

GRADUATE DEPARTMENT OF PHYSICAL THERAPY

# Student Handbook

2012-2013



GEORGE FOX  
UNIVERSITY

**Be Known**

## **STUDENT HANDBOOK 2012-13**

### **Graduate Department of Physical Therapy**



### **Introduction**

The Student Handbook outlines the mission, goals and objectives, and philosophy of the Graduate Department of Physical Therapy at the George Fox University (GFU). It also contains department policies and procedures that affect students enrolled in the Doctor of Physical Therapy (DPT) program. The policies are intended (1) to protect and make explicit student rights and responsibilities, and (2) to insure that DPT program operation is consistent with its obligations as a professional physical therapist education program.

In addition, the program provides a Clinical Education Handbook designed for use by students as well as clinical instructors.

Students are responsible to be familiar with the contents of both handbooks and to seek verification of any questions regarding the contents.

Tyler Cuddeford PhD, PT  
Associate Professor of Physical Therapy  
Director - Physical Therapy Program

### **Compliance with accreditation**

George Fox University is accredited by the Northwest Commission on Colleges and Universities which is recognized by both the Commission on Higher Education and the US Department of Education.

George Fox University is seeking accreditation by the Commission on Accreditation in Physical Therapy Education (1111 North Fairfax Street, Alexandria, VA 22314; phone; 703-706-3245; accreditation@apta.org). The program has submitted an Application for Candidacy, which is the formal application required in the pre-accreditation stage. Submission of this document does not assure that the program will be granted Candidate for Accreditation status. Achievement of Candidate for Accreditation status is required prior to implementation of the professional/technical phase of the physical therapy program; therefore, no students may be enrolled in professional or technical courses until Candidate for Accreditation status has been achieved. Further, achievement of Candidate for Accreditation status does not assure that the program will be granted Accreditation.

Process for filing a complaint can be found at the CAPTE website: [www: CAPTEonline.org](http://www.CAPTEonline.org)

Commission on Accreditation in Physical Therapy Education  
1111 North Fairfax Street  
Alexandria, Virginia 22314  
Email: accreditation@apta.org  
Ph: (703)-684-2782 or (703)-706-3245

### **Non-discrimination policy**

George Fox University students work and live in an environment where the dignity of each individual is respected. Demeaning gestures, threats of violence, or physical attacks directed toward another person are not tolerated. This includes hazing or other initiations or any actions that may be hazardous, dehumanizing, harassing, or humiliating to community members. Also included is the use of telephones, United States or campus mail, or e-mail for the purpose of issuing obscene, harassing, or threatening messages. In addition, vandalism of property is unacceptable. Students are expected to maintain an educational and workplace environment free from unlawful discrimination and harassment, and to conduct themselves in a manner that ensures no discrimination or harassment occurs.

Discrimination or harassment due to race, color, sex, sexual orientation, marital status, religion, creed, age, national origin, citizenship status, workers' compensation status, physical or mental disability, veteran status, or any other status protected under applicable local, state, or federal law; or any other distinguishing characteristic protected by non-discrimination law, is prohibited.

The faculty recognizes the need for, and is committed to, the education of Physical Therapists representative of our diverse American population, to include men and women of any ethnic and cultural backgrounds.

### **Technical standards, essential functions and students with special needs.**

In keeping with the central tenets of its mission – teaching, faith, and service – George Fox University is committed to the full access and 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 may need reasonable accommodation for conditions in order to participate fully in the DPT program. Students must contact the Disability Services Office (DSO) as early as possible. If you currently have a DSO Accommodation Plan, 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. It is the student’s responsibility to meet with the DSO and the DPT Program Director’s designee at least one month before the start of the lab experience and/or clinical placement in order to review the student’s accommodation needs for the lab and/or clinical experience.

### **Minimal Abilities for Eligibility to Participate in the Doctor of Physical Therapy Program at GFU.**

The DPT program statement incorporates the University policy and is more specific to the technical standards of physical therapy, in preparing students to fulfill the professional role of practicing physical therapists. These technical standards are outlined in the table below:

Essential Performance Functions for Success in the School of Physical Therapy and are designed to provide full access to learning opportunities for all students while respecting the professional duty to ensure client/patient safety and well-being while facilitating healing. The use of a trained intermediary would mean that a candidate's judgment is mediated by someone else's power of selection and observation. Therefore, third parties cannot be used to assist students in accomplishing curricular requirements.

A significant component of a practicing physical therapist is the assessment and treatment of movement disorders. Students must be able to perform the following essential functions with or without reasonable accommodation in order to fully participate in the DPT program. The following table is not a comprehensive listing of the functions of a physical therapist; these essential functions are stated to assist faculty and potential and/or currently enrolled students to:

- 1) Decide whether to enter the School of Physical Therapy;
- 2) Assess the student’s ability to progress in the program; and/or
- 3) Determine the nature/extent of accommodation that might be necessary for equal participation in the program. Please note that students are responsible for requesting accommodations for a disability, in advance.

The student must be able to perform these minimal abilities prior to beginning the didactic portion of the educational program and prior to any clinical affiliation. Included in the handbook is a minimal abilities acknowledgement form that each student must complete. This form acknowledges that you meet the minimal abilities. If you are unable to meet these performance functions you will not be allowed to continue in the program.

