CLINICAL EDUCATION MANUAL

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This manual consists of documents designed to explain policies, procedures, obligations, and principles relative to clinical education for the students enrolled in the Doctor of Physical Therapy Program at The University of Iowa.

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**DEFINITIONS** – The following definitions are introduced to clarify terms used in this manual.

**Clinical Education:** That portion of a physical therapy program that is conducted in the health care environment rather than in the academic environment.

**Clinical Education Experiences:** That aspect of the curriculum in which students’ learning occurs directly as a function of being immersed within physical therapy practice. These experiences comprise all of the formal and practical “real-life” learning experiences provided for students to apply classroom knowledge, skills, and professional behaviors in the clinical environment. The experiences would be further described by those of short and long duration (e.g., part-time and full-time experiences)…to include comprehensive care of patients/clients across the life span and related activities. A clinical education experience that occurs at any point during the curriculum other than at the end of the curriculum such that didactic content occurs before and after the experience is referred to as an Integrated Clinical Education (ICE) experience. A Terminal Clinical Education (TCE) experience is defined as an experience that occurs at or near the end of curriculum. The University of Iowa’s terminal experiences consist of 27 weeks divided among three sites.

**Clinical Education Site:** The physical therapy practice environment in which clinical education occurs; that aspect of the clinical education experience that is managed and delivered exclusively within the physical therapy practice environment (also: clinical facility, clinical site, clinical center).

**Clinical Instructor (CI):** Individual(s) at the clinical site who directly instructs and supervises students during their clinical learning experiences. These individuals are responsible for facilitating clinical learning experiences and assessing students’ performance in cognitive, psychomotor and affective domains as related to entry-level clinical practice and academic and clinical performance expectations.

**Director of Clinical Education (DCE):** The individuals who are responsible for managing and coordinating the clinical education program at the academic institution, including facilitating clinical site and clinical faculty development. The DCE/DCE is also responsible for coordinating student placements, communicating with clinical educators about the academic program and student performance, and maintaining current information to clinical sites.

**Site Coordinator of Clinical Education (SCCE):** Individual who administers, manages and coordinates CI assignments and learning activities for students during their clinical education experiences, formerly referred to as Center Coordinator of Clinical Education (SCCE). In addition, this person determines the readiness of persons to serve as CIs for students, supervises CIs in the delivery of clinical education experiences, communicates with the academic program regarding student performance, and provides essential information about the clinical education program to physical therapy programs.

**Clinical Education Affiliation Agreement:** A legal contract that is negotiated between academic institutions and clinical sites specifying party’s roles, responsibilities, and liabilities relative to student clinical education.

**Didactic Education:** That part of the educational process which occurs in the classroom and emphasizes skills and theoretical concepts to be put into practice in the clinical education phase.
DPT PROGRAM MISSION AND VISION STATEMENTS

The faculty of The University of Iowa Department of Physical Therapy & Rehabilitation Sciences unanimously supports the following mission and vision statements regarding the education of the entry-level physical therapy student:

Mission Statement

The mission of the Department of Physical Therapy and Rehabilitation Sciences is to advance the health of humankind by:
1) excellence in education,
2) discovering new knowledge, and
3) developing leaders in healthcare and science.

Approved 1/29/2007

Vision Statement

The vision of the Department of Physical Therapy and Rehabilitation Sciences is to be the recognized leader in clinical practice, research, and education.

Approved 1/29/2007

Accreditation

The Doctor of Physical Therapy Program at the University of Iowa is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100, Alexandria, Virginia 22305; telephone: (703)706-3245; email: accreditation@apta.org; http://www.capteonline.org.
FACULTY – Core

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1995  BS, Iowa State University, Ames, IA
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1999  BS, Health & Exercise Science, Syracuse University, Syracuse, NY
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2006  BA, Spanish, Emory University, Atlanta, GA
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1989  BS, Biology, Creighton University, Omaha, NE
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1998  BS, Biology, Millikin University, Decatur, IL
2000  MPT, University of Iowa, Iowa City, IA
2008  PhD, Physical Rehabilitation Science, University of Iowa, Iowa City, IA

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1990  BS, Physical Education & Sport Studies, University of Iowa, Iowa City, IA
1991  MA, Exercise Physiology, University of Iowa, Iowa City, IA
1993  MPT, Physical Therapy, University of Iowa, Iowa City, IA
2007  PhD, Physical Rehabilitation Science, University of Iowa, Iowa City, IA

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Brad Zwart, DPT, OCS – Orange City Area Health System
DPT COURSE OF STUDY

Note: The following course descriptions can also be found on the website of the Department of Physical Therapy & Rehabilitation Science: http://www.medicine.uiowa.edu/pt/dptcurriculum/

Summer Session 1

PTRS:5101 Introduction to Physical Therapy Practice (2 s.h.)  
Professional development of physical therapists; evolution of profession; analysis of current role in health care and public health with respect to societal health challenges; patient management terminology including medical terminology and language utilized in the Guide to Physical Therapist Practice; concepts of enablement models and disablement models, including World Health Organization’s International Classification of Functioning, Disability and Health model in the biopsychosocial model of health; introduction to evidence-based practice principles.

PTRS:5102 Principles of Physical Therapy I (2 s.h.)  
Patient management skills: interviewing, medical history taking, vital signs, positioning, draping, transfers, body mechanics, assisted gait, wheelchairs, and negotiation of architectural barriers.

PTRS:5205 Health Promotion and Wellness (3 s.h.)  
Overview of health promotion, fitness, and wellness strategies, including information on levels of health promotion, risk assessment, applied physiology (skeletal muscle, energy metabolism, and physiological responses to exercise), exercise testing and training guidelines, body composition assessment, and development of individual weight management and exercise training programs; classroom and laboratory experiences.

Semester 1 (Fall)

ACB:5108 Human Anatomy (5 s.h.)  
Regional dissection, lectures, demonstrations; areas important to physical therapists, particularly the upper and lower extremities.

PTRS:5100 Professional Issues & Ethics (1 s.h.)  
Contemporary issues in clinical practice and professional development; legal and ethical perspectives on human rights, ethical theory and principles for analyzing and acting on ethical problems; professional and peer relationships.

PTRS:5103 Principles of Physical Therapy II (2 s.h.)  
Continuation of PTRS:5102 (Principles of Physical Therapy I); expansion of existing skills and provides new learning experiences in documentation, assessment of joint range of motion/goniometry, manual muscle testing, preambulatory intervention strategies, gait analysis; musculoskeletal, neuromuscular, and integumentary systems review.

PTRS:5144 Inter-professional Education I: Team Based Approach to Healthcare (1 s.h.)  
Development and interaction within small group of interprofessional students from physical therapy, medicine, pharmacy, dentistry, nursing, and public health; deans and faculty from each college facilitate; three-hour initial session for all disciplines followed by informal monthly electronic scenarios, second formal meeting followed by informal monthly electronic discussions.

PTRS:5209 Surface Anatomy (1 s.h.)  
Laboratory teaching activities that parallel the human anatomy course; observation, palpation, and problem solving skills; upper- and lower-limb, head and neck, thorax, and abdomen.

PTRS:5210 Kinesiology & Pathomechanics (4 s.h.)  
Normal and pathological movement based on understanding of muscle mechanics, segment and joint mechanics, muscle function; instructor- and student-centered learning experiences; EMG laboratories.
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
<th>Description</th>
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<tbody>
<tr>
<td>PTRS:5212</td>
<td>Human Pathology for the Physical Therapist (4 s.h.)</td>
<td>4</td>
<td>Human disease; basic disease processes, organ-related and multisystem diseases; case analysis.</td>
</tr>
<tr>
<td>PTRS:5235</td>
<td>Case-Based Learning I (1 s.h.)</td>
<td>1</td>
<td>Small group case study seminars and simulated patient instructor learning experiences; clinical problems coordinated with concurrent courses; student-centered, problem-based learning format with emphasis on evidence-based practice objectives. First in a two-course sequence.</td>
</tr>
<tr>
<td>PTRS:5790</td>
<td>Integrated Clinical Education in Physical Therapy I (1 s.h.)</td>
<td>1</td>
<td>Integrated clinical experiences in area physical therapy clinics; overview of diverse nature of practice through half-day experiences; basic skills in examination, intervention, and documentation.</td>
</tr>
</tbody>
</table>

**Semester 2 (Spring)**

<table>
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<tr>
<th>Course Code</th>
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<th>Credits</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTRS:6253</td>
<td>Functional Neuroanatomy (4 s.h.)</td>
<td>4</td>
<td>Basic principles of neuroanatomy and neurophysiology; emphasis on human central nervous system; laboratory emphasis on anatomical study of spinal cord and brain.</td>
</tr>
<tr>
<td>PTRS:5131</td>
<td>Therapeutic Physical Agents (2 s.h.)</td>
<td>2</td>
<td>Theoretical and practical applications for safe, effective use of physical agents (superficial and deep heat, cold, hydrotherapy), electrotherapeutic modalities (biofeedback, NMES, TENS, iontophoresis); massage and soft tissue mobilization; emphasis on problem solving, clinical decision making.</td>
</tr>
<tr>
<td>PTRS:5201</td>
<td>Musculoskeletal Therapeutics I (3 s.h.)</td>
<td>3</td>
<td>Musculoskeletal techniques and biomechanical principles applied to assessment and evaluation of common orthopedic problems of the spine; problem solving, case-study approach to clinical methods, skill acquisition.</td>
</tr>
<tr>
<td>PTRS:5206</td>
<td>Cardiopulmonary Therapeutics (3 s.h.)</td>
<td>3</td>
<td>Cardiorespiratory anatomy, physiology, and application of basic concepts, techniques in management of patients with acute and chronic cardiac, pulmonary disorders; laboratories.</td>
</tr>
<tr>
<td>PTRS:5215</td>
<td>Applied Clinical Medicine (2 s.h.)</td>
<td>2</td>
<td>Pathological disorders frequently encountered by physical therapists in clinical practice, addressed by physicians and health professionals who are not physical therapists; physical therapy management.</td>
</tr>
<tr>
<td>PTRS:5236</td>
<td>Case-Based Learning II (1 s.h.)</td>
<td>1</td>
<td>Small-group case study seminars and simulated patient instructor learning experiences; clinical problems coordinated with concurrent courses taken in curriculum; student-centered, problem-based learning format; emphasis on evidence-based practice objectives. Second in a two-part series of integrated courses.</td>
</tr>
<tr>
<td>PTRS:5791</td>
<td>Integrated Clinical Education in Physical Therapy II (1 s.h.)</td>
<td>1</td>
<td>Integrated clinical experiences in area physical therapy clinics; overview of diverse nature of practice through full-day clinical experiences; basic skills in examination, intervention, and documentation.</td>
</tr>
</tbody>
</table>

**Summer Session 2**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTRS:6120</td>
<td>Physical Therapy Management &amp; Administration I (2 s.h.)</td>
<td>2</td>
<td>The changing U.S. health care system; access to physical therapy services, reimbursement to health care providers, mechanisms for controlling costs while providing quality care; clinical vignettes, small group problem solving.</td>
</tr>
</tbody>
</table>
**PTRS:6143 Selected Topics in Physical Therapy Practice (2 s.h.)**
Specialty area of practice including wheelchair seating and prescription, pelvic health, home assessment and DME recommendations, and geriatrics. The topics included in this course are dictated by the changing needs of health care and our profession. Emphasis on clinical decision making and the synthesis and evaluation of this information with respect to the prerequisite first year physical therapy curriculum.

**PTRS:6176 Pharmacology for Physical Therapists (3 s.h.)**
Contemporary pharmacology; overview of basic pharmokinetic and pharmacodynamic principles; relation of drug therapy to therapeutic interventions provided by physical therapists; small group clinical case presentations.

**PTRS:6793 Integrated Clinical Education in Physical Therapy III (3 s.h.)**
Six-week, full time clinical education experience in a rural health setting.

**Semester 3 (Fall)**

**PTRS:6122 Psychosocial Aspects of Patient Care (1 s.h.)**
Emotional reactions to illness/trauma; social determinants of health; recognition of mental illness in physical therapy examination and intervention; psychosocial aspects of disability as they relate to patient-physical therapist interaction; effective communication strategies; cultural competence in professional behavior and patient care.

**PTRS:6134 Physical Therapy Management of the Integumentary System (2 s.h.)**
Overview of physical therapy examination and management of the integumentary system; wound pathology, diagnosis associated with the integumentary system inflammation and repair, examination and reexamination techniques, documentation, clinical decision making, lecture and laboratory formats; interventions, including patient/client information, physical agents, electrotherapy, wound dressing.

**PTRS:6145 Inter-professional Education II: Teaching Neural & Musculoskeletal Evaluation Principles (1 s.h.)**
Active involvement in integrating anatomy, kinesiology, and movement control principles as applied to a select group of pathologies with the goal of being able to teach content area; preassigned student group leaders; emphasis on student as active learner; opportunity to teach academic areas previously studied in first and second years of curriculum; may include teaching several of these musculoskeletal principles in a first-year medical student anatomy course.

**PTRS:6170 Management of People with Prosthetic and Orthotic Needs (2 s.h.)**
Physical Therapy management and assessment of patients in need of prosthetic and orthotic devices; principles and components of prosthetic and orthotic design and use.

**PTRS:6200 Pediatric Physical Therapy (2 s.h.)**
Preparation for physical therapy practice in pediatric settings using interdisciplinary family-centered practice; normal and abnormal development, standardized assessment, service-delivery settings, interventions, management strategies specific to pediatrics.

**PTRS:6202 Musculoskeletal Therapeutics II (3 s.h.)**
Pathology, assessment, management of orthopedic disorders of the upper quarter; problem-solving approach to evaluation and management of patients with musculoskeletal conditions.

**PTRS:6224 Activity Based Neural and Musculoskeletal Plasticity in Healthcare (4 s.h.)**
Examination of neural, muscular, and skeletal plasticity to increased and decreased use in normal and pathological states (chronic inactivity, obesity, metabolic syndromes, orthopedic and neurological injuries); principles of genetic regulation with physical activity including underlying mechanisms contributing to acute and chronic adaptations of muscle, spinal circuitry and supra-spinal centers; integration of movement control concepts through contemporary papers evaluating short and long latency reflexes, posture and balance control, spasticity, and motor learning in individuals with acute and chronic perturbations to the nervous system.
PTRS:6237 Community Outreach and Engagement I (1 s.h.)
Outreach and engagement activities with individuals and organizations in the community; students select service learning experiences from current community partners, or may suggest their own idea, and develop their individual learning goals for these experiences; discussion and written assignments focus on student experiences with persons who are different than themselves, and on social responsibility, advocacy, and professionalism in the field of physical therapy; first in a two-course series.

PTRS:6250 Critical Inquiry I: Evidence-based Practice (2 s.h.)
Topics relevant to evidence-based practice and research design. Students will learn to identify appropriate questions for research and clinical applications, efficiently locate and evaluate available evidence on a focused topic, identify critical issues affecting the validity of various research designs, and interpret basic statistical analyses.

Semester 4 (Spring)

PTRS:6121 Physical Therapy Management & Administration II (1 s.h.)
Principles of management in physical therapy practice, historical perspective, current health care environment; business principles; marketing, managing risk, medical/legal aspects, preparing for the future.

PTRS:6133 Pain Mechanisms & Treatment (2 s.h.)
Introduction to basic science mechanisms, assessment, and management of pain; basic science mechanism involved in transmission and perception of painful stimuli after tissue injury, assessment and physical therapy management of pain; emphasis on scientific principles and published literature to support treatment techniques.

PTRS:6172 Radiology/Imaging for Physical Therapists (2 s.h.)
Basic principles and procedures for acquisition and interpretation of radiology and imaging in clinical practice and research; plain film radiographs, CT, MRI, other common imaging modalities; case-based, multidisciplinary approach.

PTRS:6173 Differential Diagnosis in Physical Therapy (2 s.h.)
Use of physical therapy examination and evaluation skills to diagnose physical therapy problems; focus on use of good clinical decision-making skills when analyzing a patient’s history and administering physical therapy tests and measures in order to confirm or rule out differential diagnoses; components of the medical examination; importance of collaboration between therapists and other health professionals; interactive case studies presented by clinical experts.

PTRS:6203 Musculoskeletal Therapeutics III (3 s.h.)
Pathology, assessment, management of orthopedic disorders of the lower quarter; problem-solving approach to evaluation and management of patients with musculoskeletal conditions.

PTRS:6204 Progressive Functional Exercise (2 s.h.)
Therapeutic exercise options (e.g., isometrics, isotonics, isokinetics, plyometrics, endurance exercises, stretching exercises) and training principles; application to functional activities, including those of daily living, work, recreation, and sport; laboratory component.

PTRS:6225 Neuromuscular Therapeutics II (3 s.h.)
Evidence-based application of clinical neuroscience, motor control, and learning principles to practice of neurological physical therapy; approaches to evaluation and therapeutic intervention for clients with adult-onset neurological conditions, with emphasis on examination, developing a diagnosis, clinical decision making, and prescribing interventions that help clients accomplish goals.

PTRS:6238 Community Outreach and Engagement II (1 s.h.)
Outreach and engagement activities with individuals and organizations in the community; students select from current community partners, or may suggest their own idea, and develop their individual learning goals for these experiences; discussion and written assignments focus on reflection about student experiences with persons who are different than themselves, and on social responsibility, advocacy, and professionalism in the field of physical therapy; second in a two-course series.
PTRS:6251 Critical Inquiry in Physical Therapy II: Rehabilitation Research (1 s.h.)
Experience conducting group research projects under faculty supervision; data collection and analysis, manuscript preparation, oral defense of research findings during a formal poster presentation.

PTRS:6792 Integrated Clinical Education in Physical Therapy IV (1 s.h.)
Two-week, full-time clinical experience in physical therapy clinics under the guidance of physical therapists; theory and practice of physical therapy procedures, competence building in basic skills.

**Summer Session 3**

PTRS:6794 Terminal Clinical Education in Physical Therapy I (4 s.h.)
Full-time terminal clinical education divided among varied settings; development of competence in independent examination, evaluation and treatment of patients under supervision of clinical faculty.

**Fall Semester 5**

PTRS:6795 Terminal Clinical Education in Physical Therapy II (4 s.h.)
Full-time terminal clinical education divided among varied settings; development of competence in independent examination, evaluation and treatment of patients under supervision of clinical faculty.

