetings.

12. Attends PTA Advisory Board meetings held each semester.

13. Organizes and establishes the agenda, content, and guest speaker for the Clinical Educators’ meeting scheduled each year.

F. RESPONSIBILITIES OF THE MWCC PTA STUDENT

1. Communicates with Academic Coordinator of Clinical Education through individual interviews, written requests, group presentations, email and/or telephone, as appropriate. The student is expected to actively and cooperatively assist the ACCE in determining his/her specific clinical education objectives.

2. Attends all meetings (individual and group) with the ACCE. Students are notified concerning the dates and times of clinical education meetings at the beginning of each semester. Schedules are also posted on the ACCE’s office door and PTA bulletin board. Attendance is mandatory and will be monitored. Participation in each of Clinical Practicums I, II, and III are dependent in part on attendance in these sessions and fulfilling required assignments given during these sessions.

3. Reviews the Clinical Center Information file on a particular clinical facility once placement has been assigned. Information to be reviewed includes the CCCE, dress code, hours of operation, and any requirements unique to that facility. Files are maintained in the ACCE’s office. Students can review these files during the ACCE’s scheduled office hours.

4. Two weeks prior to the starting date, a student must write or call the clinical supervisor of the facility to which he/she is assigned. The letter is to confirm the clinical experience assignment dates as well as to confirm the student's arrival.

5. Complies with the requirements of the clinical facility to which they have been assigned which includes dress code, hours of operation, confidentiality, etc.

6. Notifies both their clinical instructor and ACCE AS SOON AS FEASIBLY POSSIBLE if they will be absent or tardy. All absences and hours missed must be made up prior to the completion of a clinical practicum at the convenience of the clinical facility.

7. Provides transportation to and from their clinical facility. A student may be required to drive up to one (1) hour’s distance to a given clinical site.
8. **Incurs** all expenses associated with clinical education (in addition to tuition) including, but not limited to: transportation, meals, liability insurance, clothing/uniform, lab coat, name tag, and CPR certification.

9. Meets all requirements to participate in clinical practica (Appendix C).

10. Adheres to the Guidelines for Professional Conduct and Code of Ethics for the Affiliate Member as maintained by the American Physical Therapy Association

11. Adheres to the Drug and Alcohol Policies applicable to Mount Wachusett Community College*

* In the event that it is suspected that a PTA student is under the influence of drugs and/or alcohol on a clinical or PTA sponsored event, they will not be permitted to participate in that experience. The PTA Program Director and ACCE will be notified by the involved clinical or academic faculty. Safe transportation from the event and to the student’s place of residence is the responsibility of the student to include any costs associated with said transportation. In addition, the involved clinical or academic faculty has full discretion regarding the safety and adequacy of said transportation arrangements.

Occasionally a facility will cancel an affiliation prior to its start because of unforeseen circumstances. In the event of a last minute cancellation, every effort will be made to secure a comparable clinical replacement, depending on the availability of existing clinical sites.
VIII. SUMMARY OF FORMS, ASSESSMENTS, AND EVALUATION TOOLS UTILIZED IN THE MWCC PTA CLINICAL EDUCATION PROGRAM

*1. Clinical Practicum Preference Information Form (Appendix A)
   • Completed by student prior to participation in Clinical Practicum I; Allows the student to indicate first, second, and third preferences of clinical assignments. Lists potential conflicts of interest a student may encounter with any particular clinical assignment; Allows student to list any special consideration that the ACCE needs to be aware of in assigning the student to a particular facility.

*2. Clinical Practicum Student Introduction Form (Appendix B)
   • Completed by the student prior to participation in each of the three clinical practicums. Allows the student to inform the Clinical Instructor of: the student’s previous clinical experience, areas of strength/weakness, expected learning experiences, potential medical problems encountered, and specific learning styles that the student has identified as being receptive to in previous educational experiences.

*3. Requirements to Participate in Clinical Practicums (Appendix C)
   • Completed by student prior to participation in Clinical Practicum I. This form details MWCC PTA program requirements that the student must meet to become eligible for participation in each of the three clinical practicums.

*4. Clinical Practicum I (PTA110) Course Syllabus (Appendix D)
   • Details course description, prerequisites, evaluation, attendance policy, and course objectives for Clinical Practicum I (PTA110).

*5. Clinical Practicum II (PTA116) Course Syllabus (Appendix E)
   • Details course description, prerequisites, evaluation, attendance policy, and course objectives for Clinical Practicum II (PTA116).

*6. Clinical Practicum III (PTA119) Course Syllabus (Appendix F)
   • Details course description, prerequisites, evaluation, attendance policy, and course objectives for Clinical Practicum III (PTA119).

*7. WEB Based Physical Therapist Assistant Clinical Performance Instrument (WEB PTA CPI)
   • Completed by the Clinical Instructor (CI) and PTA student at the conclusion of PTA 110 and at mid-term and at the conclusion of PTA 116 and PTA 119. The student and CI will each complete the form and should arrange an opportunity to sit and discuss scoring. The grade for each clinical is based on the CI’s evaluation, timely completion of the ACCE’s assignments, the in-service performance presented to the clinical staff during the practicum, and a case study assignment due after the conclusion of each Clinical Practicum.
*8. **Weekly Assessment Form (Appendix G)**
   • Completed weekly by the student during each of the three clinical practicums. This form is designed for the student: to identify their strengths/weaknesses, to track what they have observed and/or participated in, list last week’s goals that have been met during the practicum, and to define future goals during the remainder of their clinical practicum. The CI will find that this form is a valuable tool in: tracking students’ weekly progress, organizing the student’s learning experiences, and serving as an aid in completing the WEB PTA CPI.

*9. **Value Based Behaviors Assessment of the PTA (Appendix H)**
   • Completed by the MWCC PTA program faculty at midterm of each semester and reviewed with student. Completed forms are kept in each student’s MWCC file (ACCE office). Data can be used by students as part of individual’s identification of strengths and weaknesses.

*10. **PTA Student Evaluation: Clinical Experience & Clinical Instruction (Appendix I)**
   • Completed by the student at the conclusion of each of the three clinical practicums. The student is not required to discuss this evaluation with the Clinical Instructor. The Clinical Instructor and/or Coordinator of Clinical Education can request a copy of this form be sent by the MWCC PTA Academic Coordinator of Clinical Education (ACCE) after the conclusion of the clinical practicum.

*11. **Evaluation of MWCC PTA Program and ACCE (Appendix J)**
   • Completed by the Coordinator of Clinical Education (CCE) and/or the Clinical Instructor (CI) of the affiliating institution at the conclusion of each of the three clinical practicums. This form enables the clinical staff the opportunity to critique both the MWCC PTA program and the effectiveness of the MWCC Academic Coordinator of Clinical Education (ACCE). The MWCC PTA faculty utilizes this form to update and prove our existing academic and clinical education curriculum.

*12. **In-Service Presentation Form (Appendix K)**
   • Completed by the Clinical Instructor (CI) after completion of the assigned presentation during Clinical Practicums II and III. The topic of the presentation is determined by the student with approval by the Clinical Instructor. The size and make-up of the audience are determined by the CI. The student may not use a presentation from an earlier assignment and must present two (2) different topics during Clinical Practicums II and III.

*13. **Clinical Practicum Agreement (Appendix L)**
   • This is the formal written agreement between Mount Wachusett Community College and the clinical facility agreeing to accept PTA students for clinical practicum assignment. This form details the facility’s responsibilities, the College’s responsibilities, and both parties’ responsibilities. A completed agreement form, signed by the College and the institution, is required prior to having a PTA student participate in a clinical practicum(s). It will be renewed on an annual basis.

*15. Health Requirements Release Form (Appendix T)
This information is sent to a clinical facility prior to each clinical practicum. It should be completed and returned to the ACCE immediately following the completion of each clinical practicum.
PHYSICAL THERAPIST ASSISTANT PROGRAM
CLINICAL PRACTICUM PREFERENCE INFORMATION

STUDENT NAME

ADDRESS

PHONE

Indicate your first, second, and third preference for a clinical affiliation. An attempt will be made to place a student in at least one affiliation which he/she has expressed as a preference. Since many factors are considered and all affiliations are not active during each semester, a student may not be able to be assigned to his preference. Announced placements are considered tentative and subject to change if the faculty become aware of a low staff and/or low patient load situation, for example. Also, if a previous clinical instructor(s) recommends repetition of basic skill, the student may be placed in a facility similar to the one previously attended.

INDICATE "1ST", "2ND", AND "3RD" CHOICES IN ORDER OF PREFERENCE:

_____ Acute Care Hospital

_____ Industrial Rehabilitation

_____ Outpatient Center

_____ Private Practice

_____ ECF/Nursing Home/SNF

_____ Subacute Rehabilitation

_____ Federal/State/County Health (VA, Pediatric/Adult Developmental Center)

_____ School/Preschool System

_____ Home Health Care

_____ Wellness/Prevention Program

_____ Other -- Please describe

If you wish a specific facility(s) relating to your general preference expressed above, please list:

__________________________________________________________________

I. Do you have any personal relationships, i.e., relative/friend in any of the physical therapy departments that are utilized as clinical affiliations? If so, please name the affiliation(s). This question is asked to avoid the student being assigned an affiliation in which either the student or clinical instructor would feel a conflict of interest.

II. Please list previous experience(s) relating to physical therapy (volunteer and/or employment) naming the facility and function.

III. Do you have any special considerations that the ACCE should be aware of such as housing or transportation difficulties that may impact your clinical placement?
PHYSICAL THERAPIST ASSISTANT PROGRAM
CLINICAL PRACTICUM STUDENT INTRODUCTION FORM

STUDENT NAME_________________________ FACILITY NAME_________________________
STUDENT ADDRESS_______________________ FACILITY ADDRESS_______________________
_______________________________________ _________________________________
_______________________________________ _________________________________
STUDENT PHONE________________________ FACILITY PHONE________________________
STUDENT MWCC EMAIL ______________________
LEVEL OF THIS CLINICAL PRACTICUM   I    II    III
DATES OF CLINICAL PRACTICUM______________________________
LENGTH OF CLINICAL PRACTICUM: WEEKS_________/HOURS_________

I. Previous Clinical Practicums
   1. Clinical Practicum I (160 Total Hours) ______________________________
      ______________________________
      ______________________________
      ______________________________

   2. Clinical Practicum II (240 Total Hours) ______________________________
      ______________________________
      ______________________________
      ______________________________

II. Previous professional related experience, if any, such as volunteer work or employment
__________________________________________
__________________________________________
__________________________________________
__________________________________________
__________________________________________
III. Student’s Self-Assessment
   1. Describe areas of strength.
   
   2. Describe areas of need.
   
   3. List specific learning experiences you hope will be offered at this affiliation.
   
   4. Indicate any medical problems of which your affiliation should be aware.

IV. Student’s Learning Style
   1. Describe learning styles/types of supervision that you predict would be helpful to you.
      (   ) Close supervision during the first part of the affiliation, then gradually decreasing supervision for the remainder of the time
      (   ) Given suggestions/feedback each clinic day
      (   ) Allowed independent performance in areas of strength
   
   2. Describe preferred pattern of assignment of student to professional staff understanding that the staff make the final decisions based on many considerations.
      (   ) One PT/PTA for the entire practicum
      (   ) Alternating between two PT/PTAs throughout the practicum
      (   ) Rotating to a second PT/PTA @ midterm
      (   ) Other, please describe
REQUIREMENTS TO PARTICIPATE IN CLINICAL PRACTICUMS

As a student of the PTA program at Mount Wachusett Community College, I am aware and fully understand that the following requirements must be met as prerequisites prior to participating in Clinical Practicum I, II, and III. Failure to meet these requirements will prevent me from participating in any clinical practicum experience.

1. Grade point average at least 2.77 (C+) or better in all Physical Therapy courses and Anatomy/Physiology I & II

2. Attendance at all mandatory Clinical Education meetings and timely completion of required forms assigned by the ACCE

3. Health Requirements
   - Physical Exam
   - TB Screening
   - Rubella Immunization
   - Measles Immunization
   - Mumps Immunization
   - Tetanus/tDap Immunization
   - Hepatitis B Immunization
   - Chicken Pox History

4. Current Liability Insurance

5. Health-Care Provider CPR Certification

6. Mount Wachusett Name Tag Purchased

7. Completion of an acceptable CORI evaluation

Print __________________________ Sign __________________________ Date __________________________

I certify the health information to be true and accurate in accordance with my records.

Diane King, BSN, RN, HNC
Mount Wachusett Community College
Health and Wellness Nurse

Margaret Jailet, PT DPT ACCE
Mount Wachusett Community College
CORI Coordinator PTA Program
COURSE SYLLABUS

COURSE TITLE: PTA110 Clinical Practicum I
DIVISION: Health Professions, Public Service Programs & Social Sciences
DEPARTMENT: Physical Therapist Assistant
CREDITS: 3.0
COURSE HOURS: 120 hours/semester
              40 hours/week; 3 weeks
PREREQUISITES: PTA106, PTA107, PTA139
INSTRUCTOR(S): ACCE and Clinical Instructor(s) of Assigned Clinical Site

COURSE DESCRIPTION:
Clinical Practicum I is the first of three comprehensive clinical experiences in a Physical Therapy setting. The purpose of this initial experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. Basic patient care skills, anatomy/biomechanics, therapeutic exercise, selected assessment techniques, and human disease and pathology will be emphasized. Typical practice settings may include acute care hospitals, private practice, skilled nursing centers, out-patient rehabilitation centers.

TEACHING METHODOLOGY: Students will obtain skill in course materials through the following to encourage problem-solving and/or critical thinking skills:

• observation
• demonstration
• instruction
• discussion
• practice
• performance
• literature review
• assignments
COURSE EVALUATION:
Grading:

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<th>%</th>
<th>Activity</th>
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<tr>
<td>10</td>
<td>Skill Criteria paper</td>
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Grading of Clinical Affiliation:

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<tr>
<td>Timely completion of Final CPI</td>
<td>5</td>
</tr>
<tr>
<td>Weekly Progress Notes</td>
<td>5</td>
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<tr>
<td>Communication with ACCE (verbal &amp; written)</td>
<td>10</td>
</tr>
<tr>
<td>Meeting MWCC PTA/CPI grading rubric</td>
<td>75 *</td>
</tr>
</tbody>
</table>

The final letter grade for the course is determined by converting the total number of points earned by the student into a percentage of the total possible points. The percentage is then converted into a letter grade as follows:

A 93-100  A- 90-92  B+ 87-89  B 83-86  B- 80-82  C+ 77-79  C 70-76  D 60-69  F less than 59.

*student must achieve a minimum of **57 of the available 75 points on the final CPI grading rubric** to pass clinical. **Failure to meet the requirement for all “Red Flagg Items” may result in failing clinical.**

*students must achieve a minimum grade of “C+” or higher in order to continue in sequence in the PTA Program.

* Refer to PTA Student Handbook regarding policy for repeating a practicum in the event of failure.

ATTENDANCE POLICY:
Students are expected to attend daily, during the clinical settings regular hours, for four consecutive weeks, totaling 120 hours. Missed days for illness/personal reasons must be made up.

FORMAT FOR CLINICAL PRACTICUM I WRITTEN ASSIGNMENT:
There is a written requirement for PTA110 Clinical Practicum I. This assignment will be in the form of a 1-2 page paper on a CPI skill level criteria that was the most challenging for you. Include why your felt it was challenging to meet the required skill level and what your plan is for improvement in this area.

* Papers must be submitted to the ACCE within the first seven days after completion of the clinical experience. Failure to complete and return the paper by the due date will result in an “F”. You may also be dismissed from the program.
FORMAT FOR CASE STUDY ASSIGNMENT:
The student is responsible for completing a case study assignment during Clinical Practicum I. The purpose of this assignment is to present an overview and rationale for the physical therapy treatment provided to a selected patient. In addition, the student is to determine if the treatment selected and rendered provided satisfactory outcomes by attaining the patient’s established physical therapy goals. The case study must include five sections: PERSONAL HISTORY, INITIAL EVALUATIVE PHYSICAL THERAPY FINDINGS, COURSE OF PHYSICAL THERAPY, CURRENT PHYSICAL THERAPY FINDINGS, and a DISCUSSION section. The case study assignment must be submitted to the MWCC ACCE by the first Tuesday that follows the last day of Clinical Practicum I. Failure to submit this assignment by the due date will result in an “F” and will prevent the student from participating further in the MWCC PTA Program.

