

**DIVISION OF
PHYSICAL THERAPY**

STUDENT HANDBOOK

2019-2020

(Updated 1.15.20)



NOTICE

The Medical University of South Carolina *Bulletin* and *Student Handbook* contains official university policies.

The Division of Physical Therapy *Student Handbook* is intended to inform students about policy and procedures that are particularly important and specific to the graduate program in Physical Therapy, and to provide helpful information.

The PT Division Policy and Procedure Committee will have regularly scheduled quarterly meetings as well as meetings as needed to monitor, assess, and discuss:

- issues that may arise pertaining to existing policies;
- issues identified by the faculty that may require the development of new or additional policies;
- the effectiveness of all written policies.

All records and actions of the committee can be accessed in the meeting minutes or the policy and procedure matrices, which have been constructed and are maintained by the PT Division Policy and Procedures Committee. (updated 5.19.17)

***Student Handbooks* contain information intended to benefit students. They are not contracts. Student Handbooks are subject to change as University, College, Department, and Division policies may change.**

Please seek advice on particular matters from your faculty advisor or the director for the Division of Physical Therapy.

Students in the Division of Physical Therapy are responsible for following the policies and procedures outlined in this handbook, those located in the Bulletin for the Medical University of South Carolina, and those in the MUSC Student Handbook.

The complete Bulletin can be located at: <https://education.musc.edu/students/enrollment/bulletin>

The CHP Student Handbook can be located at: <https://chp.musc.edu/current-students/college-and-program-handbooks>

For additional information or clarification, contact:

Mark Bowden, PT, PhD
Associate Professor and Director
Division of Physical Therapy
Department of Health Professions
College of Health Professions
Medical University of South Carolina
(843) 792-5036
bowdenm@musc.edu

TABLE OF CONTENTS

1. Program Mission and Learning Objectives
2. Curriculum: Comprehensive Examinations and Course Descriptions
3. Faculty Advising
4. College of Health Professions Academic Progress Guidelines
5. Division of Physical Therapy Academic Guidelines
6. Professional Development Evaluation
7. MUSC Honor Code
8. MUSC Photo Consent
9. Refund Policy
10. Student Incident/Accident Report Form
11. Professional Self-Assessment Form
12. Informed Participation Consent
13. Laboratory Information and Informed Consent
14. Essential Functions and Technical Standards
15. Accommodations for Examinations, Laboratories, and Learning Experiences
16. Attendance
17. Student Conference Financial Support
18. Behavior During Examinations
19. Dress Code
20. Students Requesting Professional Services from Physical Therapy Faculty
21. Requirements for Laboratory Courses (Care of the Facilities)
22. Clinical Education Policies and Procedures
23. Professional Liability
24. Communication
25. Accreditation Status
26. American Physical Therapy Association (APTA)
27. Student Awards and Scholarships
28. White Coat Ceremony
29. Class Advisor
30. MUSC Student Handbook and Student Government Association (SGA)
31. MUSC Support Services/Opportunities
32. MUSC Office of Diversity
33. Important Policy Links
34. Contact Information: College and Division

1. PROGRAM MISSION

The mission of the Doctor of Physical Therapy program is to prepare evidence-based, ethical, inclusive, and compassionate entry-level physical therapists with a diversity of backgrounds and experiences. The program seeks to improve the human experience for the citizens of South Carolina and beyond by emphasizing promotion of health, prevention of disease and injury, and the optimization of movement.

Program Goals:

The goals of the Doctorate of Physical Therapy Program are to:

1. Recruit, educate, and graduate a student population of diverse backgrounds and experiences.
2. Prepare evidence-based, ethical, inclusive, and compassionate students.
3. Provide a curriculum to emphasize promotion of health, prevention of disease and injury, and the optimization of movement.
4. Prepare students to work interprofessionally to improve the health outcomes and human experience of individuals in SC and beyond.

Program Objectives/Outcomes:

Toward these goals, the Doctorate of Physical Therapy Program will:

1. Increase applications, admissions, and enrollment of underrepresented students to reflect healthcare needs of the state of SC and beyond.
2. Achieve 100% pass rate for licensure examinations and 100% employment.
3. Develop a curriculum to meet CAPTE accreditation criteria and consistently evaluate via cumulative assessment (didactic and practical), student surveys and faculty retreats.
4. Obtain and evaluate program feedback from faculty, graduates, therapists' employers, and clinical partners (from surveys, feedback from Director's Advisory Board, and Curriculum Committee meetings and retreats) in development of didactic and clinical training to reflect interprofessionalism and contemporary practice.

Student Goals:

The student goals are that each student will'

1. Perform effective patient/client management through the determination of physical therapy needs of any individual, designing a plan of care that synthesizes best available evidence and individual preferences, implementing safe and effective interventions, and determining efficacy of outcomes.
2. Demonstrate professional behavior that is ethical, inclusive, compassionate and interprofessional in the communication and delivery of services.
3. Conduct independent practice with respect to established institutional, state, federal, and professional standards.
4. Become life-long learners and leaders in the use of research and clinical evidence to expand knowledge and become influential change agents for health care delivery.

Student Objectives/Outcomes:

Upon graduation, all DPT students will:

1. Demonstrate potential for effective patient/client management by scoring at least entry level on each component of the Clinical Practicum-4 CPI and receiving a 100% first-time pass rate on the OSCE assessment.
2. Demonstrate professional behavior by achieving a 100% first-time pass rate on the OSCE assessment; passing all practical assessments in laboratory coursework; and by scoring at least entry level on each component of Clinical Practicum-4 CPI.
3. Demonstrate potential for independent practice by achieving a 100% first-time pass rate on the OSCE assessment; achieving a 100% first-time pass rate on the comprehensive DPT examination; and by

achieving a 100% first-time pass rate on the NPTE licensure exam. In addition, work performance will be qualitatively evaluated via graduate and employer surveys.

4. Demonstrate professional development and consistency with preparation for engagement in life-long learning and leadership. We will monitor the number of students involved with leadership activities while in the program (eg. Division, College, and University leadership). Upon graduation, we will monitor the percentage of graduates who plan to pursue residencies, fellowships, clinical specializations, and professional organization involvement.

