COURSE: PDPT 680 Clinical Internship I

CREDIT HOURS: 6

CLOCK HOURS: 240 clinic hours

PREREQUISITES: PDPT 581 Comprehensive Clinical Experience
Successful completion of didactic coursework to date
Recommendation by academic faculty

INSTRUCTOR: Paul Shew PT, DPT, Director of Clinical Education
Li-Zandre Philbrook PT, DPT, Assistant Director of Clinical Education

OFFICE HOURS: Available by appointment.

SCHEDULE: Schedule determined by clinic

CLASSROOM: In clinic

COURSE DESCRIPTION:
This course is a 6-week full time clinical experience. Students will be under direct supervision of a clinical instructor as assigned by the Physical Therapist and facility. Clinical sites vary in their location and it is the student’s responsibility for travel and living expenses if they occur.

COURSE REQUIREMENTS:
At completion of this internship student is expected to be rated at least at “Advanced Beginner” on The APTA Clinical Performance Instrument.
    Should demonstrate progress on all items:
    1. Professional Behavior:
        a. Demonstrate at least Advanced 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. Follow standards outlined in the Clinical Handbook
    2. Complete 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:
Prior to Clinical Internship:
  - Review GFU Clinical Education Handbook
  - Review CPI
  - Review Medicare rules related to use of student Physical Therapists in the clinic
    - Supervision of Students Under Medicare Chart
    - Implementing MDS 3.0: Use of Therapy Students
    - Use of Students Under Medicare Part B

During Internship:
  - Reading as assigned by Clinical Instructor

**RECOMMENDED TEXTS:**
None

**COURSE MATERIAL ON FOXTALE:**
Links to the goal-setting form and the CPI assessment will be available on the Google Clinical Internship website.

**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 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 Information Survey
   - ACCE/DCE Performance Assessment & Student Survey

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.

**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 581 and in addition, pathology, motor control, neurorehabilitation, PNF Principles of joint mobilization, prosthetics and orthotics, and integumentary.
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, joint mobilization (limb joints only), physical agents, and functional mobility training.
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 advanced beginning proficiency.
5. Document with advanced beginning proficiency any treatment provided including subjective, objective, assessment, and plan components.
6. Demonstrate advanced beginning level of effectiveness in professional communication.
7. Demonstrate advanced beginning level of time management (2-3 times longer than entry-level).
8. Require clinical supervision 75-90% 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. May begin sharing the physical therapist’s caseload.

PROGRAM AND UNIVERSITY POLICIES:
Please refer to the George Fox University Student Handbook, the Clinical Education Handbook, and the Graduate School of Physical Therapy Student Handbook regarding policies on attendance, preparedness, academic honesty, grading, remediation, and appeals.

Disability Services Information
In keeping with the central tenets of its mission – teaching, faith, and service – George Fox University is committed to the full access and the inclusion of all qualified students in its programs. It is the policy of the University to ensure that students with disabilities have equal opportunity for participation in the University’s academic programs and activities, in accordance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act. Some students with disabilities may need reasonable accommodation in order to participate fully in the Doctor of Physical Therapy program. If accommodation is needed in classroom or clinical settings, students should contact the Disability Services Office (DSO) as early as possible (www.georgefox.edu/dso). If you have been approved for accommodations through the DSO, please discuss your accommodations with your professors and your advisor at the start of each semester in order to optimize your learning opportunities.
**Important:** The DPT program includes multiple lab experiences and off-campus clinical placements. Students may need additional or different accommodation arrangements for these lab and clinical components of the program. The Director of Clinical Education should receive the student's Field Experience Accessibility Plan from the Disability Service Office by February 1 of the calendar year prior to the scheduled start of a clinical experience. Early notification improves the ability to arrange a suitable placement to support needed accommodations. If an Accessibility Plan is submitted after the designated date, the Director of Clinical Education will attempt to arrange placements that meet accessibility needs, but the student might be delayed in completing clinical experiences.

The Director of Clinical Education may meet with the student at the students’ request to discuss strategies for a successful completion of the clinical internship. Students may be encouraged at this time to meet with the Site Coordinator of Clinical Education (SCCE) to come to an agreement as to the request for accommodations. At no time is the student required to disclose their medical diagnosis. Prior to the clinical placement, the SCCE signs the **Field experience accessibility plan.** The SCCE may decline the student request if the request is unreasonable for their specific setting.

**Clinical 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. Student/Intern must have current appropriate CPR certification and complete immunization records. This includes, MMR, HepB, Tdap, Varicella, and TB. The student/intern is responsible for keeping copies of their own records so that they can be presented to their clinical instructors on the first day. Student must provide proof of current health insurance. There may be additional requirements from the site and this can vary from state to state.
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
5. Absences for personal reasons (weddings, family reunions, etc.) are not professional behavior and are not supported.
6. Tardiness during your clinical rotation is not professional behavior and is not supported.

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. Final CPI is required. By the end of this clinical internship, the student should be at “Advanced Beginner” level.