MEASURABLE PERFORMANCE OBJECTIVES:
At the completion of the course, the student will:
1. Perform professional behavior patterns consistent with employer’s expectations and professional association guidelines in course competency areas for physical therapist assistants. These behaviors include, but are not limited to, adhering to designated times for each educational experience, following a dress code, being adequately prepared, displaying appropriate interpersonal dynamics and communication skills.

Demonstrate the role and utilization of the Physical Therapist Assistant in the delivery of a safe and effective plan of care.

3. Safely, ethically, and legally perform the responsibilities of the Physical Therapist Assistant as defined by Mount Wachusetts Community College, the facility, the Guide for Conduct of the Affiliate Member, Standards of Ethical Conduct for the PTA, and state law.

4. Demonstrate the initiative to build knowledge, assemble skills, and improve techniques by asking appropriate questions and utilizing available resources.

5. Demonstrate appropriate interaction and teaching through accurate and effective verbal and non-verbal communication with the patient, patient’s family, and fellow health care providers.

6. Effectively communicate with the supervising Physical Therapist and/or Physical Therapist Assistant regarding patient progress, treatment modifications, changes in patient physiological response, and any observations relevant to the welfare of the patient.

7. Use accurate, concise, and appropriate terminology when documenting aspects of patient care.

8. Demonstrate effective preparation and appropriate modification to changes in physiological response when implementing the plan of care, as directed by a licensed Physical Therapist.

9. Demonstrate the ability to correctly follow instructions given by the supervising Physical Therapist and/or Physical Therapist Assistant when assisting with unfamiliar procedures, tests, and assessments.
10. Demonstrate the following skills directed by the supervising Physical Therapist/Physical Therapist Assistant safely and competently (to include use of proper body mechanics and appropriate use of universal precautions):
   a) Implement the following basic patient care skills (to include appropriate safety, communication, and level of assistance):
      1. universal precautions/asepsis
      2. body mechanics (self and patient instruction)
      3. draping
      4. positioning and turning
      5. wheelchair prescription and management (including negotiation of architectural barriers)
      6. transfer training
      7. ambulation with assistive devices (including gait pattern/weightbearing instruction, measurement, and adjustment of assistive devices)
      8. therapeutic massage
   b) Implement the following therapeutic exercise and functional activities into the patient’s plan of care:
      1. PROM
      2. AAROM/AROM (concentric/eccentric)
      3. Progressive resistive exercise (concentric/eccentric; isometric, isotonic, isokinetic; manual and mechanical resistance)
      4. Open vs. closed chain exercise
      5. Stretching (active and passive; manual and mechanical)
      6. Endurance/cardiovascular exercise
      7. Selected exercise protocols (ACL, patellofemoral, frozen shoulder, posture and scoliosis, THR, TKR)
   c) Perform the following assessment/measurement procedures integrating the findings into the patient’s plan of care:
      1. vital signs
      2. pain
      3. skin integrity and sensation
      4. posture
      5. segmental length, girth, volume
      6. balance and coordination
      7. functional activities
      8. environmental assessment/architectural barriers
      9. goniometry
      10. manual muscle testing
      11. measurement of assistive devices
      12. normal and pathological gait analysis
   d) Demonstrate the ability to design a safe and effective home exercise program (including patient instruction/education) based on goals identified in the physical therapy plan of care.

11. Demonstrate the participation in discharge planning and follow-up care.

12. Demonstrate introductory organizational skills by compiling and preparing relevant information into the form of a daily log.
13. Participate in a variety of learning activities such as: observation of surgery, other healthcare disciplines, departmental quality assurance; attend in-services, etc. (the performance of this objective is facility, caseload, and time availability dependent).

14. Assimilate relevant didactic material and treatment rationale into clinical practice by composing an acceptable case study assignment.

* Completion of the preceding objectives is dependent on each clinical site and the availability of patients during the time of Clinical Practicum I.

STATEMENT ON DISABILITIES:
If you have a disability, a medical or emotional issue which might impact on your class performance, please consult with the instructor in the privacy of his/her office so that the College may provide the required and appropriate accommodations for you. It is most beneficial if the disclosure is made early in the semester. This could include learning disabilities, brain injury, attention deficit disorder, epilepsy, diabetes, visual and hearing impairments, etc., just to name a few. For consideration of accommodations schedule a meeting with the Coordinator of Student Disability Services, where accommodations are discussed on a case by case basis.
COURSE SYLLABUS

COURSE TITLE: PTA116 Clinical Practicum II
DIVISION: Health Professions, Public Service Programs & Social Sciences
DEPARTMENT: Physical Therapist Assistant
CREDITS: 5.0
COURSE HOURS: 240 hours/semester
40 hours/week, 6 weeks
PREREQUISITES: PTA112, PTA113, PTA114
INSTRUCTOR(S): ACCE and Clinical Instructor(s) of assigned clinical sites

COURSE DESCRIPTION:
Clinical Practicum II is the second of three comprehensive clinical experiences in a physical therapy setting. The purpose of this intermediate experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, therapeutic modalities, advanced therapeutic techniques, and neurophysiological techniques into an established physical therapy program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, in-patient and out-patient rehabilitation centers, V.A. hospitals, and psychiatric centers.

TEACHING METHODOLOGY Students will obtain skill in course materials through the following to encourage problem-solving and critical thinking skills:

- demonstration
- discussion
- practice
- performance
- instruction
- literature review
- presentation
- assignments
COURSE EVALUATION:

Grading:

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<tr>
<td>Communication with ACCE (verbal &amp; written)</td>
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</tr>
<tr>
<td>Meeting MWCC PTA/CPI grading rubric (attached)</td>
<td>75*</td>
</tr>
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Grading Scale

The final letter grade for the course is determined by converting the total number of points earned by the student into a percentage of the total possible points. The percentage is then converted into a letter grade as follows:

A 93-100  A- 90-92  B+ 97-89  B 83-86  B- 80-82  C+ 77-79  C 70-76  D 60-69  F less than 59

* Students must achieve a minimum of 57 of the available 75 points on the final CPI grading.

Students must achieve a grade of “C+” or higher in order to continue in sequence in the PTA Program.

1. Successful completion of all course objectives based on patient availability and clinical education sites.

2. Regular attendance, enthusiasm, motivation, interest, professionalism, and performance of learned PTA skills during Clinical Practicum II.

3. Timely completion of the Clinical Practicum II Case Study Assignment.

4. Timely completion, presentation, and content of the Clinical Practicum II In-Service Presentation Assignment.

The Web Based Physical Therapist Assistant Clinical Performance Instrument is the assessment tool and will be completed at the mid-term and conclusion of the practicum by the clinical instructor(s).

The scoring for the Web Based CPI will be shared with students and will be available in the PTA student handbook.

Students will not be allowed to continue in sequence in the PTA program if they fail PTA 116 Clinical Practicum II.

* Refer to the PTA Student Handbook regarding the policy for repeating a practicum in the event of failure, pgs. 20-21.
ATTENDANCE POLICY:
Students are expected to attend daily, during the clinical settings’ regular hours for 6 consecutive weeks totaling 240 hours (5 days/week) over 6 weeks. Missed days for illness and/or personal reasons must be made up.

FORMAT FOR WRITTEN ASSIGNMENT:
The student will identify one of the patients that they were able to see for an initial evaluation and treatment and critically analyze their exercise program. The paper will describe the following: The patient, diagnosis, evaluation findings, treatment goals, treatment approach and treatment outcomes. Research: The diagnosis and the treatment approach in the literature then compare and discuss what your see versus what has been reported in the literature. The case study needs to include a bibliography that contains at least 3 journal articles (published within the past 5 years) from scholarly peer-reviewed journals. The case study must follow the Physical Therapist Assistant Program required APA style documentation.

FORMAT FOR IN-SERVICE PRESENTATION:
The student is responsible for presenting a formal oral presentation to the clinical staff during Clinical Practicum II. The topic of the presentation and the size of the audience are left to the discretion of the Clinical Instructor (CI). The student is not allowed to use a previous oral presentation and is responsible for two different oral presentations for Clinical Practicums II and III. The CI will be provided with an evaluation form for rating the student’s presentation performance.

MEASURABLE PERFORMANCE OBJECTIVES:

At the completion of the course, the student will:
1. Perform professional behavior patterns consistent with employer’s expectations and professional association guidelines in course competency areas for physical therapist assistants. These behaviors include, but are not limited to, adhering to designated times for each educational experience, following a dress code, being adequately prepared, displaying appropriate interpersonal dynamics and communication skills.

2. Appropriately demonstrate the role and utilization of the Physical Therapist Assistant in the delivery of a safe and effective plan of care.

3. Safely, ethically, and legally perform the responsibilities of the Physical Therapist Assistant as defined by Mount Wachusett Community College, the facility, the Guide for Conduct of the Affiliate Member, Standards of Ethical Conduct for the PTA, and state law.

4. Perform objectives and procedures which met basic competence when performed during PTA110 with appropriate supervision and utilizing various patient populations in order to attain proficiency (higher degree of competence).

5. Demonstrate the initiative to build knowledge, assemble skills, and improve techniques by asking appropriate questions and utilizing available resources.

6. Demonstrate appropriate interaction and teaching through accurate and effective verbal and non-verbal communication with the patient, patient’s family, and fellow health care providers.
7. Regularly and effectively communicate with the supervising Physical Therapist and/or Physical Therapist Assistant regarding patient progress, treatment modifications, changes in patient physiological response, and any observations relevant to the welfare of the patient.

8. Regularly use accurate, concise, and appropriate terminology when documenting aspects of patient care.

9. Regularly demonstrate effective preparation and appropriate modification to changes in physiological response when implementing the plan of care, as directed by a licensed Physical Therapist.

10. Regularly demonstrate the ability to follow instructions given by the supervising Physical Therapist and/or Physical Therapist Assistant when assisting with unfamiliar procedures, tests, and assessments.

11. Integrate the following skills into the patient plan of care as directed by the supervising Physical Therapist/Physical Therapist Assistant safely and competently (to include proper body mechanics and appropriate use of universal precautions):
   a) Implement the following basic patient care skills (to include appropriate safety, communication, and level of assistance):
      1. universal precautions/asepsis
      2. body mechanics (self and patient instruction)
      3. draping
      4. positioning and turning
      5. wheelchair prescription and management (including negotiation of architectural barriers)
      6. transfer training
      7. ambulation with assistive devices (including gait pattern/weightbearing instruction, measurement, and adjustment of assistive devices)
      8. therapeutic massage
      9. wound care/dressing
     10. residual limb bandaging
     11. functional activities
     12. preprosthetic and prosthetic training
     13. donning/doffing orthotics and prostheses
   b) Implement the following therapeutic exercise and functional activities into the patient’s plan of care:
      1. PROM
      2. AAROM/AROM (concentric/eccentric)
      3. Progressive resistive exercise (concentric/eccentric; isometric, isotonic, isokinetic; manual and mechanical resistance)
      4. Open vs. closed chain exercise
      5. Stretching (active and passive; manual and mechanical)
      6. Endurance/cardiovascular exercise
      7. Selected exercise protocols (ACL, patellofemoral, frozen shoulder, posture and
scoliosis, THR, TKR)
8. pulmonary hygiene (postural drainage, percussion, vibration)
9. breathing retraining and exercise
10. cardiac rehabilitation (phase I)
11. basic amputee management (therapeutic exercise, gait training)
12. basic therapeutic exercise implementation for burn, SCI, TBI, pediatric, and geriatric patients
13. neuromuscular facilitation (proprioceptive and exteroceptive)
14. balance and coordination programs
15. developmental sequence
16. neuromuscular re-education
17. righting and equilibrium reactions

c) Perform the following assessment/measurement procedures integrating the findings into the patient’s plan of care:
1. vital signs
2. pain
3. skin integrity and sensation
4. posture
5. segmental length, girth, volume
6. balance and coordination
7. functional activities
8. environmental assessment/architectural barriers
9. goniometry
10. manual muscle testing
11. measurement of assistive devices
12. normal and pathological gait analysis
13. righting and equilibrium reactions
14. auscultation

d) Implement the following treatment modalities and interventions into the patient’s plan of care (to include entry-level safety, knowledge of physiological and therapeutic effects, indications and contraindications):
1. hydrocollator packs
2. cryotherapy (ice packs, ice massage, cryocuff)
3. paraffin
4. infrared lamp
5. hydrotherapy
6. ultraviolet
7. ultrasound (pulsed and continuous)
8. phonophoresis
9. diathermy (shortwave)
10. electrical stimulation
11. iontophoresis
12. biofeedback
13. intermittent compression
14. mechanical traction (cervical, lumbar)
15. wound care (sterile field, dressings)
   e) Demonstrate the ability to design a safe and effective home exercise program (including patient instruction) based on goals identified in the physical therapy plan of care.

12. Demonstrate participation in discharge planning and follow-up care.

13. Integrate information from professional literature into clinical practice by researching and presenting an acceptable faculty in-service presentation.

14. Assimilate relevant didactic material and treatment rationale into clinical practice by composing an acceptable case study assignment.

15. Efficiently manage and treat with minimal supervisory input a partial patient case load (case load dependent on clinical facility policy).

16. Participate in a variety of learning activities such as observation of: surgery; other healthcare disciplines; departmental quality assurance; attend in-services, etc. (The performance of this objective is facility, caseload, and time availability dependent.)

*Completion of the preceding objectives is dependent on each clinical site and the availability of patients during the time of Clinical Practicum II.

**STATEMENT ON DISABILITIES:**
Students with documented disabilities (physical, emotional, learning and/or others) who believe that they may need accommodations in this class are encouraged to contact Glaisma Perez-Silva, Disabilities Counselor, in Room 139, extension 120, as soon as possible to ensure that such accommodations are implemented in a timely fashion.
COURSE SYLLABUS

COURSE TITLE: PTA119 Clinical Practicum III
DIVISION: Health Professions, Public Service Programs & Social Sciences
DEPARTMENT: Physical Therapist Assistant
CREDITS: 5.0
COURSE HOURS: 240 hours/semester
40 hours/week, 6 weeks
PREREQUISITES: PTA116, PTA117, PTA118
INSTRUCTOR: ACCE and clinical instructor(s) of the assigned clinical site

COURSE DESCRIPTION:
Clinical Practicum III is the third of three comprehensive clinical experiences in a physical therapy setting. The purpose of this final experience is to apply, integrate, and perform learned clinical skills on patients under the supervision of a licensed Physical Therapist and/or licensed Physical Therapist Assistant. The emphasis of this experience is to integrate previously learned and practiced PTA skills, special topics, and clinical management and health care issues into the delivery of a comprehensive physical therapy treatment program. Typical practice settings may include acute care hospitals, private practice, sports, developmental centers, skilled nursing centers, geriatrics, pediatrics, VNA, in-patient and out-patient rehabilitation centers, V.A. hospitals, and psychiatric centers.

TEACHING METHODOLOGY: Students will obtain higher level skills in course materials through the following to encourage problem-solving and/or critical thinking skills:

- demonstration
- discussion (via Blackboard site)
- practice
- performance
- instruction
- literature review
- presentation
- assignments

COURSE EVALUATION:
Grading:

<table>
<thead>
<tr>
<th>%</th>
<th>Activity</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Reflection paper</td>
<td>1</td>
</tr>
<tr>
<td>10</td>
<td>Presentation</td>
<td>1</td>
</tr>
<tr>
<td>70</td>
<td>Clinical Affiliation</td>
<td>1</td>
</tr>
</tbody>
</table>
Grading of Clinical Affiliation:

<table>
<thead>
<tr>
<th>Content</th>
<th>Possible Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timely completion of Midterm CPI</td>
<td>5</td>
</tr>
<tr>
<td>Timely completion of Final CPI</td>
<td>5</td>
</tr>
<tr>
<td>Weekly Progress Notes</td>
<td>5</td>
</tr>
<tr>
<td>Communication with ACCE (verbal &amp; written)</td>
<td>10</td>
</tr>
<tr>
<td>Meeting MWCC PTA/CPI grading rubric (attached)</td>
<td>75 *</td>
</tr>
</tbody>
</table>

Grading Scale:
The final letter grade for the course is determined by converting the total number of points earned by the student into a percentage of the total possible points. The percentage is then converted into a letter grade as follows:

- A 93-100
- A- 90-92
- B+ 97-89
- B 83-86
- B- 80-82
- C+ 77-79
- C 70-76
- D 60-69
- F less than 59.

* Student must achieve a minimum of 57 of the available 75 points on the final CPI grading rubric and meet the requirement for all “Red Flag Items” to pass the Clinical Affiliation.