PTRS:6796 Terminal Clinical Education in Physical Therapy III (4 s.h.)
Full-time terminal clinical education divided among varied settings; development of competence in independent examination, evaluation and treatment of patients under supervision of clinical faculty.

PTRS:6252 Critical Inquiry in Physical Therapy III: Clinical Application (1 s.h.)
Principles and procedures learned in PTRS:6250 and PTRS:6251 applied to a clinical setting; students write and present a case report with an evidence-based practice focus, using a clinical case from their final internships.
**CLINICAL EDUCATION POLICIES**

**Dress Code** – Professional attire is expected during clinical experiences. Students are required to follow the dress code outlined by each clinical center. The student should bring his/her UIHC photo name badge to all clinic sites. General guidelines for professional attire would include: no jeans, t-shirts, shorts, no low riding pants, low cut or cropped shirts, no visible tattoos or body piercing (other than earrings), and no open-toe or high-heeled shoes.

**Absences** – Absences are not allowed during clinical experiences with the exception of illness or family emergency. The student must contact both the DCE and SCCE prior to their scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the DCE in consultation with the SCCE/CI. Students are not allowed to request vacation time during their scheduled terminal clinical experiences. There is a week-long break scheduled between internships for students to use for personal needs, including job interviews. An unexcused absence may be grounds for failing a clinical experience. Any exceptions to this policy must be approved by the DCE.

**Clinical Education Expenses** – There will be some travel required to clinic sites in surrounding cities. A car is nice to have, but not necessary as generally students can carpool for the part-time clinicals. During the 6-week and 9-week clinical education experiences, some travel will likely be required to off-campus clinical sites. Living expenses will vary depending on where the students complete these experiences. Some sites require extra screening (i.e., drug screening, background checks) that the student may be responsible for. Students are responsible for all travel and living expenses associated with clinical education experiences.

**Cancellation of or Changes to a Clinical Education Experience:** Occasionally situations will arise that will require that a scheduled clinical education experience be changed or cancelled. A change in setting or clinical instructor does not automatically warrant a change in clinical experience location. If a site must cancel a clinical education experience, the DCE will work with the student to reschedule a new site. It cannot be guaranteed that the student will be in the same geographical area or setting type, but reasonable efforts may be made to accommodate such requests. As always, students are responsible for all travel and living expenses associated with clinical education experiences.

**Disclaimer for Students Riding in Non-UI Vehicles during Clinical Education Placements**
The university makes no representations, warranties or endorsements with regard to any individual driver and does not screen drivers or conduct background checks with regard to an individual’s driving record or criminal history. Vehicle owners have primary responsibility for any accidents. Therefore, if a student is involved in an accident, the personal auto policy of the vehicle owner must respond.

**Student Information Shared with Clinical Education Sites** – Students are each provided a training transcript to take with them on their clinical internships verifying completion of the following:

- Mandatory Reporter Training
- Safety & Infection Control
- CPR – American Heart Association – BLS Provider
- HIPAA & Data Privacy Training
- Fraud and Abuse/HIPAA Refresher
- Cultural Diversity & Limited English Proficiency Plan
- Take Five: Best Practices During a Pandemic
- Personal Protective Equipment & Isolation Refresher for COVID-19
- Domestic Violence Reporting Training
- New Hire Orientation: Students and Part-Time Staff
- Patient and Staff Rights and Responsibilities
- Organ, Tissue and Eye Donation
• Criminal Background Check upon admission to the program
• Annual signed attestation statement that the criminal background is unchanged

Additional information may be requested by a specific clinical education site, such as a current background check, drug screen or academic standing. Students are made aware of any additional information to be shared through the Clinical Site Description Form and/or communication with the DCE or SCCE. Student approval is required to share any additional information.

**Professional Liability Insurance** – Malpractice insurance is required on all students in the DPT Program. The University maintains professional liability insurance on the DPT students in the amount of $1,000,000 per occurrence and $3,000,000 in the aggregate per year. The cost for coverage is paid by the Department. Detailed information concerning limits of coverage, etc., may be obtained from the DCE’s.

**Health Insurance** – Health insurance is required. If students do not provide proof of insurance annually, they will automatically be enrolled in a health insurance plan and billed by the UI. Many of our clinical education sites will require the physical therapy student to provide proof of health insurance coverage prior to beginning the clinical education experiences.

**Off-Campus Emergency Services** – In the event of accident or illness to students associated with their learning experience while at off-campus clinical facilities, the facility will provide or arrange for emergency treatment. The student is responsible for the expense associated with the treatment.

**Criteria to Determine Student Readiness to Engage in Clinical Education**
Criteria upon which the determination is made that each student is ready to engage in clinical education:

- Written and lab practical examinations
- Professional behaviors
- Simulated patient experiences

The mechanisms utilized by the core faculty to determine that each student is ready to engage in clinical education, including the determination that the student is prepared to interact safely with patients/clients during the clinical education experience:

- Written and lab practical examinations
- Professional behaviors
- Simulated patient experiences
- Review of student performance at monthly FSSA committee meetings and after each semester

**Role of Students in Clinical Education**
- To take responsibility for learning and to make the most out of opportunities provided with the goal of becoming a competent professional.
- To participate in ongoing self-assessment, reflecting on areas of strength, limitations, and inconsistencies.
- To provide constructive criticism to both academic and clinical faculty.
- To be accountable for personal and professional behaviors and actions.
- To welcome and befriend constructive criticism on clinical performance and develop an action plan for growth and development.
- To practice diligently and be willing to make mistakes and learn from them.
- To respect the rights of patients, clinical instructors, and all others associated with clinical education.
**Expectations for Clinical Instructors**

It is expected that a clinical instructor (CI) will demonstrate a desire to work with students and will serve as a positive role model for our students. By demonstrating effective communication skills, the CI will collaborate with students to plan learning experiences, goals, and expectations for student performance. The CI will make time to effectively supervise the student and will provide timely feedback related to student knowledge, skills, and professional behaviors. Clinical instructors for students on full time clinical education experiences will have a minimum of one year of full-time post licensure clinical experience.

**Patient’s Right to Refuse Care Provided by a Student**

The Health Insurance Portability and Accountability Act (HIPPA) grants patients/clients certain legal rights when receiving health care. This includes health care provided by students during clinical education experiences. Among those rights is the right to know who is providing care and the right to refuse that care. Patients/clients should be clearly informed and completely understand when care is being provided by a student even when the student is closely supervised by a licensed physical therapist. The patient/client has the right to refuse treatment by a student prior to and at any time during the treatment of the patient without penalty.

**Evaluation of Performance**

**Purpose of Student Evaluations:**

1. To improve learning: Primarily this evaluation is intended to benefit the individual student. Regular feedback keeps the student informed about personal progress and helps the student recognize individual strengths and weaknesses. Students have a need for specific information.

2. To improve instruction: The information gained from the evaluation should also prove beneficial to faculty who are responsible for curriculum design and to clinical educators responsible for design and implementation of future learning experiences in their clinic.

3. To certify competency: Students and faculty alike need an appraisal of the student’s clinical skills prior to beginning full time experiences.

**Part-time Integrated Clinical Experiences:**

- The clinical instructor provides information regarding the clinical skills the student was able to observe and/or participate in while in the clinic. In addition, the student receives feedback on their professional behaviors, core values and communications skills.

**6-week Integrated Clinical Experience:**

- The student is evaluated by the CI using the Integrated Clinical Education Student Performance Assessment at both midterm and final. At the final evaluation, the student should be rated at an “assisted” level or higher in each of the clinical skills. Ratings below this level will alert the DCEs to complete a more focused review of the student’s performance.
- The student will also use the Integrated Clinical Education Student Performance Assessment to complete a self-assessment of his or her performance at midterm and final. The student should rate him or herself at an “assisted” level or higher in each of the clinical skills at the final evaluation. Students who do not feel that they are performing at this level are encouraged to discuss their performance with the CI, SCCE and/or the DCE.
2-week Integrated Clinical Experience:
- At the end of this experience, the student is evaluated with the Integrated Clinical Education Student Performance Assessment rating scale. The student should be rated at an “assisted” level or higher in each of the clinical skills. Ratings below this level will alert the DCEs to complete a more focused review of the student’s performance.
- At the end of this experience, the student will also use the Integrated Clinical Education Student Performance Assessment rating scale. The student should rate themselves at an “assisted” level or higher in each of the clinical skills. Students who do not feel that they are performing at this level are encouraged to discuss their performance with the CI, SCCE and/or the DCE.

9-week Terminal Clinical Experiences:
- During each 9-week terminal clinical experience, the student will be evaluated by the CI using the PT CPI at both midterm and final.
- The student should show progress from midterm to final evaluation on all clinical performance criteria.
- During each of the three terminal clinical experiences, the student should strive to demonstrate ‘entry level performance’ in all of the 18 performance criteria at the final evaluation. For the first two experiences, ratings below an ‘advanced intermediate level’ will alert the DCEs to complete a more focused review of the student’s performance. For the final experience, ratings below ‘entry level’ will alert the DCEs to complete a more focused review of the student’s performance.

Course Grades:
- Grading will be completed by the program DCEs. Criteria that will be used to determine a Satisfactory grade will include: the clinical setting, experience with patients in that setting, progression of performance from midterm to final evaluations, whether or not the clinical instructor has identified significant concerns, the congruence between the midterm and final comments, and the ratings provided on the evaluation tools.

Site Evaluations:
- The student will evaluate the clinical site and clinical instructor using an on-line questionnaire following the completion of the clinical experience. This form must be submitted on-line within one week of the completion of the experience.
- During each clinical experience, the DCE will contact each clinical instructor and student at midterm via email to check on performance and environment. Additional contacts, including a possible on-site visit, will be made if deemed necessary.

Unsatisfactory Clinic Performance/Behavior Issues
- When a problem with clinic performance is noted, all efforts should be made to resolve the problem with SCCE, CI and student input. The desired change in behavior should be outlined and opportunities for the student to demonstrate change should be allowed.
- If the problem cannot satisfactorily be resolved, the student and the SCCE should contact the DCE immediately. The DCE will then serve as a mediator between the student and the SCCE or CI. If possible, a clinic site visit will be completed to meet with the individuals involved.
- Reassignment of the clinical experience may occur if the problem is deemed unresolvable, the student or SCCE requests termination of the clinical experience, and if another site can be arranged where the student may be able to satisfactorily complete the clinical experience.
- If, following the above arbitration, the student’s overall performance is not judged to be satisfactory, this should be reported to the DCE.
• The Program’s DCEs have the final responsibility of assigning a grade. Prior to assigning a grade the DCEs discuss all student evaluations by the clinical instructors. In addition to clinical instructor ratings and comments, multiple other sources of information are given due consideration. The grading decisions made by the DCE will also consider clinical setting, experience with patients in that setting progression of performance from midterm to final evaluations, whether or not “significant concerns” box is checked, and the congruence between the midterm and final comments related to the five performance dimensions and the ratings provided on the student evaluation tool.

• All five segments of the full-time Clinical Education in Physical Therapy courses (PTRS:6792; PTRS:6793; PTRS:6794; PTRS:6795; PTRS:6796) must be completed with a Satisfactory (S) grade.

• A grade of Unsatisfactory (U) in a segment will require the student to be reviewed by the Graduate Student Review & Promotions Committee. If a student receives a grade of U, they will not receive Graduate College credit and may be unable to continue in the program until graduate credit for that course is earned.

• A grade of Incomplete (I) in a segment may require the student to be reviewed by the Graduate Student Review & Promotions Committee. A student receiving an Incomplete may be allowed to continue in the program during remediation. The Incomplete will turn into an F if not remediated by the end of the next full semester.

MANAGING COMPLAINTS
Clinical Education complaints are first brought to the attention of the Directors of Clinical Education (DCEs). Other complaints are managed at the departmental committee level. If the complaint is not resolved by the DCEs or committee, then it is referred on to the department chair. Curricular complaints not handled at the committee level or by the chair, can be directed to the Commission on Accreditation in Physical Therapy Education, 703-706-3245 or accreditation@apta.org.
Integrated Clinical Education in PT I  
PTRS:  5790

Course Director:  
Marcie Becker, DPT, GCS  
Clinical Assistant Professor and ACCE  
Office 1-240 MEB  
Phone: 335-8552  
E-mail: marcie-becker@uiowa.edu  
Office hours: email to make an appointment

Course Description:  
A description of patient populations, medical diagnoses, impairments and physical therapy practice settings serves as the foundation for this course. Integrated clinical experiences are scheduled throughout the semester to provide the student an opportunity to apply didactic knowledge and practice clinical skills while directly supervised and mentored by licensed physical therapists. Experiences will be reflected upon and patient documentation will be discussed in meetings lead by the course director.

Course Website: The course site can be accessed using the University course management ICON at https://icon.uiowa.edu. You will need your HAWK ID and password to log-in.

Course Hours:  
1 semester hour

Course Time and Location:  
Friday mornings scheduled during the semester. Each clinical experience is approximately four hours in duration. Sessions with course director are 1-2 hours in duration. Please see course schedule.

Prerequisites:  
Enrolled in the Department of Physical Therapy & Rehabilitation Science.

Course Objectives:  
Following this course, students will be able to:  
1. Discuss the role of physical therapists in the examination and intervention of a variety of patient populations and clinical environments.  
2. Describe their participation in a variety of patient evaluations and treatments by an experienced physical therapist.  
3. Develop verbal and nonverbal communication skills that foster trust with patients and clinic staff.  
4. Demonstrate professional behaviors in all interactions with patients, clients, families, caregivers, other health care providers, and CI.  
5. Adhere to legal practice standards and institutional regulations related to patient or client care and to fiscal management.
Learning Objectives:
Throughout this course, students will learn to:

1. Outline the purpose of the specific healthcare settings in which physical therapists are employed relative to the broad context of the healthcare system in the United States.
2. Explain the primary responsibility of physical therapy in each healthcare setting.
3. Discuss possible discharge locations for a patient based upon the setting in which physical therapy care is provided.
4. Diagram the general healthcare system flow of care from emergency department to outpatient care services.
5. Demonstrate safe patient care clinical skills such as positioning, transferring, and guarding.
6. Perform examination and intervention procedures within individual capabilities with special emphasis on history taking, vital sign measurement, goniometry, manual muscle testing, and therapeutic exercise.
7. Demonstrate a familiarity with the patient medical record as it is pertinent to physical therapy.
8. Document physical therapist examinations and interventions with supervision and assistance.

Affective Objectives:
Throughout the course the student will:

1. Demonstrate professional behaviors and respect for all clinical instructors by:
   • arriving promptly and not leaving early;
   • turning off all cell phones, or placing them on silent mode; no texting;
   • listening attentively to feedback from clinical instructors.
2. Be prepared to engage with patients, health care professionals and your clinical instructor during each learning experience.
3. Complete all assignments by their deadlines.
4. Notify the instructor if you must miss a clinical experience in advance.
5. Adhering to infectious disease precautionary measures.
6. Volunteer to adjust his/her assigned clinical schedule as needed to respect the time and contribution of the participating clinical sites.

Required and Recommended Course Materials:
Required texts: None
Other readings: As directed by course instructor throughout the semester. All readings will be posted on ICON.

Instructional Methods and Learning Experiences:
This course provides an opportunity for physical therapist students to interact and learn from a variety of clinicians working with a variety of ages and medical diagnoses. Students are challenged to be active participants in the learning process. Instructional methods include live presentations, pre-recorded modules, class discussions and experiential learning in physical therapy clinical sites. Critical thinking, reflection and communication are emphasized.

Each student is assigned three clinical experiences in this course. In general, the clinical experiences will start around 8:00am and end around 12pm. These times are at the discretion of the specific clinic and/or clinical instructor and may vary slightly from clinic to clinic. Dress code for these experiences varies between facilities as well. In general, it is business casual with your nametag. Refer to specifics on the clinic information sheet for each clinic for the recommended dress code and arrival times.
**Student Evaluation/Grading:**
This course is graded on a Satisfactory/Unsatisfactory scale.

A satisfactory grade will be assigned based upon the following criteria:
1. Attendance and consistent communication at scheduled clinical experiences.
2. Submission of the assessment form from the clinical instructor following each experience.
3. Submission of two clinical notes as described below.
4. Demonstration of 80% competency on assigned quizzes.

**Clinical Experience Documentation:** Upon completing your scheduled experience, you will need to have your clinical instructor fill out a short questionnaire. These will be due on the Tuesday following your clinical experience. You may place them in my mailbox in the copy room.

**Clinical Notes:** You are required to write two clinical notes over the course of the semester. Please see the assignment created on ICON for more specific information and clinical note outlines.

**Due dates are as follows:**
Students are encouraged to submit work early according to their own individual clinical education schedule.

**Quizzes:**
Quizzes will be utilized to promote retention of foundational clinical practice concepts outlined in this course.

Quiz 1: Physical Therapy Patient Populations and Practice Settings. The minimum passing score is 80%. If a score lower than a 80% is received, the student is required to meet with the instructor. At the discretion of the instructor, a retake of the quiz may be permitted.

Failure to turn in the required assignments or complete the required quizzes will result in an Unsatisfactory grade in the course.

If at any time during the semester you have a problem or a concern about your clinical rotations, please contact the course director. If I cannot be reached, please contact Kelly Sass.

**Attendance:**
Attendance at the scheduled clinical experiences is required if you are in good health. If you are unable to attend a scheduled clinical due to an illness or emergency, you must call the course director prior to the scheduled start of the clinical experience.

**Course Standards and Policies:**

**Professional Behaviors:**

Professional behaviors are behaviors, attributes, or characteristics that are not explicitly part of a profession's core knowledge and technical skills but are nevertheless required for success in that profession. Professional behaviors, which define expected behavior within a given profession, serve as the foundation for ability-based learning. Students are evaluated by faculty each semester regarding their professional behaviors. The 10 abilities and definitions are listed below:

1. **Critical Thinking** - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.
2. Communication - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.

3. Problem Solving – The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

4. Interpersonal Skills – The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

5. Responsibility – The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

6. Professionalism – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

7. Use of Constructive Feedback – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

8. Effective Use of Time and Resources – The ability to manage time and resources effectively to obtain the maximum possible benefit.

9. Stress Management – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.

10. Commitment to Learning – The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

Administration
This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University's General Catalog and a manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual.