CURRICULUM COMPLETED

<table>
<thead>
<tr>
<th>Professional Practices in Physical Therapy</th>
<th>Pathophysiology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Patient Care Skills</td>
<td>Cardiopulmonary Therapy</td>
</tr>
<tr>
<td>Human Anatomy with labs</td>
<td>Med/Surg/Integumentary Management</td>
</tr>
<tr>
<td>Neuroscience/Motor Control</td>
<td>Geriatric Physical Therapy</td>
</tr>
<tr>
<td>Evidence Based Practice</td>
<td>2/3 Neurorehabilitation</td>
</tr>
<tr>
<td>Applied Physiology</td>
<td>Pediatric Physical Therapy</td>
</tr>
<tr>
<td>Therapeutic Exercise</td>
<td>2/3 Orthopedic Rehabilitation</td>
</tr>
<tr>
<td>Biomechanics and Kinesiology</td>
<td>Professional Research Project</td>
</tr>
<tr>
<td>Therapeutic Modalities</td>
<td>Clinical Education (4wks)</td>
</tr>
<tr>
<td>Essentials of Research and Statistics</td>
<td></td>
</tr>
</tbody>
</table>

COURSEWORK INCLUDED

<table>
<thead>
<tr>
<th>Professional Practices in PT</th>
<th>Neuroscience/Motor Control</th>
<th>Therapeutic Modalities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjective history evaluation</td>
<td>Dermatomes</td>
<td>Massage</td>
</tr>
<tr>
<td>Documentation</td>
<td>Postural control</td>
<td>Ultrasound</td>
</tr>
<tr>
<td>Universal precautions</td>
<td>Reflex testing</td>
<td>Phonophoresis</td>
</tr>
<tr>
<td>Legal issues (state and federal)</td>
<td>Sensory testing</td>
<td>Electrical muscle stimulation (NMES)</td>
</tr>
<tr>
<td>Ethics</td>
<td>Cranial nerve testing</td>
<td>Iontophoresis</td>
</tr>
<tr>
<td>HIPPA</td>
<td>Basic vestibular test/treatment</td>
<td>TENS</td>
</tr>
<tr>
<td>Vital signs</td>
<td></td>
<td>Laser</td>
</tr>
<tr>
<td><strong>Basic Patient Care Skills</strong></td>
<td><strong>Therapeutic Exercise</strong></td>
<td>Whirlpool Paraffin bath Mechanical traction</td>
</tr>
<tr>
<td>Range of motion</td>
<td>Design and modify basic exercise and stretching programs</td>
<td></td>
</tr>
<tr>
<td>Manual muscle testing</td>
<td>Posture</td>
<td>Cervical</td>
</tr>
<tr>
<td>Transfers</td>
<td>Ergonomics</td>
<td>Lumbar</td>
</tr>
<tr>
<td>Bed mobility</td>
<td>Balance and proprioceptive training</td>
<td></td>
</tr>
<tr>
<td>Gait with assistive devices</td>
<td>Limited joint mobilization</td>
<td>Biofeedback</td>
</tr>
<tr>
<td>Body mechanics</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Human Anatomy</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muscle attachment/innervation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Palpation including arteries</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Neuro Rehab
- Use of a systematic clinical decision making frameworks
- Patient interview
- Neurologic tests and measures
  - Cognition
  - Perception
  - Motor control
  - Postural control
  - Sensory exam
  - Cranial nerves
- Principles of neuroplasticity and neurotherapeutics
- Interventions to enhance:
  - Bed mobility
  - Sitting function
  - Sit to stand
- Wheelchair seating/positioning
- Pathophysiology, examination, prognosis, and intervention for:
  - Stroke
  - Multiple sclerosis
  - Cerebellar dysfunction
  - Brain tumors

### Ortho Extremities
- Patient interview
- Tests and measures
  - Upper and lower extremities
- General orthopedic conditions
  - Diagnosis
  - Prognosis
  - Plan of Care
- Post-operative care
- Hand mobilizations
  - Grade 1-3, limited grade 4

### Cardio Pulmonary Rehab
- EKG
- Cardiac Rehab
  - Phases I-IV
- Spirometry
- 6-Minute Walk Test
- Aerobic and anaerobic testing
- Breathing exercises
- Postural drainage and percussion
- Exercise prescription

### Other
- Evidence Based Practice Applied
- Physiology Biomechanics and Kinesiology Essentials of Research/Statistics
- Pathophysiology
- MedSurg Integumentary
- Geriatric Physical Therapy
- Pediatric Physical Therapy
- Decision making
- Professional Research Project

---

**CURRICULUM NOT COMPLETED**

- Neurologic topics not listed above
- Orthopedic Assessment and Rehabilitation (Spine)
- Professional Research Project
- Pharmacology for PT
- Health and Wellness in Physical Therapy
- Prosthetics and Orthotics
- Medical Screening and Differential Diagnosis
- Diagnostic Imaging for Physical Therapists
- Psychosocial Aspects of Patient Care and Disability
- Professional Duty and Social Responsibility
- Administration in Physical Therapy
- Professional Seminar/Special Topics