* Students must achieve a minimum grade of “C+” or higher in order to continue in sequence in the PTA Program

1. Successful completion of all course objectives based on patient availability and clinical education sites.

2. Regular attendance, enthusiasm, motivation, interest, professionalism, and performance of learned PTA skills during Clinical Practicum III.

3. Timely completion of the PTA Reflection Paper

4. Timely completion, presentation, and content of the Clinical Practicum III In-Service Presentation Assignment.

The Web Based Physical Therapist Assistant Clinical Performance Instrument (Web CPI) is the assessment tool and will be completed at the mid-term and conclusion of the practicum by the clinical instructor(s). All CI are provided electronic access to the tool once online training is completed.

Passing scores for each criteria of the Web based CPI have been provided to the students on the established rubric

* Refer to PTA Student Handbook regarding policy for repeating in the event of a failed practicum, pgs. 20-21.

ATTENDANCE POLICY:
Students are expected to attend daily, during the clinical settings’ regular hours, for 6 consecutive weeks totaling 240 hours. Missed days for illness and/or personal reasons must be made up.
FORMAT FOR PTA CLINICAL REFLECTION PAPER
Please refer to PTA 119 Blackboard for assignment grading rubric.

- Paper to be a minimum of 3 pages long.
- Reflection to include how your clinical learning experiences (PTA 110,116,119) affected your preconceptions or misconceptions that brought you into the program.
- Express what you have learned from this experience, the challenges you may have faced, and how you overcame those challenges.
- Describe what effect this experience will have on your behavior in the future.

FORMAT FOR IN-SERVICE PRESENTATION:
The student is responsible for presenting a formal oral presentation to the clinical staff during Clinical Practicum III. The topic of the presentation and the size of the audience are left to the discretion of the Clinical Instructor (CI). The student is not allowed to use a previous oral presentation. The CI will be provided with an evaluation form for rating the student’s presentation performance.

MEASURABLE PERFORMANCE OBJECTIVES:
At the completion of the course, the student will:

1. Perform professional behavior patterns consistent with employer’s expectations and professional association guidelines in course competency areas for physical therapist assistants. These behaviors include, but are not limited to, adhering to designate times for each educational experience, following a dress code, being adequately prepared, displaying appropriate interpersonal dynamics and communication skills.

2. Appropriately demonstrate the role and utilization of the Physical Therapist Assistant in the delivery of a safe and effective plan of care.

3. Safely, ethically, and legally perform the responsibilities of the Physical Therapist Assistant as defined by Mount Wachusett Community College, the facility, the Guide for Conduct of the Affiliate Member, Standards of Ethical Conduct for the PTA, APTA Core Values and state law.

4. Perform objectives and procedures which met basic competence during PTA110 and PTA116 with appropriate supervision and utilizing various patient populations in order to attain proficiency (higher degree of competence).

5. Consistently demonstrate the initiative to build knowledge, assemble skills, and improve techniques by asking appropriate questions and utilizing available resources.

6. Consistently demonstrate appropriate interaction and teaching through accurate and effective verbal and non-verbal communication with the patient, patient’s family, and fellow health care providers.

7. Consistently and effectively communicate with the supervising Physical Therapist and/or Physical Therapist Assistant regarding patient progress, treatment modifications, changes in patient physiological response, and any observations relevant to the welfare of the patient.

8. Consistently use accurate, concise, and appropriate terminology when documenting aspects of patient care.
9. Consistently demonstrate effective preparation and appropriate modification to changes in physiologic response when implementing the plan of care, as directed by a licensed Physical Therapist.

10. Consistently demonstrate the ability to follow instructions given by the supervising Physical Therapist and/or Physical Therapist Assistant when assisting with unfamiliar procedures, tests, and assessments.

11. Integrate the following skills into the patient plan of care as directed by the supervising Physical Therapist/Physical Therapist Assistant safely and competently (to include proper body mechanics and appropriate use of universal precautions):
   a) Implement the following basic patient care skills (to include appropriate safety, communication, and level of assistance):
      1. universal precautions/asepsis
      2. body mechanics (self and patient instruction)
      3. draping
      4. positioning and turning
      5. wheelchair prescription and management (including negotiation of architectural barriers)
      6. transfer training
      7. ambulation with assistive devices (including gait pattern/weightbearing instruction, measurement, and adjustment of assistive devices)
      8. therapeutic massage
      9. wound care/dressing
      10. residual limb bandaging
      11. functional activities
      12. preprosthetic and prosthetic training
      13. donning/doffing orthotics and prostheses

   b) Implement the following therapeutic exercise and functional activities into the patient’s plan of care:
      1. PROM
      2. AAROM/AROM (concentric/eccentric)
      3. Progressive resistive exercise (concentric/eccentric; isometric, isotonic, isokinetic; manual and mechanical resistance)
      4. Open vs. closed chain exercise
      5. Stretching (active and passive; manual and mechanical)
      6. Endurance/cardiovascular exercise
      7. Selected exercise protocols (ACL, patellofemoral, frozen shoulder, posture and scoliosis, THR, TKR)
      8. pulmonary hygiene (postural drainage, percussion, vibration)
      9. breathing retraining and exercise
      10. cardiac rehabilitation (phase I)
      11. basic amputee management (therapeutic exercise, gait training)
      12. basic therapeutic exercise implementation for burn, SCI, TBI, pediatric, and geriatric patients
      13. neuromuscular facilitation (proprioceptive and exteroceptive)
      14. balance and coordination programs
      15. developmental sequence
      16. neuromuscular re-education
      17. righting and equilibrium reactions
c) Perform the following assessment/measurement procedures integrating the findings into the patient’s plan of care:
   1. vital signs
   2. pain
   3. skin integrity and sensation
   4. posture
   5. segmental length, girth, volume
   6. balance and coordination
   7. functional activities
   8. environmental assessment/architectural barriers
   9. goniometry
   10. manual muscle testing
   11. measurement of assistive devices
   12. normal and pathological gait analysis
   13. righting and equilibrium reactions
   14. auscultation

d) Implement the following treatment modalities and procedures into the patient’s plan of care (to include entry-level safety, knowledge of physiological and therapeutic effects, indications and contraindications):
   1. hydrocollator packs
   2. cryotherapy (ice packs, ice massage, cryocuff)
   3. paraffin
   4. infrared lamp
   5. hydrotherapy
   6. ultraviolet
   7. ultrasound (pulsed and continuous)
   8. phonophoresis
   9. diathermy (shortwave)
   10. electrical stimulation
   11. iontophoresis
   12. biofeedback
   13. intermittent compression
   14. mechanical traction (cervical, lumbar)
   15. wound care (sterile field, dressings)

e) Demonstrate the ability to design a safe and effective home exercise program (including patient instruction) based on goals identified in the physical therapy plan of care.

12. Demonstrate participation in discharge planning and follow-up care.

13. Integrate information from professional literature into clinical practice by researching and presenting an acceptable faculty in-service presentation.

14. Assimilate relevant didactic material and treatment rationale into clinical practice by
composing an acceptable case study assignment.

15. Efficiently manage and treat with minimal supervisory input a full patient case load (case load dependent on clinical facility policy).

16. Participate in a variety of learning activities such as: observation of surgery; other healthcare disciplines; departmental quality assurance; attend in-services, etc. (The performance of this objective is facility, caseload, and time availability dependent.)

*Completion of the preceding objectives is dependent on each clinical site and the availability of patients during the time of Clinical Practicum III.

STATEMENT ON DISABILITIES:
If you know that you have an academic, emotional/psychological, and/or medical condition that significantly impacts your learning experience, please submit appropriate documentation to the Counselor for Students with Disabilities as soon as possible. The Disability Services Team members are the designated persons to review your documentation, protect the confidentiality of the information disclosed, and to discuss the most reasonable accommodation options. Bring back the signed Accommodation Recommendation Form. We can then, discuss your needs privately and implement the best accommodations in view of the required academic and technical standards of this class.

STATEMENT ON TUTORING:
Many students find that college course work provides new academic challenges. Students who wish to deepen their understanding of course concepts, extend their skills and improve their performance in this course are encouraged to use the free tutoring and other support services available in the Academic Support Center. Math and Writing tutors are available on a drop-in basis. Tutoring in other subjects is arranged by appointment. If you have any questions about tutoring, stop by the Academic Support Center in room 116 or call at (978) 632-6333.
PHYSICAL THERAPIST ASSISTANT PROGRAM
WEEKLY ASSESSMENT
(completed by student)

STUDENT NAME ______________________________________________ DATE ______________________
CLINICAL INSTRUCTOR________________________________________ WEEK # __________________
CLINICAL FACILITY____________________________________________ LEVEL OF PRACTICUM  I  II  III

1. List special experiences observed/participated in, such as in-services, surgeries, lectures/seminars:

2. Student’s review of the week: (including an example of one occasion when you performed well and one example of when you were less effective than you wanted to be)

3. Clinical Instructor’s review of the week:

4. Goals/objectives met this week:

5. Goals/objectives for next week:
VALUES-BASED BEHAVIORS FOR THE PHYSICAL THERAPIST ASSISTANT

The Values-Based Behaviors is a concise document that describes those values that most significantly influence PTAs providing patient/client care as a member of the physical therapy team. The Values-Based Behaviors were developed in 2010 by the Advisory Panel of PTAs, reviewed and adapted by numerous stakeholder groups, and approved by APTA’s Board of Directors in January 2011. A complete history on the development and approval of this document is included in the introduction section of the Values-Based Behaviors document.

This self-assessment tool accompanies the Values-Based Behaviors and is intended to increase the physical therapist assistant’s (PTA’s) awareness of the Values-Based Behaviors for the PTA and to self-assess the frequency with which he or she demonstrates the eight values listed and defined in the first column. The second column provides sample indicators or examples of actions that a PTA who has adopted the Values-Based Behaviors would choose to take in a variety of situations. And the third column is for scoring the frequency with which one chooses to demonstrate the described behavior or action.

Complete the Self-Assessment
Review each sample indicator and rate the frequency with which you display that behavior on a daily basis. It is not expected that one will rate himself or herself as 5 (always) or 1 (never) on every item. Be candid in your response as this is a self-assessment process with an opportunity for identification of areas of strength and opportunities for growth.

Analyze the Completed Self-Assessment
Once you have completed the Self-Assessment, you may want to reflect as an individual or group on the following questions:

- On what sample indicators did you or the group consistently score yourself/themselves on the scale at the 4 (frequent) or 5 (always) levels?
- Why did you or the group rate yourself/themselves higher in frequency for demonstrating these sample behaviors?
- On what sample indicators did you or the group score yourself/themselves on the scale at level 3 or below?
- Why did you or the group rate yourself/themselves lower in frequency for demonstrating these sample behaviors?
- Identify, develop, and implement approaches to strengthening the integration of the values-based behaviors within your clinical environment. Seek out mentoring in this area from your supervising physical therapist or other experienced clinicians.
- Establish personal goals for increasing the frequency with which you demonstrate specific sample behaviors with specific values-based behaviors.
- Conduct periodic re-assessment of your values-based behaviors to determine the degree to which your performance has changed in your growth personally and as a PTA.

Questions about the self assessment tool or the Values-Based Behaviors should be directed to APTA’s PTA Services Department at pta@apta.org.
VALUES-BASED BEHAVIORS FOR THE PHYSICAL THERAPIST ASSISTANT (PTA)

For each values-based behavior listed, a definition is provided and a set of sample indicators that describe what one would see if the PTA were demonstrating that behavior in his/her daily work. For each of the sample indicators listed, check the box that best represents the frequency with which you demonstrate the behavior where: 1 = Never; 2 = Rarely; 3 = Occasionally; 4 = Frequently; and 5 = Always.

<table>
<thead>
<tr>
<th>Values-Based Behavior with Definition</th>
<th>Sample Indicators</th>
<th>Self-Assessment Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Altruism</strong></td>
<td>1. Providing patient/client-centered interventions.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td></td>
<td>2. Readily offering to assist the physical therapist in providing patient/client interventions.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td></td>
<td>3. Generously providing the necessary time and effort to meet patient/client needs.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td></td>
<td>4. Placing the patient/client’s needs ahead of one’s own, as evidenced by willingness to alter one’s schedule, delay other projects or tasks, etc.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td></td>
<td>5. Contributing, as able, to the provision of physical therapy services to underserved and underrepresented populations.</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

**Caring and Compassion**

Compassion is the desire to identify with or sense something of another’s experience; a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.

<table>
<thead>
<tr>
<th>Sample Indicators</th>
<th>Self-Assessment Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Actively listening to the patient/client and considering the patient/client’s needs and preferences.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>2. Exhibiting compassion, caring, and empathy in providing services to patients/clients.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>3. Demonstrating respect for others and considering others as unique and of value.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>4. Considering social, emotional, cultural, psychological, environmental, and economic influences of the patient/client (eg, learning styles, language abilities, cognitive abilities and adapting approach accordingly.</td>
<td>1 2 3 4 5</td>
</tr>
<tr>
<td>5. Recognizing and refraining from acting on one’s social, cultural, gender, and sexual biases; i.e. demonstrate a nonjudgmental attitude.</td>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>
### Continuing Competence

Continuing competence is the lifelong process of maintaining and documenting competence through ongoing self-assessment, development, and implementation of a personal learning plan, and subsequent reassessment.

1. Identifying strengths and limitations in knowledge, skills, and behaviors through self-assessment and feedback from physical therapists and others, and developing and implementing strategies to address the limitations.

2. Maintaining continuing competence using a variety of lifelong learning strategies (e.g., continuing education, reflective journals, journal clubs, and working with a mentor).

3. Seeking further education in the use and delivery of interventions based on new evidence as it becomes available.

4. Developing and implementing a career advancement plan based on interests, opportunities, and career aspirations.

### Duty

Duty is the commitment to meeting one’s obligations to provide effective physical therapy services to individual patients/clients, to serve the profession, and to positively influence the health of society.

1. Demonstrating behaviors, conduct, actions, attitudes, and values consistent with the roles, responsibilities, and tasks of the PTA.

2. Facilitating each patient/client’s achievement of goals for function, health, and wellness, as directed in the plan of care.

3. Preserving the safety, security, and confidentiality of individuals in all patient/client contexts.

4. Participating in quality assurance/quality improvement activities in physical therapy care.

5. Promoting the profession of physical therapy.

6. Providing student instruction and mentoring other PTAs.

### Integrity

Duty is adhering to applicable laws regarding scope of work, payment policies and guidelines, institutional policies and procedures, and APTA policies, positions, and guidelines to ensure optimal patient/client care and fiscal management.

2. Adhering to the highest standards of the profession for the PTA, including the Standards of Ethical Conduct for the
<table>
<thead>
<tr>
<th>Integrity (cont.)</th>
<th>Physical Therapist Assistant, Guide for Conduct of the Physical Therapist Assistant, state practice acts, and payment requirements.</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.</td>
<td>Demonstrating the ideals of the values-based behaviors of the PTA.</td>
</tr>
<tr>
<td>4.</td>
<td>Demonstrating honesty and trustworthiness in all interactions and relationships.</td>
</tr>
<tr>
<td>5.</td>
<td>Choosing employment situations that are congruent with ethical principles and work standards.</td>
</tr>
<tr>
<td>6.</td>
<td>Identifying ethical and legal concerns and initiating actions to address the concern, when appropriate.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PT/PTA Collaboration</th>
<th>The PT/PTA team works together, within each partner’s respective role, to achieve optimal patient/client care and to enhance the overall delivery of physical therapy services.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Educating the PT as needed about the roles, responsibilities, and appropriate utilization of the PTA in the PT/PTA team using available resources (eg, state licensure/practice rules and regulations, PTA clinical problem-solving algorithm, PTA direction and supervision algorithms, Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level).</td>
</tr>
<tr>
<td>2.</td>
<td>Promoting a positive working relationship within the PT/PTA team.</td>
</tr>
<tr>
<td>3.</td>
<td>Demonstrating respect for the roles and contributions of both the PT and PTA in achieving optimal patient/client care, including the PT’s responsibility for the PTA’s performance in patient/client interventions.</td>
</tr>
<tr>
<td>4.</td>
<td>Seeking out opportunities to collaborate with the PT to improve outcomes in patient/client care.</td>
</tr>
<tr>
<td>5.</td>
<td>Working with the PT in educating consumers and other health care providers about physical therapy.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Responsibility is the active acceptance of the roles, obligations, and actions of the PTA, including behaviors that positively influence personal ability.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Identifying strengths and limitations in knowledge and skill, and working within limitations of personal ability.</td>
</tr>
<tr>
<td>2.</td>
<td>Completing patient/client care and other tasks in a timely and efficient manner.</td>
</tr>
</tbody>
</table>
3. Identifying, acknowledging, and accepting responsibility for actions and, when errors occur, following error reporting processes.