2. CURRICULUM

The Physical Therapy curriculum is 3-years in length, beginning in May (summer semester) of the first year, and ending in May of the third year. The curriculum spans 9 semesters and can be found at:

<https://education.musc.edu/students/enrollment/bulletin/colleges-and-degrees/health-professions/doctor-of-physical-therapy/curriculum>. Students in the DPT Program take comprehensive written and practical examinations during the summer semester of the second year in the curriculum. The comprehensive examinations are given prior to the students' second clinical practicum. Course descriptions can be located through the Office of Enrollment Management at the following website:

<https://education.musc.edu/students/enrollment/bulletin/colleges-and-degrees/health-professions/course-descriptions#choices>.

3. FACULTY ADVISING

Students in the MUSC DPT Program are assigned a faculty advisor upon beginning the program. The contribution that faculty advisors make is an essential part of physical therapy education. Advisors are important role models, mentors, and advocates for our students as they experience the challenges and triumphs of their professional education. Division faculty advisors give valuable input into helping students prepare for their professional role as a physical therapist. They serve as resources for academic guidance, professional performance, technical skills/standards, school/life balance, career advising, as well as other areas.

Student Responsibilities:

- Provide advisor with current resume during your first semester and keep updated as needed.
- Provide advisor with your Individualized Development Plan from *Foundations of Physical Therapy* (due no later than fall year 1).
- Contact your assigned faculty advisor no later than midpoint of the designated semester to request the following individual meetings:
 - **summer semester year 1**
 - **spring semester year 1**
 - **fall semester year 2**
 - **summer semester year 3**

Prior to each of these meetings, complete the Professional Self-Assessment Form (appendices) and email your advisor a PDF copy. Failure to initiate any of these designated meetings will result in an Advisement/Concern Form placed in your file with the Professional Performance Committee.

4. COLLEGE OF HEALTH PROFESSIONS ACADEMIC PROGRESS GUIDELINES

The Division of Physical Therapy adheres to the College of Health Professions academic progress guidelines. These are found in the *College of Health Professions Student Policies and Procedures Manual*.

<https://chp.musc.edu/current-students/college-and-program-handbooks>

In addition, physical therapy students must adhere to Division academic progress guidelines.

5. DIVISION OF PHYSICAL THERAPY ACADEMIC GUIDELINES

Students must demonstrate attainment of the necessary knowledge, behaviors and skills for progression in the physical therapy division. The Division of Physical Therapy requires each student to:

1. Maintain a 3.0 (85%) or higher cumulative grade point average (GPA).
2. Demonstrate acceptable ongoing professional development skills and behaviors.
3. Demonstrate acceptable skill requirements (technical standards).

Grades

1. Students receiving an exam or assignment grade below an 80 may be required to contact the instructor or course coordinator within one week of receiving the grade to discuss strategies to improve performance. In addition, students receiving a grade below 80 on any exam are also encouraged to schedule a consultation with the Center of Academic Excellence before the next examination, or the first week of the following semester for examinations given at the end of the semester.
2. A **grade below 75** is considered a failing grade.
3. Students who have questions concerning a grade received on an exam or an assignment for a course **must contact the course instructor within one week from the date the score or grade is released to the student.** This includes the posting of final grades by the Office of Enrollment Management. The instructor will then schedule a meeting with the student to review the student's concerns in a timely manner.
4. Absence from a Final Exam: refer to the CHP Student Policies and Procedures Manual.
5. Appealing an Exam Grade: refer to the CHP Student Policies and Procedures Manual.

Final Clinical Practica (CP2-CP4) Performance and Grade Requirements (updated 11.8.18)

A student who fails to meet the required level of professional competency during any of the final clinical practica (i.e. CP2-CP4) will not be issued a passing grade. Any student who is unsuccessful in earning a passing grade for a practicum will receive a learning contract that will indicate the specific expectations and requirements to successfully complete the subsequent practicum as well as the yet to be passed practicum. The student may be required to remediate prior to repeating the failed practicum. The Director of Clinical Education (DCE) may issue a learning contract to those who pass the practicum, if the clinical instructor and DCE feel that there were certain areas of proficiency requiring additional work. Hardship during a clinical practicum will be considered on a case by case basis by the Division of Physical Therapy faculty.

Indicators of failed performance may include the following:

- Any "red flag" items that are of "significant concern" at the final evaluation.
- Evidence in the form of written documentation demonstrating greater than two areas of "significant concern".
- Written comments indicating lack of progress over the course of the clinical practicum.
- Failure to achieve an appropriate level of performance on the CPI as described in the course materials and syllabus.

If a student is required to repeat a failed or non-completed final clinical practicum (may include IP, WP or WF in CP2-CP4), then he/she will have to register for an additional semester to complete the practicum. Any continuation of a clinical practicum beyond the date of graduation will result in the student having to register for the summer semester and being required to pay tuition for the summer semester, regardless of the length of the practicum. **Because this is a repeated course, the student will not be eligible for financial aid.**

A student may not have more than one active learning contract. Learning contracts will be signed by the student and a faculty representative and are binding contracts with explicit expectations of requirements and expected outcomes. There will be learning contracts written for all clinical practica following a failure or non-completed practicum. Failure of completion of expectations within a learning contract will result in dismissal from the program. In addition, a student may repeat only one clinical practicum. Failure to pass more than one practicum will result in dismissal from the program.

Student academic progress will be discussed and reviewed by Division of Physical Therapy faculty at regularly scheduled faculty meetings and recorded in the minutes. Any student who is experiencing academic difficulty will be contacted by Physical Therapy Division faculty for advising about improvement.

Academic Progress

Notification regarding concerns with academic / professional behavior progress will occur in writing when appropriate throughout a semester, or when appropriate, after grade reports are available from the Office of Enrollment Management. Any student wishing to appeal a decision regarding academic progress should refer to the specified methods found in the *College of Health Professions Student Policy and Procedures Manual* and the MUSC policy on academic review. The applicable MUSC policies may be found at the following website: <https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines>

The following are the academic criteria and consequences for students with problems related to academic progress in the **Division of Physical Therapy**:

Probation:

1. A student with a semester GPA or a cumulative GPA below 3.0 (85%) will be placed on academic probation (see item 5 in this section below for additional details).
2. A student receiving a final grade below 2.0 (75%) but above a 1.0 (70%), he/she cannot continue in the physical therapy curriculum until the course has been retaken and passed with an earned grade of at least 3.0 (85%). However, any student failing in this category must undergo a review by the Academic Progress Committee, which will recommend whether the student takes a leave of absence and returns the following year to retake the failed course or is dismissed from the physical therapy educational program.