Course Evaluation: Assessing the Classroom Environment (ACE)
Every student must provide their anonymous evaluation of the course and course instructor(s) so that we can continuously monitor and improve our educational program. Our department policy requests all instructors provide 15–20 minutes of class time during final exam week for students to complete the online ACE evaluations. Instructors may make alternate arrangements for their specific course if they do not have a final exam or an alternate time works better for their class for completion of the ACE evaluations during a scheduled class time. These responses are then tabulated and provided to the Instructor(s) and Department Executive Officer after grades have been submitted. Your honest feedback is earnestly considered and is critical to the continued success of our program.

Electronic Communication
University policy specifies that students are responsible for all official correspondences sent to their standard University of Iowa e-mail address (@uiowa.edu). Students should check this account daily.

Electronic Technologies in the Classroom
Computers, laptops, and mobile devices such as phones and media players are to be used for learning exercises. Professional behavior is expected. Disruption of the classroom learning experience will not be tolerated.

Accommodations for Disabilities
A student seeking academic accommodations should first register with Student Disability Services and then meet privately with the course instructor to make specific arrangements. See http://sds.studentlife.uiowa.edu/ for more information.
Academic Fraud
Plagiarism and any other activities when students present work that is not their own (cheating) are academic fraud. Examples of academic fraud include:

- Presentation of ideas from sources that you do not credit;
- Use of direct quotations without quotation marks and without credit to the source;
- Paraphrasing information and ideas from sources without credit to the source;
- Failure to provide adequate citations for material obtained through electronic research;
- Downloading and submitting work from electronic databases without citation;
- Participation in a group project which presents plagiarized materials;
- Taking credit as part of a group without participating as required in the work of the group;
- Submitting material created/written by someone else as one’s own, including purchased term/research papers.

These rules and regulations are published in the University’s General Catalog and a manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual.

Concerns about Faculty Actions
Students who have a concern about a faculty action should first address the issue with the instructor. If you remain unsatisfied you may contact the DEO of the Department of Physical Therapy, Richard Shields (319-335-9801). If the student cannot resolve the issue at this level, the concern should be sent in writing to the Dean of the Graduate College.

Understanding Sexual Harassment
Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. See the UI’s Office of the Sexual Misconduct Response Coordinator (https://osmrc.uiowa.edu/) for assistance and reporting. See UI’s Operations Manual for the full University policy (https://osmrc.uiowa.edu/interim-policy-sexual-harassment-and-sexual-misconduct).

Reacting Safely to Severe Weather
In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue, if possible, when the event is over. For more information on Hawk Alert and the siren warning system, visit http://hawkalert.uiowa.edu or http://police.uiowa.edu.

Protocol for Handling Emergencies
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. When dialing from a campus phone, dial 9-911. You cannot send a text message to 911.

The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.
- University of Iowa Police: 319-335-5022
- Facility Management (Work Control): 319-335-5071
- Information Technology: 319-384-4357
- Environmental Health and Safety: 319-335-8501
Grievance Policy
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV. The manual is available online at:
http://www.grad.uiowa.edu/graduate-college-manual. In addition, the Department of Physical Therapy and Rehabilitation Science has established formal procedures for student grievances, which are detailed in the Department Policy Manual. Refer to this document on your class ICON site for more specifics.

Meeting Course Standards
Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service (http://tutor.uiowa.edu/find-help/) and the Writing Center (http://writingcenter.uiowa.edu/). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health (http://studenthealth.uiowa.edu/) and the University Counseling Service (http://counseling.studentlife.uiowa.edu/), respectively.
Integrated Clinical Education in Physical Therapy II  
PTRS:5791

Course Instructor:
Kelly J. Sass, PT, PhD  
Clinical Asst. Professor & Academic Coordinator of Clinical Education  
Physical Therapy & Rehabilitation Science  
1-241 Medical Education Building  
Phone: 335-9798  
Email: kelly-sass@uiowa.edu

Course Description:
Integrated clinical experiences scheduled in local physical therapy clinics in which students are supervised by qualified clinical instructors.

Course Hours:
1 semester hour

Course Time and Location:
Student will be scheduled for 5 full day Friday clinical rotations in local PT clinics throughout the semester.

Prerequisites:
Enrolled in the Graduate Program in Physical Therapy & Rehabilitation Science

Course Goals:
Following this course, students will be able to:
1. Recognize the variety of settings in which physical therapists practice and the role(s) of the therapist through observation and discussion  
2. Correlate the biological, anatomical or physiological theories to the application of selected physical therapy interventions.  
3. Develop insight into the daily routines of a physical therapy clinic/department.  
4. Demonstrate professional behaviors at all times related to timeliness, on-time completion of assignments, communication and dress codes.

Learning Objectives:
Throughout this course, students will:
1. Engage in appropriate communication with the clinical staff.  
2. Interact with patients in an effective manner including appropriate introductions and professional and conversational dialogues.  
3. Extract pertinent information from a patient’s treatment history following a chart review.  
4. Demonstrate the ability to effectively lead a patient through an exercise program prescribed by a physical therapist.
5. Compose accurate and complete initial evaluation and daily progress notes for patients they interact with in the clinic.
6. Discuss examination and interventions performed by the physical therapist.
7. Practice previously learned clinical skills including, but not limited to: patient/client interviewing, vital signs, positioning, documentation, transfers, gait training with assistive devices, goniometry, and manual muscle testing.
8. Employ, with the assistance of their clinical instructor(s), the various tests, measures, and interventions that have been covered within the academic course work.
9. Evaluate his/her performance in the clinic environment
10. Receive and integrate feedback from the clinical instructor
11. Demonstrate the seven core values of professionalism in all of his/her interactions in the clinic.

Required and Recommended Course Materials:
None

Instructional Methods and Learning Experiences:
Learning experiences will include observation and assisted practice in a clinical environment with qualified physical therapists serving as student supervisors. Each student will also be responsible to have the clinical instructor provide feedback on an evaluation form provided to the student.

Information regarding the clinical sites, including addresses, dress codes, hours, etc, can be found on ICON in the PTRS:5791 course. Students should plan to bring their lunches to the clinic on the days of their rotations.

Student Evaluation/Grading:
Grades will be on a Satisfactory/Unsatisfactory basis.
1. The student is responsible to turn in a clinical note for each of their clinical rotations. An attempt should be made to make at least 2 of the notes initial evaluations. The remainder of the notes could be initial evaluations, daily progress notes, or discharge notes. Please review your note writing information from Principles of PT II and use the template uploaded on ICON. Your clinical note should be submitted to ICON no later than noon on the Monday following your clinical rotation.
2. The student will peer review two notes from their classmates. Peer review assignments will be designated on ICON. Feedback for your peer should be provided on the document in ICON.
3. For each clinical rotation, the student should have the clinical instructor complete the Student Feedback Form. This form will be placed in the student’s mailbox during the week of their rotation. Forms should be turned into Kelly’s mailbox on the Monday following the clinical experience.
4. The student should complete the Student Self Evaluation and Site Evaluation Form survey that will be emailed to them following each clinical experience.
5. Failure to turn in notes or evaluations could jeopardize your passing grade.

Attendance:
Attendance at all clinical education rotations is mandatory as scheduled, except in the case of illness, family emergency or inclement weather. In the case of inclement weather, the student should determine if they feel that the roads are safe for travel. As is the case with all absences, the student should contact the instructor to report their absence prior to the start of the clinical experience.

Professional Behaviors:
Professional behaviors are behaviors, attributes, or characteristics that are not explicitly part of a profession’s core knowledge and technical skills but are nevertheless required for success in that profession. Professional behaviors, which define expected behavior within a given profession, serve as the foundation for ability-based learning. (<http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf>). Students are evaluated by faculty each semester regarding their Professional Behaviors. The 10 abilities and definitions are
listed below:

1. **Critical Thinking** - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.

2. **Communication** - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.

3. **Problem Solving** – The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

4. **Interpersonal Skills** – The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

5. **Responsibility** – The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

6. **Professionalism** – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

7. **Use of Constructive Feedback** – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

8. **Effective Use of Time and Resources** – The ability to manage time and resources effectively to obtain the maximum possible benefit.

9. **Stress Management** – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.

10. **Commitment to Learning** – The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

**Course Standards and Policies:**

**Administration**
This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University’s General Catalog and a manual is available online at: [http://www.grad.uiowa.edu/graduate-college-manual](http://www.grad.uiowa.edu/graduate-college-manual).

**Course Evaluation:**
We ask every student to provide their anonymous evaluation of the course and course instructor(s) so that we can continuously monitor and improve our educational program. Our department policy requests all instructors provide 15 – 20 minutes of class time during the final week of class (prior to finals week) for students to complete the online ACE evaluations. These responses are then tabulated and provided to the Instructor(s) and Department Executive Officer after grades have been submitted. Your honest feedback is earnestly considered and is critical to the continued success of our program.

**Electronic Communication**
University policy specifies that students are responsible for all official correspondences sent to their standard University of Iowa e-mail address (@uiowa.edu). Students should check this account frequently.
Electronic Technologies in the Classroom:
Computers, laptops, mobile devices such as phones and media players are to be used for learning exercises. Professional behavior is expected. Disruption of the classroom learning experience will not be tolerated.

Accommodations for Disabilities
A student seeking academic accommodations should first register with Student Disability Services and then meet privately with the course instructor to make particular arrangements. See http://sds.studentlife.uiowa.edu/ for more information.

Academic Fraud
Plagiarism and any other activities when students present work that is not their own (cheating) are academic fraud. Example of academic fraud include:
- Presentation of ideas from sources that you do not credit;
- Use of direct quotations without quotation marks and without credit to the source;
- Paraphrasing information and ideas from sources without credit to the source;
- Failure to provide adequate citations for material obtained through electronic research;
- Downloading and submitting work from electronic databases without citation;
- Participation in a group project which presents plagiarized materials;
- Taking credit as part of a group without participating as required in the work of the group;
- Submitting material created/written by someone else as one’s own, including purchased term/research papers.

These rules and regulations are published in the University’s General Catalog and a manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual.

Concerns about Faculty Actions
Students who have a concern about a faculty action should first address the issue with the instructor. If you remain unsatisfied you may contact the DEO of the Department of Physical Therapy, Richard Shields (319-335-9801). If the student cannot resolve the issue at this level, the concern should be sent in writing to the Dean of the Graduate College.

Understanding Sexual Harassment
Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. See the UI’s Diversity website (http://diversity.uiowa.edu/eod/sexual-harassment-prevention-education-resources-0) for assistance, definitions, and the full University policy.

Reacting Safely to Severe Weather
In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue, if possible, when the event is over. For more information on Hawk Alert and the siren warning system, visit http://hawkalert.uiowa.edu or http://police.uiowa.edu.

Protocol for Handling Emergencies
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. When dialing from a campus phone, dial 9-911. You cannot send a text message to 911.
The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.
University of Iowa Police 319-335-5022
Facility Management (Work Control) 319-335-5071
Information Technology 319-384-4357
Environmental Health and Safety 319-335-8501

Grievance Policy: In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV. The manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual. In addition, the Department of Physical Therapy and Rehabilitation Science has established formal procedures for student grievances, which are detailed in the Department Policy Manual. Refer to this document on your class ICON site for more specifics.

Meeting Course Standards: Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service (http://tutor.uiowa.edu/find-help/) and the Writing Center (http://writingcenter.uiowa.edu/). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health (http://studenthealth.uiowa.edu/) and the University Counseling Service (http://counseling.studentlife.uiowa.edu/), respectively.

Course Schedule: See ICON.
Integrated Clinical Education in PT III
PTRS:6793

Course Directors:
Kelly J. Sass, PT, PhD
Clinical Assistant Professor
DCE
Office: 1-241 MEB
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Office hours: by appointment

Marcie Becker, DPT, GCS
Clinical Assistant Professor
DCE
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Email: marcie-becker@uiowa.edu
Office hours: by appointment

Course Description:
An integrated 6-week full-time clinical education experience with a focus on developing competence in examination, evaluation, and treatment of patients under supervision of clinical faculty in a rural health facility.

Course Website: Course information can be found in the ICON DPT Ongoing Class. It can be accessed using the University course management ICON at https://icon.uiowa.edu. You will need your HAWK ID and password to log-in.

Course Location: Rural healthcare setting in the state of Iowa with whom the University of Iowa has contracts for clinical education. These are arranged by the education program’s DCEs with input from program faculty and students.

Course Hours:
3 semester hours
Clinical experience scheduled July – August each year
No lecture hours are scheduled. Students are expected to work the equivalence of a full-time therapist at their assigned clinical site.

Prerequisites:
Student must be in good academic standing and enrolled in the Department of Physical Therapy & Rehabilitation Science.

Course Goals and Objectives:
Upon completion of this course, the student will be able to:
1. Professionally communicate with patients/clients, families, caregivers and other health professionals in matters related to patient/client management.
2. Adhere to the ethical and legal standards required of a physical therapist.
3. Identify indications/contraindications for treatment and minimize the risk of injury to self or patient/client.
4. Produce accurate and timely documentation as required by the clinical setting.
5. Demonstrate developing competence performing a patient/client examination including the following skills: history taking, vital signs, ROM/MMT, select special tests, select outcome measures, and functional mobility.

6. Demonstrate developing competence synthesizing the results of the examination to complete an evaluation of the patient/client, including a PT diagnosis, PT prognosis and plan of care.

7. Demonstrate developing competence selecting and implementing PT interventions with patients/clients, including functional mobility, gait training, therapeutic exercise, joint mobilizations, and physical agents.

8. Adapt delivery of patient/client management elements to reflect respect for individual differences and patient response to interventions.

9. Use relevant and effective teaching techniques in matters related to patient/client education.

10. Employ sound time management skills.

11. Demonstrate an understanding economic factors in the delivery of physical therapy services (e.g., budgeting, billing and reimbursement, scheduling and marketing).

12. Value the importance of a professional physical therapist’s responsibilities to the profession, including patient care, patient advocacy, education, administration and research.

13. Demonstrate awareness of strengths and limitations through on-going self-assessment activities.

14. Demonstrate the desire to grow and improve by asking for and befriending feedback from the clinical instructor and others.

15. Exhibit professional behaviors at all times including appreciating clinic hours, dress code and rules/regulations.

**Required and Recommended Course Materials:**

**Clinical Education Manual:**
The manual consists of documents designed to explain policies, procedures, obligations, and principles relative to clinical education for the students enrolled in the Doctor of Physical Therapy Program at the University of Iowa and can be found in the DPT ongoing course ICON page. Students are expected to abide by policies outlined in the PTRS Clinical Education Manual.

**Instructional Methods and Learning Experiences:**
Students are challenged to be active participants in the learning process, with emphasis on critical thinking and problem solving.

**Student Evaluation/Grading:**

**Course Grade:**
Grading will be completed by the program DCEs. Criteria that will be used to determine a Satisfactory grade will include: the clinical setting, experience with patients in that setting, progression of performance from midterm to final evaluations, the global performance assessment, the congruence between the midterm and final comments related to their performance, and the ratings provided on the ICE Student Performance Assessment.

**ICE Student Performance Assessment:**
The first section of this tool asks the clinical instructor to assess the student’s performance in the following categories: Communication/Interpersonal, Safety, Documentation, Examination, Evaluation, and Intervention. The second section asks the clinical instructor to identify areas of student strength and areas in need of improvement. Finally, the clinical instructor is asked to provide a global assessment of the student’s performance relative to his/her education level.
The rating scale used on the ICE Student Performance Assessment is below:

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<th>Rating</th>
<th>Description</th>
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<td>Indirect Supervision</td>
<td>Demonstrates a quality standard of the clinical skill 90-100% of the time without supportive cues. Is proficient, coordinated, confident, and only occasionally requires increased time or excess effort.</td>
</tr>
<tr>
<td>Direct Supervision</td>
<td>Demonstrates a quality standard of the clinical skill 75-89% of the time. Requires occasional supportive cues for efficiency, coordination, and confidence. Often requires increased time or excess effort.</td>
</tr>
<tr>
<td>Assisted</td>
<td>Demonstrates a quality standard of the clinical skill 50-74% of the time. Requires frequent verbal and/or physical cues. May be skillful in parts of necessary tasks but is inefficient, uncoordinated, and requires increased time or excess effort.</td>
</tr>
<tr>
<td>Emerging</td>
<td>Demonstrates a quality standard of the clinical skill 25-49% of the time. Requires continuous verbal and/or physical cues to perform the skill, is inefficient, uncoordinated and requires increased time and excess effort.</td>
</tr>
<tr>
<td>Dependent</td>
<td>Demonstrates a quality standard of the clinical skill less than 25% of the time. Unable or unsafe to perform the skill even with continuous verbal and/or physical cues.</td>
</tr>
<tr>
<td>Did not observe</td>
<td>Did not observe the student perform this skill because:</td>
</tr>
<tr>
<td></td>
<td>□ Opportunity to use this skill not available</td>
</tr>
<tr>
<td></td>
<td>□ Student not ready to attempt this skill</td>
</tr>
</tbody>
</table>


The clinical instructor uses the ICE Student Performance Assessment to evaluate student performance at both midterm and final. Due to the student’s level of education at the time of this clinical experience, it is not expected that the student will perform with only Indirect Supervision in all of the assessed areas. However, the student should show progress from midterm to final based on ratings and/or clinical instructor comments. Ratings below the “Assisted” level on the final evaluation or a response of “No” to the global assessment question will alert the DCEs to complete a more focused review of the student’s performance to determine if remediation is indicated.

**Student Self-Assessment**

The student also uses the ICE Student Performance Assessment to complete a self-assessment of his/her performance at midterm and final that can be compared to the clinical instructor’s assessment. Students who do not feel that they are performing at an appropriate level are encouraged to discuss their performance with the CI, SCCE and/or the DCE.

**Evaluation of Clinical Site:**

The student must complete an evaluation of the clinical site at the end of the clinical education experience. A link to the survey will be emailed to the student. This survey must be submitted within one week of the completion of the clinical education experience to avoid an Incomplete grade in the course.
Attendance:
Absences are not allowed during clinical experiences with the exception of illness or family emergency. The student must contact both the DCE and SCCE/Ci prior to their scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the DCE in consultation with the SCCE. Students are not allowed to request vacation time during their scheduled terminal clinical experiences. An unexcused absence may be grounds for failing a clinical internship. Any exceptions to this policy must be approved by the DCE.