4. Communicating in a timely manner with others (eg, PTs, patients/clients, and others).

Social Responsibility

Social responsibility is the promotion of a mutual trust between the PTA, as a member of the profession, and the larger public that necessitates responding to societal needs for health and wellness.

1. Advocating for patient/client needs in the clinical setting.

2. Demonstrating behaviors that positively represent the profession to the public.

3. Promoting a healthy lifestyle, wellness, and injury prevention strategies in the community.

4. Serving the profession and the community, including activities occurring in conjunction with work or outside of work (eg, community health fairs, National Physical Therapy Month events, APTA service).

5. Advocating for changes in laws, regulations, standards, and guidelines that positively affect physical therapy and patient/client services.

Date Completed:

Comments:
References/Related Reading

PHYSICAL THERAPIST ASSISTANT STUDENT EVALUATION:

CLINICAL EXPERIENCE AND CLINICAL INSTRUCTION

American Physical Therapy Association
Department of Physical Therapy Education
1111 North Fairfax Street
Alexandria, Virginia 22314
PREAMBLE

The purpose of developing this tool was in response to academic and clinical educators’ requests to provide a voluntary, consistent and uniform approach for students to evaluate clinical education as well as the overall clinical experience. Questions included in this draft tool were derived from the many existing tools already in use by physical therapy programs for students to evaluate the quality of the clinical learning experience and clinical instructors (CIs), as well as academic preparation for the specific learning experience. The development of this tool was based on key assumptions for the purpose, need for, and intent of this tool. These key assumptions are described in detail below. This tool consists of two sections that can be used together or separately: Section 1-Physical therapist assistant student assessment of the clinical experience and Section 2-Physical therapist assistant student assessment of clinical instruction. Central to the development of this tool was an assumption that students should actively engage in their learning experiences by providing candid feedback, both formative and summative, about the learning experience and with summative feedback offered at both midterm and final evaluations. One of the benefits of completing Section 2 at midterm is to provide the CI and the student with an opportunity to modify the learning experience by making midcourse corrections.

Key Assumptions

The tool is intended to provide the student’s assessment of the quality of the clinical learning experience and the quality of clinical instruction for the specific learning experience. The tool allows students to objectively comment on the quality and richness of the learning experience and to provide information that would be helpful to other students, adequacy of their preparation for the specific learning experience, and effectiveness of the clinical educator(s). The tool is formatted in Section 2 to allow student feedback to be provided to the CI(s) at both midterm and final evaluations. This will encourage students to share their learning needs and expectations during the clinical experience, thereby allowing for program modification on the part of the CI and the student.

Sections 1 and 2 are to be returned to the academic program for review at the conclusion of the clinical experience. Section 1 may be made available to future students to acquaint them with the learning experiences at the clinical facility. Section 2 will remain confidential and the academic program will not share this information with other students.

The tools meet the needs of the physical therapist (PT) and physical therapist assistant (PTA) academic and clinical communities and where appropriate, distinctions are made in the tools to reflect differences in PT scope of practice and PTA scope of work.

The student evaluation tool should not serve as the sole entity for making judgments about the quality of the clinical learning experience. This tool should be considered as part of a systematic collection of data that might include reflective student journals, self-assessments provided by clinical education sites, Center Coordinators of Clinical Education (CCCEs), and CIs based on the Guidelines for Clinical Education, ongoing communications and site visits, student performance evaluations, student planning worksheets, Clinical Site Information Form (CSIF), program outcomes, and other sources of information.

Acknowledgement

We would like to acknowledge the collaborative effort between the Clinical Education Special Interest Group (SIG) of the Education Section and APTA’s Education Department in completing this project. We are especially indebted to those individuals from the Clinical Education SIG who willingly volunteered their time to develop and refine these tools. Comments and feedback provided by academic and clinical faculty, clinical educators, and students on several draft versions of this document were instrumental in developing, shaping, and refining the tools. Our gratitude is extended to all individuals and groups who willingly gave their time and expertise to work toward a common voluntary PT and PTA Student Evaluation Tool of the Clinical Experience and Clinical Instruction.

Ad Hoc Group Members: Jackie Crossen-Sills, PT, MS, Nancy Erikson, PT, MS, GCS, Peggy Gleeson, PT, PhD, Deborah Ingram, PT, EdD, Corrie Odom, PT, DPT, ATC, and Karen O'Loughlin, PT, MA

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# General Information and Signatures

## General Information

Student Name

Academic Institution

Name of Clinical Education Site

<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
</tr>
</thead>
</table>

Clinical Experience Number

Clinical Experience Dates

## Signatures

I have reviewed information contained in this physical therapist assistant student evaluation of the clinical education experience and of clinical instruction. I recognize that the information below is being collected to facilitate accreditation requirements for clinical instructor qualifications. I understand that my personal information will not be available to students in the academic program files.

Student Name (Provide signature)  

Date

Primary Clinical Instructor Name (Print name)  

Date

Primary Clinical Instructor Name (Provide signature)

<table>
<thead>
<tr>
<th>Entry-level PT/PTA degree earned</th>
<th>Highest degree earned</th>
<th>Degree area</th>
<th>Years experience as a CI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest degree earned</td>
<td>Degree area</td>
<td>Years experience as a clinician</td>
<td></td>
</tr>
<tr>
<td>Areas of expertise</td>
<td>Clinical Certification, specify area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

APTA Credentialed CI

Other CI Credential

State

Professional organization memberships

APTA

Other

Date

Addtional Clinical Instructor Name (Print name)  

Date

Additional Clinical Instructor Name (Print name) (Provide signature)

<table>
<thead>
<tr>
<th>Entry-level PT/PTA degree earned</th>
<th>Highest degree earned</th>
<th>Degree area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highest degree earned</td>
<td>Degree area</td>
<td>Years experience as a CI</td>
</tr>
<tr>
<td>Years experience as a clinician</td>
<td>Areas of expertise</td>
<td></td>
</tr>
<tr>
<td>Clinical Certification, specify area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>APTA Credentialed CI</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Other CI Credential</td>
<td>State</td>
<td>Yes</td>
</tr>
<tr>
<td>Professional organization memberships</td>
<td>APTA</td>
<td>Other</td>
</tr>
</tbody>
</table>

Date
SECTION 1: PTA STUDENT ASSESSMENT OF THE CLINICAL EXPERIENCE

Information found in Section 1 may be available to program faculty and students to familiarize them with the learning experiences provided at this clinical facility.

1. Name of Clinical Education Site
   
   Address
   City
   State

2. Clinical Experience Number

3. Specify the number of weeks for each applicable clinical experience/rotation.

   Acute Care/Inpatient Hospital Facility
   Ambulatory Care/Outpatient
   ECF/Nursing Home/SNF
   Federal/State/County Health
   Industrial/Occupational Health Facility
   Private Practice
   Rehabilitation/Sub-acute Rehabilitation School/Preschool Program
   Wellness/Prevention/Fitness Program
   Other

Orientation

4. Did you receive information from the clinical facility prior to your arrival? Yes No

5. Did the on-site orientation provide you with an awareness of the resources you would need for the experience?

6. What else could have been provided during the orientation?

Patient/Client Management and the Practice Environment

For questions 7, 8, and 9, use the following 4-point rating scale:

1 = Never  2 = Rarely  3 = Occasionally  4 = Often

7. During this clinical experience, describe the frequency of time spent in each of the following areas. Rate all items in the shaded columns using the above 4-point scale.

<table>
<thead>
<tr>
<th>Diversity Of Case Mix</th>
<th>Rating</th>
<th>Patient Lifespan</th>
<th>Rating</th>
<th>Continuum Of Care</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Musculoskeletal</td>
<td></td>
<td>0-12 years</td>
<td></td>
<td>Critical care, ICU, Acute</td>
<td></td>
</tr>
<tr>
<td>Neuromuscular</td>
<td></td>
<td>13-21 years</td>
<td></td>
<td>SN F/ECF/Sub-acute</td>
<td></td>
</tr>
<tr>
<td>Cardiopulmonary</td>
<td></td>
<td>22-65 years</td>
<td></td>
<td>Rehabilitation</td>
<td></td>
</tr>
<tr>
<td>Integumentary</td>
<td></td>
<td>over 65 years</td>
<td></td>
<td>Ambulatory/Outpatient</td>
<td></td>
</tr>
<tr>
<td>Other (GI, GU, Renal, Metabolic, Endocrine)</td>
<td></td>
<td></td>
<td></td>
<td>Wellness/Health/Hospice</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. During this clinical experience, describe the frequency of time spent in providing the following components of care from the patient/client management model of the Guide to Physical Therapist Practice. Rate all items in the shaded columns using the above 4-point scale. List the five (5) most common interveentions that you provided to patients/clients during this clinical experience.

<table>
<thead>
<tr>
<th>Components Of Care</th>
<th>Rating</th>
<th>Five Most Common Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Collection</td>
<td></td>
<td>1.</td>
</tr>
<tr>
<td>Implementation of Established Plan of Care</td>
<td></td>
<td>2.</td>
</tr>
<tr>
<td>Selected Interventions</td>
<td></td>
<td>3.</td>
</tr>
<tr>
<td>Coordination, communication, documentation</td>
<td></td>
<td>4.</td>
</tr>
<tr>
<td>Patient/client related instruction</td>
<td></td>
<td>5.</td>
</tr>
<tr>
<td>Direct Interventions</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
9. During this experience, how frequently did staff (i.e., CI, CCCE, and clinicians) maintain an environment conducive to your work and growth? Rate all items in the shaded columns using the 4-point scale on page 4.

<table>
<thead>
<tr>
<th>Environment</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providing a helpful and supportive attitude for your role as a PTA student.</td>
<td></td>
</tr>
<tr>
<td>Providing effective role models for problem solving, communication, and teamwork.</td>
<td></td>
</tr>
<tr>
<td>Demonstrating high morale and harmonious working relationships.</td>
<td></td>
</tr>
<tr>
<td>Adhering to ethical codes and legal statutes and standards (e.g., Medicare, HIPAA, informed consent, APTA Code of Ethics, etc).</td>
<td></td>
</tr>
<tr>
<td>Being sensitive to individual differences (i.e., race, age, ethnicity, etc).</td>
<td></td>
</tr>
<tr>
<td>Using evidence to support clinical practice.</td>
<td></td>
</tr>
<tr>
<td>Being involved in professional development (e.g., degree and non-degree continuing education, in-services, journal clubs, etc).</td>
<td></td>
</tr>
<tr>
<td>Being involved in district, state, regional, and/or national professional activities.</td>
<td></td>
</tr>
</tbody>
</table>

10. What suggestions, relative to the items in question #9, could you offer to improve the environment for your work and growth?

Clinical Experience

11. Were there other students at this clinical facility during your clinical experience? (Check all that apply):
   - Physical therapist students
   - Physical therapist assistant students
   - Students from other disciplines or service departments (Please specify)

12. Identify the ratio of students to CIs for your clinical experience:
   1. 1 student to 1 CI
   2. 1 student to greater than 1 CI
   3. 1 CI to greater than 1 student; Describe

13. How did the clinical supervision ratio in Question #12 influence your learning experience?

14. In addition to patient/client management, what other learning experiences did you participate in during this clinical experience? (Check all that apply)
   - Attended in-services/educational programs
   - Presented an in-service
   - Attended special clinics
   - Attended team meetings/conferences/grand rounds
   - Observed surgery
   - Participated in administrative and business management
   - Participated in providing patient/client interventions collaboratively with other disciplines (please specify disciplines)
   - Participated in service learning
   - Performed systematic data collection as part of an investigative study
   - Used physical therapy aides and other support personnel
   - Other; Please specify

15. Please provide any logistical suggestions for this location that may be helpful to students in the future. Include costs, names of resources, housing, food, parking, etc.
Overall Summary Appraisal

16. Overall, how would you assess this clinical experience? (Check only one)

______Excellent clinical learning experience; would not hesitate to recommend this clinical education site to another student.

______Time well spent; would recommend this clinical education site to another student.

______Some good learning experiences; student program needs further development. Student clinical education program is not adequately developed at this time.

17. What specific qualities or skills do you believe a physical therapist assistant student should have to function successfully at this clinical education site?

18. If, during this clinical education experience, you were exposed to content not included in your previous physical therapist assistant academic preparation, describe those subject areas not addressed.

19. What suggestions would you offer to future physical therapist assistant students to improve this clinical education experience?

20. What do you feel were the strengths of your physical therapist assistant academic preparation and/or coursework for this clinical experience?

21. What curricular suggestions do you have that would have prepared you better for this clinical experience?
SECTION 2: PTA STUDENT ASSESSMENT OF THE CLINICAL INSTRUCTOR

Information found in Section 2 is to be shared between the student and the clinical instructor(s) at midterm and final evaluations. Additional copies of Section 2 should be made when there are multiple CIs supervising the student. Information contained in this section is confidential and will not be shared by the academic program with other students.

Assessment of Clinical Instruction

22. Using the scale (1 - 5) below, rate how clinical instruction was provided during this clinical experience at both midterm and final evaluations (shaded columns).

<table>
<thead>
<tr>
<th>Provision of Clinical Instruction</th>
<th>Midterm</th>
<th>Final</th>
</tr>
</thead>
<tbody>
<tr>
<td>The clinical instructor (CI) was familiar with the academic program’s objectives and expectations for this experience.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The clinical education site had written objectives for this learning experience.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The clinical education site’s objectives for this learning experience were clearly communicated.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There was an opportunity for student input into the objectives for this learning experience.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI provided constructive feedback on student performance.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI provided timely feedback on student performance.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI demonstrated skill in active listening.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI communicated in an open and non-threatening manner.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI taught in an interactive manner that encouraged problem solving.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>There was a clear understanding to whom you were directly responsible and accountable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The supervising CI was accessible when needed.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI clearly explained your student responsibilities.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI provided responsibilities that were within your scope of knowledge and skills.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI facilitated patient-therapist and therapist-student relationships.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time was available with the CI to discuss patient/client interventions.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI served as a positive role model in physical therapy practice.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI skillfully used the clinical environment for planned and unplanned learning experiences.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI integrated knowledge of various learning styles into student clinical teaching.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI made the formal evaluation process constructive.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The CI encouraged the student to self-assess.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

23. Was your CI(s) evaluation of your level of performance in agreement with your self-assessment?
   Yes   No

24. Midterm Evaluation   Yes   No   Final Evaluation   Yes   No

25. If there were inconsistencies, how were they discussed and managed?

   Midterm Evaluation

   Final Evaluation
26. What did your CI(s) do well to contribute to your learning?

Midterm Comments

Final Comments

27. What, if anything, could your CI(s) and/or other staff have done differently to contribute to your learning?

Midterm Comments Final Comments

Thank you for sharing and discussing candid feedback with your CI(s) so that any necessary mid-course corrections can be made to modify and further enhance your learning experience.
### PHYSICAL THERAPIST ASSISTANT PROGRAM
### EVALUATION OF MWCC PTA PROGRAM AND ACCE
(To be completed by clinical faculty/clinical coordinator at completion of Clinical Practicum I, II, III)

**CLINICAL FACULTY COMPLETING FORM**

**CLINICAL FACILITY**

**CLINICAL PRACTICUM** I II III **DATE**

<table>
<thead>
<tr>
<th>SCORE</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Strongly agree</td>
</tr>
<tr>
<td>4</td>
<td>Agree</td>
</tr>
<tr>
<td>3</td>
<td>Neither agree/disagree</td>
</tr>
<tr>
<td>2</td>
<td>Disagree</td>
</tr>
<tr>
<td>1</td>
<td>Strongly disagree</td>
</tr>
<tr>
<td>NA</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

### I. PTA PROGRAM

1. You/your institution has up-to-date information regarding the MWCC curriculum.

2. The MWCC PTA curriculum provides adequate entry-level instruction for a PTA at your facility. Please comment on the following:
   a. Basic patient skills (positioning, draping, transfers)
   b. Palpation and background anatomy
   c. APTA Code of Ethics and professionalism
   d. Documentation (written communication skills)
   e. Gait training (with assistive devices)
   f. Cardiopulmonary Techniques
   g. Therapeutic Modalities
   h. Background in the etiology and manifestations of various diseases
   i. Therapeutic exercise
### Physical therapy assessment skills
(vital signs, goniometry, MmT, sensation, pain, girth/edema)

### Knowledge and application of Universal Precautions

### Verbal communication skills

<table>
<thead>
<tr>
<th>SCORE</th>
<th>COMMENTS</th>
</tr>
</thead>
</table>

---

**II. MWCC ACCE**

1. Is readily available for communication between facilities (returns phone messages promptly).

2. Is knowledgeable concerning all aspects of the curriculum.

3. Assures that all clinical forms (i.e., evaluations, medical information, agreements, liability insurance vouchers, etc.) are prepared, sent to your facility, and completed on a timely basis.