Dismissal:

1. A student receiving a final grade of 1.0 (70%) or below in any core course will be dismissed from the physical therapy educational program.
2. If a student, who is currently on academic probation, earns a failing grade in any course (i.e. below a 2.0), the student will be dismissed from the physical therapy educational program.
3. If a student receives a final course grade below 2.0 (75%) but above a 1.0 (70%), he/she cannot continue in the physical therapy curriculum until the course has been retaken and passed with an earned grade of at least 3.0 (85%). However, any student falling in this category must undergo a review by the Academic Progress Committee, which will recommend whether the student takes a leave of absence and returns the following year to retake the failed course or is dismissed from the physical therapy educational program.
4. A student receiving a final grade below 2.0 (75%) in any two-core courses during a single semester will be dismissed from the physical therapy educational program.
5. A student placed on academic probation for greater than any two semesters will be dismissed from the physical therapy educational program.

Example: A student who, at the completion of the summer semester, has a cumulative GPA below a 3.0 will be placed on probation for the fall semester. If the student does not improve his/her cumulative GPA to over a 3.0 in the fall, he/she will again be placed on probation for the spring semester. If the student does not improve his/her cumulative GPA to a 3.0 by the end of the spring semester, he/she will then undergo a review by the Academic Progress Committee, who will recommend either remediation or dismissal from the physical therapy educational program.

*Additionally, a student who fails to achieve a 3.0 semester GPA in any 2 (two) semesters and does not improve to a semester **and** cumulative 3.0 GPA in the immediate semester subsequent to the second semester in which the cumulative 3.0 GPA was not achieved, that student will undergo a review by the Academic Progress Committee and may either be recommended for remediation or be dismissed from the physical therapy educational program.*

Example: If a student earns a semester GPA below a 3.0 in the first summer semester, then earns a high enough GPA in the fall semester to bring his/her cumulative GPA up to a 3.0 at the end of the fall semester, but then fails to maintain a cumulative GPA 3.0 at the end of the spring semester; that student must then bring his/her cumulative GPA up to a 3.0 during the following summer semester. Failure to do so will result in the student undergoing review by the Academic Progress Committee, which will recommend either remediation or dismissal from the physical therapy educational program.

*Academic probation begins at the start of the semester immediately following the semester that a student fails to achieve a 3.0 GPA.

Example: If a student does not score above a cumulative 3.0 in the fall semester, his/her probation period will start with the beginning of the spring semester.

All courses in the physical therapy curriculum are considered to be core professional courses unless they are specifically labeled as *elective courses*. Decisions concerning dismissal from the Division of Physical Therapy for academic issues are made by the Division Director with advisement from the Academic Progress Committee/faculty. Upon advisement from the Academic Progress Committee and the faculty, the Division Director makes all final determinations regarding a student's academic progress.

Any student wishing to appeal a decision regarding academic progress should refer to the specified methods for pursuing student grievances found in the *Bulletin of the Medical University of South Carolina*.

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/academic-review-and-appeal>

6. PROFESSIONAL DEVELOPMENT EVALUATION PROCESS

The Division of Physical Therapy has adopted a code of professional conduct which all students are expected to follow. Each student's professional conduct is continually monitored and assessed by the faculty based on the criteria listed below, both in academic courses and clinical practica, the Professional Performance Committee, and when necessary during routine faculty meetings. The Division process, along with the University Policy on Professionalism **Standards of Conduct for Students** are intended to assure expectations of behaviors are clearly communicated and supported.

Reporting: Students may submit complaints of unprofessional conduct a letter to the Division Director (either signed or unsigned) with details of the alleged concern as well as any materials which may be needed for an investigation into the concern. The concern will be brought forward to members of the Professional Development Committee to discuss, document and decide on any needed investigations.

If warranted, the committee (in part or whole) may request a meeting with the student to discuss the alleged violation. The meeting should include prior written notice to student of allegations, opportunity for

clarifications on both side, access to any supporting materials, time for the student to address concerns to those present and a plan to address concerns, which will be sent in writing following the meeting. The student is permitted to have an advisory person present during the procedure but that person is not permitted to speak on the student's behalf.

Professionalism issues may be considered concurrently with academic progress and performance issues. The standard of Professionalism is expected to be upheld throughout the duration of the students tenure at MUSC as well as for their career. Thus the students entire professionalism history may be considered relative to an alleged violation.

The DPT Professionalism Development Committee will make recommendations to the PT faculty regarding severity of professionalism issues that need to be addressed by committee; program director; or faculty.

Incidents of non-adherence will be addressed with the student (or students) not in compliance, and he/she/they will be allowed the opportunity to correct the issue(s). Continued non-adherence will be reported to the Professional Performance Committee, which will in turn make recommendations to the Director and PT faculty at regularly occurring faculty meetings.

PROFESSIONAL CONDUCT STANDARDS

Under the code of professional conduct, a student enrolled in the DPT Program in the College of Health Professions is expected to, but not limited to these behaviors and values:

Compassion:

- Be guided at all times by concern for the welfare of patient/clients entrusted to his/her care via attention, respect, empathy and responsiveness in care.

Collaborate:

- Communicate in a direct and respectful manner. Be aware of and adhere to channels of communication for needs associated with the program: 1.) Communicate with the course instructor; 2.) If further advice is required, seek guidance from your academic advisor; 3.) If further advice is warranted, communicate with the Division Director; and 4.) If necessary, contact the Department Chair.
- Regard as strictly confidential all information concerning each patient/client and refrain from discussing this information with any unauthorized individual, per Health Information Portability and Accountability Act (HIPAA) regulations.