Course Standards and Policies:

Professional Behaviors:
Professional behaviors are behaviors, attributes, or characteristics that are not explicitly part of a profession's core knowledge and technical skills but are nevertheless required for success in that profession. Professional behaviors, which define expected behavior within a given profession, serve as the foundation for ability-based learning. (http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf). Students are evaluated by faculty each semester regarding their professional behaviors. The 10 abilities and definitions are listed below:

1. **Critical Thinking** - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.
2. **Communication** - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
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6. **Professionalism** – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.
7. **Use of Constructive Feedback** – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.
8. **Effective Use of Time and Resources** – The ability to manage time and resources effectively to obtain the maximum possible benefit.
9. **Stress Management** – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.
10. **Commitment to Learning** – The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.
Administration
This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University's General Catalog and a manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual.

Course Evaluation: Assessing the Classroom Environment (ACE)
Every student must provide their anonymous evaluation of the course and course instructor(s) so that we can continuously monitor and improve our educational program. Our department policy requests all instructors provide 15–20 minutes of class time during final exam week for students to complete the online ACE evaluations. Instructors may make alternate arrangements for their specific course if they do not have a final exam or an alternate time works better for their class for completion of the ACE evaluations during a scheduled class time. These responses are then tabulated and provided to the Instructor(s) and Department Executive Officer after grades have been submitted. Your honest feedback is earnestly considered and is critical to the continued success of our program.

Electronic Communication
University policy specifies that students are responsible for all official correspondences sent to their standard University of Iowa e-mail address (@uiowa.edu). Students should check this account daily.

Electronic Technologies in the Classroom
Computers, laptops, mobile devices such as phones and media players are to be used for learning exercises. Professional behavior is expected. Disruption of the classroom learning experience will not be tolerated.

Accommodations for Disabilities
A student seeking academic accommodations should first register with Student Disability Services and then meet privately with the course instructor to make specific arrangements. See http://sds.studentlife.uiowa.edu/ for more information.

Academic Fraud
Plagiarism and any other activities when students present work that is not their own (cheating) are academic fraud. Examples of academic fraud include:

- Presentation of ideas from sources that you do not credit;
- Use of direct quotations without quotation marks and without credit to the source;
- Paraphrasing information and ideas from sources without credit to the source;
- Failure to provide adequate citations for material obtained through electronic research;
- Downloading and submitting work from electronic databases without citation;
- Participation in a group project which presents plagiarized materials;
- Taking credit as part of a group without participating as required in the work of the group;
- Submitting material created/written by someone else as one’s own, including purchased term/research papers.

These rules and regulations are published in the University's General Catalog and a manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual.
Concerns about Faculty Actions
Students who have a concern about a faculty action should first address the issue with the instructor. If you remain unsatisfied you may contact the DEO of the Department of Physical Therapy, Richard Shields (319-335-9801). If the student cannot resolve the issue at this level, the concern should be sent in writing to the Dean of the Graduate College.

Understanding Sexual Harassment
Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. See the UI’s Diversity website (http://diversity.uiowa.edu/eod/sexual-harassment-prevention-education-resources-0) for assistance, definitions, and the full University policy.

Reacting Safely to Severe Weather
In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue, if possible, when the event is over. For more information on Hawk Alert and the siren warning system, visit http://hawkalert.uiowa.edu or http://police.uiowa.edu.

Protocol for Handling Emergencies
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. When dialing from a campus phone, dial 9-911. You cannot send a text message to 911.

The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.
University of Iowa Police: 319-335-5022
Facility Management (Work Control): 319-335-5071
Information Technology: 319-384-4357
Environmental Health and Safety: 319-335-8501

Grievance Policy
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV. The manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual. In addition, the Department of Physical Therapy and Rehabilitation Science has established formal procedures for student grievances, which are detailed in the Department Policy Manual. Refer to this document on your class ICON site for more specifics.

Meeting Course Standards
Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service (http://tutor.uiowa.edu/find-help/) and the Writing Center (http://writingcenter.uiowa.edu/). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health (http://studenthealth.uiowa.edu/) and the University Counseling Service (http://counseling.studentlife.uiowa.edu/), respectively.
Integrated Clinical Education in PT IV
PTRS:6792

Course Instructors:
Kelly J. Sass, MPT, PhD  
Clinical Assistant Professor & DCE  
Office: 1-241  
Phone: 319-335-9798  
E-mail: kelly-sass@uiowa.edu  
Office hours: by appointment
Marcie Becker, DPT, GCS  
Clinical Assistant Professor & DCE  
Office: 1-240 MEB  
Phone: 319-335-8552  
E-mail: marcie-becker@uiowa.edu  
Office hours: by appointment

Course Description:
This course is a two-week full-time integrated clinical experience during the second year of the DPT curriculum. It occurs immediately prior to the start of spring semester classes; the final didactic semester of the curriculum. The intent is to provide students with a focused period of clinical care to apply content knowledge and practice clinical skills with supervision of licensed physical therapists. Students are assigned to clinical sites based on each individual student’s curricular need.

Course Website: The course site can be accessed using the University course management ICON at https://icon.uiowa.edu. You will need your HAWK ID and password to log-in.

Course Location: Physical therapy clinical settings with whom the University of Iowa has contracts for clinical education.

Course Hours:
01 semester hour – Spring Semester, 2nd Year
80 contact hours
No lecture hours are scheduled. All clinical experiences will take place at pre-assigned clinical facilities.

Prerequisites:
Student must be in good academic standing and enrolled in the Department of Physical Therapy & Rehabilitation.

Course Goals and Objectives:
Upon completion of this course, the student will be able to:
1. Develop patient rapport and complete the history taking portion of the initial examination with direct to indirect supervision from the supervising physical therapist.
2. Locate and correctly interpret information in the patient medical record that is pertinent to physical therapy.
3. Perform previously learned clinical skills including, but not limited to: vital signs, positioning, documentation, transfers, gait training with assistive devices, passive range of motion, goniometry, manual muscle testing, application of physical agents, spine examination and intervention, prescription of therapeutic exercise, UE examination and intervention, and use of standardized outcome measures with improved competence.
4. Demonstrate awareness of contraindications and precautions in examination and intervention.
5. Appraise and adapt a physical therapy plan of care to promote patient adherence.
6. Demonstrate appropriate documentation skills by writing concise, accurate, and pertinent clinical notes in a format required by the practice setting.
7. Demonstrate skill and confidence in interpersonal relations with patients, families, and clinic/hospital staff.
8. Demonstrate compliance with all legal regulations.
9. Demonstrate the seven core values of professionalism (accountability, altruism, compassion/caring, excellence, integrity, professional duty and social responsibility) in all clinical interactions.
10. Adhere to the ethical standards per the APTA Code of Ethics.
11. Provide sensitive, respectful and effective care to patients/clients with cultural backgrounds and beliefs different from their own.
12. Appraise his or her own strengths and limitations by seeking out feedback from the CI, staff and patients.

Required and Recommended Course Materials:

Clinical Education Manual:
The manual consists of documents designed to explain policies, procedures, obligations, and principles relative to clinical education for the students enrolled in the Doctor of Physical Therapy Program at the University of Iowa and can be found in the DPT Class ongoing course ICON page. Students are expected to abide by policies outlined in the PTRS Clinical Education Manual.

Students are encouraged to bring their class notes and textbooks for reference.

Instructional Methods and Learning Experiences:
Students are challenged to be active participants in a supervised clinical environment, with emphasis on critical thinking and problem solving. Licensed physical therapists serve as the clinical instructors. Students are required to complete a self-evaluation following this experience.

Student Evaluation/Grading:
Students will be directly assessed by the clinical instructors using the ICE Student Performance Assessment near completion of this clinical experience. Grading will be completed by the program DCEs and is based on a Satisfactory/Unsatisfactory basis. Criteria that will be used to determine a Satisfactory grade will include: the clinical setting, experience with patients in that setting, ratings provided on the ICE Student Performance Assessment at final evaluation, the global performance assessment and the congruence between ratings and comments related to their performance. Ratings below the “Assisted” level on the final evaluation or a response of “No” to the global assessment question will alert the DCEs to complete a more focused review of the student’s performance to determine if remediation is indicated. Entry-level performance is not an expectation for this clinical experience.

ICE Student Performance Assessment:
The first section of this tool asks the clinical instructor to assess the student’s performance in the following categories: Communication/Interpersonal, Safety, Documentation, Examination, Evaluation, and Intervention. The second section asks the clinical instructor to identify areas of student strength and areas in need of improvement. Finally, the clinical instructor is asked to provide a global assessment of the student’s performance relative to his/her education level.
The rating scale used on the ICE Student Performance Assessment is below:

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<td>Demonstrates a quality standard of the clinical skill 90-100% of the time without supportive cues. Is proficient,</td>
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<td>coordinated, confident, and only occasionally requires increased time or excess effort.</td>
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<td>Demonstrates a quality standard of the clinical skill 75-89% of the time. Requires occasional supportive cues for efficiency, coordination, and confidence. Often requires increased time or excess effort.</td>
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**Student Self-Assessment**
The student also uses the ICE Student Performance Assessment to complete a self-assessment of his/her performance near completion of this clinical experience that can be compared to the clinical instructor’s assessment. Students who do not feel that they are performing at an appropriate level are encouraged to discuss their performance with the CI, SCCE and/or the DCE.

**Evaluation of Clinical Site:**
The student must complete an evaluation of the clinical site at the end of the clinical education experience. A link to the survey will be emailed to the student. This survey must be submitted within one week of the completion of the clinical education experience to avoid an Incomplete grade in the course.

**Attendance:**
Absences are not allowed during clinical education experiences except for illness or family emergency. The student must contact their clinical instructor and the ACCEs prior to his/her scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the SCCE, CI and ACCE. Students shall not request vacation time during the clinical experience. An unexcused absence, one in which the CI or ACCE were not notified in advance, requires remediation and may be grounds for an unsatisfactory grade for a clinical experience.
Course Standards and Policies:

Professional Behaviors:
Professional behaviors are behaviors, attributes, or characteristics that are not explicitly part of a profession’s core knowledge and technical skills but are nevertheless required for success in that profession. Professional behaviors, which define expected behavior within a given profession, serve as the foundation for ability-based learning. (http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf). Students are evaluated by faculty each semester regarding their professional behaviors. The 10 abilities and definitions are listed below:

1. **Critical Thinking** - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.

2. **Communication** - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.

3. **Problem Solving** - The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

4. **Interpersonal Skills** - The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

5. **Responsibility** - The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

6. **Professionalism** - The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

7. **Use of Constructive Feedback** - The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

8. **Effective Use of Time and Resources** - The ability to manage time and resources effectively to obtain the maximum possible benefit.

9. **Stress Management** - The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.

10. **Commitment to Learning** - The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

Administration
This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University’s General Catalog and a manual is available online at: http://www.grad.uiowa.edu/graduate-college-manual.

Course Evaluation: Assessing the Classroom Environment (ACE)
Every student must provide their anonymous evaluation of the course and course instructor(s) so that we can continuously monitor and improve our educational program. Our department policy requests all instructors provide 15–20 minutes of class time during final exam week for students to complete the online ACE evaluations. Instructors may make alternate arrangements for their specific course if they do not have a final exam or an alternate time works better for their class for completion of the ACE evaluations during a scheduled class time.
These responses are then tabulated and provided to the Instructor(s) and Department Executive Officer after grades have been submitted. Your honest feedback is earnestly considered and is critical to the continued success of our program.

**Electronic Communication**
*University policy specifies that students are responsible for all official correspondences sent to their standard University of Iowa e-mail address (@uiowa.edu). Students should check this account daily.*

**Electronic Technologies in the Classroom**
Computers, laptops, mobile devices such as phones and media players are to be used for learning exercises. Professional behavior is expected. Disruption of the classroom learning experience will not be tolerated.

**Accommodations for Disabilities**
A student seeking academic accommodations should first register with Student Disability Services and then meet privately with the course instructor to make specific arrangements. See [http://sds.studentlife.uiowa.edu/](http://sds.studentlife.uiowa.edu/) for more information.

**Academic Fraud**
Plagiarism and any other activities when students present work that is not their own (cheating) are academic fraud. Examples of academic fraud include:

- Presentation of ideas from sources that you do not credit;
- Use of direct quotations without quotation marks and without credit to the source;
- Paraphrasing information and ideas from sources without credit to the source;
- Failure to provide adequate citations for material obtained through electronic research;
- Downloading and submitting work from electronic databases without citation;
- Participation in a group project which presents plagiarized materials;
- Taking credit as part of a group without participating as required in the work of the group;
- Submitting material created/written by someone else as one’s own, including purchased term/research papers.

These rules and regulations are published in the University’s General Catalog and a manual is available online at: [http://www.grad.uiowa.edu/graduate-college-manual](http://www.grad.uiowa.edu/graduate-college-manual).

**Concerns about Faculty Actions**
Students who have a concern about a faculty action should first address the issue with the instructor. If you remain unsatisfied you may contact the DEO of the Department of Physical Therapy, Richard Shields (319-335-9801). If the student cannot resolve the issue at this level, the concern should be sent in writing to the Dean of the Graduate College.

**Understanding Sexual Harassment**
Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. See the UI’s Diversity website ([http://diversity.uiowa.edu/eod/sexual-harassment-prevention-education-resources-0](http://diversity.uiowa.edu/eod/sexual-harassment-prevention-education-resources-0)) for assistance, definitions, and the full University policy.

**Reacting Safely to Severe Weather**
In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue, if possible, when the event is over. For more information on Hawk Alert and the siren warning system, visit [http://hawkalert.uiowa.edu](http://hawkalert.uiowa.edu) or [http://police.uiowa.edu](http://police.uiowa.edu).
Protocol for Handling Emergencies
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. When dialing from a campus phone, dial 9-911. You cannot send a text message to 911.

The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.
University of Iowa Police: 319-335-5022
Facility Management (Work Control): 319-335-5071
Information Technology: 319-384-4357
Environmental Health and Safety: 319-335-8501

Grievance Policy
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV. The manual is available online at: [http://www.grad.uiowa.edu/graduate-college-manual](http://www.grad.uiowa.edu/graduate-college-manual). In addition, the Department of Physical Therapy and Rehabilitation Science has established formal procedures for student grievances, which are detailed in the Department Policy Manual. Refer to this document on your class ICON site for more specifics.

Meeting Course Standards
Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service ([http://tutor.uiowa.edu/find-help/](http://tutor.uiowa.edu/find-help/)) and the Writing Center ([http://writingcenter.uiowa.edu/](http://writingcenter.uiowa.edu/)). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health ([http://studenthealth.uiowa.edu/](http://studenthealth.uiowa.edu/)) and the University Counseling Service ([http://counseling.studentlife.uiowa.edu/](http://counseling.studentlife.uiowa.edu/)), respectively.
PTRS:6794
Terminal Clinical Education in PT I
Summer

Course Directors:
Kelly J. Sass, PT, PhD
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Marcie Becker, DPT, GCS
Clinical Asst Professor
DCE
Office: 1-240 MEB
Phone: 319-335-8552
Email: marcie-becker@uiowa.edu
Office hours: by appointment

Course Description:
Full-time clinical education in a physical therapy practice setting; development of competence in independent examination, evaluation, and treatment of patients under supervision of clinical faculty.

Course Website: Course information can be found in the ICON 2019 – 2021 DPT Class ongoing course. It can be accessed using the University course management ICON at https://icon.uiowa.edu. You will need your HAWK ID and password to log-in.

Course Location: Physical therapy settings in the United States with whom the University of Iowa has contracts for clinical education. These are arranged by the education program’s DCEs with significant input from program faculty and students.

Course Hours:
4 sh
Clinical experience scheduled May 24 – July 23, 2021
No lecture hours are scheduled. Students are expected to work the equivalence of a full-time therapist at their assigned clinical site during this time.

Prerequisites:
Enrolled in the Department of Physical Therapy & Rehabilitation.

Course Goals and Objectives:
Following the completion of the terminal clinical education experiences, the student will be able to:

1. Demonstrate entry-level competence in the elements of patient/client management, including screening, examination (including history, systems review, and appropriate tests/measures), evaluation, diagnosis, prognosis, and interventions in a manner designed to optimize patient/client outcomes.

2. Exhibit professional behaviors in all situations and develop a self-directed plan for professional development and life-long learning opportunities.
3. Demonstrate appropriate communication skills with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional teams, consumers, payers and policymakers, that is congruent with situational needs.

4. Apply the principles from the UIHC compliance training modules related to safety, infection control, PPE, HIPAA, mandatory reporting for child/dependent adult abuse, domestic violence recognition, and age-specific care as needed.

5. Adhere to all federal, state and institutional legal practice standards, practice in a manner consistent with the APTA Code of Ethics and Core Values and be prepared to report any cases of fraud and abuse.

6. Demonstrate entry-level clinical reasoning skills to identify, evaluate, and integrate the best evidence for practice, patient/client values, needs and preferences to determine best care for a patient/client.

7. Compose appropriate and timely physical therapy documentation that follows all regulatory requirements of the state practice act, practice setting, and payers.

8. Develop and manage a plan of care for a patient/client that addresses individual patient/client differences, needs, and response to interventions.

9. Develop and manage a plan of care for a patient/client that addresses professional obligations, interprofessional collaborations, policies and procedures, and when appropriate, delegation of interventions to the physical therapist assistant.

10. Participate in the financial and practice management of physical therapy services.

11. Demonstrate effective teaching methods when interacting with a variety of learners (patients, caregivers, staff, students, healthcare providers, etc).

**Required and Recommended Course Materials:**

**Clinical Education Manual:**
The manual consists of documents designed to explain policies, procedures, obligations, and principles relative to clinical education for the students enrolled in the Doctor of Physical Therapy Program at the University of Iowa and can be found in the DPT 2019-2021 DPT Class ongoing course ICON page or on the PTRS website: PTRS Clinical Instructor Resource Page. Students are expected to abide by the PTRS Clinical Education Manual.

**Physical Therapist Clinical Performance Instrument (PT CPI):**
The PT CPI can be found at [https://cpi2.amsapps.com](https://cpi2.amsapps.com). An online training must be completed by clinical instructors and students prior to using for the first time. You can find the training here: PT CPI Training

**Instructional Methods and Learning Experiences:**
Students are challenged to be active participants in the learning process. Critical thinking and problem solving is emphasized.