4. Communicates effectively with you and other staff members.

5. Was available and effective in providing clinical education professional development through communications (mailings, email, phone conversations).

---

**OPTIONAL:** Complete this section only if an on-site visit occurred by MWCC's ACCE.

<table>
<thead>
<tr>
<th>SCORE</th>
<th>COMMENTS</th>
</tr>
</thead>
</table>

1. MWCC's ACCE was sensitive to the needs of your facility and the MWCC PTA student.

2. He/she attended the visit on time and was courteous to all staff.
3. He/she was knowledgeable concerning the reason for the visit and was able to resolve any areas of problem/concern.

4. Was available and effective in providing clinical education professional development while on site visit.

III.

a. Please discuss your perceptions of the **STRENGTHS** of the MWCC PTA program.

b. Please discuss your perceptions of the **WEAKNESSES** of the MWCC PTA program.

(Feel free to include your suggestions on how we may correct any deficiencies in our program/curriculum.)

IV. I am/am not interested in attending the next Clinical Educators' Annual meeting (held annually each fall at MWCC).

Please list any agenda items that you would like to discuss at next fall's Clinical Educators' meeting.
PHYSICAL THERAPIST ASSISTANT PROGRAM
IN-SERVICE PRESENTATION EVALUATION

Student: ________________________________ Topic: ________________________________

Date: ________________________________

Rating:

4 - Excellent 3 - Average 2
1 - Poor

I. Content

A. Choice of topic:
   1. Interesting Subject
   2. Pertinent Subject
   3. Timely Subject
   4. Level of Difficulty
   5. Geared to Audience

B. Organization:
   1. Was the presentation well organized?
   2. Did presentation demonstrate thorough preparation?
   3. Was the presentation understandable and logical?
   4. Was the presentation complete?
   5. Did the student demonstrate thorough knowledge of the subject?
   6. Was the information correct and up-to-date?
   7. Did the student use appropriate references?

II. Presentation

A. Appearance:

B. Speaking Ability:
   1. Voice Volume
   2. Poise
   3. Eye Contact
   4. Nervous Habits

C. Did the student demonstrate confidence?

D. Did the student demonstrate enthusiasm?
E. Did the presentation hold the interest of the audience?

F. Audio-visuals:
   1. Clear and Effective
   2. Enhance Presentation

III. Discussion

   A. Student's ability to respond to questions in appropriate manner.

   B. Did the student respond to questions with appropriate information or referral to references?

IV. Comments

   A. Identify strong points of the presentation.

   B. Suggestions for future presentations.

   C. Additional Comments:
Appendix L

CLINICAL PRACTICUM AGREEMENT

PHYSICAL THERAPIST ASSISTANT

This AGREEMENT made and effective as of ______________ by and between ______ (hereinafter referred to as the INSTITUTION) and Mount Wachusett Community College (hereinafter referred to as the COLLEGE).

WHEREAS, the parties agree that, for the mutual benefit of each, a formal affiliation should be entered into and carried out for the purpose of establishing a clinical education program for Physical Therapist Assistant students; and

WHEREAS, certain legal obligations and responsibilities shall attach to such affiliation when established:

NOW, THEREFORE, IN CONSIDERATION of the foregoing, the parties hereto mutually agree as follows:

1.0 The INSTITUTION agrees to:

1.1 Provide clinical instruction as all times by a Licensed Physical Therapist or Physical Therapist Assistant.

1.2 Designate one individual to become the Center Coordinator of Clinical Education. This person shall be responsible for the supervision, coordination, and evaluation of the activities of the COLLEGE students. Such person, having met the academic and professional standards required by the COLLEGE, shall be accepted by the COLLEGE as a Clinical Instructor (CI) for the period of the practicum.

1.3 Assume responsibility for the orientation of the students to the rules, regulations, policies, and procedures of the INSTITUTION, insofar as they pertain to the activities of such students while participating in the clinical education program.

1.4 Allow the COLLEGE to list the INSTITUTION in its catalogs, student recruitment efforts, etc.

1.5 Make available initial first aid for students who are injured or become ill while on duty in a clinical assignment and to notify the MWCC Academic Coordinator of Clinical Education of such injury or illness. This clinical assignment shall include the primary treatment center plus secondary satellite clinics or contracted treatment centers such as schools, nursing homes, and home care. It is understood that students (or their parents or guardians as the case may be) shall be responsible for their own expenses, whether incurred at the INSTITUTION or elsewhere.

*In the event of an exposure to a blood born pathogen, the INSTITUTION agrees to follow the MWCC policy regarding exposures. The INSTITUTION agrees to keep said policy on hand.

1.6 Assure that assignments to a secondary treatment center will be in conjunction with the supervising professional staff and that a Clinical Instructor will be in attendance throughout the student’s stay in the secondary treatment center.

1.7 Allow the students the use of the INSTITUTION’S cafeteria, library, and parking facilities.

2.0 The COLLEGE agrees to:

2.1 Designate an individual to become the Academic Coordinator of Clinical Education. This person shall be responsible for the supervision, coordination, and evaluation of the activities of MWCC PTA students. Other responsibilities to include: contract negotiation and renewals; updating all clinical forms and handbooks; serving as liaison between the INSTITUTION and the COLLEGE; student orientation to the clinical setting; ethics, morality and professionalism; and supervision and upkeep of students’ medical records, health forms, and liability insurance.

2.2 Provide clinical adjunct faculty appointment for one individual at the INSTITUTION who meets the position qualifications and who can assume the responsibilities of the CCCE.

2.3 Furnish the CCCE with the clinical objectives and required student curriculum.

2.4 Ensure that the academic preparation of the students assigned to the INSTITUTION shall be in keeping with the INSTITUTION’S requirements for participation in the clinical education program.
Assume full responsibility for the planning and implementation of the clinical education program including administration, didactic instruction, admissions, and clinical assignment of students, graduation, and curriculum changes.

Ensure that the students shall have a general physical examination prior to the commencement of the affiliations assignments. Such examinations shall include a chest x-ray and/or tuberculin test, hepatitis B vaccination, MMR, chicken pox immunization or written proof of positive history and tetanus immunizations, a copy of which shall be submitted to the INSTITUTION.

Ensure that each student has completed satisfactory criminal background checks as permitted by law with written consent by the student.

Require that all students are covered with professional liability insurance in amounts of no less than one million dollars ($1,000,000) per occurrence and three million dollars ($3,000,000) in the aggregate during the practicum, a copy of which shall be submitted to the INSTITUTION.

Provide the INSTITUTION with the criteria and forms for evaluation of students before the start of the practicum period.

Furnish the practicum INSTITUTION with a profile of each student before the beginning of the practicum. Such a profile shall include general information and a summary of clinical experience with clinical strengths and weaknesses identified per self assessment.

Accord the INSTITUTION the right to limit the number of students it will accept in the clinical education program.

Accord the INSTITUTION the right to suspend the practicum of any student for reasons of health, unsatisfactory performance, or other reasonable causes. Any action which may result in permanent termination will not take effect until a COLLEGE representative and an INSTITUTION representative have discussed the situation and have come to an agreement on the appropriate action to be taken.

Representatives of the COLLEGE (signers of AGREEMENT) and the INSTITUTION shall communicate by telephone at least once during each clinical experience to discuss issues of mutual concern and to decide whether any changes or alteration in the program or AGREEMENT are necessary. On site visits will be arranged one time during each practicum (unless the facility is located more than one hour travel distance from the COLLEGE).

The COLLEGE will provide the INSTITUTION with one tuition voucher for every student accepted by the INSTITUTION to participate in a clinical experience. These vouchers may be accumulated and used at the college by any physical therapy staff for any courses offered through the Division of Lifelong Learning. One voucher shall be equivalent to 1.5 credits. Vouchers will remain valid for three (3) years from the date of issue.

The College acknowledges that its Students, Faculty, employees and agents may acquire or have access to Protected Health Information (“PHI”) through their participation in the Program and that the use or disclosure of any PHI for any purpose not directly connected with the services under this Agreement is prohibited. The College shall ensure that its Students, Faculty, employees and agents comply with applicable INSTITUTION policies and procedures, the requirements of applicable Massachusetts laws and regulations, and the requirements of applicable federal laws and regulations, including the Health Insurance Portability and Accountability Act (“HIPPA”), in regards to PHI. The College agrees to ensure that its agents, Faculty and Students maintain the confidentiality of any patient information that they receive through their participation in the Program and that its agents, Faculty and Student use patient information only as needed to accomplish the goals of the Program. College agrees that any patient information in its possession will be returned to the INSTITUTION or destroyed once the goals of the Program are accomplished. The College agrees to instruct its Students, Faculty and agents of their obligation under this Agreement. In furtherance of these obligations, College shall ensure that each Student and Faculty member signs an INSTITUTION Confidentiality Agreement, if applicable, and shall provide copies of the executed agreements to the INSTITUTION prior to the Student’s and Faculty member’s participation in the Program.

Students and Faculty are not employees of the INSTITUTION for any purposes under this Agreement, and shall be identified as Faculty and Students by means of dress, badge or other appropriate means of identification. INSTITUTION and College agree that Students participating in the Program shall at all times remain students of the College; provided however, that for purposes of compliance with the Health Insurance Portability and Accountability Act (“HIPPA”) and access to Protected Health Information (“PHI”), the students are considered part of the INSTITUTION’S workforce while working under supervision to practice or improve their skills as health care providers in accordance with the terms of this Agreement.
3.0 Both parties agree:

3.1 Students are not employees or agents of the INSTITUTION and shall not be entitled to any payment from the INSTITUTION in the nature of benefits under the Massachusetts Workers’ Compensation Act for any accident, illness, occurrence, or event occurring in or relating to the INSTITUTION and arising out of the clinical education program.

3.2 At no time shall the matter of race, creed, color, sex, physical handicap, or other similar criteria be employed by either of the parties for the purpose of discrimination against students participating in the clinical education program.

3.3 To comply with policies established by the Commission of Accreditation in Physical Therapy Education of the American Physical Therapy Association.

3.4 Maintain all files and records of students including health information, student profiles, and evaluations in strictest confidence according to the provisions of the Family Educational Rights and Privacy Act of 1974.

3.5 This may be terminated by mutual consent of both parties or by either party upon ninety (90) days written notice to the other party. This AGREEMENT will be renewed on a three year basis. Terms of this agreement will cover _____________, 2011 to _____________, 2014.

IN WITNESS WHEREOF, the parties hereto have executed this AGREEMENT the day and years first above written.

Mount Wachussett Community College admits students of any age, race, sex, color, handicap, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the COLLEGE. It does not discriminate on the basis of race, color, religious creed, age, physical or mental disability, sex, national origin or ancestry, marital status, sexual orientation, genetic information or veteran status.

<table>
<thead>
<tr>
<th>COLLEGE</th>
<th>INSTITUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTA Program</td>
<td></td>
</tr>
<tr>
<td>Robert E. LaBonte</td>
<td></td>
</tr>
<tr>
<td>Asst.Vice President of Administrative Services</td>
<td></td>
</tr>
<tr>
<td>Mount Wachussett Community College</td>
<td></td>
</tr>
<tr>
<td>Eileen Costello, MS, RN</td>
<td></td>
</tr>
<tr>
<td>Dean</td>
<td></td>
</tr>
<tr>
<td>Health Sciences and Community Service Programs</td>
<td></td>
</tr>
<tr>
<td>Mount Wachussett Community College</td>
<td></td>
</tr>
<tr>
<td>Margaret Jailet, PT MHA DPT</td>
<td></td>
</tr>
<tr>
<td>Program Director/ACCE</td>
<td></td>
</tr>
<tr>
<td>Physical Therapist Assistant Program</td>
<td></td>
</tr>
<tr>
<td>Mount Wachussett Community College</td>
<td></td>
</tr>
</tbody>
</table>
INTRODUCTION:

The primary purpose of the Clinical Site Information Form (CSIF) is for Physical Therapist (PT) and Physical Therapist Assistant (PTA) academic programs to collect information from clinical education sites to: Facilitate clinical site selection,
Assist in student placements,
Assess the learning experiences and clinical practice opportunities available to students; and Provide assistance with completion of documentation required for accreditation.

The CSIF is divided into two sections:
Part I: Information for Academic Programs (pages 4-16)
  ❗️ Information About the Clinical Site (pages 4-6)
  ❗️ Information About the Clinical Teaching Faculty (pages 7-10)
  ❗️ Information About the Physical Therapy Service (pages 10-12)
  ❗️ Information About the Clinical Education Experience (pages 13-16)
Part II: Information for Students (pages 17-20)

Duplication of requested information is kept to a minimum except when separation of Part I and Part II of the CSIF would omit critical information needed by both students and the academic program. The CSIF is also designed using a check-off format wherever possible to reduce the amount of time required for completion.
DIRECTIONS FOR COMPLETION:

To complete the CSIF go to APTA’s website at under “Education Programs,” click on “Clinical” and choose “Clinical Site Information Form.” This document is available as a Word document.

1. **Save the CSIF on your computer** before entering your facility’s information. The title should be the clinical site’s zip code, clinical site’s name, and the date (e.g., 90210BevHillsRehab 10-26-2005). Using this format for titling the document allows the users to quickly identify the facility and most recent version of the CSIF from a folder. Saving the document will preserve the original copy on the disk or hard drive, allowing for ease in updating the document as changes in the clinical site information occurs.

2. **Complete the CSIF thoroughly and accurately.** Use the tab key or arrow keys to move to the desired blank space. The form is comprised of a series of tables to enable use of the tab key for quicker data entry. Use the Comment section to provide additional information as needed.

3. **Save the completed CSIF.**

4. **E-mail** the completed CSIF to each academic program with whom the clinic affiliates (accepts students).

5. In addition, to develop and maintain an accurate and comprehensive national database of clinical education sites, e-mail a copy of the completed CSIF Word document to the Department of Physical Therapy Education at kristinestoneley@apta.org.

6. **Update the CSIF on an annual basis** to assist in maintaining accurate and relevant information about your physical therapy service for academic programs, students, and the national database.

What should I do if my physical therapy service is associated with multiple satellite sites that also provide clinical learning experiences?

If your physical therapy service is associated with multiple satellite sites that offer a variety of clinical learning experiences, such as an acute care hospital that also provides clinical rotations at associated sports medicine and long-term care facilities, provide information regarding the primary clinical site for the clinical experience on page 4. Complete page 4, to provide essential information on all additional clinical sites or satellites associated with the primary clinical site. **Please note that if the satellite site(s) offering a clinical experience differs from the primary clinical site, a separate CSIF must be completed for each satellite site. Additionally, if any of the satellite sites have a different CCCE, an abbreviated resume must be completed for each individual serving as CCCE.**

What should I do if specific items are not applicable to my clinical site or I need to further clarify a response?