Respect:

- Appear and conduct himself/herself in a professionally acceptable manner in accordance with the Division of Physical Therapy dress code (see policy 14 in the Student Handbook – Division of Physical Therapy 2016-2017 regarding dress code) and the Code of Ethics of Physical Therapists at: https://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/HOD/Ethics/CodeofEthics.pdf
- Show respect for and be mutually supportive of patient/clients, fellow students, faculty, and staff regardless of race, religion, gender, sexual preference/identity, nationality, or economic status.
- Demonstrate respect by responding to requests (written, verbal, email, telephone) in a timely manner

Integrity:

- Be trustworthy by acting in a reliable and dependable manner
- Identify truthfully and accurately his/her credentials and professional status.
- Demonstrate accountability for decisions and actions
- Refrain from performing any professional service which requires competence that he/she does not possess or which is prohibited by law, unless the situation morally dictates otherwise.

- Accept responsibility for reporting unprofessional and unethical conduct to the proper authorities. Adhere to College (<https://chp.musc.edu/current-students/college-and-program-handbooks>) and Division specific policies and procedures including but not limited to attendance, dress code etc.

Innovation:

- Support and create a culture of discovery

If a student does not adhere to professional conduct standards, the student will be counseled by his/her faculty advisor and/or the instructor who observed the behavior. During this meeting the student may be asked to complete the Professional Self-Assessment Form and/or the Professionalism in Physical Therapy Core Values Self-Assessment Form to identify areas that need improvement. If unprofessional behavior/conduct continues to be noted, the student will receive a written notice of unsatisfactory professional conduct and will be counseled by the Division Director or appropriate member of the Professional Development Committee as outlined earlier in the policy.

Determinations of outcomes following the process may include but are not limited to: no action, non-punitive feedback to foster professional growth, supportive interventions, monitoring, mandatory leave of absence or dismissal. Upon recommendation of the Division Director, a student who receives an unsatisfactory evaluation on professional development for one or more semesters may be dismissed from the Division of Physical Therapy. The College of Health Professions reserves the right to discipline, suspend, and/or dismiss any student who appears physically, morally, psychologically, or academically unsuited to continue studies necessary to complete the requirements for the degree for which he or she is enrolled. The student has the right to appeal a disciplinary action or dismissal; refer to the Academic Review Policy in the College of Health Professions Student Policies and Procedures Manual for guidance.

The appeals process is also outlined at the following website:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/academic-review-and-appeal>

7. MUSC HONOR CODE

All students of the Medical University of South Carolina are bound by the Honor Code. It is the student's responsibility to know rules and regulations governing the Honor Code and the processes governing the Honor Code. The Honor Code and information about the process can be found at:

<https://education.musc.edu/students/enrollment/bulletin/honor-code>

Examples of violations may include:

- accessing non-permitted information sources during in an exam.
- posting questions from an exam on a shared page or with other students.
- completing individual assignments in groups.
- Plagiarism.
- using protected course information without permission.

Student Complaints: refer to the CHP Student Policies and Procedures Manual. Also, see the CHP Student Policies and Procedures Manual for the MUSC Student Complaint Form.

8. PHOTO CONSENT

All students must review policy and complete the form handed out at orientation to be kept in the student's official Division academic record.

9. REFUND POLICY

The Refund Policy is in the University Bulletin, linked here:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/leaving-the-university>

10. ACCIDENT/INCIDENT REPORTING AND INVESTIGATIONS

An accident or incident is defined as any situation in which an injury may have occurred to a student. A reportable injury that results from the accident or incident is one that requires a student to completely stop participating in an activity or one in which a student displays obvious physical harm and/or requires first aid or medical attention.

A student who has incurred a reportable injury (as defined above) should complete the ACORD form (<https://www.carc.musc.edu/acord/>) and then report to Student Health Services during his/her normal class day on the day of the injury. In the event that a physical therapy faculty member is not present when a reportable injury occurs to a student, the injured student should report the injury to his/her faculty advisor or to the Physical Therapy Division Director.

11. PROFESSIONAL SELF-ASSESSMENT FORM

The Professional Self-Assessment Form is to be used by students as well as by faculty as a feedback tool towards student professional behavior and performance. Students should review the content of the form as a guide to expected behavior.

Professional Self-Assessment

Professional Self-Assessment and behavioral criteria specific to the practice of physical therapy were identified by the MUSC Division of Physical Therapy Program faculty. The Professional Self-Assessment Form may be found in the addendum at the end of this handbook.

The Professional Self-Assessment and the associated behavioral criteria exemplify the quality of professional behavior expected of Doctor of Physical Therapy students and graduates. Students are expected to progress from demonstrating a minimum of Beginning Level criteria the first semester progressing to Entry Level criteria by the end of the final clinical practicum.

These professional behaviors are found in the appendices.

12. INFORMED PARTICIPATION CONSENT

As a student in the Division of Physical Therapy of the Medical University of South Carolina, I provide informed consent that I understand and will be held accountable for these:

1. I am expected to serve as a “practice patient/client” for my lab partner during laboratory practice and practical exams.
2. I may be asked to serve as a “model” for class or laboratory demonstrations by faculty members.
3. I may be exposed to patients/clients with infectious diseases while a student or as a practicing physical therapist.
4. I may be exposed to hazardous materials/waste while a student or as a practicing physical therapist.
5. I may be exposed to legal action/litigation as a result of my actions while a physical therapy student.
6. I will receive instruction in and am expected to use universal precautions whenever a potential for risk exists for me, my patient, or others.
7. I may be assigned to work with patients/clients who are medically unstable.
8. I am required to have the results of a current TB test on file throughout my enrollment in the physical therapy educational program (Division of Physical Therapy).
9. I am required to complete the Hepatitis B immunization series within the first semester of enrollment.
10. I am required to complete any other immunizations/examinations required by a clinical site to which I have been assigned for clinical education.
11. I am required to obtain **American Heart Association (AHA) CPR** (“*Healthcare Provider*” version) and the **AHA First Aid** certification by the end of July my first year and CPR must be renewed in the third year of enrollment in the physical therapy educational program. The Physical Therapy Division will oversee the scheduling of the required CPR and First Aid classes for all PT students.
12. I am required to complete a criminal background check upon beginning the program, and again if necessary for clinical education.
13. I am required to participate in the group Professional Liability Policy throughout the program.
14. I am responsible for all expenses related to clinical education, including but not limited to, room and board, transportation, uniforms, and any required health examinations or immunizations.
15. I will be required to submit to drug testing.
16. I will be required to obtain and maintain personal health insurance throughout the years of enrollment in the Physical Therapy Program.