**Student Evaluation/Grading:**
**Course Grade:**
Grading will be completed by the program DCEs. Criteria that will be used to determine a Satisfactory grade will include: the clinical setting, experience with patients in that setting, progression of performance from midterm to final evaluations, whether or not “significant concerns” box is checked, the congruence between the midterm and final comments related to the five performance dimensions, and the ratings provided on the CPI.

**Clinical Instructor Performance Assessment:**
The clinical instructor uses the Physical Therapist Clinical Performance Instrument (PT CPI) to evaluate student performance at both midterm and final. The student should strive to demonstrate entry level performance in each of the 18 performance criteria at the final evaluation. Ratings below an advanced intermediate level will alert the DCEs to complete a more focused review of the student’s performance. The PT CPI must be electronically signed by both the clinical instructor and the student at midterm and final to be released to the DCE for review.
Student Performance Assessment
The student uses the PT CPI to complete a self-assessment of his or her performance at midterm and final. As stated above, the student should strive to demonstrate entry level performance in each of the 18 performance criteria at the final evaluation. Students who do not feel that they are performing at this level are encouraged to discuss their performance with the CI, SCCE and/or the DCE. This PT CPI must be electronically signed by both the clinical instructor and the student at midterm and final to be released to the DCE for review.

Evaluation of Clinical Site:
The student must complete an evaluation of the clinical site and their clinical instructor at the end of the clinical education experience. A link to the survey will be emailed to the student. This survey must be submitted within one week of the completion of the clinical education experience to avoid an Incomplete grade in the course.

Attendance:
Absences are not allowed during internships except for illness or family emergency. The student must contact both the DCE and SCCE prior to their scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the DCCE in consultation with the SCCE and CI. Students are not allowed to request vacation time during their scheduled clinical internships. *There is a week-long break scheduled between internships for students to use for personal needs, including job interviews.* An unexcused absence may be grounds for failing a clinical experience. *Any exceptions to this policy must be approved by the DCE.*

Cancellation of a Clinical Education Experience: If a clinical education site cancels a scheduled clinical experience for any reason, the DCCEs will reschedule the student to a different site with input from the student. It cannot be guaranteed that the student will be in the same geographical area or setting type, but reasonable efforts may be made to accommodate such requests. As always, students are responsible for all travel and living expenses associated with clinical education experiences.

Course Standards and Policies:

Professional Behaviors:
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6. **Professionalism** – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

7. **Use of Constructive Feedback** – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

8. **Effective Use of Time and Resources** – The ability to manage time and resources effectively to obtain the maximum possible benefit.

9. **Stress Management** – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the healthcare team and in work/life scenarios.

10. **Commitment to Learning** – The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

**Administration**

This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University’s General Catalog and a manual is available online at: [https://grad.uiowa.edu/academics/manual](https://grad.uiowa.edu/academics/manual)

**Course Evaluation: Assessing the Classroom Environment (ACE)**

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**Electronic Communication**

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**Accommodations for Disabilities**

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**Academic Fraud**

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- Use of direct quotations without quotation marks and without credit to the source;
- Paraphrasing information and ideas from sources without credit to the source;
• Failure to provide adequate citations for material obtained through electronic research;
• Downloading and submitting work from electronic databases without citation;
• Participation in a group project which presents plagiarized materials;
• Taking credit as part of a group without participating as required in the work of the group;
• Submitting material created/written by someone else as one’s own, including purchased term/research papers.

These rules and regulations are published in the University’s General Catalog and a manual is available online at: https://grad.uiowa.edu/academics/manual

Concerns about Faculty Actions
Students who have a concern about a faculty action should first address the issue with the instructor. If you remain unsatisfied you may contact the DEO of the Department of Physical Therapy, Richard Shields (319-335-9801). If the student cannot resolve the issue at this level, the concern should be sent in writing to the Dean of the Graduate College.

Understanding Sexual Harassment
Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. See the UI’s Diversity website (https://diversity.uiowa.edu/) for assistance, definitions, and the full University policy.

Reacting Safely to Severe Weather
In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue, if possible, when the event is over. For more information on Hawk Alert and the siren warning system, visit http://hawkalert.uiowa.edu or http://police.uiowa.edu.

Protocol for Handling Emergencies
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. When dialing from a campus phone, dial 9-911. You cannot send a text to 911. The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.

University of Iowa Police: 319-335-5022
Facility Management (Work Control): 319-335-5071
Information Technology: 319-384-4357
Environmental Health and Safety: 319-335-8501

Grievance Policy
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV. The manual is available online at: https://grad.uiowa.edu/academics/manual. In addition, the Department of Physical Therapy and Rehabilitation Science has established formal procedures for student grievances, which are detailed in the Department Policy Manual. Refer to this document on your class ICON site for more specifics.

Meeting Course Standards
Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service (http://tutor.uiowa.edu/find-help/) and the Writing Center (http://writingcenter.uiowa.edu/). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health (http://studenthealth.uiowa.edu/) and the University Counseling Service (http://counseling.studentlife.uiowa.edu/), respectively.
PTRS:6795
Terminal Clinical Education in PT II
Fall

Course Directors:
Kelly J. Sass, PT, PhD
Clinical Asst Professor
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Office: 1-241 MEB
Phone: 319-335-9798
E-mail: kelly-sass@uiowa.edu
Office hours : by appointment

Marcie Becker, DPT, GCS
Clinical Asst Professor
DCE
Office: 1-240 MEB
Phone: 319-335-8552
Email: marcie-becker@uiowa.edu
Office hours : by appointment

Course Description:
Full-time clinical education in a physical therapy practice setting; development of competence in independent examination, evaluation, and treatment of patients under supervision of clinical faculty.

Course Website: Course information can be found in the ICON 2019 – 2021 DPT Class ongoing course. It can be accessed using the University course management ICON at https://icon.uiowa.edu. You will need your HAWK ID and password to log-in.

Course Location: Physical therapy settings in the United States with whom the University of Iowa has contracts for clinical education. These are arranged by the education program's DCEs with significant input from program faculty and students.

Course Hours:
4 sh
Clinical experience scheduled August 2-October 1, 2021
No lecture hours are scheduled. Students are expected to work the equivalence of a full-time therapist at their assigned clinical site during this time.

Prerequisites:
Enrolled in the Department of Physical Therapy & Rehabilitation.

Course Goals and Objectives:
Following the completion of the terminal clinical education experiences, the student will be able to:

1. Demonstrate entry-level competence in the elements of patient/client management, including screening, examination (including history, systems review, and appropriate tests/measures), evaluation, diagnosis, prognosis, and interventions in a manner designed to optimize patient/client outcomes.

2. Exhibit professional behaviors in all situations and develop a self-directed plan for professional development and life-long learning opportunities.

3. Demonstrate appropriate communication skills with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional teams, consumers, payers and policymakers, that is congruent with situational needs.
4. Apply the principles from the UIHC compliance training modules related to safety, infection control, PPE, HIPAA, mandatory reporting for child/dependent adult abuse, domestic violence recognition, and age-specific care as needed.
5. Adhere to all federal, state and institutional legal practice standards, practice in a manner consistent with the APTA Code of Ethics and Core Values and be prepared to report any cases of fraud and abuse.
6. Demonstrate entry-level clinical reasoning skills to identify, evaluate, and integrate the best evidence for practice, patient/client values, needs and preferences to determine best care for a patient/client.
7. Compose appropriate and timely physical therapy documentation that follows all regulatory requirements of the state practice act, practice setting, and payers.
8. Develop and manage a plan of care for a patient/client that addresses individual patient/client differences, needs, and response to interventions.
9. Develop and manage a plan of care for a patient/client that addresses professional obligations, interprofessional collaborations, policies and procedures, and when appropriate, delegation of interventions to the physical therapist assistant.
10. Participate in the financial and practice management of physical therapy services.
11. Demonstrate effective teaching methods when interacting with a variety of learners (patients, caregivers, staff, students, healthcare providers, etc).

Required and Recommended Course Materials:

Clinical Education Manual:
The manual consists of documents designed to explain policies, procedures, obligations, and principles relative to clinical education for the students enrolled in the Doctor of Physical Therapy Program at the University of Iowa and can be found in the DPT 2019-2021 DPT Class ongoing course ICON page or on the PTRS website: PTRS Clinical Instructor Resource Page. Students are expected to abide by the PTRS Clinical Education Manual.

Physical Therapist Clinical Performance Instrument (PT CPI):
The PT CPI can be found at https://cpi2.amsapps.com. An online training must be completed by clinical instructors and students prior to using for the first time. You can find the training here: PT CPI Training

Instructional Methods and Learning Experiences:
Students are challenged to be active participants in the learning process. Critical thinking and problem solving is emphasized.

Student Evaluation/Grading:
Course Grade:
Grading will be completed by the program DCEs. Criteria that will be used to determine a Satisfactory grade will include: the clinical setting, experience with patients in that setting, progression of performance from midterm to final evaluations, whether or not “significant concerns” box is checked, the congruence between the midterm and final comments related to the five performance dimensions, and the ratings provided on the CPI.

Clinical Instructor Performance Assessment:
The clinical instructor uses the Physical Therapist Clinical Performance Instrument (PT CPI) to evaluate student performance at both midterm and final. The student should strive to demonstrate entry level performance in each of the 18 performance criteria at the final evaluation. Ratings below an advanced intermediate level will alert the DCEs to complete a more focused review of the student’s performance. The PT CPI must be electronically signed by both the clinical instructor and the student at midterm and final to be released to the DCE for review.

Student Performance Assessment
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**Evaluation of Clinical Site:**
The student must complete an evaluation of the clinical site and their clinical instructor at the end of the clinical education experience. A link to the survey will be emailed to the student. This survey must be submitted within one week of the completion of the clinical education experience to avoid an Incomplete grade in the course.

**Attendance:**
Absences are not allowed during internships except for illness or family emergency. The student must contact both the DCE and SCCE prior to their scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the DCCE in consultation with the SCCE and CI. Students are not allowed to request vacation time during their scheduled clinical internships. *There is a week-long break scheduled between internships for students to use for personal needs, including job interviews.* An unexcused absence may be grounds for failing a clinical experience. Any exceptions to this policy must be approved by the DCE.

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**Course Standards and Policies:**

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**Administration**

This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University’s General Catalog and a manual is available online at: [https://grad.uiowa.edu/academics/manual](https://grad.uiowa.edu/academics/manual)

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**Electronic Technologies in the Classroom**

Computers, laptops, mobile devices such as phones and media players are to be used for learning exercises. Professional behavior is expected. Disruption of the classroom learning experience will not be tolerated.

**Accommodations for Disabilities**

A student seeking academic accommodations should first register with Student Disability Services and then meet privately with the course instructor to make specific arrangements. See [http://sds.studentlife.uiowa.edu/](http://sds.studentlife.uiowa.edu/) for more information.

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Plagiarism and any other activities when students present work that is not their own (cheating) are academic fraud. Examples of academic fraud include:

- Presentation of ideas from sources that you do not credit;
- Use of direct quotations without quotation marks and without credit to the source;
- Paraphrasing information and ideas from sources without credit to the source;
- Failure to provide adequate citations for material obtained through electronic research;
- Downloading and submitting work from electronic databases without citation;
- Participation in a group project which presents plagiarized materials;
• Taking credit as part of a group without participating as required in the work of the group;
• Submitting material created/written by someone else as one’s own, including purchased term/research papers.

These rules and regulations are published in the University’s General Catalog and a manual is available online at: https://grad.uiowa.edu/academics/manual

**Concerns about Faculty Actions**
Students who have a concern about a faculty action should first address the issue with the instructor. If you remain unsatisfied you may contact the DEO of the Department of Physical Therapy, Richard Shields (319-335-9801). If the student cannot resolve the issue at this level, the concern should be sent in writing to the Dean of the Graduate College.

**Understanding Sexual Harassment**
Sexual harassment subverts the mission of the University and threatens the well-being of students, faculty, and staff. All members of the UI community have a responsibility to uphold this mission and to contribute to a safe environment that enhances learning. Incidents of sexual harassment should be reported immediately. See the UI’s Diversity website (https://diversity.uiowa.edu/) for assistance, definitions, and the full University policy.

**Reacting Safely to Severe Weather**
In severe weather, class members should seek appropriate shelter immediately, leaving the classroom if necessary. The class will continue, if possible, when the event is over. For more information on Hawk Alert and the siren warning system, visit http://hawkalert.uiowa.edu or http://police.uiowa.edu.

**Protocol for Handling Emergencies**
Dial 911 if there is any threat to life or a situation that requires an immediate response from police, fire, or emergency medical services. When dialing from a campus phone, dial 9-911. You cannot send a text message to 911.

The following numbers are provided for non-emergency situations. Use of these numbers will still provide a response from the appropriate agency and keep 911 lines free for actual emergencies.

University of Iowa Police: 319-335-5022
Facility Management (Work Control): 319-335-5071
Information Technology: 319-384-4357
Environmental Health and Safety: 319-335-8501

**Grievance Policy**
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV. The manual is available online at: https://grad.uiowa.edu/academics/manual. In addition, the Department of Physical Therapy and Rehabilitation Science has established formal procedures for student grievances, which are detailed in the Department Policy Manual. Refer to this document on your class ICON site for more specifics.

**Meeting Course Standards**
Any student who experiences difficulty or anticipates possible difficulty in successfully meeting the course standards is encouraged to speak with the course coordinator as soon as the difficulty is suspected. Academic assistance is available through a variety of University resources such as the Tutor Referral Service (http://tutor.uiowa.edu/find-help/) and the Writing Center (http://writingcenter.uiowa.edu/). See these web pages for details. In addition, physical or mental health concerns can be addressed at Student Health (http://studenthealth.uiowa.edu/).
PTRS:6796  
Terminal Clinical Education in PT III  
Fall

Course Directors:  
Kelly J. Sass, PT, PhD  
Clinical Asst Professor  
DCE  
Office: 1-241 MEB  
Phone: 319-335-9798  
E-mail: kelly-sass@uiowa.edu  
Office hours: by appointment

Marcie Becker, DPT, GCS  
Clinical Asst Professor  
DCE  
Office: 1-240 MEB  
Phone: 319-335-8552  
Email: marcie-becker@uiowa.edu  
Office hours: by appointment

Course Description:  
Full-time clinical education in a physical therapy practice setting; development of competence in independent examination, evaluation, and treatment of patients under supervision of clinical faculty.

Course Website: Course information can be found in the ICON 2019 – 2021 DPT Class ongoing course. It can be accessed using the University course management ICON at https://icon.uiowa.edu. You will need your HAWK ID and password to log-in.

Course Location: Physical therapy settings in the United States with whom the University of Iowa has contracts for clinical education. These are arranged by the education program’s DCEs with significant input from program faculty and students.

Course Hours:  
4 sh  
Clinical experience scheduled October 11-December 10, 2021  
No lecture hours are scheduled. Students are expected to work the equivalence of a full-time therapist at their assigned clinical site during this time.

Prerequisites:  
Enrolled in the Department of Physical Therapy & Rehabilitation.

Course Goals and Objectives:  
Following the completion of the terminal clinical education experiences, the student will be able to:

1. Demonstrate entry-level competence in the elements of patient/client management, including screening, examination (including history, systems review, and appropriate tests/measures), evaluation, diagnosis, prognosis, and interventions in a manner designed to optimize patient/client outcomes.

2. Exhibit professional behaviors in all situations and develop a self-directed plan for professional development and life-long learning opportunities.
3. Demonstrate appropriate communication skills with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional teams, consumers, payers and policymakers, that is congruent with situational needs.

4. Apply the principles from the UIHC compliance training modules related to safety, infection control, PPE, HIPAA, mandatory reporting for child/dependent adult abuse, domestic violence recognition, and age-specific care as needed.

5. Adhere to all federal, state and institutional legal practice standards, practice in a manner consistent with the APTA Code of Ethics and Core Values and be prepared to report any cases of fraud and abuse.

6. Demonstrate entry-level clinical reasoning skills to identify, evaluate, and integrate the best evidence for practice, patient/client values, needs and preferences to determine best care for a patient/client.

7. Compose appropriate and timely physical therapy documentation that follows all regulatory requirements of the state practice act, practice setting, and payers.

8. Develop and manage a plan of care for a patient/client that addresses individual patient/client differences, needs, and response to interventions.

9. Develop and manage a plan of care for a patient/client that addresses professional obligations, interprofessional collaborations, policies and procedures, and when appropriate, delegation of interventions to the physical therapist assistant.

10. Participate in the financial and practice management of physical therapy services.

11. Demonstrate effective teaching methods when interacting with a variety of learners (patients, caregivers, staff, students, healthcare providers, etc).

**Required and Recommended Course Materials:**

**Clinical Education Manual:**
The manual consists of documents designed to explain policies, procedures, obligations, and principles relative to clinical education for the students enrolled in the Doctor of Physical Therapy Program at the University of Iowa and can be found in the DPT 2019-2021 DPT Class ongoing course ICON page or on the PTRS website: [PTRS Clinical Instructor Resource Page](https://ptrs.amsapps.com/). Students are expected to abide by the PTRS Clinical Education Manual.

**Physical Therapist Clinical Performance Instrument (PT CPI):**
The PT CPI can be found at [https://cpi2.amsapps.com](https://cpi2.amsapps.com). An online training must be completed by clinical instructors and students prior to using for the first time. You can find the training here: [PT CPI Training](https://ptrs.amsapps.com/ptcpi/training).

**Instructional Methods and Learning Experiences:**
Students are challenged to be active participants in the learning process. Critical thinking and problem solving is emphasized.

**Student Evaluation/Grading:**

**Course Grade:**
Grading will be completed by the program DCEs. Criteria that will be used to determine a Satisfactory grade will include: the clinical setting, experience with patients in that setting, progression of performance from midterm to final evaluations, whether or not “significant concerns” box is checked, the congruence between the midterm and final comments related to the five performance dimensions, and the ratings provided on the CPI.

**Clinical Instructor Performance Assessment:**
The clinical instructor uses the Physical Therapist Clinical Performance Instrument (PT CPI) to evaluate student performance at both midterm and final. The student should strive to demonstrate entry level performance in each of the 18 performance criteria at the final evaluation. Ratings below entry level will alert the DCEs to complete a more focused review of the student’s performance. The PT CPI must be electronically signed by both the clinical instructor and the student at midterm and final to be released to the DCE for review.
**Student Performance Assessment**
The student uses the PT CPI to complete a self-assessment of his or her performance at midterm and final. As stated above, the student should strive to demonstrate entry level performance in each of the 18 performance criteria at the final evaluation. Students who do not feel that they are performing at this level are encouraged to discuss their performance with the CI, SCCE and/or the DCE. This PT CPI must be electronically signed by both the clinical instructor and the student at midterm and final to be released to the DCE for review.