Ability	Standard
Critical Thinking	Critical thinking and reasoning sufficient for clinical judgment. This includes ability to measure, calculate and analyze. This requires ability to recall relevant events or research and incorporate these with a current patient/ circumstance.
Behavioral skills	Emotional health, ability to exercise sound judgment, the ability to develop mature and effective relationships with co workers and patients. Must be able to continue to function even under stress of outside distractions.
Communication Skills	Communicate easily, effectively and with sensitivity with patients and staff. Communication includes speaking, listening, reading and writing. Use of electronic devices such as telephone and computer is becoming essential in the classroom and clinic.
Mobility/ Motor skills	Must have both gross and fine motor function necessary to effectively evaluate patients and assist patients considering patient safety as well as safety of the therapist. It must be considered that the patients under the care of a physical therapist may require physical assistance to perform safe transfers or for safe ambulation. The Physical Therapist must possess adequate motor ability to care for a patient in case of emergency.
Observational skills	<p>Vision- required in the safe evaluation and care of a patient. Required to perform tests and use instruments, to read reports and remain current by literature review.</p> <p>Hearing- must be sufficient to converse with patient, for testing signs such as blood pressure, auscultate heart, lung and bowel sounds.</p> <p>Tactile- touch and pressure to evaluate strength and sensation of the patient and to grade exercise programs.</p> <p>Other- proprioception, hot, cold and pain, stereognosis and vibration.</p>

## STUDENT RIGHTS

Physical therapy students enjoy the same rights and privileges as all other graduate students who attend George Fox University. Students should consult the George Fox University Student Handbook for a detailed description of student rights and due process.

## **FERPA**

George Fox University accords all the rights under the Family Educational Rights and Privacy Act (FERPA) to students who are enrolled. No one shall have access to, nor does the institution disclose any information from, students' education records without the written consent of students except to personnel within the institution with direct educational interest, to persons or organizations providing students' financial aid, to accrediting agencies carrying out their accreditation function, to persons in compliance with a judicial order, and to persons in an emergency in order to protect the health or safety of students or other persons. All these exceptions are permitted under the Act. At its discretion, George Fox University may provide "directory information" in accordance with the provisions of the Act. Directory information is defined as that information which would not generally be considered harmful or an invasion of privacy if disclosed. For further information consult the GFU Student Life Handbook.

[www.georgefox.edu/offices/registrar/ferpa.html](http://www.georgefox.edu/offices/registrar/ferpa.html)

[www.georgefox.edu/catalog/general/compliance/privacy.html](http://www.georgefox.edu/catalog/general/compliance/privacy.html)



Graduate Department of Physical Therapy  
RELEASE OF INFORMATION

Name \_\_\_\_\_

ID# \_\_\_\_\_

Campus Box \_\_\_\_\_

In accordance with the Family Educational Rights and Privacy Act I hereby give my permission to release the information indicated below to the following person(s):

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Information to be released [please check appropriate item(s)]:

Mid-Semester Grade Report  Final Semester Grade Report

Report of Academic Standing  Class Schedule

I understand this release is in effect as of the date below until revoked in writing to the Program Director.

Signature of Student \_\_\_\_\_

Date Signed \_\_\_\_\_

## **Communication with students**

It is important for the Department to maintain communication with each of our students. To this end, notifications made will be provided primarily through the use of email using the students' email accounts. If the student wishes to have that account forward his/her messages to another account, it is the students' responsibility to set that up and ensure it is properly maintained.

Residential address: It is the students' responsibility to notify the school and department of any changes of address.

## **University Policies**

Please refer to the university handbook regarding any questions about University policies:

[www.georgefox.edu/offices/student-life/student-handbook/index.html](http://www.georgefox.edu/offices/student-life/student-handbook/index.html)

## **Mission, Philosophy Goals, Educational Outcomes**

### **University Mission**

George Fox University, a Christ-centered community, prepares students spiritually, academically, and professionally to think with clarity, act with integrity, and serve with passion.

### **School of Behavioral and Health Sciences Mission**

Members of the School of Behavioral and Health Sciences are committed to providing high quality educational programs that prepare students to care for the overall wellness of diverse individuals and groups by utilizing their expertise in the areas of physical, emotional, and spiritual healing.

### **Graduate Department of Physical Therapy Mission**

In conjunction with the mission of the university and of the School of Behavioral and Health Sciences, the mission of the Doctor of Physical Therapy Program is to prepare students to practice as ethical, well-rounded, and autonomous physical therapists. The program is committed to providing high quality educational programs that promote an excellence in academic and scholarly achievement, and provide students with the skills necessary for leadership, critical thinking, and lifelong learning. In addition, the program is committed to preparing students who engage in service to the community and contribute to the profession and society as clinicians, researchers, and teachers.

### **Educational Philosophy**

The faculty is committed to excellence in teaching. To this end, there has been established the following:

1. It is our responsibility to facilitate learning by actively involving the student in the educational process.
2. We strive to create a safe, secure, and open environment for learning.
3. It is our responsibility to facilitate and assist students in developing critical thinking and problem-solving skills.
4. We believe that the clinical education component of the program is an integral part of the curriculum as it provides opportunities for students to utilize and integrate the knowledge, skills, and attitudes they develop in their academic courses.
5. The faculty models lifelong learning and professional growth through clinical experience, research, and service activities.
6. We expect our graduates to continue to participate in professional and community service activities.

The School functions within the guidelines presented by:

1. George Fox University
2. State of Oregon Physical Therapy Licensing Board
3. Documents of the American Physical Therapy Association:  
[www.apta.org/CoreDocuments](http://www.apta.org/CoreDocuments)
  - Guide to Physical Therapist Practice
  - Code of Ethics and the Guide for Professional Conduct
  - Normative Model for Physical Therapist Professional Education
  - Statement on Professionalism in Physical Therapy: Core Values
  - The APTA web Clinical Performance Instrument
  - The Commission on Accreditation of Physical Therapy Education's Evaluative Criteria for Educational Programs for Preparation of Physical Therapists

### **Program Goals**

The major objective of the Doctor of Physical Therapy program is to graduate entry-level physical therapist practitioners who excel in clinical decision-making skills, demonstrate safe and accurate patient/client management functions, and exhibit a high level of professionalism.

### **Educational Outcomes**

In keeping with the APTA's Vision 20/20 statement, the primary educational outcome of the DPT program is to provide society with physical therapists who are doctors of physical therapy. These therapists may go on to become board-certified specialists.