My signature indicates that I understand each of the conditions of participation and agree to comply with all responsibilities and requirements. Failure to remain current with any of these may result in being prevented from attending class or clinical activities.

Signature: _____

Date: _____

13. LABORATORY INFORMATION AND INFORMED CONSENT

During the physical therapy educational experience at MUSC, students will be instructed in and practice techniques and skills that will be used for clinical practice. As students first learn to perform these techniques, performance may well be less than optimal, and at times may be stressful. As a student performing the techniques and as a student serving as a model, several things need to be understood.

1. Serving as a practice patient allows participants to practice and perfect technique performance. It is important for the education experience.
2. Students who are performing a technique with another student should always explain what they are going to do, give their partner instructions on what to expect and the purpose for what is being done, and **gain consent** for the technique to be performed.
3. Students who are the practice patient are to consider the technique to be performed on them, in light of any current or previous injuries or problems, and also considering their body type and tolerance for stress. The student serving as a patient has the right to remove themselves from any situation that they do not feel comfortable with or in which they feel they may be harmed. This includes when working with an instructor / or faculty member. Likewise, while one's medical history is private and protected, it is in everyone's best interest if the student serving as a patient discloses to their partner and the instructor if they have a problem / condition so that their partner and the instructor are aware of this. While caution should be used at all times regardless, this allows for added caution when needed, or avoiding the activity all together.
4. Students performing techniques should constantly observe their partner and themselves for signs of discomfort or any other problem. One important sign is if the patient / partner is guarding or not relaxing. In most cases, this implies that the technique should not proceed. In addition, students should discuss with the instructor any limitations they have that may impact their performance of laboratory skills and techniques.
5. The consent process needs to be followed every time something is practiced. It should become habit and carried over into the clinic. While repetition is needed to perfect skills, techniques that stress / strain tissues should only be performed a couple of times at the most during any one practice session.
6. **PARTICIPANTS ARE TO REMOVE THEMSELVES FROM ANY SITUATION IN WHICH THEY HAVE CONCERN THAT THEY WILL BE HARMED IN ANY WAY (mental or physical).** Participants with a history of an injury or problem related to the task should not be a patient for stressful examination or treatment techniques involving that area until they are assured that it is safe. Participants may speak to the instructor at any time about this.
7. Any adverse response during a course or during practice **MUST BE REPORTED** to the instructor immediately. This is not meant to get anyone in trouble. It is the policy of the Division of Physical Therapy to report all problems, and this serves to protect all participants.

Signature: _____

Date: _____

Important Note: Students are expected to alert the course instructor(s) and his/her/their lab partner(s) of any laboratory activities/techniques that they feel may be unsafe for them to participate in due to an existing medical issue. It is also the student's responsibility to contact the CHP ADA Compliance Officer to determine what course of action is necessary to attain formal accommodations granting temporary or permanent exemption of selected laboratory activities. Students requesting special accommodations for testing / examinations, lab courses, and learning experiences must have the appropriate documentation. The request for accommodations is made through the MUSC ADA compliance officer.

For more information as well as the necessary request form, please visit this

Website: <https://education.musc.edu/leadership/diversity/ada-resources>

14. ESSENTIAL FUNCTIONS AND TECHNICAL STANDARDS CANDIDATES FOR PHYSICAL THERAPY PROGRAM ADMISSION, CONTINUANCE AND GRADUATION

Policy

The Medical University of South Carolina (MUSC) Division of Physical Therapy endeavors to select applicants who have the ability to become highly competent physical therapists. As an accredited physical therapy program, the MUSC Curriculum in Physical Therapy adheres to the standards and guidelines of the Commission on Accreditation for Physical Therapy Education of the American Physical Therapy Association.

Within these guidelines, the MUSC Division of Physical Therapy has the freedom and ultimate responsibility for the selection and evaluation of its students, the design, implementation, and evaluation of its curriculum, and the determination of who should be awarded a degree. Admission and retention decisions are based not only on prior satisfactory academic achievement, but also on non-academic factors which serve to ensure that the candidate can complete the essential functions of the academic program required for graduation.

The Division has the responsibility to the public to assure that its graduates can become fully competent and caring physical therapists, capable of doing benefit and not harm. Thus, it is important the persons admitted possess the intelligence, integrity, compassion, humanitarian concern, and physical and emotional capacity necessary to practice physical therapy.

The Division is committed to the principle of equal opportunity. The Division does not discriminate on the basis of race, color, creed, religion, national origin, gender, sexual orientation, age, marital status, or disability. When requested, the University will provide reasonable accommodation to otherwise qualified students with disabilities. Additional information related to disabilities is addressed below.

Program

The purpose of technical standards is to delineate skills deemed essential for continuation in and completion of the educational program, as distinguished from academic standards. Technical standards refer to those physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the curriculum, and the development of professional attributes required by the faculty of all students at graduation. The essential functions required by the curriculum are in the following areas: sensory, communication, motor, intellectual (conceptual, integrative, and quantitative abilities for problem solving and patient assessment) and the behavioral and social aspects of the performance of a physical therapist.

The student must have the ability to master information presented in course work in the form of lectures, written material, and projected images. The student is held accountable to all compliance documents (including CPR, First Aid, HIPAA, OSHA, immunizations, TB, criminal background screening and drug screening) and **any lapse in currency will result in the student being removed from the classroom or clinic.** Additional compliance items may be required by affiliating facilities during the clinical practicums.

The Doctor of Physical Therapy (DPT) degree signifies that the holder of that degree has been educated to competently practice the profession in all healthcare settings and to apply for licensure. The education of a healthcare professional requires the assimilation of knowledge, acquisition of skills and development of judgment through patient care experiences in preparation for practice. The practice of the profession emphasizes collaboration among healthcare providers and the patient.