**Evaluation of Clinical Site:**
The student must complete an evaluation of the clinical site and their clinical instructor at the end of the clinical education experience. A link to the survey will be emailed to the student. This survey must be submitted within one week of the completion of the clinical education experience to avoid an Incomplete grade in the course.

**Attendance:**
Absences are not allowed during internships except for illness or family emergency. The student must contact both the DCE and SCCE prior to their scheduled work hours to report an absence. Time missed due to absence will be made up at the discretion of the DCCE in consultation with the SCCE and CI. Students are not allowed to request vacation time during their scheduled clinical internships. There is a week-long break scheduled between internships for students to use for personal needs, including job interviews. An unexcused absence may be grounds for failing a clinical experience. Any exceptions to this policy must be approved by the DCE.

**Cancellation of a Clinical Education Experience:** If a clinical education site cancels a scheduled clinical experience for any reason, the DCCEs will reschedule the student to a different site with input from the student. It cannot be guaranteed that the student will be in the same geographical area or setting type, but reasonable efforts may be made to accommodate such requests. As always, students are responsible for all travel and living expenses associated with clinical education experiences.

**Course Standards and Policies:**

**Professional Behaviors:**
Professional behaviors are behaviors, attributes, or characteristics that are not explicitly part of a profession's core knowledge and technical skills but are nevertheless required for success in that profession. Professional behaviors, which define expected behavior within a given profession, serve as the foundation for ability-based learning. (https://www.marquette.edu/physical-therapy/documents/professional-behaviors.pdf) Students are evaluated by faculty each semester regarding their professional behaviors. The 10 abilities and definitions are listed below:

1. **Critical Thinking** - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision-making process.
2. **Communication** - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
3. **Problem Solving** – The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
4. **Interpersonal Skills** – The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.
5. **Responsibility** – The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.
6. **Professionalism** – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

7. **Use of Constructive Feedback** – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

8. **Effective Use of Time and Resources** – The ability to manage time and resources effectively to obtain the maximum possible benefit.

9. **Stress Management** – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.

10. **Commitment to Learning** – The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

**Administration**

This course adheres to the Department of Physical Therapy and Rehabilitation Sciences Policy Manual (located on class ICON and department ICON courses). Please refer to this document for details on important classroom policies and procedures such as review and promotion, academic dishonesty, disciplinary action, student mistreatment, emergency procedures, etc. In addition, the Rules and Regulations of the Graduate College apply to all students in the Physical Therapy and Rehabilitation Science Graduate Program. These rules and regulations are published in the University’s General Catalog and a manual is available online at: https://grad.uiowa.edu/academics/manual

**Course Evaluation: Assessing the Classroom Environment (ACE)**

Every student must provide their anonymous evaluation of the course and course instructor(s) so that we can continuously monitor and improve our educational program. Our department policy requests all instructors provide 15–20 minutes of class time during final exam week for students to complete the online ACE evaluations. Instructors may make alternate arrangements for their specific course if they do not have a final exam or an alternate time works better for their class for completion of the ACE evaluations during a scheduled class time. These responses are then tabulated and provided to the Instructor(s) and Department Executive Officer after grades have been submitted. Your honest feedback is earnestly considered and is critical to the continued success of our program.

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Appendix 1

Student Performance Evaluation

PTRS:5790
Integrated Clinical Education in Physical Therapy I
**PTRS 5790: Integrated Clinical Education I Student Assessment Form**

Please utilize this form to provide feedback to the student and the course instructor, Marcie Becker, DPT, GCS. Share your questions, comments, and suggestions with Marcie at 319-335-8552 or marcie-becker@uiowa.edu.

Students are required to actively participate in patient care skills with direct clinical teaching of their instructor. Independence is not anticipated, but engagement is expected. Skills marked with an asterisk (*) were included in the summer semester. The other skills will be covered throughout the fall semester.

<table>
<thead>
<tr>
<th>Patient Care Skill</th>
<th>Frequency of Performance Today</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Obtaining the patient history and establishing rapport with a patient.</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Directing a patient’s position and providing appropriate draping for examination and intervention.</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Identify impairments to the integumentary system that require precaution/contraindication.</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Measure heart rate, blood pressure, respiration status and pain level.</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*PROM of Cervical Spine, UEs, and/or LEs</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Facilitation of Bed Mobility</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Facilitation of Transfers, including Mechanical Lifts.</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Fitting and Instruction of Gait and Transfers with Assistive Devices</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>*Instruction on Wheelchair Management and Propulsion</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>Sitting tolerance progression with use of tilt table and/or cardiac chairs/bed.</td>
<td>○ Observed/Did not perform</td>
</tr>
<tr>
<td></td>
<td>○ 1-2 times</td>
</tr>
<tr>
<td></td>
<td>○ More than 3 times</td>
</tr>
<tr>
<td>Patient Care Skill</td>
<td>Frequency of Performance Today</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>-----------------------------------------------------</td>
</tr>
</tbody>
</table>
| Activity Measurement of Gait (TUG, Self-Selected Walking Speed) | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| UE ROM Measurement with Goniometer                      | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| LE ROM Measurement with Goniometer                      | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| Spine ROM Assessment                                   | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| MMT of UE                                              | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| MMT of LE                                              | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| MMT of Trunk Musculature                               | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| Observational Gait Analysis                            | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| Clinical Documentation                                  | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |
| Other:                                                  | Observed/Did not perform  
 |                                                          | 1-2 times  
 |                                                          | More than 3 times                                   |

Do you have any concerns regarding this student’s professional behavior? ___Yes; ____No, Please explain:

Please provide written feedback for the student regarding his/her interactions with patients and clinic staff:

Thank you for mentoring the first-year physical therapist students from The University of Iowa!
Appendix 2

Student Performance Evaluation

PTRS: 5791
Integrated Clinical Education in Physical Therapy II
PTRS:5791 Integrated Clinical Education (ICE) II
Spring
Clinical Instructor Feedback Form

Student Name: ____________________________________________________________
Clinic Site: ______________________________________________________________
Clinical Instructor: _______________________________________________________
Date: ________________________________________________________________

Please rate the student’s performance in the following areas (check the box that applies):

<table>
<thead>
<tr>
<th>Area</th>
<th>Unable</th>
<th>Emerging</th>
<th>Satisfactory</th>
<th>Exemplary</th>
<th>Not observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication—with patients, clinical instructor, other clinical staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Examination Skills—patient interviewing, MMT, ROM, functional mobility, gait, vital signs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient education—effectively lead a patient through an exercise program</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Documentation—initial evaluation or daily visit for a patient they interacted with at the clinic</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Display professional behaviors at all time (appropriate dress, on time, positive body language, engaged in the environment)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments related to your ratings above:

Other comments:
Appendix 3

Student Performance Evaluation

PTRS:6793/PTRS:6792
Integrated Clinical Education in Physical Therapy III & IV
Integrated Clinical Education Student Performance Assessment
PTRS:6792/PTRS:6793 Clinical Experiences
2nd Year DPT Students

Student Name: ________________________________________________

Name of Clinical Facility: ________________________________________

Clinical Instructor’s Name: ________________________________________

The 6-week Integrated Clinical Education experience is intended to allow the student to practice and develop the new skills they are learning while in the PT program. A student in an integrated clinical education experience is in need of frequent feedback in order to grow their skills. This evaluation tool is intended to provide the student with constructive, objective feedback on their performance at this point in their education.

We ask that you complete the evaluation indicating the student’s current level of performance for each task. If you had no opportunity to observe a characteristic, check the “did not observe” circle. You are also asked to provide comments in regard to the student’s overall strengths, areas in need of improvement, and to provide a global assessment of the student’s progress.

Use the following rating scale when assessing the student:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indirect Supervision</td>
<td>Demonstrates a quality standard of the clinical skill 90-100% of the time without supportive cues. Is proficient, coordinated, confident, and only occasionally requires increased time or excess effort.</td>
</tr>
<tr>
<td>Direct Supervision</td>
<td>Demonstrates a quality standard of the clinical skill 75-89% of the time. Requires occasional supportive cues for efficiency, coordination, and confidence. Often requires increased time or excess effort.</td>
</tr>
<tr>
<td>Assisted</td>
<td>Demonstrates a quality standard of the clinical skill 50-74% of the time. Requires frequent verbal and/or physical cues. May be skillful in parts of necessary tasks but is inefficient, uncoordinated, and requires increased time or excess effort.</td>
</tr>
<tr>
<td>Emerging</td>
<td>Demonstrates a quality standard of the clinical skill 25-49% of the time. Requires continuous verbal and/or physical cues to perform the skill, is inefficient, uncoordinated and requires increased time and excess effort.</td>
</tr>
<tr>
<td>Dependent</td>
<td>Demonstrates a quality standard of the clinical skill less than 25% of the time. Unable or unsafe to perform the skill even with continuous verbal and/or physical cues.</td>
</tr>
<tr>
<td>Did not observe</td>
<td>Did not observe the student perform this skill because:</td>
</tr>
<tr>
<td></td>
<td>□ Opportunity to use this skill not available</td>
</tr>
<tr>
<td></td>
<td>□ Student not ready to attempt this skill</td>
</tr>
</tbody>
</table>

Portions of the rating scale and evaluative criteria have been adapted from: Henderson, W., The Open Journal of Occupational Therapy, 4(3), 2016; Fitzgerald LM et al., Validation of the Clinical Internship Evaluation Tool. Phys Ther.2007;87:844–860; Bondy, K.N., Journal of Nursing Education, 22(9), 1983
<table>
<thead>
<tr>
<th>Communication/Interpersonal</th>
<th>Dependent</th>
<th>Emerging</th>
<th>Assisted</th>
<th>Direct Supervision</th>
<th>Indirect Supervision</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Displays professional behaviors in all clinic interactions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maintains open communication with clinical instructor</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Establishes rapport with patients</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates sensitivity &amp; when working with people of diverse backgrounds</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicates appropriately with patient/clients in all interactions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Communicates appropriately with the healthcare team as needed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Communication Comments:**

<table>
<thead>
<tr>
<th>Safety</th>
<th>Dependent</th>
<th>Emerging</th>
<th>Assisted</th>
<th>Direct Supervision</th>
<th>Indirect Supervision</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Takes appropriate measures to ensure the safety of the patient</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Takes appropriate measures to minimize risk of injury to self (e.g., body mechanics)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates awareness of contraindications &amp; precautions to treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Safety Comments:**

<table>
<thead>
<tr>
<th>Documentation</th>
<th>Dependent</th>
<th>Emerging</th>
<th>Assisted</th>
<th>Direct Supervision</th>
<th>Indirect Supervision</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation of <em>patient history</em> is accurate, thorough, and appropriate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Documentation of <em>tests and measures</em> is accurate, thorough, and appropriate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Documentation of <em>evaluation</em> is accurate, thorough and incorporates the biopsychosocial model in the assessment, PT diagnosis and prognosis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Documentation of the <em>plan of care</em> is accurate, thorough and outlines the physical therapy goals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Documentation Comments:**
<table>
<thead>
<tr>
<th>Examination</th>
<th>Dependent</th>
<th>Emerging</th>
<th>Assisted</th>
<th>Direct Supervision</th>
<th>Indirect Supervision</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gathers appropriate information during patient history taking.</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to monitor vital signs</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to select and perform specific ROM and MMT measurements as needed</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to assess patient functional mobility skills (bed mobility, transfers, assisted gait, etc)</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to select and perform other appropriate tests and measures as needed</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to select and implement appropriate standardized outcome measures</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
</tbody>
</table>

Examination comments:

<table>
<thead>
<tr>
<th>Evaluation</th>
<th>Dependent</th>
<th>Emerging</th>
<th>Assisted</th>
<th>Direct Supervision</th>
<th>Indirect Supervision</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to synthesize the results of the examination to arrive at a PT diagnosis</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to synthesize the results of the examination to arrive at a PT prognosis</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to synthesize the results of the examination to develop an appropriate plan of care</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
</tbody>
</table>

Evaluation Comments:

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Dependent</th>
<th>Emerging</th>
<th>Assisted</th>
<th>Direct Supervision</th>
<th>Indirect Supervision</th>
<th>Not Observed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to instruct and perform patient positioning, transfers, and bed mobility</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to instruct and perform gait training with assist devices</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to prescribe and instruct a patient in an appropriate therapeutic exercise program</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to perform appropriate joint mobilizations</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to select and apply physical agents when appropriate</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to deliver patient education in an effective manner</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Able to modify an intervention plan based on patient response and individual differences</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
</tbody>
</table>

Intervention Comments:
Global Assessments of Student Performance:

Based on your overall assessment, is the student performing at a level that is satisfactory for his/her current level of education?

_______ Yes  ________ No

If no, please explain:

Please rate this student’s overall preparedness, at this time, for competent entry level clinical practice:

Below                                                                 At                                                                 Exceeds
Entry Level                                                                 Entry Level                                                                 Entry Level

General Comments:

________________________________________________________________________________________
Clinical Instructor Signature                      Student Signature

________________________________________________________________________________________
Date                                                  Date
Appendix 4

Clinical Performance Instrument (CPI) Performance Dimensions and Rating Scale

© 1997, 2006 American Physical Therapy Association. All rights reserved. For more information about this publication and other APTA publications, contact the American Physical Therapy Association, 1111 North Fairfax Street, Alexandria, VA 22314-1488. [Publication No. E-42]
# Definitions of Performance Dimensions and Rating Scale Anchors

<table>
<thead>
<tr>
<th>Category</th>
<th>Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Performance Dimensions</strong></td>
<td></td>
</tr>
</tbody>
</table>
| Supervision/Guidance      | Level and extent of assistance required by the student to achieve entry-level performance.  
- As a student progresses through clinical education experiences, the degree of supervision/guidance needed is expected to progress from 100% supervision to being capable of independent performance with consultation and may vary with the complexity of the patient or environment. |
| Quality                   | Degree of knowledge and skill proficiency demonstrated.  
- As a student progresses through clinical education experiences, quality should range from demonstration of limited skill to a skilled performance.                                                                                                                       |
| Complexity                | Number of elements that must be considered relative to the task, patient, and/or environment.  
- As a student progresses through clinical education experiences, the level of complexity of tasks, patient management, and the environment should increase, with fewer elements being controlled by the CI.                                                                 |
| Consistency               | Frequency of occurrences of desired behaviors related to the performance criterion.  
- As a student progresses through clinical education experiences, consistency of quality performance is expected to progress from infrequently to routinely.                                                                                                                   |
| Efficiency                | Ability to perform in a cost-effective and timely manner.  
- As the student progresses through clinical education experiences, efficiency should progress from a high expenditure of time and effort to economical and timely performance.                                                                                      |
| **Rating Scale Anchors**  |                                                                                                                                                                                                                                                                                                                                                     |
| Beginning performance     | • A student who requires close clinical supervision 100% of the time managing patients with constant monitoring and feedback, even with patients with simple conditions.  
- At this level, performance is inconsistent and clinical reasoning* is performed in an inefficient manner.  
- Performance reflects little or no experience.  
- The student does not carry a caseload.                                                                                                                |
| Advanced beginner performance | • A student who requires clinical supervision 75% – 90% of the time managing patients with simple conditions, and 100% of the time managing patients with complex conditions.  
- At this level, the student demonstrates consistency in developing proficiency with simple tasks (eg, medical record review, goniometry, muscle testing, and simple interventions), but is unable to perform skilled examinations, interventions, and clinical reasoning skills.  
- The student may begin to share a caseload with the clinical instructor.                                                                 |
| Intermediate performance  | • A student who requires clinical supervision less than 50% of the time managing patients with simple conditions, and 75% of the time managing patients with complex conditions.  
- At this level, the student is proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning.  
- The student is capable of maintaining 50% of a full-time physical therapist’s caseload.                                                                  |
| Advanced intermediate performance | • A student who requires clinical supervision less than 25% of the time managing new patients or patients with complex conditions and is independent managing patients with simple conditions.  
- At this level, the student is consistent and proficient in simple tasks and requires only occasional cueing for skilled examinations, interventions, and clinical reasoning.  
- The student is capable of maintaining 75% of a full-time physical therapist’s caseload.                                                                   |
| Entry-level performance   | • A student who is capable of functioning without guidance or clinical supervision managing patients with simple or complex conditions.  
- At this level, the student is consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning.  
- Consults with others and resolves unfamiliar or ambiguous situations.  
- The student is capable of maintaining 100% of a full-time physical therapist’s caseload in a cost effective manner.                                                                 |
| Beyond entry-level performance | • A student who is capable of functioning without clinical supervision or guidance in managing patients with simple or highly complex conditions, and is able to function in unfamiliar or ambiguous situations.  
- At this level, the student is consistently proficient at highly skilled examinations, interventions, and clinical reasoning, and is a capable of serving as a consultant or resource for others.  
- The student is capable of maintaining 100% of a full-time physical therapist’s caseload and seeks to assist others where needed.  
- The student is capable of supervising others.  
- The student willingly assumes a leadership role* for managing patients with more difficult or complex conditions. |

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Appendix 5

Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction
Terminal CE Block I PT Student Evaluation of Clinical Site

Clinical Site
Location

I received adequate information regarding this clinical experience prior to the start?

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

What else could have been provided during the orientation?

What was the frequency of time you spent with patients/clients in the following diagnostic categories?

<table>
<thead>
<tr>
<th>Category</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Musculoskeletal</td>
<td></td>
</tr>
<tr>
<td>Neuromuscular</td>
<td></td>
</tr>
<tr>
<td>Cardiopulmonary</td>
<td></td>
</tr>
<tr>
<td>Integumentary</td>
<td></td>
</tr>
<tr>
<td>Other (GI, GU, Renal, Metabolic, Endocrine)</td>
<td></td>
</tr>
</tbody>
</table>

What was the frequency of time spent with patients/clients in the following age categories?

<table>
<thead>
<tr>
<th>Age Category</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5 years of age</td>
<td></td>
</tr>
<tr>
<td>6-12 years of age</td>
<td></td>
</tr>
<tr>
<td>13-20 years of age</td>
<td></td>
</tr>
<tr>
<td>21-65 years of age</td>
<td></td>
</tr>
<tr>
<td>65 – 80 years of age</td>
<td></td>
</tr>
<tr>
<td>81-90 years of age</td>
<td></td>
</tr>
<tr>
<td>Over 90 years of age</td>
<td></td>
</tr>
</tbody>
</table>

What was the frequency of time spent with patients/clients in the following continuum of case categories?