"Consumers will have direct access to physical therapists in all environments for patient/client management, prevention, and wellness services. Physical therapists will be practitioners of choice in patients'/clients' health networks and will hold all privileges of autonomous practice. Physical therapists may be assisted by physical therapist assistants who are educated and licensed to provide physical therapist directed and supervised components of interventions. Guided by integrity, life-long learning, and a commitment to comprehensive and accessible health programs for all people, physical therapists and physical therapist assistants will render evidence-based services throughout the continuum of care and improve quality of life for

society. They will provide culturally sensitive care distinguished by trust, respect, and an appreciation for individual differences. While fully availing themselves of new technologies, as well as basic and clinical research, physical therapists will continue to provide direct patient/client care. They will maintain active responsibility for the growth of the physical therapy profession and the health of the people it serves”.

The George Fox University Graduate Department of Physical Therapy is committed to offering a quality physical therapist education program that operates within compliance of the Commission on Accreditation in Physical Therapy Education (CAPTE) of the American Physical Therapy Association.

The following outcomes are set forth in the APTA’s **A Normative Model of Physical Therapist Professional Education**:

**1. Accountability**

- a. Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.
- b. Has a fiduciary responsibility for all patient/clients.
- c. Practice in a manner consistent with the professional code of ethics.
- d. Changes behavior in response to understanding the consequences (positive and negative) of his/her actions.
- e. Participate in organizations and efforts that support the role of the physical therapist in furthering the health and wellness of the public.

**2. Altruism**

- a. Place patient’s/client’s needs above the physical therapist’s needs.
- b. Incorporate pro bono services into practice.

**3. Compassion/Caring**

- a. Exhibit caring, compassion and empathy in providing services to patients/clients.
- b. Promote active involvement of the patient/client in his/her care.

**4. Integrity**

Demonstrate integrity in all interactions with patients/clients, family members, caregivers, other health care providers, students, other consumers, and payers.

**5. Professional Duty**

- a. Demonstrate professional behaviors in all interactions with patients/clients, family members, caregivers, other health care providers, students, other consumers, and payers.
- b. Participate in self-assessment to improve the effectiveness of care.
- c. Participate in peer assessment activities.
- d. Effectively deal with positive and negative outcomes resulting from assessment activities.
- e. Participate in clinical education of students.
- f. Participate in professional organizations.

**6. Communication**

Expressively and receptively communicate in a culturally competent manner with patients/clients, family members, caregivers, practitioners, interdisciplinary team members, consumers, payers, and policymakers.

**7. Cultural Competence**

Identify, respect, and act with consideration for patients’/clients’ differences, values, preferences, and expressed needs in all professional activities.

**8. Clinical Reasoning**

- a. Use clinical judgment and reflection to identify, monitor and enhance clinical reasoning in order to minimize errors and enhance patient/client outcomes.
- b. Consistently apply current knowledge, theory, and professional judgment while considering the patient/client perspective in patient/client management

#### **9. Evidence-based Practice**

- a. Consistently use information technology to access sources of information to support clinical decisions.
- b. Consistently and critically evaluate sources of information related to physical therapy practice, research and education and apply knowledge from these sources in a scientific manner and to appropriate populations.
- c. Consistently integrate the best evidence for practice from sources of information with clinical judgment and patient/client values to determine the best care for a patient/client.
- d. Contribute to the evidence for practice by written systematic reviews or evidence or written descriptions of practice.
- e. Participate in the design and implementation of patterns of best clinical practice for various populations.

#### **10. Education**

-Effectively educate others using culturally appropriate teaching methods that are commensurate with the needs of the learner.

#### **11. Screening**

Determine when patients/clients need further examination or consultation by a physical therapist or referral to another health care professional.

#### **12. Examination**

- a. Examine patients/clients by obtaining a history from them and from other sources.
- b. Examine patients/clients by performing systems reviews.
- c. Examine patients/clients by selecting and administering culturally appropriate and age-related tests and measures. Tests and measures include, but are not limited to those that assess:

- 1) Aerobic Capacity/Endurance
- 2) Anthropometric Characteristics
- 3) Arousal, Attention, and Cognition
- 4) Assistive and Adaptive Device requirements
- 5) Circulation (Arterial, Venous, Lymphatic)
- 6) Cranial /Peripheral Nerve Integrity
- 7) Environmental, Home, and Work Barriers
- 8) Ergonomics and Body Mechanics
- 9) Functional Mobility, including Gait, Locomotion, and Balance
- 10) Integumentary Integrity
- 11) Joint Integrity and Mobility
- 12) Motor Function (Motor Control and Motor Learning)
- 13) Muscle Performance (including Strength, Power, and Endurance)
- 14) Neuromotor Development and Sensory Integration
- 15) Orthotic, Protective, and Supportive Device requirements
- 16) Pain
- 17) Posture
- 18) Prosthetic Requirements
- 19) Range of Motion (including Muscle Length)

- 20) Reflex Integrity
- 21) Self-Care and Home Management (including ADL and IADL)
- 22) Sensory Integrity
- 23) Ventilation and Respiration/Gas Exchange
- 24) Work (Job/School/Play), Community and Leisure Integration or Reintegration (including IADL)

**13. Evaluation-**

Evaluate data from the examination (history, systems review, and tests and measures) to make clinical judgments regarding patients/clients.

**14. Diagnosis-** Determine a diagnosis that guides future patient/client management.

**15. Prognosis-** Determine patient or client prognoses.

**16. Plan of Care**

- a. Collaborate with patients/clients, family members, payers, other professionals, and other individuals to determine a plan of care that is acceptable, realistic, culturally competent, and patient-centered.
- b. Establish a physical therapy plan of care that is safe, effective, and patient/client centered.
- c. Determine patient/client goals and outcomes within available resources and specify expected length of time to achieve the goals and outcomes.
- d. Deliver and manage a plan of care that is consistent with legal, ethical, professional obligations, and administrative policies and procedures of the practice environment.
- e. Monitor and adjust the plan of care in response to patient/client status.