If specific items on the CSIF do not apply to your clinical education site at the time you are completing the form, please leave the item(s) blank. Provide additional information and/or comments in the Comment box associated with the item.
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<table>
<thead>
<tr>
<th><strong>CLINICAL SITE INFORMATION FORM</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Initial Date</strong></td>
</tr>
<tr>
<td><strong>Revision Date</strong></td>
</tr>
<tr>
<td><strong>Person Completing CSIF</strong></td>
</tr>
<tr>
<td><strong>E-mail address of person completing CSIF</strong></td>
</tr>
<tr>
<td><strong>Name of Clinical Center</strong></td>
</tr>
<tr>
<td><strong>Street Address</strong></td>
</tr>
<tr>
<td><strong>City</strong></td>
</tr>
<tr>
<td><strong>Facility Phone</strong></td>
</tr>
<tr>
<td><strong>PT Department Phone</strong></td>
</tr>
<tr>
<td><strong>PT Department Fax</strong></td>
</tr>
<tr>
<td><strong>PT Department E-mail</strong></td>
</tr>
<tr>
<td><strong>Clinical Center Web Address</strong></td>
</tr>
<tr>
<td><strong>Director of Physical Therapy E-mail</strong></td>
</tr>
<tr>
<td><strong>Center Coordinator of Clinical Education (CCCE) / Contact Person</strong></td>
</tr>
<tr>
<td><strong>CCCE / Contact Person Phone</strong></td>
</tr>
<tr>
<td><strong>CCCE / Contact Person E-mail</strong></td>
</tr>
<tr>
<td><strong>APTA Credentialed Clinical Instructors (CI)</strong></td>
</tr>
<tr>
<td><strong>(List name and credentials)</strong></td>
</tr>
<tr>
<td><strong>Other Credentialed CIs (List name and credentials)</strong></td>
</tr>
<tr>
<td><strong>Indicate which of the following are required by your facility prior to the clinical education experience:</strong></td>
</tr>
<tr>
<td><strong>Proof of student health clearance</strong></td>
</tr>
<tr>
<td><strong>Criminal background check</strong></td>
</tr>
<tr>
<td><strong>Child clearance</strong></td>
</tr>
<tr>
<td><strong>Drug screening</strong></td>
</tr>
<tr>
<td><strong>First Aid and CPR</strong></td>
</tr>
<tr>
<td><strong>HIPAA education</strong></td>
</tr>
<tr>
<td><strong>OSHA education</strong></td>
</tr>
<tr>
<td><strong>Other: Please list</strong></td>
</tr>
</tbody>
</table>


**Information About Multi-Center Facilities**

If your health care system or practice has multiple sites or clinical centers, complete the following table(s) for each of the sites. Where information is the same as the primary clinical site, indicate “SAME.” If more than three sites, copy, and paste additional sections of this table before entering the requested information. Note that you must complete an abbreviated resume for each CCCE.

<table>
<thead>
<tr>
<th>Name of Clinical Site</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Facility Phone</td>
<td>Ext.</td>
</tr>
<tr>
<td>PT Department Phone</td>
<td>Ext.</td>
</tr>
<tr>
<td>Fax Number</td>
<td>Facility E-mail</td>
</tr>
<tr>
<td>Director of Physical Therapy</td>
<td>E-mail</td>
</tr>
<tr>
<td>CCCE</td>
<td>E-mail</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Clinical Site</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Facility Phone</td>
<td>Ext.</td>
</tr>
<tr>
<td>PT Department Phone</td>
<td>Ext.</td>
</tr>
<tr>
<td>Fax Number</td>
<td>Facility E-mail</td>
</tr>
<tr>
<td>Director of Physical Therapy</td>
<td>E-mail</td>
</tr>
<tr>
<td>CCCE</td>
<td>E-mail</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Clinical Site</th>
<th>Street Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Facility Phone</td>
<td>Ext.</td>
</tr>
<tr>
<td>PT Department Phone</td>
<td>Ext.</td>
</tr>
<tr>
<td>Fax Number</td>
<td>Facility E-mail</td>
</tr>
<tr>
<td>Director of Physical Therapy</td>
<td>E-mail</td>
</tr>
<tr>
<td>CCCE</td>
<td>E-mail</td>
</tr>
</tbody>
</table>
### Clinical Site Accreditation/Ownership

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Date of Last Accreditation/Certification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Is your clinical site certified/ accredited? If no, go to #3.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If yes, has your clinical site been certified/accredited by:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>JCAHO</td>
</tr>
<tr>
<td></td>
<td></td>
<td>CARF</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Government Agency (eg, CORF, PTIP, rehab agency, state, etc.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Which of the following best describes the ownership category for your clinical site? (check all that apply)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Corporate/Privately Owned</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Government Agency</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hospital/Medical Center Owned</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Nonprofit Agency</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Physician/Physician Group Owned</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PT Owned</td>
</tr>
<tr>
<td></td>
<td></td>
<td>PT/PTA Owned</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other (please specify)</td>
</tr>
</tbody>
</table>

### Clinical Site Primary Classification

To complete this section, please:

A. Place the number 1 (1) beside the category that best describes how your facility functions the majority (> 50%) of the time. Click on the drop down box to the left to select the number 1.

B. Next, if appropriate, check (✓) up to four additional categories that describe the other clinical centers associated with your facility.

<table>
<thead>
<tr>
<th>Acute Care/Inpatient Hospital Facility</th>
<th>Industrial/Occidental Health Facility</th>
<th>School/Preschool Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambulatory Care/Outpatient</td>
<td>Multiple Level Medical Center</td>
<td>Wellness/Prevention/Fitness Program</td>
</tr>
<tr>
<td>ECF/ Nursing Home/SNF</td>
<td>Private Practice</td>
<td>Other: Specify</td>
</tr>
<tr>
<td>Federal/State/County Health</td>
<td>Rehabilitation/Sub-acute Rehabilitation</td>
<td></td>
</tr>
</tbody>
</table>

### Clinical Site Location

Which of the following best describes your clinical site’s location?

- Rural
- Suburban
- Urban
Information About the Clinical Teaching Faculty

ABBREVIATED RESUME FOR CENTER COORDINATORS OF CLINICAL EDUCATION

Please update as each new CCCE assumes this position.

<table>
<thead>
<tr>
<th>NAME:</th>
<th>Length of time as the CCCE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE: (mm/dd/yy)</td>
<td>Length of time as a CI:</td>
</tr>
<tr>
<td>PRESENT POSITION: (Title, Name of Facility)</td>
<td>Mark (X) all that apply:</td>
</tr>
<tr>
<td></td>
<td>PT</td>
</tr>
<tr>
<td></td>
<td>PTA</td>
</tr>
<tr>
<td></td>
<td>Other, specify</td>
</tr>
<tr>
<td></td>
<td>Length of time in clinical practice:</td>
</tr>
<tr>
<td>LICENSURE: (State/Numbers)</td>
<td>APTA Credentialed CI Yes No</td>
</tr>
<tr>
<td></td>
<td>Other CI Credentialing Yes No</td>
</tr>
<tr>
<td>Eligible for Licensure: Yes No</td>
<td>Certified Clinical Specialist: Yes No</td>
</tr>
<tr>
<td>Area of Clinical Specialization:</td>
<td></td>
</tr>
<tr>
<td>Other credentials:</td>
<td></td>
</tr>
</tbody>
</table>

**SUMMARY OF COLLEGE AND UNIVERSITY EDUCATION** (Start with most current): Tab to add additional rows.

<table>
<thead>
<tr>
<th>INSTITUTION</th>
<th>PERIOD OF STUDY</th>
<th>MAJOR</th>
<th>DEGREE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FROM</td>
<td>TO</td>
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</tr>
</tbody>
</table>

**SUMMARY OF PRIMARY EMPLOYMENT** (For current and previous four positions since graduation from college; start with most current): Tab to add additional rows.
<table>
<thead>
<tr>
<th>EMPLOYER</th>
<th>POSITION</th>
<th>PERIOD OF EMPLOYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>FROM</td>
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<td></td>
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</tr>
</tbody>
</table>
CONTINUING PROFESSIONAL PREPARATION RELATED DIRECTLY TO CLINICAL TEACHING RESPONSIBILITIES (for example, academic for credit courses [dates and titles], continuing education [courses and instructors], research, clinical practice/expertise, etc. in the last three (3) years): Tab to add additional rows.

<table>
<thead>
<tr>
<th>Course</th>
<th>Provider/Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

6
CLINICAL INSTRUCTOR INFORMATION

Provide the following information on all PTs or PTAs employed at your clinical site who are CIs. For clinical sites with multiple locations, use one form for each location and identify the location here. Tab to add additional rows.

| Name followed by credentials (e.g., Joe Therapist, DPT, OCS Jane Assistant, PTA, BS) | PT/PTA Program from Which CI Graduated | Year of Graduation | Highest Earned Physical Therapy Degree | No. of Years of Clinical Practice | No. of Years of Clinical Teaching | List Certifications KEY: A = APTA credentialed, CI B = Other CI credentialing | APTA Member Yes/No | L/E/T Number | State of Licensure |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
**Clinical Instructors**

What criteria do you use to select clinical instructors? *(Mark (X) all that apply):*

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Marked Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>APTA Clinical Instructor Credentialing</td>
<td>No criteria</td>
</tr>
<tr>
<td>Career ladder opportunity</td>
<td>Other (not APTA) clinical instructor credentialing</td>
</tr>
<tr>
<td>Certification/training course</td>
<td>Therapist initiative/volunteer</td>
</tr>
<tr>
<td>Clinical competence</td>
<td>Years of experience: Number:</td>
</tr>
<tr>
<td>Delegated in job description</td>
<td>Other (please specify):</td>
</tr>
<tr>
<td>Demonstrated strength in clinical teaching</td>
<td></td>
</tr>
</tbody>
</table>

How are clinical instructors trained? *(Mark (X) all that apply)*

<table>
<thead>
<tr>
<th>Training Method</th>
<th>Marked Training Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:1 individual training (CCCE:CI)</td>
<td>Continuing education by consortia</td>
</tr>
<tr>
<td>Academic for-credit coursework</td>
<td>No training</td>
</tr>
<tr>
<td>APTA Clinical Instructor Education and Credentialing Program</td>
<td>Other (not APTA) clinical instructor credentialing program</td>
</tr>
<tr>
<td>Clinical center inservices</td>
<td>Professional continuing education (e.g., chapter, CEU course)</td>
</tr>
<tr>
<td>Continuing education by academic program</td>
<td>Other (please specify):</td>
</tr>
</tbody>
</table>

**Information About the Physical Therapy Service**

**Number of Inpatient Beds**

For clinical sites with inpatient care, please provide the number of beds available in each of the subcategories listed below: (If this does not apply to your facility, please skip and move to the next table.)

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>Number of Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute care</td>
<td>Psychiatric center</td>
</tr>
<tr>
<td>Intensive care</td>
<td>Rehabilitation center</td>
</tr>
<tr>
<td>Step down</td>
<td>Other specialty centers: Specify</td>
</tr>
<tr>
<td>Subacute/transitional care unit</td>
<td>Total Number of Beds</td>
</tr>
<tr>
<td>Extended care</td>
<td>Total Number of Beds</td>
</tr>
</tbody>
</table>

**Number of Patients/ Clients**

Estimate the average number of patient/client visits per day:

<table>
<thead>
<tr>
<th>INPATIENT</th>
<th>OUTPATIENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual PT</td>
<td>Individual PT</td>
</tr>
<tr>
<td>Student PT</td>
<td>Student PT</td>
</tr>
<tr>
<td>Individual PTA</td>
<td>Individual PTA</td>
</tr>
<tr>
<td>Student PTA</td>
<td>Student PTA</td>
</tr>
<tr>
<td>PT/PTA Team</td>
<td>PT/PTA Team</td>
</tr>
<tr>
<td><strong>Total</strong> patient/client visits per day</td>
<td><strong>Total</strong> patient/client visits per day</td>
</tr>
</tbody>
</table>
Patient/Client Lifespan and Continuum of Care

Indicate the frequency of time typically spent with patients/clients in each of the categories using the key below:

1 = (0%)  2 = (1 - 25%)  3 = (26 - 50%)  4 = (51 - 75%)  5 = (76 - 100%)

Click on the ◁ ray bar under rating to select from the drop down box.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Patient Lifespan</th>
<th>Rating</th>
<th>Continuum of Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 years</td>
<td>Critical care, ICU, acute</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13-21 years</td>
<td>SNF/ECF/sub-acute</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22-65 years</td>
<td>Rehabilitation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Over 65 years</td>
<td>Ambulatory/outpatient</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Home health/hospice</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Wellness/fitness/industry</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Patient/Client Diagnoses

1. Indicate the frequency of time typically spent with patients/clients in the primary diagnostic groups (bolded) using the key below:

1 = (0%)  2 = (1 - 25%)  3 = (26 - 50%)  4 = (51 - 75%)  5 = (76 - 100%)

2. Check (¥) those patient/client diagnostic sub-categories available to the student.

Click on the ◁ ray bar under rating to select from the drop down box.

<table>
<thead>
<tr>
<th>(1-5) Musculoskeletal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acute injury</td>
</tr>
<tr>
<td>Amputation</td>
</tr>
<tr>
<td>Arthritis</td>
</tr>
<tr>
<td>Bone disease/dysfunction</td>
</tr>
<tr>
<td>Connective tissue disease/dysfunction</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(1-5) Neuro-muscular</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain injury</td>
</tr>
<tr>
<td>Cerebral vascular accident</td>
</tr>
<tr>
<td>Chronic pain</td>
</tr>
<tr>
<td>Congenital/developmental</td>
</tr>
<tr>
<td>Neuromuscular degenerative disease</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(1-5) Cardiovascular-pulmonary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiac dysfunction/disease</td>
</tr>
<tr>
<td>Fitness</td>
</tr>
<tr>
<td>Lymphedema</td>
</tr>
<tr>
<td>Pulmonary dysfunction/disease</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(1-5) Integumentary</th>
</tr>
</thead>
<tbody>
<tr>
<td>Burns</td>
</tr>
<tr>
<td>Open wounds</td>
</tr>
<tr>
<td>Scar formation</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(1-5) Other (May cross a number of diagnostic groups)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cognitive impairment</td>
</tr>
<tr>
<td>General medical conditions</td>
</tr>
<tr>
<td>General surgery</td>
</tr>
<tr>
<td>Oncologic conditions</td>
</tr>
</tbody>
</table>
**Hours of Operation**
Facilities with multiple sites with different hours must complete this section for each clinical center.

<table>
<thead>
<tr>
<th>Days of the Week</th>
<th>From: (a.m.)</th>
<th>To: (p.m.)</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wednesday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sunday</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Student Schedule**
Indicate which of the following best describes the typical student work schedule:
- Standard 8 hour day
- Varied schedules

Describe the schedule(s) the student is expected to follow during the clinical experience:

**Staffing**
Indicate the number of full-time and part-time budgeted and filled positions:

<table>
<thead>
<tr>
<th></th>
<th>Full-time budgeted</th>
<th>Part-time budgeted</th>
<th>Current Staffing</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PTAs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aides/Techs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Others: Specify</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Information About the Clinical Education Experience

#### Special Programs/Activities/Learning Opportunities

Please mark (X) all special programs/activities/learning opportunities available to students.

<table>
<thead>
<tr>
<th>Administration</th>
<th>Industrial/ergonomic PT</th>
<th>Quality Assurance/CQI/TQM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aquatic therapy</td>
<td>Inservice training/lectures</td>
<td>Radiology</td>
</tr>
<tr>
<td>Athletic venue coverage</td>
<td>Neonatal care</td>
<td>Research experience</td>
</tr>
<tr>
<td>Back school</td>
<td>Nursing home/ECF/SNF</td>
<td>Screening/prevention</td>
</tr>
<tr>
<td>Biomechanics lab</td>
<td>Orthotic/Prosthetic fabrication</td>
<td>Sports physical therapy</td>
</tr>
<tr>
<td>Cardiac rehabilitation</td>
<td>Pain management program</td>
<td>Surgery (observation)</td>
</tr>
<tr>
<td>Community/re-entry activities</td>
<td>Pediatric-general (emphasis on): Team meetings/rounds</td>
<td></td>
</tr>
<tr>
<td>Critical care/intensive care</td>
<td>Classroom consultation</td>
<td>Vestibular rehab</td>
</tr>
<tr>
<td>Departmental administration</td>
<td>Developmental program</td>
<td>Women’s Health/OB-GYN</td>
</tr>
<tr>
<td>Early intervention</td>
<td>Cognitive impairment</td>
<td>Work Hardening/conditioning</td>
</tr>
<tr>
<td>Employee intervention</td>
<td>Musculoskeletal</td>
<td>Wound care</td>
</tr>
<tr>
<td>Employee wellness program</td>
<td>Neurological</td>
<td>Other (specify below)</td>
</tr>
<tr>
<td>Group programs/classes</td>
<td>Prevention/wellness</td>
<td></td>
</tr>
<tr>
<td>Home health program</td>
<td>Pulmonary rehabilitation</td>
<td></td>
</tr>
</tbody>
</table>

#### Specialty Clinics

Please mark (X) all specialty clinics available as student learning experiences.

<table>
<thead>
<tr>
<th>Arthritis</th>
<th>Orthopedic clinic</th>
<th>Screening clinics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance</td>
<td>Pain clinic</td>
<td>Developmental</td>
</tr>
<tr>
<td>Feeding clinic</td>
<td>Prosthetic/orthotic clinic</td>
<td>Scoliosis</td>
</tr>
<tr>
<td>Hand clinic</td>
<td>Seating/mobility clinic</td>
<td>Preparticipation sports</td>
</tr>
<tr>
<td>Hemophilia clinic</td>
<td>Sports medicine clinic</td>
<td>Wellness</td>
</tr>
<tr>
<td>Industry</td>
<td>Women’s health</td>
<td>Other (specify below)</td>
</tr>
<tr>
<td>Neurology clinic</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Health and Educational Providers at the Clinical Site**

Please mark (X) all health care and educational providers at your clinical site students typically observe and/or with whom they interact.