The curriculum for the DPT requires the student to engage in diverse, complex and specific experiences essential to the acquisition and practice of physical therapy. Unique combinations of cognitive, affective, psychomotor, physical and social abilities are required to satisfactorily perform these functions. In addition to being essential for the completion of the requirements for the DPT, these functions are necessary to ensure the health and safety of patients/clients, fellow candidates, faculty and other healthcare providers.

The essential functions necessary to acquire or demonstrate competence in physical therapy and needed for successful admissions and continuance by candidates for the DPT Program at MUSC, in addition to the standards of professional conduct set forth by the College of Health Professions, include but are not limited to the following abilities:

Sensory/Observational Skills: The student must be able to demonstrate the functional use of vision, hearing and other sensory modalities. These include but are not limited to:

- Ability to acquire the information presented through demonstrations and participate in lecture and laboratory settings.
- Ability to observe patients accurately both at a distance and close at hand and observe and appreciate non-verbal communications during patient interactions.
- Capable of perceiving signs of disease and malfunction as manifested through the physical examination
- Palpate a pulse and detect changes or abnormalities of surface texture, skin temperature, body contour, muscle tone, joint movement.
- Sufficient position, movement and balance sensation to assist and safely guard/protect patients with movement dysfunctions.
- Ability to use vision, hearing, and tactile means for acquisition of information.

Communication Skills: Students must be able to utilize effective communication with peers, faculty, patients, families and other healthcare providers. These include but are not limited to:

- Ability to effectively use English to communicate in oral and written form.
- Ability to express ideas clearly and freely, and demonstrate a willingness to give and receive feedback.
- Ability to exchange information in order to obtain a health history, identify problems presented, explain alternative solutions and give directions during treatment and post-treatment.
- Ability to process and communicate information on the patient's status with accuracy in a timely manner to members of the health care team.
- Ability to complete reading assignments, writing assignments, search and evaluate the literature, and maintain written records in a timely manner.
- Ability to recognize, interpret and respond to non-verbal behavior of self and others.

Motor Skills: The student must have sufficient motor capabilities to execute the movements and skills required to provide safe and effective patient/client management. These include but are not limited to:

- Ability to execute movements required to provide care and treatment to patients in all health care settings.
- Ability to elicit information from patients by palpation, auscultation, percussion and other evaluative procedures.
- Ability to execute motor movements required to provide physical therapy including coordination, balance, speed and agility to assist and safely guard patients who are walking, exercising or performing other therapeutic activities.
- Ability to perform cardiopulmonary resuscitation.
- Ability to lift and transfer patients.
- Ability to demonstrate adequate gross and fine motor movements, balance, manual dexterity and kinesthetic awareness to safely perform physical therapy procedures.

Intellectual and Cognitive Skills: Students must be able to utilize effective cognitive functioning. These include but are not limited to:

- Ability to measure, calculate, reason, analyze and synthesize data.
- Ability to obtain, interpret, analyze, evaluate, and document data to determine a physical therapy diagnosis.
- Ability to quickly read and comprehend extensive written material.
- Ability to use sound judgment, prioritize therapeutic interventions, and measure and record outcomes.
- Ability to use the computer for searching, recording, storing and retrieving information.
- Ability to comprehend 3-dimensional and spatial relationships of anatomic structures.

Behavioral, Professionalism and Social Attributes: Students must be capable of behaviors required for the successful conduct of physical therapy in all environments. These include but are not limited to:

- Ability to use their intellectual capacity, exercise good judgment and promptly complete all duties related to diagnosis and care of patients under potentially stressful circumstances.
- Ability to carry full DPT course load, as it reflects the nature of the area of practice.
- Ability to demonstrate the emotional stability to function effectively under stress and to adapt to an environment that may change rapidly without warning or in an unpredictable manner.
- Ability to demonstrate empathy, integrity, ethical standards, mature interpersonal skills, motivation and interest, not only for admission, but also throughout their careers as physical therapists.
- Ability to demonstrate cultural sensitivity.
- Ability to demonstrate effective, collegial, collaborative and harmonious relationships in diverse academic and working environments.
- Ability to reason morally and practice physical therapy in an ethical manner.
- Ability to learn and abide by professional standards of practice.
- Ability to demonstrate cooperation, compassion, empathy, altruism, integrity, honesty, responsibility and tolerance.
- Ability to engage in patient care in all clinical settings.
- Ability to deliver care to all patient population.

Reasonable Accommodation for Disabilities

MUSC Division of Physical Therapy is committed to ensuring that otherwise qualified candidates with disabilities are given equal access through reasonable accommodations to its services, programs, activities and education. The Division of Physical Therapy works closely with the ADA officers in this process. Each case is considered individually for best outcomes.

Students wishing to request reasonable accommodations are encouraged to contact disability services to start the process of documenting their disability and determining eligibility for services prior to the start of the program. While this can be started at any time, accommodations cannot be implemented retrospectively. MUSC does have policies regarding the type of documentation required in order to document a disability and request accommodations.

Students requesting special accommodations for testing / examinations, lab courses, and learning experiences must have the appropriate documentation. The request for accommodations is made through the MUSC ADA compliance officer. For more information as well as the necessary request form, please visit this Website: <https://education.musc.edu/leadership/diversity/ada-resources>.

Students with disabilities are expected to perform all essential functions of the program with or without reasonable accommodation. The University will work with the student and respective campus disability office to provide reasonable and appropriate accommodations. While we will make every effort to work with our students with disabilities to accommodate their disability-related needs, it is important to note we are not

required to provide requested accommodations that would fundamentally alter the essential functions or technical standards of the program.

Implementation of Essential Functions for Admission, Continuance and Graduation

Incoming students will be alerted to the Essential Functions during program orientation and where to locate the information for future reference (student handbook). Faculty will address student performance and abilities to meet essential functions during regularly scheduled faculty meetings. Faculty advisors in conjunction with course instructors and the Division Director will be responsible for monitoring whether the student is meeting the essential functions for the program.

By signing below, you indicate that you have read and understand the content of the previous four pages entitled **Division of Physical Therapy Essential Functions and Technical Standards**. I confirm that I have the ability to demonstrate all of the above requirements.

Print your name on this line _____

Sign your name on this line _____

Date _____

15. ACCOMODATONS FOR EXAMINATIONS, LAB COURSES, AND LEARNING EXPERIENCES

Students requesting special accommodations for testing / examinations, lab courses, and learning experiences must have the appropriate documentation. The request for accommodations is made through the MUSC ADA compliance officer. For more information as well as the necessary request form, please visit this Website: <https://education.musc.edu/leadership/diversity/ada-resources>. Clinical facilities may not be able to provide the same accommodations. Students need to be proactive with the DCE and clinical facility to address the necessary accommodation.

16. ATTENDANCE

In accordance with the accepted attendance practices in most health care environments, graduate students in the Division of Physical Therapy will attend classes and participate in all learning activities. Student physical therapists are required to notify the course instructor by email or phone at least two hours prior to the scheduled class time if attendance is not possible. In the event of an emergency where prior notification is not possible, students are to contact the course instructor as soon as possible or within 24 hours. Students are responsible for all course content taught in any class for which they are absent.

Definitions

Absence:

An absence is defined as non-attendance of any scheduled class, laboratory, or clinic assignment.

Extenuating Circumstance:

Extenuating circumstances include such life events as illness, family emergencies, death of a family member, or other unexpected circumstances. Students may need to provide appropriate documentation for the absence (e.g. doctor's note, funeral notice).

Approved Absence:

An approved absence is defined as one in which a student is given permission by a course coordinator/instructor to miss a class, a laboratory, and/or a clinical assignment. For example, a course coordinator / instructor may grant an approved absence for classes/laboratories/clinical assignments missed due to extenuating circumstances (see above). In such cases, no penalties would be incurred by a student having an approved absence, and if needed, instructors may allow make up work to be completed.

Non-approved Absence:

A non-approved absence is defined as one in which a student is denied approval by a course coordinator/instructor to miss a class, a laboratory, and/or a clinical assignment due to absence(s) occurring for non-academic reasons (for examples please see below).

Attendance Policies and Procedures

Approved Absence:

Students requesting an approved absence in advance should contact all of the instructors for the courses they are or will be taking, at the time of the absence. This request should be made in writing as early as possible to determine if the absence will be approved or not. An email is an appropriate method to request an approved absence. Students typically receive approved absences for family or medical emergencies, for an illness, or for a religious holiday. Students who are absent due to illness may need to provide a statement from a physician or other health care professional for verification of the illness.

Students requesting to participate in medical mission trips should request an approved absence before committing to the trip. Also, students should consult with all faculty whose classes, laboratories, or clinical assignments will be missed **before** organizing and agreeing to participate in an event that may involve most if not all students. Examples include participation in Special Olympics, Legislative Day at the Statehouse, conferences, presentations, or other similar activities. **Faculty members are not obligated to excuse absences**

for mission trips, professional meetings, or other non-curricular activities (as noted above). Students who have demonstrated academic difficulty are advised not to schedule activities that require an absence from class, and may not be given approval for mission trips or professional meetings that require missing class or other programmatic educational experiences.

Non-Approved Absence:

Faculty are under no obligation to grant an approved absence to students for an absence when time is taken away from classes and labs. For all non-approved absences, students will be held accountable by the faculty member of the class missed and are subject to consequences and/or penalties (such as a reduction in his or her course grade) as per the syllabus that has been determined by the course coordinator/instructor.

Professional Conduct Probation:

More than three total unexcused absences from any class per semester may be sufficient for placement on professional conduct probation as per the Student Handbook.

17. STUDENT CONFERENCE FINANCIAL SUPPORT

Students attending professional conferences that are sponsored by the American Physical Therapy Association (APTA) and/or its Sections, or non-APTA conferences that are **approved** by the Division of Physical Therapy may be given a monetary allowance in order to offset travel costs **on a one time per 12 months basis**. Students who are presenting their research as **1st author/presenter**, either as a poster or as a platform (oral) presentation, may be allowed up to \$500.00 (per student) as the budget allows. Students who are presenting their research as **1st author/presenter**, either as a poster or as a platform (oral) presentation, may be allowed up to \$500.00 (per student) as the budget allows. Students who are co-authors on a research presentation but are not the 1st author/presenter may have their conference registration (up to \$500) reimbursed by the Division of Physical Therapy on a **one time per 12 month basis**, as the Division budget allows.

Students who are not presenting research but attend a professional conference as a participant may receive an allowance of up to \$100.00 **on a one time per 12 months basis** as the budget allows. Individuals who have access to funds, such as grant funds or indirect funds may also supplement research presenters.

Students who are running for a national office and attend a conference and/or meeting that has been approved by the APTA and/or its Sections may be given a monetary allowance of up to \$500.00 per student to offset travel costs. Payment for this activity may be made on a **one time per 12 months basis**, as the Division budget allows.

Students who receive financial support to attend a professional conference either as a presenter or co-presenter, as a participant, or as a candidate for office are required to produce one of the following, which must be completed prior to the Physical Therapy Division Director's signing the necessary documents for conference reimbursement (see above):

- Write a 2-3 page written report (double spaced, Times Roman 12 font) detailing their experience with presenting at the conference, and/or their conference experience in general, i.e. networking, presentation attendance, or new ideas/inspiration for pursuing a specific area of physical therapy such as research, education, clinical practice, or APTA leadership. Students in this category should complete the report within one (1) calendar week after returning to MUSC and submit the report to the Physical Therapy Division Director, who will read the report, mark as Satisfactory or Unsatisfactory and return to the student. In the event of an Unsatisfactory report, the student will resubmit the report and address the Physical Therapy Division Director's concerns within one (1) calendar week.
- Participate in a 5 x 5-panel presentation upon returning to the MUSC campus during a student lunch and learn session, meaning that student conference attendees would present five (5) slides in five (5) minutes on what they learned while attending the conference. This activity could be done as an individual or in small groups. Student(s) should present his/her/their five (5) slides to the Physical Therapy Division Director upon

one (1) calendar week after returning to the MUSC campus. A time will then be chosen by the student(s) and the Physical Therapy Division Director for the presentation to be done at the noontime lunch and learn session.