**17. Intervention**

a. Provide physical therapy interventions to achieve patient/client goals and outcomes.

Interventions include:

- i. Therapeutic Exercise
- ii. Functional Training in Self-Care and Home Management (including ADL and IADL)
- iii. Functional Training in Work (Job/School/Play), Community, and Leisure Integration or Reintegration (including IADL)
- iv. Manual Therapy Techniques (including Mobilization/Manipulation, thrust and non-thrust techniques)
- v. Prescription, Application, and as appropriate, Fabrication of Devices and Equipment (Assistive, Adaptive, Orthotic, Protective, Supportive and Prosthetic)
- vi. Airway Clearance Techniques
- vii. Integumentary Repair and Protection Techniques
- viii. Electrotherapeutic Modalities
- ix. Physical Agents and Mechanical Modalities

b. Determines those components of interventions that may be directed to the physical therapist assistant (PTA) upon consideration of

- i. The needs of the patient/client
- ii. The PTA's ability
- iii. Jurisdictional law
- iv. Practice guidelines/policies/codes of ethics
- v. Facility policies

c. Provide effective culturally competent instruction to patients/clients and others to achieve goals and outcomes.

- d. Complete documentation that follows professional guidelines, guidelines required by health care systems, and guidelines required by the practice setting.
- e. Practice using principles of risk management.
- f. Respond effectively to patient/client and environmental emergencies in one's practice setting.

**18. Outcomes Assessment**

- a. Select outcome measures to assess individual and collective outcomes of patients/clients using valid and reliable measures that take into account the setting in which the patient/client is receiving services, cultural issues, and the effect of societal factors such as reimbursement.
- b. Collect data from the selected outcome measures in a manner that supports accurate analysis of individual patient/client outcomes.
- c. Analyze results arising from outcome measures selected to assess individual outcomes of patients/clients.
- d. Use analysis from individual outcome measurements to modify the plan of care.
- e. Select outcome measures that are valid and reliable and shown to be able to be generalized to patient/client populations being studied.

**19. Prevention, Health Promotion, Fitness, and Wellness**

- a. Provide culturally competent physical therapy services for prevention, health promotion, fitness, and wellness to individuals, groups, and communities.
- b. Promote health and quality of life by providing information on health promotion, fitness, wellness, disease, impairment, functional limitation, disability, and health risks related to age, gender, culture, and lifestyle within the scope of physical therapy practice.
- c. Apply principles of prevention to defined population groups.

**20. Management of Care Delivery**

- a. Provide culturally competent first contact through direct access to patients/clients who have been determined through the screening and examination processes to need physical therapy care.
- b. Provide culturally competent care to patients/clients referred by other practitioners and assure that care is continuous and reliable.
- c. Provide culturally competent care to patients/clients in tertiary care settings in collaboration with other practitioners.
- d. Participate in the case management process

**21. Practice Management**

- a. Direct and supervise human resources to meet patient/client goals and expected outcomes.
- b. Participate in financial management of the practice.
- c. Establish a business plan on a programmatic level within a practice.
- d. Participate in activities related to marketing and public relations.
- e. Manage practice in accordance with regulatory and legal requirements.

**DPT Curriculum**

**The DPT Program offers a 3 year curriculum.**

Successful completion of all academic and clinical coursework in successive order is required for graduation. The focus of the coursework begins with foundational sciences in order to establish adequate groundwork in normal human structure and function as well as basic physical therapy modalities and practices. The student is introduced to differential diagnosis, clinical reasoning, and evidence based practice across a lifespan and advances to a greater understanding of systems, conditions and the physical therapist's role in rehabilitation, prevention, health promotion, administration and legislation. Coursework includes presentation of relevant testing, intervention and education of a patient/client. The student will complete 35 weeks of full time clinical education throughout the 3 year curriculum. Clinical sites include acute care (hospital), rehabilitation (hospital based, skilled nursing facilities and home health) and outpatient (hospital based, sports medicine and privately practice). Specialty areas including pediatrics, school district based therapy, and women's health may also be available. Students will be required to complete a full time, 8 or 9 week clinical experience in each of the following settings, 1. Acute care setting, 2. Outpatient setting and 3. Rehab setting. Students should be prepared to participate in clinical internships outside of the Portland-Metropolitan during the clinical education portion of the program.

### **Fall Year 1 (20 credits)**

PDPT 500 Professional Practices in Physical Therapy (2)  
PDPT 503 Basic Patient Care Skills (2)  
PDPT 510 Human Anatomy I (4)  
PDPT 520 Pathokinesiology I (3)  
PDPT 531 Neuroscience (4)  
PDPT 540 Therapeutic Modalities (3)  
PDPT 550 Therapeutic Exercise I (2)

### **Spring Year 1 (19 credits)**

PDPT 511 Human Anatomy II (3)  
PDPT 521 Musculoskeletal Pathokinesiology II (4)  
PDPT 529 Evidence Based Practice and Clinical Decision Making (2)  
PDPT 551 Therapeutic Exercise II (3)  
PDPT 560 Essentials of Research and Statistics (4)  
PDPT 570 Differential Diagnosis for Physical Therapy (3)

### **Summer Year 1 (4 weeks)**

PDPT 580 Clinical Internship I (4)

### **Fall Year 2 (21 credits)**

PDPT 600 Cardiovascular and Pulmonary Therapeutics (3)  
PDPT 610 Pharmacology and Pathophysiology (3)  
PDPT 619 Clinical Nutrition, Health and Wellness (3)  
PDPT 621 Principles of Motor Control Across the Lifespan (2)  
PDPT 630 Neurorehabilitation I (4)  
PDPT 650 Orthopedic Assessment and Rehabilitation I (4)