<table>
<thead>
<tr>
<th>Administrators</th>
<th>Massage therapists</th>
<th>Speech/language pathologists</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternative therapies:</td>
<td>Massage therapists</td>
<td>Social workers</td>
</tr>
<tr>
<td>List:</td>
<td>Nurses</td>
<td>Special education teachers</td>
</tr>
<tr>
<td>Athletic trainers</td>
<td>Occupational therapists</td>
<td>Students from other disciplines</td>
</tr>
<tr>
<td>Audiologists</td>
<td>Physicians (list specialties)</td>
<td>Students from other physical therapy education programs</td>
</tr>
<tr>
<td>Dietitians</td>
<td>Physician assistants</td>
<td>Therapeutic recreation therapists</td>
</tr>
<tr>
<td>Enterostomal /wound specialists</td>
<td>Podiatrists</td>
<td>Vocational rehabilitation counselors</td>
</tr>
<tr>
<td>Exercise physiologists</td>
<td>Prosthetists /orthotists</td>
<td>Others (specify below)</td>
</tr>
<tr>
<td>Fitness professionals</td>
<td>Psychologists</td>
<td></td>
</tr>
<tr>
<td>Health information technologists</td>
<td>Respiratory therapists</td>
<td></td>
</tr>
</tbody>
</table>
Affiliated PT and PTA Educational Programs
List all PT and PTA education programs with which you currently affiliate. Tab to add additional rows

<table>
<thead>
<tr>
<th>Program Name</th>
<th>City and State</th>
<th>PT</th>
<th>PTA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
## Availability of the Clinical Education Experience

Indicate educational levels at which you accept PT and PTA students for clinical experiences (Mark (X) all that apply).

<table>
<thead>
<tr>
<th>Physical Therapist</th>
<th>Physical Therapist Assistant</th>
</tr>
</thead>
<tbody>
<tr>
<td>First experience: Check all that apply.</td>
<td></td>
</tr>
<tr>
<td>Half days</td>
<td></td>
</tr>
<tr>
<td>Full days</td>
<td></td>
</tr>
<tr>
<td>Other: (Specify)</td>
<td></td>
</tr>
<tr>
<td>First experience: Check all that apply.</td>
<td></td>
</tr>
<tr>
<td>Half days</td>
<td></td>
</tr>
<tr>
<td>Full days</td>
<td></td>
</tr>
<tr>
<td>Other: (Specify)</td>
<td></td>
</tr>
<tr>
<td>Intermediate experiences: Check all that apply.</td>
<td></td>
</tr>
<tr>
<td>Half days</td>
<td></td>
</tr>
<tr>
<td>Full days</td>
<td></td>
</tr>
<tr>
<td>Other: (Specify)</td>
<td></td>
</tr>
<tr>
<td>Intermediate experiences: Check all that apply.</td>
<td></td>
</tr>
<tr>
<td>Half days</td>
<td></td>
</tr>
<tr>
<td>Full days</td>
<td></td>
</tr>
<tr>
<td>Other: (Specify)</td>
<td></td>
</tr>
<tr>
<td>Final experience</td>
<td></td>
</tr>
<tr>
<td>Final experience</td>
<td></td>
</tr>
<tr>
<td>Internship (6 months or longer)</td>
<td></td>
</tr>
<tr>
<td>Specialty experience</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PT</th>
<th>PTA</th>
</tr>
</thead>
<tbody>
<tr>
<td>From</td>
<td>To</td>
</tr>
</tbody>
</table>

Indicate the range of weeks you will accept students for any single full-time (36 hrs/wk) clinical experience.

Indicate the range of weeks you will accept students for any one part-time (< 36 hrs/wk) clinical experience.

<table>
<thead>
<tr>
<th>PT</th>
<th>PTA</th>
</tr>
</thead>
</table>

Average number of PT and PTA students affiliating per year. Clarify if multiple sites.

**Yes**  **No**  **Comments**

Is your clinical site willing to offer reasonable accommodations for students under ADA?

What is the procedure for managing students whose performance is below expectations or unsafe?

Box will expand to accommodate response.

**Answer if the clinical center employs only one PT or PTA.**

Explain what provisions are made for students if the clinical instructor is ill or away from the clinical site.

Box will expand to accommodate response.
**Clinical Site’s Learning Objectives and Assessment**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>
| 1. Does your clinical site provide written clinical education objectives to students?  
   If no, go to # 3. |  |
| 2. Do these objectives accommodate:  
   The student’s objectives?  
   Students prepared at different levels within the academic curriculum?  
   The academic program's objectives for specific learning experiences?  
   Students with disabilities? |  |
| 3. Are all professional staff members who provide physical therapy services acquainted with the clinical site's learning objectives? |  |

When do the CCCE and/or CI typically discuss the clinical site's learning objectives with students? *(Mark (X) all that apply)*

- Beginning of the clinical experience
- At mid-clinical experience
- Daily
- At end of clinical experience
- Weekly
- Other

Indicate which of the following methods are typically utilized to inform students about their clinical performance? *(Mark (X) all that apply)*

- Written and oral mid-evaluation
- Written and oral summative final evaluation
- Ongoing feedback throughout the clinical
- As per student request in addition to formal and ongoing written & oral feedback
- Student self-assessment throughout the clinical

**OPTIONAL:** Please feel free to use the space provided below to share additional information about your clinical site (eg, strengths, special learning opportunities, clinical supervision, organizational structure, clinical philosophies of treatment, pacing expectations of students [early, final]).

Box will expand to accommodate response.
**Part I. Information for Students**

Use the check (X) boxes provided for Yes/No responses. **For all other responses or to provide additional detail please use the Comment box.**

**Arranging the Experience**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1. Do students need to contact the clinical site for specific work hours related to the clinical experience?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2. Do students receive the same official holidays as staff?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3. Does your clinical site require a student interview?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4. Indicate the time the student should report to the clinical site on the first day of the experience.</td>
</tr>
</tbody>
</table>
|     |    | 5. Is a Mantoux TB test (PPD) required?  
|     |    | a) one step (check)  
|     |    | b) two step (check)  
|     |    | If yes, within what time frame? |
|     |    | 6. Is a Rubella Titer Test or immunization required? |
|     |    | 7. Are any other health tests/immunizations required prior to the clinical experience?  
|     |    | If yes, please specify: |
|     |    | 8. How is this information communicated to the clinic? Provide fax number if required. |
|     |    | 9. How current are student physical exam records required to be? |
|     |    | 10. Are any other health tests or immunizations required on-site?  
|     |    | If yes, please specify: |
|     |    | 11. Is the student required to provide proof of OSHA training? |
|     |    | 12. Is the student required to provide proof of HIPAA training? |
|     |    | 13. Is the student required to provide proof of any other training prior to orientation at your facility?  
|     |    | If yes, please list. |
|     |    | 14. Is the student required to attest to an understanding of the benefits and risks of Hepatitis-B immunization? |
|     |    | 15. Is the student required to have proof of health insurance? |
|     |    | 16. Is emergency health care available for students?  
|     |    | a) Is the student responsible for emergency health care costs? |
|     |    | 17. Is other non-emergency medical care available to students? |
|     |    | 18. Is the student required to be CPR certified?  
<p>|     |    | (Please note if a specific course is required). |</p>
<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>a) Can the student receive CPR certification while on-site?</td>
</tr>
<tr>
<td>19.</td>
<td></td>
<td>Is the student required to be certified in First Aid?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a) Can the student receive First Aid certification on-site?</td>
</tr>
<tr>
<td>20.</td>
<td></td>
<td>Is a criminal background check required (e.g., Criminal Offender Record Information)? If yes, please indicate which background check is required and time frame.</td>
</tr>
<tr>
<td>21.</td>
<td></td>
<td>Is a child abuse clearance required?</td>
</tr>
<tr>
<td>22.</td>
<td></td>
<td>Is the student responsible for the cost or required clearances?</td>
</tr>
<tr>
<td>23.</td>
<td></td>
<td>Is the student required to submit to a drug test? If yes, please describe parameters.</td>
</tr>
<tr>
<td>24.</td>
<td></td>
<td>Is medical testing available on-site for students?</td>
</tr>
<tr>
<td>25.</td>
<td></td>
<td>Other requirements: (On-site orientation, sign an ethics statement, sign a confidentiality statement.)</td>
</tr>
</tbody>
</table>

**Housing**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>26. Is housing provided for male students? (If no, go to #32)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>27. Is housing provided for female students? (If no, go to #32)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>28. What is the average cost of housing?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>29. Description of the type of housing provided:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>30. How far is the housing from the facility?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>31. Person to contact to obtain/confirm housing:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Name:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Address:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>City: State: Zip:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Phone: E-mail:</td>
</tr>
<tr>
<td>Yes</td>
<td>No</td>
<td>Comments</td>
</tr>
<tr>
<td>-----</td>
<td>----</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>32. If housing is <strong>not</strong> provided for either gender:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a) Is there a contact person for information on housing in the area of the clinic? Please list contact person and phone #.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) Is there a list available concerning housing in the area of the clinic? If yes, please attach to the end of this form.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transportation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>33. Will a student need a car to complete the clinical experience?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>34. Is parking available at the clinical center?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a) What is the cost for parking?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>35. Is public transportation available?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>36. How close is the nearest transportation (in miles) to your site?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a) Train station? miles</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) Subway station? miles</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c) Bus station? miles</td>
</tr>
<tr>
<td></td>
<td></td>
<td>d) Airport? miles</td>
</tr>
<tr>
<td></td>
<td></td>
<td>37. Briefly describe the area, population density, and any safety issues regarding where the clinical center is located.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>38. Please enclose a map of your facility, specifically the location of the department and parking. <strong>Travel directions can be obtained from several travel directories on the internet.</strong> (e.g., Google Maps, Yahoo, MapQuest, Expedia).</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Meals</td>
</tr>
<tr>
<td></td>
<td></td>
<td>39. Are meals available for students on-site? (If no, go to #40)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Breakfast (if yes, indicate approximate cost)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lunch (if yes, indicate approximate cost)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Dinner (if yes, indicate approximate cost)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40. Are facilities available for the storage and preparation of food?</td>
</tr>
</tbody>
</table>
### Stipend/Scholarship

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>41. Is a stipend/salary provided for students? If no, go to #43.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a) How much is the stipend/salary? ($ / week)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>42. Is this stipend/salary in lieu of meals or housing?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>43. What is the minimum length of time the student needs to be on the clinical experience to be eligible for a stipend/salary?</td>
</tr>
</tbody>
</table>

### Special Information

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>44. Is there a facility/student dress code? If no, go to # 45.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If yes, please describe or attach.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>a) Specify dress code for men:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) Specify dress code for women:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>45. Do you require a case study or inservice from all students (part-time and full-time)?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>46. Do you require any additional written or verbal work from the student (e.g., article critiques, journal review, patient/client education handout/brochure)?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>47. Does your site have a written policy for missed days due to illness, emergency situations, other? If yes, please summarize.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>48. Will the student have access to the Internet at the clinical site?</td>
</tr>
</tbody>
</table>

### Other Student Information

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>49. Do you provide the student with an on-site orientation to your clinical site?</td>
</tr>
<tr>
<td>(mark X below)</td>
<td></td>
<td>a) Please indicate the typical orientation content by marking an X by all items that are included.</td>
</tr>
</tbody>
</table>

- Documentation/billing
- Facility-wide or volunteer orientation
- Learning style inventory
- Patient information/assignments
- Policies and procedures (specifically outlined plan for emergency responses)
- Quality assurance
- Reimbursement issues
- Required assignments (e.g., case study, diary/log, inservice)

- Review of goals/objectives of clinical experience
- Student expectations
- Supplemental readings
- Tour of facility/department
- Other (specify below – e.g., bloodborne pathogens, hazardous materials, etc.)
In appreciation...

Many thanks for your time and cooperation in completing the CSIF and continuing to serve the physical therapy profession as clinical mentors and role models. Your contributions to learners’ professional growth and development ensure that patients/clients today and tomorrow receive high-quality patient/client care services.
PHYSICAL THERAPIST ASSISTANT PROGRAM
ADVISORY BOARD

Helen Berkio, PT, HealthAlliance (retired)
Gay Haughton, PT, Heywood Hospital
Kim Manty, PT, Heywood Hospital
Colleen Cipro, PT, Quabbin Valley Care Center
Amy Jackson, PTA Heywood Rehabilitation Center
Ed Ramsey, DPT, Ramsey Rehabilitation
Kim Schofield, PT, Health Alliance
Ruth Wentzell, PT, CAPS Collaborative
Kim Salmon, PT, Beaumont Nursing Home
Jennifer Baer, PT, Clinton Hospital
Cheryl Babin, Life Care Centers of America
Charlene Shaver, PTA Ramsey Rehabilitation
Karen Hewitt, PTA, Ayer Valley Continuing Care Center
Ricardo Muchiutti, PT HealthAlliance Home Health and Hospice
Bill Chapman, PTA Heywood Rehab
Eileen Hurley, PT Gardner VNA
Kelly Loescher, OTR Gardner VNA
Diana Couillard, Student Liaison
Maria Patriacca, Student Liaison
Marjorie Berkman, Student Liaison
Jeanne Coleman, Student Liaison
Jacqueline Shakar, PTA, MWCC
Eileen Costello, Dean, MWCC
Margaret Jailet, PT ACCE, MWCC
PREAMBLE

This document of the American Physical Therapy Association sets forth standards for the ethical conduct of the physical therapist assistant. All physical therapist assistants are responsible for maintaining high standards of conduct while assisting physical therapists. The physical therapist assistant shall act in the best interest of the patient/client. These standards of conduct shall be binding on all physical therapist assistants.

STANDARD 1
A physical therapist assistant shall respect the rights and dignity of all individuals and shall provide compassionate care.

STANDARD 2
A physical therapist assistant shall act in a trustworthy manner towards patients/clients.

STANDARD 3
A physical therapist assistant shall provide selected physical therapy interventions only under the supervision and direction of a physical therapist.

STANDARD 4
A physical therapist assistant shall comply with laws and regulations governing physical therapy.

STANDARD 5
A physical therapist assistant shall achieve and maintain competence in the provision of selected physical therapy interventions.

STANDARD 6
A physical therapist assistant shall make judgments that are commensurate with their educational and legal qualifications as a physical therapist assistant.

STANDARD 7
A physical therapist assistant shall protect the public and the profession from unethical, incompetent, and illegal acts.

(See also Ethics and Judicial Committee document Guide for Conduct of the Physical Therapist Assistant)

(Program 17 – Judicial/Legal Issues, ext 3253)
MWCC INCIDENT REPORT
BLOOD and BODY FLUID EXPOSURE
CONTROL PLAN

Employee ( ) Student ( )

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>MI</th>
<th>SS#</th>
<th>Sex (Male/Female)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone</th>
<th>Student Academic Program</th>
<th>Employee Title</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Physicians’ Name</th>
<th>Address</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SECTION A. EXPOSURE: To be completed by clinical supervisor and student employee

* Clinical facility where exposure occurred: ____________________________________________

* Date/Time of exposure ____________ Type: Needlestick ___ Mucus Membrane ___
  Other _____ Splash

* Describe event _________________________________________________________________
  _________________________________________________________________
  _________________________________________________________________

* Reported to clinical supervisor/Program Coordinator: _____________________________

* If exposure occurred at a clinical rotation site, report incident to their Infection control/Occupational Health:
  Name/Title of individual reported to: _________________________________________
  Name/Title
  Telephone Number ___________________________________________________________

* Exposure on campus: Report to MWCC Health Nurse. (978-630-9136)
  Date ___________ Time ___________

* Employee Exposure: also reports to supervisor: Date _______ Time _______
  and Human Resource Department: Date _______ Time _______
* Report **ALL** exposure incidents to MWCC Health Nurse: Date __________

Signature Employee/Student: ____________________________________________ Date __________

Signature Clinical Supervisor: ____________________________________________ Date __________

**SECTION B. INITIAL EVALUATION:** To be completed by student/employee and health care professionals.

* Date of last tetanus-diphtheria vaccine (within ten years) ______________________

* Hepatitis B vaccine status: Never had ______ Date of Series 1 __________ 2 __________ 3 __________

(vaccine history may be obtained from MWCC Health Services: 978-630-9136)

* Hepatitis B surface antibody status: Date Drawn: __________

(Verify within 72 hours) Positive _________ Date __________ Negative _________ Date __________

Signature of person who ordered this test: ____________________________ Date __________

* HIV status:

  HIV counseling: Yes _____ No_____ Date/Signature of counselor ________________

  Initial HIV testing: Yes _____ No _____

  M.D. __________________; Local HIV Test Site ____________

* Source Patient: Known _____ Unknown _____

  Serological Testing __________________ Results __________________

  __________________________________________

  No Testing/Explain ____________________________________________

  Source Patients’ attending physician: ____________________________

  How will source patients’ test results be communicated to the exposed? __________

  __________________________________________

Signature of Student/Employee ____________________________________ Date __________

Signatures and titles of people completing section B:

__________________________________________ Date __________

__________________________________________ Date __________

**SECTION C. TREATMENT:**

* Students: Section C is to be completed by the students’ primary care provider in compliance to their individual health insurance/HMO.