<table>
<thead>
<tr>
<th>Case Category</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Department</td>
<td></td>
</tr>
<tr>
<td>ICU</td>
<td></td>
</tr>
<tr>
<td>Acute Care</td>
<td></td>
</tr>
<tr>
<td>Acute Inpatient Rehab</td>
<td></td>
</tr>
<tr>
<td>SNF/Sub-Acute rehab</td>
<td></td>
</tr>
<tr>
<td>Home Health</td>
<td></td>
</tr>
<tr>
<td>Outpatient Clinic</td>
<td></td>
</tr>
<tr>
<td>Wellness/Fitness/Prevention</td>
<td></td>
</tr>
<tr>
<td>Hospice</td>
<td></td>
</tr>
</tbody>
</table>

What was the frequency of time spent in the following components of patient/client care?

<table>
<thead>
<tr>
<th>Component</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination: Screening</td>
<td></td>
</tr>
<tr>
<td>Examination: History Taking</td>
<td></td>
</tr>
<tr>
<td>Examination: Systems Review</td>
<td></td>
</tr>
<tr>
<td>Examination: Tests and Measures</td>
<td></td>
</tr>
<tr>
<td>Evaluation</td>
<td></td>
</tr>
<tr>
<td>Diagnosis</td>
<td></td>
</tr>
<tr>
<td>Prognosis</td>
<td></td>
</tr>
<tr>
<td>Plan of Care</td>
<td></td>
</tr>
<tr>
<td>Interventions</td>
<td></td>
</tr>
<tr>
<td>Outcomes Assessment</td>
<td></td>
</tr>
</tbody>
</table>
How frequently did the clinic staff maintain an environment conducive to professional practice and growth in the following areas?

| Providing a helpful and supportive attitude for your role as a PT student. |
|---|---|
| Providing effective role models for problem solving, communication, and teamwork. |
| Demonstrating high morale and harmonious working relationships. |
| Adhering to ethical codes and standards. |
| Being sensitive to individual differences. |
| Using evidence to support clinical practice. |
| Being involved in professional development activities. |
| Being involved in district, state, regional, and/or national professional activities. |

What suggestions could you offer to improve the environment for professional practice and growth?

Were there other students at this clinical site during your clinical experience? Identify the ratio of students to CIs for your clinical experience.

How did the clinical supervision ratio in the previous question influence your learning experience?

In addition to patient/client management, what other learning experiences did you participate in during this clinical experience?

Please provide any logistical suggestions for this location that may be helpful to future students. Include costs, names of resources, housing information, food, parking, etc.

---

**Summary of Clinical Experience**

Overall, how would you assess this clinical experience?

What specific qualities or skills do you believe a PT student should have to function successfully at this clinical site?

During this clinical experience, were you exposed to content not included in your previous PT academic preparation?

During this clinical experience, were you exposed to content not included in your previous PT academic preparation?

What suggestions would you offer to future physical therapy students for this clinical education experience?

What do you believe were the strengths of the PT academic preparation and/or coursework for this clinical experience?

What curricular suggestions do you have that would have prepared you better for this clinical experience?
Appendix 6

Graduate Student Review & Promotion
GRADUATE STUDENT REVIEW AND PROMOTION

Rules and Regulations of the Graduate College: The Rules and Regulations of the Graduate College apply to all students in the Department of Physical Therapy and Rehabilitation Sciences. These rules and regulations are published in the University’s General Catalog and a manual is available online at: https://grad.uiowa.edu/academics/manual

Doctoral students in the Department of Physical Therapy and Rehabilitation Science are to maintain a 3.0 GPA on all courses in our curriculum. This does not include any transferred graduate credits not included in our curriculum.

A doctoral student on regular status shall be placed on academic probation if, after completing 9 hours of graded (A, B, C, D, F) graduate work at The University of Iowa, the student’s cumulative grade-point average falls below 3.00. A student will be returned to good standing when his or her cumulative grade-point average becomes equal to or greater than 3.00. If, after completing 9 more semester hours of graded (A, B, C, D, F) graduate work at the University, the student’s cumulative grade-point average remains below 3.00, the student may be dropped from the degree program and denied permission to reregister within any Graduate College doctoral degree program. If there are extenuating circumstances, as determined by the departmental Graduate Student Review and Promotions Committee, and upon the approval of the DEO, a petition may be made to the graduate college for the student to have additional time to meet the 3.00 GPA requirement. If there are no approved extenuating circumstances the student may apply for and be accepted into a nondoctoral degree or certificate program. If, after completing the second 9 semester hours, the cumulative grade-point average is at least 3.00, the student is returned to good standing.

If a student receives a grade of D, F, or U in a course, they will not receive Graduate College credit and will be unable to continue in the program until graduate credit for that course is earned. If a student receives a grade of Incomplete in a course, they may be allowed to continue in the program during remediation. The Incomplete turns into an F if not remediated in a timely manner (within one semester when feasible).

Rules and Regulations of the Department of Physical Therapy & Rehabilitation Science:

The progress of all students will be evaluated by the Graduate Student Review and Promotion Committee following the completion of each academic session. The progress of individual students can be evaluated at any time as deemed necessary by circumstances or by the DEO. The results of these evaluations will be reported to the DEO and the Faculty, Staff, and Student Affairs Committee. All recommendations from this committee are advisory to the DEO.

Committee Composition
- Three faculty, one PhD student, one DPT2 student.
- Student members will be recommended by their peers and approved by faculty committee members.
- DPT student members will serve one-year terms beginning June 1st each year. The PhD student member will serve one-year terms beginning September 1st each year.
- Students are non-voting members.
- Committee members will receive orientation and education regarding committee responsibilities by senior committee members.

Scope of the Committee
The purpose of the Graduate Student Review and Promotions Committee is to ensure that each person who graduates from The University of Iowa Department of Physical Therapy and Rehabilitation Sciences has adequate skills, knowledge, and judgment to assume appropriate professional responsibilities within the physical therapy profession. To perform these duties, the committee will depend upon the cooperation, advice and judgment of faculty, students and administration.
As deemed appropriate, the Graduate Student Review and Promotions Committee may request a meeting with a student in order to explore issues that are impeding their progress and/or their status in the program. The scope of the Review and Promotions Committee includes, but is not limited to, the following:

- Students who fail to receive a grade with Graduate College credit (A thru C - carries Graduate College credit) in courses or clinical education experiences.
- Unprofessional or unethical behavior such as plagiarism, dishonesty, theft, cheating, violation of patient confidentiality, alcohol or substance abuse-related violations, etc.
- Investigation of suspected academic misconduct. This may include review of video and/or electronic data recorded by the Respondus LockDown Browser, Respondus Monitor, Proctorio remote proctoring service, or other software used while administering exams.
- Information obtained from criminal background checks will be assessed by the Chair of the Admissions Committee in concert with the Committee. The DEO will maintain the confidentiality of individuals except in cases where the incident is viewed to potentially impact professional behavior, necessitating review by the Graduate Student Review and Promotions Committee.
- Negative comments on clinical education evaluations.
- Persistently poor or marginal academic or clinical performance.
- Requests to extend the period of study beyond the usual time allowed.
- Former students applying for reinstatement to the Department after withdrawal or dismissal.
- Other purposes as determined by the Department DEO in consultation with the Review and Promotions Committee.

Except under extenuating circumstance that are communicated in writing, failure of the student to appear before the committee will be viewed as a negative response by the student when the issue is deliberated by the committee.

**Appearing before the Review and Promotions Committee**

- A written request will be provided outlining the purpose for an independent appearance before the Review and Promotions Committee.
- Students are expected to answer questions posed by the Committee members during the interview. In addition, if desired, students may bring a prepared statement to read at the meeting.
- The student may not contact the Review and Promotion Committee members in advance of or following the meeting regarding committee actions or deliberation.
- All deliberations and actions of the committee will be held in the strictest confidence.

**Review and Promotion Committee Actions**

- Following the interview with the student, Committee members will discuss the student’s situation and faculty members will vote on a recommendation to be sent to the Department DEO.
  - The recommendations of the Review and Promotions Committee, which may range from taking no action to dismissal from the Program, are forwarded to the DEO for ratification or amendment. Examples include, but are not limited to:
    - requiring the student to repeat or otherwise remediate academic deficiencies
    - a plan of action or recommendation for corrective action on issues of professionalism or behaviors
    - suspending the student or placing the student on leave of absence for a specified time or until specific conditions are met
    - changes in the student’s program of study. This may include requiring the student to undertake an extended academic schedule
    - dismissal from the Program
- When voting on a recommendation, three faculty members must be present at the meeting and a simple majority is required for passing a recommendation.
- Review and Promotion Committee members may recuse themselves from an interview and discussion on a student if they feel there may be a conflict of interest. Faculty members who recuse themselves will temporarily be replaced by faculty members appointed by the Department DEO.
• Official paperwork outlining the Committee’s recommendation will be delivered to the Department DEO and the student within 3 working days of the Review and Promotion Committee meeting.

Department DEO Actions
• The Department DEO will review the recommendations of the Committee and make a decision on the recommendation and/or any other action as determined by the DEO within 3 working days of the Review and Promotion Committee meeting and indicate that decision with his signature.
• A student may schedule an appointment with the DEO to discuss the Review and Promotion Committee’s recommendation prior to the DEO’s decision and within the 3 working days referenced above.
• A student wishing to appeal the DEO’s decision must submit a letter to the DEO within 3 working days of receiving notification of that decision, with a copy to the Graduate College Associate Dean of Academic Affairs.

Grievance Procedures:
In general, the Department adheres to the policies of the current issue of the Manual of Rules and Regulations of the Graduate College as specified in Section IV.E. The manual is available online at: [https://grad.uiowa.edu/academics/manual](https://grad.uiowa.edu/academics/manual)

This manual also states that "If a student judges the dismissal decision improper, the student has a right to review. Each department shall establish procedures for handling such reviews." The following procedures will be followed by the Department of Physical Therapy and Rehabilitation Sciences.

1. The Department DEO will appoint a minimum of three graduate faculty members, one PhD student, and one DPT2 student at the beginning of each academic year to serve, if called upon, as members of the Grievance Committee. (Members will be different from those currently serving on the Graduate Student Review and Promotions Committee.)
2. Prior to the formal initiation of the grievance process, a student should discuss the grievances with the Department DEO to resolve such grievances informally.
3. If the student continues to feel the decision is improper and cannot be resolved through the discussion provided for in #2 above, the student shall forward a written request for review of the decision to the Department DEO. The letter should outline the grievances in reasonable detail. In addition, the student should choose two of the graduate faculty members and students from those chosen to serve on the committees, to constitute his/her review committee.
4. The Department DEO shall designate a chairman of the review committee from those committee members identified by the student.
5. The review committee chairman shall convene the committee as soon as possible. Normally it is expected that the review process will be completed within two weeks of its formal initiation by the student.
6. The student requesting the review shall have the opportunity to discuss the grievances directly with the committee and provide any supporting material relevant to the review.
7. The review committee shall then determine what additional information or consultation is necessary to complete their review.
8. Upon review of relevant information, the review committee shall communicate their findings and recommendations in writing to the student and the Department DEO. The committee’s report should include major considerations in the decision.

The Graduate College policy is that questions involving judgment of performance will not be reviewed beyond the Department level. If, however, the student feels there has been unfairness or some procedural irregularity concerning dismissal, the student may pursue a grievance according to the Academic Grievance Procedure (AGP) established by the Graduate College. The AGP is available in the Graduate College. The student should consult with the Graduate College prior to initiating an academic grievance. If a Department decision is appealed, the Dean may appoint an appeals committee of faculty and students from a slate of nominees prepared by the Graduate Council and the Graduate Student Senate to recommend an appropriate course of action. The student should inquire at the Office of the Dean for further information. If the student disagrees with the decision made by the Dean, the student may request a review by the Provost.
Appendix 7

Clinical Site Description Form
Name of Clinical Site:
Address:
SCCE Name:
SCCE Email Address:

Clinical practice settings available at this clinical site:

<table>
<thead>
<tr>
<th>Setting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Department</td>
</tr>
<tr>
<td>Acute Care</td>
</tr>
<tr>
<td>Acute Inpatient Rehabilitation</td>
</tr>
<tr>
<td>Subacute Inpatient Rehabilitation</td>
</tr>
<tr>
<td>Outpatient Rehabilitation</td>
</tr>
<tr>
<td>Rural Health/Critical Access Hospital</td>
</tr>
<tr>
<td>Home Health</td>
</tr>
<tr>
<td>Extended Care Facility</td>
</tr>
<tr>
<td>Fitness/Wellness</td>
</tr>
<tr>
<td>School/Preschool</td>
</tr>
<tr>
<td>Industrial/Occupational Health Facility</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

Patient Population:

<table>
<thead>
<tr>
<th>Age Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 years of age</td>
</tr>
<tr>
<td>13-21 years of age</td>
</tr>
<tr>
<td>22-65 years of age</td>
</tr>
<tr>
<td>Over 65 years of age</td>
</tr>
</tbody>
</table>
Health Conditions Encountered:

<table>
<thead>
<tr>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Musculoskeletal</td>
</tr>
<tr>
<td>Neuromuscular</td>
</tr>
<tr>
<td>Cardiopulmonary</td>
</tr>
<tr>
<td>Integumentary</td>
</tr>
<tr>
<td>Cognitive/Mental Health</td>
</tr>
<tr>
<td>Medically Complex, Multi-System Disease/Impairment</td>
</tr>
<tr>
<td>Other (GI, GU, Renal, Metabolic, Endocrine)</td>
</tr>
</tbody>
</table>

Psychosocial Conditions Encountered:

<table>
<thead>
<tr>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of family and/or friend support</td>
</tr>
<tr>
<td>Limited Employment or Unemployment</td>
</tr>
<tr>
<td>Lack of Medical Insurance Coverage</td>
</tr>
<tr>
<td>Inadequate Housing</td>
</tr>
<tr>
<td>Poor Health Literacy</td>
</tr>
<tr>
<td>Language Barrier</td>
</tr>
</tbody>
</table>

Does your clinic have hours outside of Monday-Friday, 8:00 am – 5:00 pm?

Describe the pace of this clinical environment.

- Slow-paced, frequent breaks from patient care activities during the work day. Significant flexibility _____ available in the clinical care schedule; most days of the work week.

- Medium-paced, occasional breaks from patient care activities during the work day. Transitions from _____ one activity to the next were completed in a fairly predictable pattern; most days of the work week.

- Fast-paced, minimal break from patient care activities during the work day. Quick transitions from _____ one activity to the next, sometimes in an unpredictable pattern; most days of the work week.

Describe your clinical site culture. How would you describe your clinical site to students? What do you value about your clinical environment and/or clinical practice?
Learning Experiences:

<table>
<thead>
<tr>
<th>Experience</th>
<th>Required</th>
<th>Available</th>
<th>Not available</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop and present an inservice</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Direct and supervise PTAs and other support personnel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participate in administrative and business practice management</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional readings/project</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide service to community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Care Rounds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Co-treatments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observations with other health care providers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observe surgery</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Journal Clubs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department/Committee Meetings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Association with a physical therapy residency program</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Association with PT students from other DPT programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Association with students from other health care fields</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Pre-Clinical Requirements:

Clinical site requires a drug screen:

Clinical site requires an additional background check. (University of Iowa DPT students are required to complete national and state of Iowa background checks within the first 6 weeks of starting the curriculum):

Pre-clinical orientation and/or additional training is required prior to arrival:

- [ ] Drug Screen
- [ ] Additional Background check
- [ ] Preclinical orientation/training required prior to arrival

Professional Appearance and Dress Code Policy for this Clinical Site:
Housing Options:

- Student is responsible for housing
- Clinical site can typically provide student with housing suggestions
- Clinical site provides student housing
  Estimated Cost:

Transportation Options:

Food/Meal Options:
Appendix 8

Affiliation Agreement
AFFILIATION AGREEMENT
BETWEEN
The University of Iowa
AND
[facility]

THIS AGREEMENT (“Agreement”) is executed on ______________, 2021 between The University of Iowa, Department of Physical Therapy and Rehabilitation Science, 1-252 Medical Education Building, Iowa City, IA  52242, for and on behalf of the Doctor of Physical Therapy Program and sometimes referred to as “School” in this Agreement and ______________(facility and location), sometimes referred to as “Facility” in this Agreement.

WITNESSETH:

WHEREAS, the School is conducting an educational program and desires to obtain clinical experiences for its students enrolled in the Doctor of Physical Therapy Program.

WHEREAS, the Facility has facilities and is willing to provide clinical affiliation and clinical education experiences at the Facility for students enrolled in the Program.

WHEREAS, the School and Facility have the following common objectives: (1) to provide clinical experience in terms of patient and related instruction for the students of the School; (2) to improve the overall educational program of the School by providing opportunities for learning experiences that will progress the students to advanced levels of performance; (3) to increase contacts between academic facilities and expertise; and (4) to establish and operate a Clinical Education Program.

NOW, THEREFORE, for and in consideration of the foregoing, and in further consideration of the mutual benefits, the parties of this agreement agree as follows:

(1) GENERAL INFORMATION

a. This Agreement must be reviewed and signed by both Facility and School prior to the beginning of the student’s clinical experience.

b. The period of time for each student’s clinical education will be mutually agreed upon at least one month before the beginning of the Clinical Education Program.

c. The number of students eligible to participate in the Clinical Education Program will be mutually determined by agreement of the parties and may be altered by mutual agreement.
RESPONSIBILITIES OF THE SCHOOL

a. The School shall assure that all students have received a physical examination prior to the beginning of the clinical experience.

b. The School will maintain records for verification of each student's immune status for tetanus/diphtheria, measles, mumps, rubella, chicken pox, and tuberculin skin test (2-step) (or negative chest x-rays) and provide these to the Facility upon request. The School shall maintain records that each student has received the hepatitis B vaccine (the student may be in the process of receiving the series of shots) or a signed waiver. The Student will provide these records to the Facility upon request.

c. The School will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the curriculum.

d. The School will designate an academic faculty member, the Academic Coordinator of Clinical Education, to coordinate with a designee of the Facility (the Center Coordinator of Clinical Education) the assignment to be assumed by the student participating in the Clinical Education Program.

e. The School may designate other academic faculty members who shall be responsible for the instruction and supervision of students during clinical learning experiences at the Facility. The faculty members shall coordinate with the Center Coordinator of Clinical Education.

f. The School will be responsible for the academic evaluation of participating students and may consult with the Facility about the student’s experience at the Facility.

g. The School agrees to abide by applicable privacy and confidentiality laws and regulations and to inform all students of the laws relating to health information.

h. The School shall provide at all times during the term of this Agreement professional liability insurance coverage for its students participating in the program at the Facility with limits of at least $1,000,000 per occurrence and $3,000,000 aggregate. The School shall provide the Facility with a certificate evidencing such liability insurance upon request.

i. Subject to the limits and without waiving any immunities provided under applicable law (including constitutional provisions, statutes and case law) regarding the status, powers and authority of the School or the School’s principal(s), the School accepts responsibility for third party claims to the extent directly attributable to the School’s negligence in performing its obligations under this Agreement.

j. The School shall remove a student from the Clinical Education Program if the Facility or student requests removal from the Program pursuant to Section 3(c). This removal shall occur immediately upon receipt of such request.
k. The School completes a comprehensive background investigation of the student upon the student’s admission to the program. The background investigation includes a criminal background check and other checks related to the past work experience and other possible licensures of the student. Students are also required on an annual basis to disclose in writing any criminal convictions that have occurred within the past year. If any information received reveals criminal or fraudulent behavior, the School will promptly notify the Facility for re-assessment of student’s assignment.

(3) RESPONSIBILITY OF THE FACILITY

a. The Facility shall provide reasonable space and equipment to the students for clinical experience.

b. The Facility shall maintain complete records and reports on each student’s performance and provide an evaluation to the School on forms provided by the School.

c. The Facility shall have the right and may request the School to withdraw from the Clinical Education Program any student whose performance is unsatisfactory, whose personal characteristics prevent desirable relationships within the Facility, or whose health status is hazardous to the Facility’s patients or personnel or it is detrimental to the student’s successful completion of the clinical education assignment. To assist the School with its due process obligations to its students, Facility will provide written documentation for the request for withdrawal of any student from the Clinical Education Program.

d. The Facility shall at all times be responsible for all aspects of patient care.

e. Facility shall be responsible for supervision of participating students.

f. The Facility shall, on a reasonable request, permit the inspection of the clinical facilities, services available for clinical experiences, student records and other such items pertaining to the Clinical Education Program by the School or agencies charged with the responsibilities for accreditation of the program.

g. The Facility shall designate and submit in writing to the School for acceptance the name and professional and academic credentials of a clinical designee to be responsible for the Clinical Education Program. That person shall be called the Center Coordinator of Clinical Education.

h. The Facility shall immediately notify the School in writing of any change or proposed change of the Center Coordinator of Clinical Education.

i. The Facility shall indemnify and hold the School harmless from and against all liability, loss, damage, cause of action, cost and expense, including reasonable attorney fees arising out of or in connection with any activity undertaken by the Facility, including Facility employees, in performing their duties and responsibilities under the Agreement or arising from a breach of the terms of this Agreement, provided that such liability, loss, damage, cause of action, cost and expense is not the result of the negligence of the
School or its students.

j. The Facility will make available emergency care for students in the event of illness or accident while at the Facility, in accordance with the Facility’s policies. The cost for emergency care shall be the responsibility of the student.

k. The Facility will not restrict access to the program for reasons relating to race, creed, color, religion, national origin, age, sex, pregnancy, disability, genetic information, status as a U.S. veteran, service in the U.S. military, sexual orientation, gender identity, associational preferences, or any other classification that deprives the person of consideration as an individual, and that equal opportunity and access to facilities shall be available to all.

(4) RESPONSIBILITY OF THE STUDENT

The student:

a. is responsible for following all policies of the Facility;

b. will have completed Adult Dependent and Pediatric Abuse education;

c. will be CPR certified per the American Heart Association guidelines;

d. is responsible for reporting to the Facility on time and following all established regulations during the regularly scheduled operating hours of the Facility; and

e. will not submit for publication any material relating to the Clinical Education Experience without prior written approval of the Facility and the School.

(5) MISCELANEOUS

a. It is understood and agreed that the students are not employees of the Facility for any purposes and are not and will not be eligible for any employee benefits. The students will not receive reimbursement for their activities at the Facility and will not be provided worker's compensation benefits, life insurance or hospitalization insurance. Such students shall, however, at all times be subject to the Facility’s policies and regulations concerning the Facility’s operating and administrative and procedural functions.
(6) TERM OF AGREEMENT, MODIFICATION

a. This agreement is for a term of five (5) years. This agreement will terminate at five (5) years without written notice. This agreement may be terminated by either party with or without cause on 30 days prior written notice to the other party.

b. It is understood and agreed that the parties to this agreement may revise or modify this agreement by written amendment when both parties agree to such amendment.

c. This agreement shall be governed by Iowa law and the parties agree to bring any actions concerning this agreement in Johnson County Iowa District Court.

The University of Iowa

_______________________________________   __________________________________
Richard K. Shields, PT, PhD
Chair & DEO, Department of Physical Therapy & Rehabilitation Science

Date: __________________________________  Date: _____________________________

Patricia Winokur, MD
Executive Dean, Carver College of Medicine

Date: _________________________________

_______________________________________
David W. Kieft
University Business Manager

Date: _________________________________
Appendix 9

Student Information Sheet
THE UNIVERSITY OF IOWA  
DEPARTMENT OF PHYSICAL THERAPY & REHABILITATION SCIENCE  
Student Information Sheet

**Purpose:** The primary purpose of this form is to assist the student in identifying goals for the nine-week terminal clinical experience which will help the clinical instructor plan learning experiences.

**Directions:** It is the student’s responsibility to complete this form and send it to the Site Coordinator of Clinical Education at the clinical site.

<table>
<thead>
<tr>
<th>Student's Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Start Date:</td>
</tr>
<tr>
<td>Clinical Site (Name)</td>
</tr>
<tr>
<td>Student Address During Clinical Experience</td>
</tr>
<tr>
<td>Student's Phone</td>
</tr>
<tr>
<td>Student's E-mail</td>
</tr>
</tbody>
</table>

**EMERGENCY CONTACT** (Person to be notified in case of accident or injury):

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
</tr>
<tr>
<td>Phone</td>
</tr>
</tbody>
</table>

**GOALS AND OBJECTIVES:** The skills I hope to strengthen or gain in consideration with the resources of this experience are:

1.  

2.  

3.  

4.  

Other comments, questions, or concerns:

The address where I can be contacted during the month prior to my arrival at your facility is:
Appendix 10

University of Iowa
Policy on Student Mistreatment
STUDENT MISTREATMENT
Students at the Carver College of Medicine can excel because the College maintains and expects an academic environment that is free from student mistreatment. Several reporting and counseling avenues exist at the University of Iowa for students who have been mistreated. In addition to those services, students are encouraged to raise any concerns with their academic advisor, or any other contact within the department. We have adopted the College of Medicine’s Medical Education Committee AMA guidelines to define physical therapy student mistreatment:

On the behavioral level, mistreatment may be operationally defined as behavior by healthcare professionals and students which is exploitive or punishing. For the purposes of this policy, examples of mistreatment include: physical punishment, physical threats, or violence; sexual harassment or sexual assault; discrimination based on race, creed, color, national origin, age, sex, disability, sexual orientation or gender identity; repeated episodes of psychological punishment of a student by a particular superior, such as public humiliation, threats, intimidation, or removal of privileges; grading used to punish a student rather than to evaluate objective performance; assigning tasks for punishment rather than educational purposes; requiring the performance of personal services; taking credit for another individual’s work; intentional neglect or intentional lack of communication.

REPORTING MISTREATMENT
Student mistreatment should be reported as follows:

- **Crimes.** Students who are the victims of misconduct that is also a crime are encouraged to contact the University’s Department of Public Safety (“DPS”); [http://police.uiowa.edu/](http://police.uiowa.edu/) Students should call 911 in an emergency. The Carver College of Medicine may refer allegations of mistreatment that may constitute criminal behavior to DPS.

- **Violence.** Students are encouraged to report incidents of violence to the College or to the University’s Department of Equal Opportunity and Diversity (“EOD”); [http://diversity.uiowa.edu/office/equal-opportunity-and-diversity](http://diversity.uiowa.edu/office/equal-opportunity-and-diversity). The Carver College of Medicine may refer allegations of mistreatment that may constitute a violation of the University’s violence policy to EOD for investigation and resolution.

- **Sexual Harassment/Assault.** Students are encouraged to report criminal incidents of sexual harassment or sexual assault to DPS; [http://police.uiowa.edu/](http://police.uiowa.edu/) Complaints may also be forwarded to the College, to the University’s Department of Equal Opportunity and Diversity (“EOD”); [http://diversity.uiowa.edu/office/equal-opportunity-and-diversity](http://diversity.uiowa.edu/office/equal-opportunity-and-diversity), the Office of the Dean of Students [http://dos.uiowa.edu/](http://dos.uiowa.edu/), or to the Sexual Misconduct Response Coordinator. [http://www.uiowa.edu/homepage/safety/sexual-misconduct.html](http://www.uiowa.edu/homepage/safety/sexual-misconduct.html) The Carver College of Medicine will refer allegations of sexual assault to the appropriate University office for investigation and resolution. The College may refer allegations of sexual harassment to the appropriate University office for investigation and resolution.

- **Other Mistreatment:** All other types of mistreatment covered by this policy will be investigated and resolved by the Carver College of Medicine.
Appendix 11

Compliance Training & Criminal Background Checks
COMPLIANCE SCREENING AND TRAINING

UIHC Mandatory Health Screening, Immunization Requirements & Compliance Training

University of Iowa practicum students or interns working at University of Iowa Hospitals and Clinics (UIHC) must complete required health screenings, immunizations, and compliance trainings prior to the start of their UIHC experience. UIHC has a core set of compliance trainings and other requirements that all students must complete. Your program may have additional requirements, in addition to those listed below.

All of the following courses can be assessed online through the CQ system. If you completed a course for prior or current work in UIHC, ask your program coordinator about whether or not you are required to complete it again.

**Required Courses:**

- **H00373:** Cultural Diversity and Limited English Proficiency Plan (*once*)
- **H01156:** Data Privacy (*annually*)
- **H00447:** HIPAA Training (*once*), then **H00441:** Fraud, Waste, and Abuse (*annually thereafter*)
- **H00403:** New Hire Orientation: Students and Part-Time Staff (*once*)
- **H00448:** Patient and Staff Rights and Responsibilities (*once*)
- **H02037:** Safety/Infection Control (Initial) (*once*), then: **H02038:** Safety/Infection Control (Renewal) (*annually*)
- **H00446:** Domestic Violence (*every 5 years*)
- **H00462:** Organ, Tissue and Eye Donation
- **H02037:** Safety/Infection Control (Initial) (*once*), then: **H02038:** Safety/Infection Control (Renewal) (*annually*)
- **H02084:** Take Five: Best Practices During a Pandemic
- **H02076:** Personal Protective Equipment & Isolation Refresher for COVID-19
- **H00446:** Domestic Violence (*every 5 years*)
- **H00462:** Organ, Tissue and Eye Donation
- **H02037:** Safety/Infection Control (Initial) (*once*), then: **H02038:** Safety/Infection Control (Renewal) (*annually*)
- **H02084:** Take Five: Best Practices During a Pandemic
- **H02076:** Personal Protective Equipment & Isolation Refresher for COVID-19

In addition, the following mandatory health screenings and immunizations are required. These can be completed at University of Iowa Student Health and Wellness (see [https://studenthealth.uiowa.edu](https://studenthealth.uiowa.edu) for hours and locations). Additional information is available on the University Employee Health Clinic (UEHC) website at [https://www.uihealthcare.org/uehc](https://www.uihealthcare.org/uehc) under the Employee and Volunteer Information tab. Visit the UEHC website for explanations of requirements.

**Mandatory Health Screening and Immunization Requirements:**

- Four-Year (Initial) Health Screening (*every 4 years*)
- *Measles, (Rubeola), Mumps, Rubella* Immunity Screenings (*once*)
- TB Screening (*annually*)
- Varicella (*once*)
- Annual Influenza Response (*every year during the months of September – March*)

* All students entering the University are required to show proof of two MMR (Measles, Mumps, Rubella) vaccinations. See [https://studenthealth.uiowa.edu/services/immunizations](https://studenthealth.uiowa.edu/services/immunizations) for more information. Practicum students who met this requirement, or received a religious exemption, do not need to complete these screenings again. See [Student Health Status](https://myuiui.edu) on MyUI to review or print a record of your student health compliance and immunization record.
HR Checklist Health Screening Requirements

**Documentation:**
All documentation must contain full name and date of birth. Documentation is defined as a photocopy of the medical record or an immunization record signed by a healthcare provider or previous employer.

**TB Screening Requirements (must meet one of the following):**
- Two negative TB skin tests from any time in the past (one being within the past 3 months)
- A blood assay for TB (IGRA, T-Spot, QuantiFERON) done within the past 3 months

**OR**
- Proof of a previous positive TB screening result:
  - Positive TB skin test documentation, plus additional testing that was done at the time of the positive TB skin test (i.e. IGRA [blood test], chest x-ray, and/or treatment)
  - A positive IGRA (blood test), plus chest x-ray results from the time of the positive test
  - A chest x-ray stating the reason for the exam is a positive TB skin test/history of positive TB skin test and treatment information

**Proof of Varicella (Chicken Pox) Immunity (must meet one of the following):**
- 2 doses of vaccine
- Positive blood test (IgG) showing immunity
- Diagnosis of shingles (herpes zoster) or chickenpox (varicella) at the time of disease by healthcare provider

**Proof of Measles, Mumps, and Rubella Immunity (must meet one of the following):**
- 2 doses of vaccine given after 1967
- Positive blood test (IgG) showing immunity

**Proof of Influenza vaccine from current season if previously received (August-March)**

For questions please contact the University Employee Health Clinic at 6-3631 / employee-health@uiowa.edu
CRIMINAL BACKGROUND CHECK

Enrollment in the DPT Program will be contingent on a successful criminal background check. At the time of application, applicants are required to disclose and explain any felony or misdemeanor convictions. Those applicants accepting admission offers will be contacted by the PTCAS background check service vendor, Certiphi Screening, Inc., via email to start the background check process. Their email will include a link to a secure, online form that will request additional information and your consent to initiate the background check process. The background check fee is currently $75 per applicant and will be paid to Certiphi by the applicant. The applicant is given an opportunity to review the results before they are released to us. Applicants should also be aware that some clinical education sites require drug screening for students performing clinical rotations.

CPR

All students are required to complete the American Heart Association Basic Life Support for the Healthcare Provider. This certification must be maintained throughout the curriculum. The cost of this course is the responsibility of the student. Courses are available through the University of Iowa Emergency Medical Services Learning Resources Center.
Appendix 12

Health Screening &
Health Insurance Information
Requirements for Health Science Students

**MMR (measles, mumps, rubella):** (2) vaccines or positive antibody titres (blood tests) of all three diseases. (2) doses of each of the single component vaccines are acceptable. The first MMR must be given after the first birthday to be valid, and the MMR vaccines must be at least 28 days apart. For health science students, there is no age exemption for MMR.

**Hepatitis B:** (3) vaccine series, completed at the appropriate intervals, followed by antibody titre 1 month or more after third vaccine. The titre is REQUIRED, even if series was completed as a child. If antibody titre is negative, follow the algorithm form on our website for boosters and re-checking titre. It can be found on our Requirements & Forms page, in the Health Science Students section.

**Varicella (chicken pox):** (2) vaccines or positive antibody titre. Currently accept report of disease history. This will no longer be accepted in 2016. If you had varicella as a child, you must have a titre to document immunity.

**Tetanus/diphtheria/pertussis:** (1) Td (tetanus/diphtheria) at least every 10 years. Must have documentation of (1) Tdap (Tetanus, diphtheria, pertussis) vaccine.

**TB (Tuberculosis) screening:** A two-step TB skin test (TST) or the blood test- IGRA (Interferon Gamma Release Assay-Quantiferon Gold or T-Spot) is required at the start of your program. Some clinical sites will require a repeat test every 12 months for compliance. If you have never had any TB skin testing, the two-step TST is done as follows: The first test is placed, and results are read in 48-72 hrs. The second test is placed at least 7 days after the placement of the first test and read at 48-72 hrs. Send documentation of both tests, and include placement date, reading date, result and mm induration. Having (2) TSTs within the same calendar year will meet the two-step requirement. If you have documentation of (1) negative TST in the past 12 months, or documentation of (2) negative TSTs in your past, you only need one more TST to meet the two-step requirement. A TST or IGRA is also required annually. Those with a history of a positive TST or IGRA must provide a copy of the CXR (Chest x-ray) report. If treated for LTBI (Latent TB Infection), provide medication information and treatment dates. Students with a history of a positive TST are also required to complete a symptom assessment initially and annually. The TB Assessment Form is on our Requirements & Forms page, in the Health Science Students section.

**Health Screening:** Complete the Health Screening form once upon entry to the Health Science program. Can be signed by RN, MD, DO, PA, ARNP. The form is on our Requirements & Forms page, in the Health Science Students section.

**Other vaccines recommended by the CDC/ACIP and Student Health & Wellness:**
- **Covid-19:** 2 vaccine series if Pfizer or Moderna, 1 dose series if Johnson & Johnson
- **Meningitis:** if initial vaccination was given before age 16, a booster is recommended
- **Influenza:** many rotation sites and hospitals require this annually
- **Hepatitis A:** (2) vaccine series
- **HPV (human papilloma virus):** (3)-vaccine series for males and females up to age 26

**Health Insurance:** All students are required to maintain health insurance. For details and additional information, visit http://hr.uiowa.edu/benefits/health-insurance-graduate-students. You will automatically be enrolled in the University SHIP health insurance plan unless you provide proof of coverage or select a different plan. Before June 7, you will need to provide Proof of Coverage through MyUI (Student Information, Student Life Management, Student Insurance) if you have your own insurance or submit an enrollment form to select your UI insurance. Otherwise, you will automatically be enrolled in the UI SHIP health insurance program. The UI insurance will be effective July 1st each year.