PDPT 750 Professional Research Project (2)

**Spring Year 2 (17 credits + 6 weeks clinical Internship)**

PDPT 611 Diagnosis and Management of Integumentary Conditions (2)

PDPT 631 Neurorehabilitation II (3)

PDPT 651 Orthopedic Assessment and Rehabilitation II (4)

PDPT 660 Prosthetics and Orthotics (2)

PDPT 670 Pediatric Physical Therapy (3)

PDPT 690 Diagnostic Imaging for Physical Therapists (3)

PDPT 680 Clinical Internship II (6)

**Summer Year 2 (6 credits)**

PDPT 710 Psychosocial Aspects of Patient Care and Disability (2)

PDPT 751 Professional Research Project (2)

PDPT 760 Professional Duty and Social Responsibility (2)

**Fall Year 3 (9 credits + 8 weeks clinical internship)**

PDPT 720 Administration in Physical Therapy (3)

PDPT 730 Professional Seminar (2)

PDPT 752 Professional Research Project (2)

PDPT 770 Special Topics (2)

PDPT 780 Clinical Internship III (8)

**Spring Year 3 (2 credits + 18 weeks clinical internship)**

PDPT 753 Professional Research Project (2)

PDPT 781 Clinical Internship IV (9)

PDPT 782 Clinical Internship V (9)

**Total Credits = 129**

Course numbers, sequencing, and names may change without notice during the course of the curriculum.

**Attendance, Preparedness and Punctuality**

Due to the quantity of material covered as well as the progressive nature of the curriculum students are required to attend all classroom sessions, lab sessions, research presentations and clinical experiences. Students are required to be present, seated in class or dressed appropriately for laboratory sessions and prepared to begin on time. This is important in order to maximize the learning time of the student and to avoid disruption of the faculty and other students.

A student may need to be absent from class due to medical or other emergency situations. As soon as the student is aware that they will be absent, they are to contact the Physical Therapy Program Administrative Assistant. If an absence is known ahead of time, it is the students' responsibility to contact the appropriate faculty member via email with the excuse and to request information and

assignments for the class sessions missed. In the event of a prolonged illness lasting more than 5 days, it is the student's responsibility to obtain the appropriate missed content.

Repeated absences or repeated tardiness, even if legitimate, may result in a reduction of the course grade at the discretion of the faculty. This may result in a substandard grade and could lead to academic probation, remediation or dismissal from the program.

It should be noted that the DPT program is rigorous in content requiring students to be in attendance 5 days per week, for day long sessions in the classroom, lab and/or clinical setting. In addition, several hours each night and weekend preparation time are to be expected. It is therefore highly recommended that the student not be employed either full time or part time.

### **Determination of student readiness for Clinical Experiences**

Student must demonstrate readiness in both satisfactory understanding of material presented in the class room and satisfactory practical application in lab sessions prior to being able to participate in their clinical affiliation. The readiness of a student is determined by faculty. The standards set for each clinical affiliation phase are found in the Graduate Department of Physical Therapy Clinical Education Handbook.

### **Guide for Professional Conduct**

Professional behaviors are attributes, characteristics, or behaviors that are not explicitly part of the profession's core of knowledge and technical skills but are nevertheless required for success in the profession. Students will use this tool to assess themselves for readiness for clinical experience. Students will have the opportunity to complete this self assessment in spring of their first and second year and fall of the third year prior to clinical experiences. Professional behaviors are:

- Commitment to lifelong learning
- Respect rights and dignity of others.
- Provide compassionate care.
- Comply with all laws and regulations governing physical therapy practice.
- Relate to others in an honest and trustworthy manner.
- Exercise sound professional judgment.
- Provide care that is: competent, based on current research standards, and relevant to patient needs.

### **Academic Policies**

#### **Academic Grading**

The DPT program reserves the right to determine how it defines professional competence and professional behavior, to establish standards of excellence, and to evaluate students. Semester grades are determined by the instructor's evaluation of the student's daily participation in class, performance on periodic tests, work on research papers and class projects, and achievement on

final examinations. The DPT program reserves the right to decline or withdraw a student's admission if the student's mental health status indicates that such action is essential for the safety of fellow students, faculty, administrative staff, or patients. The DPT program uses the following percentages for grade determination: A = 90-100%, B = 80-89%, C = 70-79%, D = 60-69%, F = 59% or below, P = pass, NP = no pass, I = incomplete.

**Clinical Grading-** The DCE will assign a grade of "Pass, No Pass or Incomplete" to the clinical education experienced based upon the final APTA web based Clinical Performance Instrument (CPI) completed by the Clinical Instructor (CI) and student as well as input from the agency CCCE as appropriate. This grade will be determined using the following as a guideline for determining a passing grade. Students are expected to reach the performance by the end of each clinical experience.

- PDPT 580 Beginner to advanced beginner in all criteria.
- PDPT 680 Advanced beginner to intermediate in all criteria.
- PDPT 780 Intermediate in all criteria.
- PDPT 781 Advanced intermediate in all criteria.
- PDPT 782 Entry level to above entry level in all criteria.

### **Progression, Retention, Withdrawal, Dismissal, and Reapplication**

For continued matriculation, promotion, and graduation, Physical Therapy students must maintain an average GPA of 3.0. If a student's GPA falls below 3.0, the student will be placed on academic probation and the Academic Standards Committee (ASC) will consider the student's potential for continued success. The ASC and program director will make recommendations to the course of action to the Dean of the School of Behavioral and Health Sciences. If a student receives a C (70-79%) in one course in a semester, the student will be required to meet with their academic advisor for counseling. If a student receives a C (70-79%) in two designated courses in a single semester, that student will be subject to academic warning and possible remediation. The remediation process could take the form of extra written work, retaking examinations (written or lab), or to retaking the course at the consent of the Academic Standards Committee and program director. In all circumstances, counseling between the student and academic advisor will be necessary to establish avenues to improve future performance.

An incomplete ("I") is given when the student is performing satisfactorily but there may be circumstances beyond the student's control which resulted in the student not completing all of the assignments within the allotted time. If the incomplete work is not completed in the timeframe outlined by the faculty, the grade will be replaced with an "F". Students cannot progress to the next sequenced course until the "I" is replaced with a passing grade. If circumstances arise such that the student is unable to complete the semester they must either apply for a leave of absence, withdraw, or be dismissed

Course grades of D and F are unacceptable and cannot be included as graduate credit and will result in immediate dismissal from the program. Students may appeal grades through the university's academic appeals process. A student will be also dismissed from the program or required to repeat for the following reasons:

1. Repeating more than one clinical affiliation.
2. Fails to achieve a minimum cumulative GPA of 3.0 by the end of the final semester.

If a student must voluntarily withdraw from the program on a leave of absence during the semester due to an illness, accident, or other substantial reason that impairs their ability to continue course work at that time, reapplication to the program must be made and all incomplete coursework completed within two years from the date of their original start. If they are unable to complete the program in that time frame, they will be dismissed from the program.

### **Academic Standing and Remediation**

**Academic Standing-** A student is considered to be in good academic standing as long as he/she:

1. Completes all didactic coursework with an average GPA of 3.0 or greater.
2. Passes all clinical experiences **and**
3. Consistently demonstrates professional conduct.

If a student is not in good academic standing, they are may be placed on academic probation and a recommended course of action for the individual will be made by the Academic Standards Committee. Students will remain on academic probation until the deficiency is corrected. Once corrected, the student will be considered in good academic standing.

Should a student fail a clinic experience, they must remediate the failed clinical experience before progressing on to the next more advanced clinical experience. Remediation programs specific to the clinical education experience are designed and implemented on a case by case basis and are determined by the circumstances that led to the failure. The DCE and Academic Standards Committee will decide the most appropriate remediation activity which may include instruction in clinical skills under direct supervision of faculty.

Unprofessional conduct will be remediated through review, oral and written testing on the code of ethics and standards of conduct; mentoring with the students' advisor or other designated faculty; and/or counseling with faculty possessing behavioral training expertise.

Academic remediation and probation will be assessed each semester or more frequently as needed. The determination of a plan to resolve the deficiencies will be developed by the ASC. If a student is at risk for dismissal, final determination will be made by the ASC. The student's advisor or program director is to notify the student of the concern regarding performance and plan of action for remediation. Scholastic dishonesty (cheating, falsifying, misrepresentation or plagiarism) are also grounds for academic probation or dismissal from the program.

Upon completion of the remediation activity, the ASC will review the results and determine the outcome of the remediation process. Successful completion of the remediation activity will result in restoration of good academic standing, and a new grade will be assigned. Unsuccessful completion may result in retaking the class, reassignment to another cohort, or dismissal.

### **Student Conduct Policies**

Code of Conduct: Students enrolled in the DPT program are expected to conduct themselves according to the following policies, procedures and guidelines. The student is responsible for seeking clarification for any questions they may have.

1. **George Fox University-** When enrolling at George Fox University, students agree to respect the expectations and appointed leadership of the institution. All expectations are designed to allow

the fullest liberty consistent with efficient work while at the same time promoting the welfare of the entire campus community.

The university admits students with the understanding they will comply with these expectations in every respect and conduct themselves as responsible citizens. All students are expected to uphold certain standards of behavior, which includes conforming to state and local laws.

Any student whose behavior is dishonest, destructive, unethical, or immoral, or whose conduct is detrimental to the total welfare of the community, shall be subject to disciplinary action that may warrant appropriate consequences; the most severe possibly resulting in suspension or dismissal.

In accordance with Christian convictions honoring the body as the temple of the Holy Spirit, the university community accepts a lifestyle that forbids immoral sexual behavior and the use, possession, or distribution of illegal drugs. Obscene or pornographic materials or literature, including pornography via the internet, also are unacceptable. Students are expected to maintain these lifestyle standards both on and off campus. Responsibilities and expectations for traditional students can be found in the Student Handbook.

2. **American Physical Therapy Association-** The APTA has provided governing principles for physical therapy professionals including students. These principles apply to on-campus and off-campus George Fox University activities including clinical experiences and community service. The documents provided by the APTA include: Professional in Physical Therapy: Core Values and the APTA Code of Ethics. [www.apta.org/CoreDocuments/](http://www.apta.org/CoreDocuments/)
3. **Professional Behaviors Assessment-** Self assessment and faculty assessment using the Generic Abilities format help the student to monitor their own behaviors in both on and off campus activities.

**Student's right to appeal-** Appeals should not be made frivolously but in good faith.

In order to form an appeal, a student must be prepared to document performance on all coursework and explain why the student's performance is not consistent with the course or program expectations expressed in the syllabus. To submit an appeal, a student should follow the steps below (if resolution is not achieved, a student should proceed to the next step):

1. Student meets with faculty member to discuss their grade or professional behavioral deficiency. The student wishing to appeal must meet with the faculty member within the first three (3) academic weeks (excluding May Term) following the awarding of the disputed grade. If a resolution is not reached, the student may then appeal to the program director in writing within 1 academic week.
2. The student files a written appeal with the program director submitting appropriate documentation. The program director will make a decision after review of the appeal and consultation with the faculty member. A reply will be made to the student in writing within 2 academic weeks with a copy forwarded to the program dean. If resolution is not made after appealing to the program director, the student may elect to pursue a formal appeal.
3. Student sends written appeal to the Academic Affairs Office. The student wishing to pursue an appeal must do so within ten (10) working days of meeting with the faculty member. The Academic Appeal Form is available at: [www.georgefox.edu/catalog/handbook/academic/grading/appeal.html](http://www.georgefox.edu/catalog/handbook/academic/grading/appeal.html)