  (Students **are not** covered under workmans compensation)
* Students must contact their primary care provider immediately to assure prompt medical intervention.

* Employees: Section C to be completed at the facility of affiliation or by their primary care provider. Employee exposures are considered workmens compensation issues. Submit medical bills to the MWCC Human Resource Department.

* Treatment: Treatment will be in accordance with primary care provider and or affiliating facilities policy. **Treatment should be initiated within 72 hours.**

**TREATMENT (guidelines only)**

<table>
<thead>
<tr>
<th>STUDENT/EMPLOYEE HBSAB +</th>
<th>SOURCE HBSAG -</th>
<th>NO TREATMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>STUDENT/EMPLOYEE HBSAB -</td>
<td>SOURCE HBSAG -</td>
<td>CHOOSE ONE:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>DATE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1) OFFER VACCINE IF NEVER HAD ________</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) BOOSTER VACCINE IF WEANED IMMUNITY ___</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) NOTIFY EHD IF DECLINES VACCINE ________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STUDENT/EMPLOYEE HBSAB +</th>
<th>SOURCE HBSAG +</th>
<th>NO TREATMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>STUDENT/EMPLOYEE HBSAB –</td>
<td>SOURCE HBSAG +</td>
<td>GIVE HBIG .06 mg/kg IM WITHIN 72-96 HRS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>AND CHOOSE ONE:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1) BEGIN HB VACCINE IF NEVER HAD ________</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) BOOSTER IF HAD VACCINE IN PAST ________</td>
</tr>
</tbody>
</table>

**SOURCE HCP +**

| OPTIONAL: IMMUNE GLOBULIN .02 ML/KG IM |

Signature Student/Employee_________________________________________ Date_______

Signature of Primary Care Provider____________________________________ Date_______

FORWARD WORKSHEET TO MWCC HEALTH OFFICE
SECTION D. POST EXPOSURE FOLLOW-UP CARE:
(To be completed by student/employee and health care providers.)

Six Week:  
Date_____________  Tests Performed____________________________
Results_____________  By Whom____________________________

Three Months:  
Date_____________  Tests Performed____________________________
Results_____________  By Whom____________________________

Six Months:  
Date_____________  Tests Performed____________________________
Results_____________  By Whom____________________________

One Year (fifty-two weeks)  
Date_____________  Tests Performed____________________________
Results_____________  By Whom____________________________

DECLINATION OF TESTING and/or FOLLOW-UP PROCEDURES

I have been informed and understand that it is in my best interest to receive initial baseline testing for Hepatitis B and HIV after an accidental exposure to blood and body fluids. The importance of receiving future follow-up testing at six weeks, three months, six months, and fifty-two weeks from the date of the exposure has also been discussed with me, however, I decline to have:

( ) initial serological testing for Hepatitis B
( ) Initial serological testing for HIV
( ) Six weeks from the date of exposure – follow-up testing for HIV
( ) Three months from the date of exposure – follow-up testing for HIV
( ) Six months from the date of exposure – follow-up testing for HIV
( ) Fifty-two weeks from the date of exposure – follow-up testing for HIV

Signature___________________________________________________  Date______________

RELEASE OF INFORMATION

I GIVE PERMISSION TO THE Director of Health Services or Health Service designee to release information to the clinical site_______________________________ that will provide follow-up testing after my exposure to blood and body fluids.

If I change the site where I am receiving my follow-up testing, I shall request that the testing results be sent to my confidential medical file at MWCC Health Service.

Signature___________________________________________________  Date______________

COPEY OF EXPOSURE WORKSHEET GIVEN TO STUDENT/EMPLOYEE PER PROTOCOL. STUDENT/EMPLOYEE AWARE THAT ALL CONTACTS MUST REMAIN CONFIDENTIAL.

Signature Student/Employee:___________________________________  Date______________

FORWARD WORKSHEET TO MWCC HEALTH OFFICE

26
MWCC PTA PROGRAM STUDENT CONSENT FORM

I, ________________, as a student in the Physical Therapist Assistant Program at Mount Wachusett Community College, consent to participate in all laboratory and classroom activities. In doing so, I acknowledge the fact that such activities in the PTA program include skills and techniques which involve physical activity, the use of massage, heat, cold, electricity, traction, and all forms of therapeutic exercise. In agreeing to participate, I also release the College, including academic and clinical faculty and fellow students, from any injuries that I may incur from my participation in all activities involved with the program.

I also agree to the following: (check all)

_____ I have received and understand the PTA Student Handbook and the MWCC Student Handbook.

_____ I have received proper explanation and fully understand the PTA Attendance and Tardiness Policies.

_____ I have received proper orientation to the PTA program and all MWCC policies.

_____ I understand my responsibilities as a student.

_____ I have been notified of the identification of my faculty advisor.

_____ I agree to participate in any videotapes, photos, or any other media productions to be used for educational purposes.

_____ I have been informed of and understand the current accreditation status of the PTA program.

_____ I have been informed of and understand MWCC’s Statement on Disabilities.

_____ I give my permission for the release of academic information to PTA faculty and clinical facilities under contract with MWCC.

_____ Laboratory participation (as described above.)

_____ I have been informed of and understand the MWCC PTA program technical standards; I acknowledge the ability to perform/demonstrate each in a safe, efficient and correct manner.

________________________________________  Date

Student Signature

________________________________________  Date

Print Faculty Name

________________________________________  Date

Faculty Signature
Students entering into the Physical Therapist Assistant Program must be able to demonstrate the ability to:

1. Comprehend textbook material at the 11th grade level.

2. Communicate and assimilate information verbally and in a printed format.

3. Gather, analyze, and draw conclusions from data.

4. Stand for a minimum of two hours.

5. Walk for a minimum of six hours, not necessarily consecutively.

6. Stoop, bend, and twist for a minimum of 30 minutes at a time and be able to repeat this activity at frequent intervals.

7. Lift a 40 pound person or assist with a larger person and transfer the person from one location to another.


9. Utilize the small muscle dexterity necessary to do such tasks as gloving, gowning, and operating controls on machinery.

10. Respond to spoken words, monitor signals, call bells, and vital sign assessment equipment.

11. Identify behaviors which would endanger a person’s life or safety and intervene quickly in a crisis situation with an appropriate solution.

12. Remain calm, rational, decisive, and in control at all times, especially during emergency situations.

13. Exhibit social skills appropriate to professional interactions.

14. Maintain cleanliness and personal grooming consistent with close personal contact.

15. Function without causing harm to self or others if under the influence of prescription or over the counter medications.
INSTRUCTIONS TO STUDENT

1. Please clearly print the information needed to release your immunization records to your clinical site.
2. Sign and date from.

AUTHORIZED FORM RELEASE OF MEDICAL INFORMATION

I HEREBY AUTHORIZE Mount Wachusett Community College to forward my immunization records to my clinical site(s) for the duration of my enrollment in this Allied Health Program: **Please print clearly.**

__________________________________________________
(Student’s Name)

__________________________________________________
(Student’s Address)

__________________       _______________       _______________
(City) (State) (Zip)

__________________________________________________
(Program)

__________________________________________________
(Student’s Signature)

__________________________________________________
(Student’s ID#)       (Date)
Physical therapists have a responsibility to deliver services in ways that protect the public safety and maximize the availability of their services. They do this through direct delivery of services in conjunction with responsible utilization of physical therapist assistants who assist with selected components of intervention. The physical therapist assistant is the only individual permitted to assist a physical therapist in selected interventions under the direction and supervision of a physical therapist.

Direction and supervision are essential in the provision of quality physical therapy services. The degree of direction and supervision necessary for assuring quality physical therapy services is dependent upon many factors, including the education, experiences, and responsibilities of the parties involved, as well as the organizational structure in which the physical therapy services are provided.

Regardless of the setting in which the physical therapy service is provided, the following responsibilities must be borne solely by the physical therapist:

1. Interpretation of referrals when available.
2. Initial examination, evaluation, diagnosis, and prognosis.
3. Development or modification of a plan of care which is based on the initial examination or reexamination and which includes the physical therapy goals and outcomes.
4. Determination of when the expertise and decision-making capability of the physical therapist requires the physical therapist to personally render physical therapy interventions and when it may be appropriate to utilize the physical therapist assistant. A physical therapist shall determine the most appropriate utilization of the physical therapist assistant that provides for the delivery of service that is safe, effective, and efficient.
5. Reexamination of the patient/client in light of their goals, and revision of the plan of care when indicated.
6. Establishment of the discharge plan and documentation of discharge summary/status.
7. Oversight of all documentation for services rendered to each patient/client.

The physical therapist remains responsible for the physical therapy services provided when the physical therapist's plan of care involves the physical therapist assistant to assist with selected interventions. Regardless of the setting in which the service is provided, the determination to utilize physical therapist assistants for selected interventions requires the education, expertise, and professional judgment of a physical therapist as described by the Standards of Practice, Guide to Professional Conduct, and Code of Ethics.

In determining the appropriate extent of assistance from the physical therapist assistant (PTA), the physical therapist considers:

- The PTA's education, training, experience, and skill level.
- Patient client criticality, acuity, stability, and complexity.
- The predictability of the consequences.
- The setting in which the care is being delivered.
- Federal and state statutes.
- Liability and risk management concerns
- The mission of physical therapy services for the setting.
- The needed frequency of reexamination.
Physical Therapist Assistant

Definition

The physical therapist assistant is a technically educated health care provider who assists the physical therapist in the provision of physical therapy. The physical therapist assistant is a graduate of a physical therapist assistant associate degree program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

Utilization

The physical therapist is directly responsible for the actions of the physical therapist assistant related to patient/client management. The physical therapist assistant may perform selected physical therapy interventions under the direction and at least general supervision of the physical therapist. In general supervision, the physical therapist is not required to be on-site for direction and supervision, but must be available at least by telecommunications. The ability of the physical therapist assistant to perform the selected interventions as directed shall be assessed on an ongoing basis by the supervising physical therapist. The physical therapist assistant makes modifications to selected interventions either to progress the patient/client as directed by the physical therapist or to ensure patient/client safety and comfort.

The physical therapist assistant must work under the direction and at least general supervision of the physical therapist. In all practice settings, the performance of selected interventions by the physical therapist assistant must be consistent with safe and legal physical therapist practice, and shall be predicated on the following factors: complexity and acuity of the patient's/client's needs; proximity and accessibility to the physical therapist; supervision available in the event of emergencies or critical events; and type of setting in which the service is provided.

When supervising the physical therapist assistant in any off-site setting, the following requirements must be observed:

1. A physical therapist must be accessible by telecommunications to the physical therapist assistant at all times while the physical therapist assistant is treating patients/clients.

2. There must be regularly scheduled and documented conferences with the physical therapist assistant regarding patients/clients, the frequency of which is determined by the needs of the patient/client and the needs of the physical therapist assistant.

3. In those situations in which a physical therapist assistant is involved in the care of a patient/client, a supervisory visit by the physical therapist will be made:
   a. Upon the physical therapist assistant’s request for a reexamination, when a change in the plan of care is needed, prior to any planned discharge, and in response to a change in the patient’s/client’s medical status.
   b. At least once a month, or at a higher frequency when established by the physical therapist, in accordance with the needs of the patient/client.
   c. A supervisory visit should include:
      i. An on-site reexamination of the patient/client.
      ii. On-site review of the plan of care with appropriate revision or termination.
      iii. Evaluation of need and recommendation for utilization of outside resources.

Relationship to Vision 2020: Professionalism

(Program 32 – Practice, ext 3176)
TARDINESS WARNING

DATE:

TO:

FROM:

COURSE NAME AND COURSE NUMBER:

THIS IS WRITTEN WARNING TO INFORM YOU THAT ON TWO OCCASIONS THIS SEMESTER YOU HAVE BEEN TARDY IN ARRIVAL TO THIS CLASS. THIS IS UNACCEPTABLE AND IS NOW OFFICIALLY NOTED BY THIS INSTRUCTOR.

PLEASE BE AWARE THAT RECEIVING THIS NOTICE WILL RESULT IN A 5 POINT REDUCTION IN YOUR FINAL GRADE FOR THIS COURSE.
APA Reference Style GUIDE

The APA Publication Manual now instructs authors to use hanging indents for references, and to use italics for titles. The hanging indent is one-half inch (1.25 cm), just like paragraph indents. All titles in references are set in sentence caps, but titles quoted in the text are set in heading caps. No quotation marks are used around titles of articles in references, but quotes are used when citing article titles in the text. The APA Publication Manual (2001) contains 95 examples of different reference types (pp. 240-281). Here are a few examples of the most commonly used formats.

Anonymous or unknown author (common in newspapers):
Citation: ("Caffeine Linked," 1991). Use heading caps when citing titles in text citations.

Books (Group author, 3ñ5 authors, reprint/translation, edition other than first):

Washington, DC: Author.
Citation: (American Psychiatric Association [APA], 1990); next citation (APA, 1990). Note: "Author" is used as above when author and publisher are identical.

Chicago: University of Chicago Press.
Citation: (Booth, Colomb, & Williams, 1995); next citation (Booth et al., 1995).

Citation: (Ebbinghaus, 1885/1913).

Citation: (Strunk & White, 1979).

Chapter or section in a book (online & print):


Citations: (Beers & Berkow, 1999, chap. 189); (Stephan, 1985). Note: Break a URL to wrap a line only after a slash or before a period. Do not add a hyphen or any other punctuation.

Conference paper (unpublished):


Citation: (Shrout et al., 1996). APA references list up to the first six authors to a work. If there are more add et al. (and others) to the list of names. In text citations give just the lead author, et al. Published papers are referenced as a chapter in a book.
Government report online accessed through GPO database:

http://purl.access.gpo.gov/GPO/LPS20906
Citation: (National Institute of Mental Health [NIMH], 2002); next citation (NIMH, 2002).

Contents | Back to top

Journal articles (Print, electronic copy, changed source, online journal, paged by issue):

Citation: (Hypericum Depression Trial Study Group, 2002). The APA *Manual* requires citing the full name of a corporate author like this; the acronym would not be easily recognized. However, shortening the author to "Hypericum Depression Trial" in subsequent citations would probably be acceptable to editors of APA journals.

Journal article, electronic facsimile:


Many documents are now available online as exact facsimile copies of the print original (usually in Adobe's PDF format). References to these facsimiles just add the note [Electronic version] to the reference. If the document is not an exact copy of a print version--"(e.g., the format differs from the print version or page numbers are not indicated)"--add the date you retrieved the document and the URL to the reference (APA, 2001, p. 271).
Journal article, changed/doubtful source:


Journal article, retrieved from a database:


Online only journal (paged by issue):


Citation: (Kortepeter & Parker, 1999). There is no period after the URL in a reference.

Note: When directly quoting or citing a document, a page number or other means of identifying a specific passage is required. In the absence of page numbers, if paragraph numbers appear in an electronic document, add the paragraph symbol or the abbreviation para. and the paragraph number to the citation (e.g., Kortepeter & Parker, 1999, ¶ 17). If there is no paragraph number, cite the nearest preceding section heading and count paragraphs from there (e.g., Kortepeter & Parker, 1999, Method section, para. 4).

Note: Occasionally a research journal may be paged by issue, that is, page numbering in each issue begins at page one. Add the number in the volume (in parentheses in plain text) to these references immediately after the volume number, as in the example above.
Letter to the editor:


Magazine article:


Newsletter/newspaper articles:


The date is given as it appears on the publication. For anonymous newspaper articles, see the previous section on "Anonymous or unknown authors."

Pamphlet:


Web page:
