

George Fox University
School of Physical Therapy

COURSE SYLLABUS

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| <u>COURSE:</u> | PDPT 580 Clinical Internship I – May 2015 |
| <u>CREDIT HOURS:</u> | 4 |
| <u>CLOCK HOURS:</u> | 160 |
| <u>PREREQUISITES:</u> | Admission to DPT program Successful completion of Didactic coursework to date Recommendation by Academic Faculty |
| <u>INSTRUCTOR:</u> | Paul Shew P.T. DPT VAC 216 503.554.2453 pshew@georgefox.edu |
| <u>OFFICE HOURS:</u> | Available by appointment |
| <u>SCHEDULE:</u> | Schedule determined by Clinic |
| <u>CLASSROOM:</u> | In Clinic |

COURSE DESCRIPTION:

This course is a 4 week full time clinical experience. Students will be under direct supervision of a clinical instructor at an assigned outpatient physical therapy clinic, rehabilitation clinic, or acute care facility. Clinical sites vary in their location and it is the student's responsibility for travel and living expenses if they occur.

COURSE REQUIREMENTS:

Specific to APTA Clinical Performance Instrument (CPI):

1. The student is expected to be rated at least "**Beginner.**"
2. Student should demonstrate progress on all items.
3. Professional Behavior:
 - a. Demonstrate at least Beginner level proficiency in all areas by end of affiliation.
 - b. Identify differences in patients' values and demonstrate the ability to respect and act based on patients' preferences.
 - c. Prior to clinical Rotation complete Generic Abilities self-assessment
4. Complete assigned post clinical surveys.

METHODS OF INSTRUCTION:

These courses emphasize application and integration of academic coursework in the clinical setting. Students are directly supervised by licensed physical therapists.

REQUIRED TEXTS/OTHER MATERIAL:

As directed By Clinical Instructor

RECOMMENDED TEXTS:

None

COURSE MATERIAL ON FOXTALE:

Links to the self-assessment and goal-setting forms can be accessed through FoxTale, as well as a link to the CPI assessment.

METHODS OF EVALUATION AND GRADING:

1. Red Flag areas and student progress are discussed with the CI during the faculty midpoint visit
2. At the end of this internship, the intern and Clinical Instructor will evaluate student performance using the CPI.
3. The CPI's and the Evaluation of Clinical Experience and Clinical Instruction form are due immediately following the last day of the internship. A link to the Clinical Experience and Clinical Instruction form will be e-mailed to the student the last week of the internship.
4. Grades will be assigned based on the completion of the following, along with verbal input from the CI and intern. Ultimately the academic faculty determines the final grade based on:
 - Student CPI
 - CI CPI
 - Evaluation of Clinical Experience and Clinical Instruction form
5. Clinical internships not completed for personal or medical reasons will be evaluated by the faculty on an individual basis to determine whether the student will continue progression through the curriculum.

Refer to the George Fox University Student Handbook, Clinical Education Handbook, and the program specific Student Handbook regarding policies on attendance, preparedness, academic honesty, grading, remediation, and appeals.

OUTLINE OF CONTENT AND COURSE OBJECTIVES:

Upon completion of this course, the students will be able to:

Cognitive:

1. Discuss and Demonstrate strong theoretical and didactic background in all areas listed under PDPT 580.
2. Appropriately justify and apply any chosen treatment technique relative to coursework to date.
3. Report and analyze on any valid subject matter designed to enhance the clinical learning experience as determined by the clinical instructor.
4. Analyze specific outcomes and modify interventions and behaviors accordingly.

Skill:

1. Assist in evaluating patients in all settings including but not limited to: muscle performance, ROM, posture, pain, functional mobility status (transfers, bed mobility, etc), and assistive gait.
2. Demonstrate advanced beginning proficiency in choosing and applying therapeutic exercise, soft tissue mobilization, and modalities.
3. Determine and discuss appropriate intervention/instruction for simple gait disorders, including selection of assistive device, gait pattern, and assistance.
4. Instruct patients/caregivers in home management programs with beginning proficiency.
5. Document with beginning proficiency any treatment provided including subjective, objective, assessment, and plan components.
6. Demonstrate beginning level of effectiveness in professional communication.
7. Demonstrate beginning level of time management (2-3 times longer than entry-level).
8. Require clinical supervision 100% of the time managing new patients or patients with simple conditions and 100% of the time for patients with complex conditions.
9. Is consistent in developing proficiency with simple tasks (i.e. Medical record review, goniometry, muscle testing and simple interventions), but is not yet able to perform skilled examinations and clinical reasoning without supervision.
10. Does not carry a caseload.

PROGRAM AND UNIVERSITY POLICIES:

1. Working hours are those established by the facility. The intern is not expected to work a longer day than any one staff PT.
2. If applicable, the intern may work on the weekend with a day off during the week according to departmental policies.
3. Students can expect to spend 8-10 hours per week studying, preparing, and reviewing relevant material. This is in addition to the 40 hours/week that the students spend in the clinic.
4. The facility dress code is to be the guide for the intern.
5. Students/Interns must have current appropriate CPR certification and complete immunization records. This includes, MMR, HBV, DPT, and TB. Students/ Interns are responsible for keeping copies of their own records so that they can be presented to their clinical instructors on the first day.
6. Interns must be supervised by at least one licensed PT (not a Physical Therapist Assistant). A supervising PT must also be located in the same premises as the intern at all times. In some cases, the PT should be in the same treatment area/room.
7. If any problems or questions occur during the affiliation, consult the Director of Clinical Education (DCE). DO NOT wait until a clinic visit, return to school, and assume things will improve, or try to "gut things out." Problem areas can often be easily handled without wasting valuable clinic time.

8. Each facility has the authority to require extra reading, homework, or reports in order to enhance the clinical experience.

Absences:

1. Absences must be due to illness or emergency only and must be made up at the discretion of the DCE or clinical instructor.
2. The facility must be notified each day of an absence by 8:00 a.m. or upon opening.
3. The DCE must be notified each day of an absence.
4. Students may have the opportunity to participate in School-approved or School-sponsored activities during an internship, including state, national, or international professional meetings, and service learning experiences. Students may participate in these activities under the following conditions:
 - a. The absence is approved by the clinical instructor
 - b. The absence is approved by the DCE
 - c. The time missed is made up

CLASS SCHEDULE:

Determined by clinical facility

COURSEWORK

EXPECTATIONS: Allow the student to have hands on experience within the limits of their knowledge and current skill set. Students should be able to examine, evaluate and treat patients in terms of modalities, range of motion, therapeutic exercise, simple gait and functional mobility issues. Only a Final CPI is required. By the end of this clinical experience, student should be at **“Beginner”** level.

CURRICULUM COMPLETED

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| Professional Practices in Physical Therapy | Therapeutic Exercise |
| Basic Patient Care Skills | Biomechanics and Kinesiology |
| Human Anatomy with labs | Therapeutic Modalities |
| Neuroscience/Motor Control | Essentials of Research and Statistics |
| Evidence Based Practice | Pathophysiology |
| Applied Physiology | |

COURSEWORK INCLUDED

| <u>Professional Practices in PT</u> | <u>Neuroscience/Motor Control</u> | <u>Therapeutic Modalities</u> |
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| Subjective history evaluation | Dermatomes | Massage |
| Documentation | Postural control | Ultrasound |
| Universal precautions | Reflex testing | Phonophoresis |
| Legal issues (state and federal) | Sensory testing | Electrical muscle stimulation (NMES) |
| Ethics | Cranial nerve testing | Iontophoresis |
| HIPPA | Basic vestibular test/treatment | TENS |
| Vital signs | <u>Therapeutic Exercise</u> | Laser |
| <u>Basic Patient Care Skills</u> | Design and modify basic exercise and stretching programs | Whirlpool |
| Range of motion | Posture | Paraffin bath |
| Manual muscle testing | Ergonomics | Mechanical traction |
| Transfers | Balance and proprioceptive training | • Cervical |
| Bed mobility | Limited joint mobilization | • Lumbar |
| Gait with assistive devices | • Grades 1-3 | Biofeedback |
| Body mechanics | | <u>Other</u> |
| <u>Human Anatomy</u> | | Evidence Based Practice |
| Muscle attachment/innervation | | Applied Physiology |
| Palpation including arteries | | Biomechanics and Kinesiology |
| | | Essentials of Research/Statistics |
| | | Pathophysiology |

CURRICULUM NOT COMPLETED

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| Cardiopulmonary Therapeutics | Health and Wellness in Physical Therapy |
| Pharmacology for Physical Therapy | Prosthetics and Orthotics |
| Geriatric Physical Therapy | Medical Screening and Differential Diagnosis |
| Neurorehabilitation | Diagnostic Imaging for Physical Therapists |
| Pediatric Physical Therapy | Psychosocial Aspects of Patient Care and Disability |
| Orthopedic Assessment and Rehabilitation | Professional Duty and Social Responsibility |
| Professional Research Project | Administration in Physical Therapy |
| Med/Surg/Integumentary Management | Professional Seminar/Special Topics |