4. The program dean discusses the appeal with the faculty member and student.  
A decision is rendered by the program dean and communicated in writing from the dean to the faculty member and the student. A copy is kept in the Academic Affairs Office and sent, along with the original Academic Appeal Form, to the Registrar's Office to be kept with the student's official academic record.
5. The decision made by the program's dean may be appealed to the Academic Appeals Board.  
If the student is not satisfied with the decision of the program dean, a hearing by the Academic Appeals Board may be requested. To request a hearing, the student must submit a written appeal to the Academic Appeals Board within ten (10) working days after receipt of the written decision from the program dean.
6. The Academic Appeals Board decides whether or not to hear the appeal.  
If the Board meets to consider the appeal, the decision of the Board is submitted in writing to the Provost, program dean, faculty member, and the student. A copy of the decision will also be forwarded to the Registrar's Office to be kept with the student's official academic record. **The decision made by the Academic Appeals Board is final.**

Policies, procedures, and practices that address handling complaints that fall outside the realm of due process

External complaints about the program from employers of future graduate, the general public, prospective students, family members of enrolled and/or prospective students, and clinical education sites should be directed to the Program Director. Ideally, the complaint will be addressed by the director and the persons involved within 14 days. The goal is to investigate the complaint, to resolve the issue where appropriate and to bring closure through communication of complaint resolution. Once resolved, a letter from the director will summarize the complaint and the resolution in writing. A copy of the letter will be sent to the persons involved. An additional copy will be filed in a locked cabinet in the Director's office for 3 years. If not resolved informally or in writing, or if the complaint is against the Director, a person may file an official complaint in writing to the Dean, Provost, or higher level of administration at the University. The Director will inform the Dean of all complaints received to allow a second objective perspective in responding to the complaint.

### Academic Advising

Each student will be assigned an academic advisor. It is the responsibility of the student to arrange regular meetings with their advisor as needed. The faculty will post their office hours.

<u>Faculty</u>	<u>Room</u>	<u>Extension</u>	<u>Email address</u>
Tyler Cuddeford		2452	<a href="mailto:tcuddeford@georgefox.edu">tcuddeford@georgefox.edu</a>
Paul Shew		2453	<a href="mailto:pshew@georgefox.edu">pshew@georgefox.edu</a>
Marcey Keefer Hutchison		2454	<a href="mailto:mkeefehutchison@georgefox.edu">mkeefehutchison@georgefox.edu</a>
Andrew Meszaros			<a href="mailto:ameszaros@georgefox.edu">ameszaros@georgefox.edu</a>

### Attire

Students are expected to maintain a proper professional image in their behavior and personal appearance at all times. In the daily class setting, students are expected to be clean and wear appropriate apparel consisting of: shirts, pants, nice shorts, dresses, skirts, and shoes. Professional appearance and dress is appropriate when the student is interacting with community clinicians or other professionals as the student is a representative of George Fox University Department of Physical Therapy. At times faculty may request professional attire for a guest lecturer.

Clean lab clothes should be readily available. Lab clothes must permit lab partners to have reasonable access to the body. Examples of appropriate lab clothes include: gym shorts, tank tops, and sports bras. Jeans or long pants are not suitable for lab experiences.

Shorts are prohibited during patient care and clinical education activities, and at any time students have contact with patients or are in the patient care areas. In these instances, dress is to be professional. ID cards should be worn by all students during on site clinical activities.

Dress for the offsite clinic is outlined in the clinical education manual.

**Financial Aid-** Information on financial aid can be found in the Student Life Handbook at:

[www.georgefox.edu/offices/stu\\_fin\\_srv/aid\\_grad.html](http://www.georgefox.edu/offices/stu_fin_srv/aid_grad.html)

And through the APTA website at:

[www.apta.org/CurrentStudents/ScholarshipsAwards/Private/](http://www.apta.org/CurrentStudents/ScholarshipsAwards/Private/)

**Emergency Funds-** George Fox University has a provision to provide compassionate assistance to students in emergency situations. The process for inquiring about these funds is found in the Student Life Handbook:

[www.georgefox.edu/offices/student-life/documents/SEFGuidelines.pdf](http://www.georgefox.edu/offices/student-life/documents/SEFGuidelines.pdf)

#### **Health Issues-**

**Health Insurance-** George Fox University requires full-time students to carry medical insurance and provide proof of coverage. Students who do not document coverage are required to enroll in the university's Student Major Medical Insurance Plan. Information on this plan can be obtained from the Health and Counseling Services:

[www.georgefox.edu/offices/hea\\_cou/insurance.html](http://www.georgefox.edu/offices/hea_cou/insurance.html)

**Immunization record-** All students are required to complete a Health Certification Requirements Record and comply with the Graduate Department of Physical Therapy Immunization Guidelines prior to beginning their first clinical course (PDPT 580). The form will be provided by the DPT program department. A copy of the health records must be maintained by the student, current and appropriate documentation must be submitted to the clinic upon request. All immunization information will be kept in the students' confidential file. The student is required to keep the original as this may be required by the individual clinics. It is the responsibility of the student to notify the Department of any changes.

1. **TB**- Students are required to have yearly TB clearance.
2. **Tetanus** - Students are considered compliant if they have received a vaccination with the last 10 years.
3. **MMR**: The state of Oregon requires that anyone born after Dec. 31, 1956, must show proof of a second measles vaccination.
4. **Hepatitis B** Written documentation of completion of Hepatitis B series or declination statement or, Laboratory evidence of Hepatitis B status
5. **Varicella**: Student must present proof of disease or, Written documentation of Varicella vaccine or, Laboratory evidence of immunity (a positive Varicella titer)

The American College Health Association recommends the following additional immunizations:

**Meningococcal**: Meningococcal meningitis is a very serious bacterial infection of the lining around the brain and spinal cord. It requires rapid diagnosis and treatment with antibiotics. There is a vaccine; however, it is ineffective against the most common strain in Oregon.

**Medical emergency or Injury**- In the case of urgent medical need or injury students are asked to present themselves at the student Health center if possible and appropriate. Students are asked to call 911 in the event of an emergency.

**Security Services**- Security services have provided the students of George Fox University with an emergency response plan:

[www.georgefox.edu/offices/security/Newberg%20Campus%20Emergency%20Response%20Plan/Emergency-Response-Plan.html](http://www.georgefox.edu/offices/security/Newberg%20Campus%20Emergency%20Response%20Plan/Emergency-Response-Plan.html)

### **Physical Therapy Department:**

Lockers are provided for each individual student. It is expected that the student will keep his/her locker clean.

Student Lounge is available when the building is open. The lounge has a microwave and refrigerator for students to use for food. Food left for long periods of time in the refrigerator or break room will not be tolerated. The refrigerator will be emptied and the contents discarded each Friday afternoon. This is the responsibility of the 1<sup>st</sup> year class. All food is to be removed from the refrigerator and break room before the weekend.

It is also the responsibility of the students to keep the room and appliances clean. A vacuum and cleaning supplies can be found in the department.

**Labs and equipment** – Students are expected to clean up the lab after each use including:

- 1) Placing linens in the laundry basket.
- 2) Cleaning and returning equipment to the appropriate storage location
- 3) Returning the lab to normal arrangement
- 4) Removal of rubbish
- 5) Insuring that the laboratory is secure when leaving

It is expected that DPT students will engage in safe and acceptable behavior during all supervised and unsupervised use of the skills laboratories. Laboratory equipment is maintained by a trained medical equipment specialist. If problems occur with equipment please notify the course instructor.

The laboratories will be available at times when regularly scheduled classes are not in session for study and practice and are open 24 hours daily and accessed with the use of your student card key. Students may only use with physical therapy equipment for practice purposes on which they have been previously trained in operation and safety. Students are not to use any equipment for the first time without a faculty member present in a classroom setting. Practice is only allowed with other physical therapy students who have also been trained in the use of the respective equipment. Likewise, students may only practice examination and intervention procedures that have been presented and practiced in a physical therapy class. Practice is only allowed with other physical therapy students who have also been trained in the use of the examination or intervention procedures. Students are not to provide injury treatment to themselves or other students in an unsupervised lab setting. Students engaging in unsafe or unprofessional behavior may lose their unsupervised access privileges to the laboratories. Students may also be held responsible for damage to equipment and supplies if the damage is related to inappropriate use. Maintenance and calibration of equipment is the responsibility of the Physical Therapy Department.

Should an injury occur during unsupervised lab times, the incident must be reported. If the incident is a medical emergency, call 911 for Newberg fire, Police, or Ambulance.

#### **Office Equipment and staff-**

**Telephones and Fax Machine** Students may use department telephones and fax machine ONLY when given permission by faculty or the Administrative Assistant in an emergency or for school-related business.

**Cell Phones-** Are a distraction to others. It is expected that the use of cell phones be limited to the student lounge or outdoors. No text messaging, calls or other use of a cell phone is permitted in the classroom, lab or clinical setting. Cell phones are to be turned off and stored where vibration mode is not detectable.

**Copiers and Printers-** Copiers are located in Student Union, Murdock Learning Resource Center and mail/print services building. Department copiers and Printers are not for student use.

**Administrative Assistants-** have enough of their own work to do. Students are not to add to their daily duties. Approval from a faculty member is required before interrupting them.

- 1) APTA/OPTA- it is highly recommended each student become a member of the
  - a. APTA \$80 annually
  - b. OPTA \$20 Annually
- 2) Laptop Computer with Wi-Fi capability
- 3) Textbooks
- 4) Lab coat
- 5) Dissection equipment
- 6) Gloves
- 7) Stethoscope and blood pressure cuff
- 8) Goniometer
- 9) Reflex hammer
- 10) Criminal Background check ( approximately \$25)
- 11) CPR for Health Care Providers ( some classes cost)
- 12) Travel and housing expenses for clinical experiences

## **Clinical Education Experience**

### **Overview**

The clinical education component of the DPT program includes five blocks of full-time off-campus clinical education of varying length over three years. Each student will have experiences with patients/clients across the lifespan in a variety of settings that encompass a range of conditions, from acute to chronic. Learning opportunities will address a wide range of patients reflecting the practice patterns in the Guide to Physical Therapist Practice. Students will progress through increasingly complex decision making scenarios during their affiliations providing them with learning opportunities in various levels of patient care. The primary individuals involved in the clinical education experience are:

**Director of Clinical Education (DCE):** The DCE acts as a connection between the DPT program and the clinic education site.

**Center Coordinator of Clinical Education:** The CCCE acts as the clinical education site's representative to the DPT program.

**Clinical Instructor:** The CI provides the student with the practical application of their didactic learning.

**Student:** The Student must maintain and produce evidence of compliance of pre-entry requirements. Such requirements may include proof of the following: current health insurance, hepatitis B vaccine, immunization for rubeola, mumps, rubella, varicella; current TB test, CPR for the HealthCare Provider, criminal background check, certification of training in standard precautions, infection control, fire and electrical safety, HIPAA regulations.

-The Student/Intern must complete all pre-requisite academic requirements.

-Follow the policies of the University and the clinic.

### **Clinical Education Course Descriptions-**



Print Your Name

Date

\_\_\_\_\_  
Signature



**Graduate Department of Physical Therapy**

**Minimal Abilities Acknowledgement Form**

I, \_(name)\_\_\_\_\_ have received and read all the information contained in this handbook. Further, I agree to ask for clarification if any information is not clear.

\_\_\_\_\_

\_\_\_\_\_

Print Your Name

Date

---

Signature