- Perform a presentation to SCAPTA (or other smaller professional conference) and/or to other students on what was learned in a multitude of styles/formats. Your presentation idea and outline must be presented to the Physical Therapy Division Director within one (1) calendar week after returning to campus. Upon approval by the Physical Therapy Division Director, the presentation must be completed in the most appropriate format within one month.
- Participate in or engage in another activity, as approved by the Physical Therapy Division Director.

Students should complete the following and turn in to the Physical Therapy Division Director at least **2 months prior** to the start of the conference requesting approval to attend and/or funds for attending approved conferences. I, John Doe, request funding to attend conference title for the purpose of specific reason(s) for attending. I request funding to assist me in expenses that I will incur, and I understand that as a requirement for attending the conference, I will be expected to provide the Physical Therapy Division Director with one of the above projects. I understand that this evidence as described above should be submitted to the Physical Therapy Division Director within one (1) calendar week after returning to MUSC.

18. BEHAVIOR DURING EXAMINATIONS

At no time while taking an examination shall students use cell phones to text messages to others or respond to text messages or any other form of electronic communication (i.e. Twitter or Facebook). Also, unless proven to be a legitimate emergency, students are not allowed to use cell phones to make or accept calls during an examination. Cell phones or computers may not be used to browse the internet (other than any site that may be assigned by the instructor) while taking an examination, nor are cell phones or any other camera or camera-like devices allowed to be used to photograph any part of an examination or anyone/anything in the testing environment. These examples constitute honor code violations. Students who engage in any of these behaviors are subject to disciplinary action, which may include:

- Appearance before an Honor Council Court to answer to charges of rules violations and possibly academic dishonesty (i.e. cheating).
- Negation of the exam being taken when the incident occurred, which may result in the assignment of a reduced grade or a zero on the exam.

If an Honor Court rules that a student is guilty of a violation of any of the above misbehaviors and/or cheating while taking an examination, he/she may then be subject to penalties including a reprimand from the Division/Division Director and/or dismissal from the educational division in which he/she is a student. If the student is allowed to remain enrolled in his/her Division, there may be conditions required that will need to be met satisfactorily in order to continue and be allowed to progress.

19. DRESS CODE

All students at MUSC are responsible for presenting a clean, neat, and positive appearance that enhances the image of MUSC to patients/clients, other MUSC personnel, visitors/guests, and the public, and is in compliance with the PT Division policy. Personal attire and accessories shall not be soiled, torn, or create a potential safety hazard for the students or any other individual. The purpose of a dress code is not to inhibit personal freedom, but rather to demonstrate respect, and acknowledgement of the role of the student as a developing professional and health care provider. Personal grooming and dress for class and in public are a reflection of you, the Division of Physical Therapy, the College of Health Professions, MUSC, and our profession.

All classes will have 3-4 students as the dress code task force. These students will be asked to volunteer in this role at the start of their time on campus. The role of these students is to peer counsel their classmates on any

dress code issues that should arise. The students on the task force will monitor dress and be the first contact for any student who is not in adherence with the PT Division dress code. If the peer counseling does not change the behavior of the classmate, the task force may approach any faculty member with their concerns. The faculty member will then verbally counsel the student and a first letter of warning will be given to the student. If the behavior continues, the student will be asked to meet with their advisor to be counseled and a second written professionalism letter will be presented to the student. At this time the student will be brought before the full faculty for discussion on unprofessional behavior. Pending the faculty decision, the student may receive an unsatisfactory professionalism letter in their record.

The following dress code guidelines should be followed on a daily basis for all students during scheduled class times. Lab dress code may differ based on the activities performed in lab. The lab dress code will be faculty specific.

Dress Code Guidelines

Shoes: Closed toe and clean flat soled shoes.

Pants: Slacks of any kind including khakis, corduroys, Capri pants, scrub bottoms etc. No leggings/jogger pants, denim, shorts, dresses or skirts are permitted. Clothing should not be so tight that it prevents you from doing a functional squat.

Shirts: Collared, crew neck (including t-shirts), scrub tops or conservative V-neck tops are acceptable. The only script allowed on t-shirts are Brand Center-approved MUSC logos. Tops should not be sheer, and bras and camisoles of any type should not be seen when worn under another top including scrub tops. ALL SHIRTS should pass the lean over as if to transfer a patient with arms out in front and arm lift overhead test.

Outerwear: When worn in class outerwear should not be grossly oversized or sloppy, no hats inside.

Dress Code for Clinical experiences in the lab, guest lecturers/volunteers, or community presentations

When attending a clinical/community experience or a class with invited guests, students shall wear a polo style buttoned, collared shirt, dress pants or slacks (NOT jeans), and closed-toe shoes. The attire should not be tight fitting or revealing in nature. When working in and/or observing in the MUSC Transitional Care Unit (TCU) or any other inpatient Medical University Hospital Authority (MUHA) clinic, department, or patient area, students shall wear steel gray scrub bottoms and tops for all such interactions. Additionally, and to prevent accidents or falls while working at the MUSC TCU or other inpatient MUHA areas, students must wear closed-toe shoes that have good floor traction.

Students are not allowed to wear unnatural hair colors (for example, blue, green, purple) while attending a clinical experience (such as the TCU or other inpatient MUHA areas), a community experience, or a class with invited guests. If students are out of dress code for any of the above activities, they will be requested to leave and be permitted to return upon adherence with the dress code.

20. STUDENTS REQUESTING PROFESSIONAL SERVICES FROM PHYSICAL THERAPY FACULTY

MUSC Division of Physical Therapy faculty shall not provide clinical or evaluative physical therapy services for MUSC Doctor of Physical Therapy students, either informally or in a clinical setting. The purpose of this policy is to avoid potential conflicts of interest as described in the APTA Code of Ethics (Principle 3D). If approached, however, by a student who believes that he/she has a condition that may require physical therapy evaluation and treatment, Division of Physical Therapy faculty may offer a suggestion as to the type of health professional with whom the student might wish to consult and may offer recommendations of professionals. In this case, faculty should avoid personal bias for any clinic or clinical health professional, and advise the student in accord with his/her best interests in mind. Faculty can receive no compensation, monetary or otherwise, for referrals.

21. REQUIREMENTS FOR LABORATORY COURSES (Care of the Facilities)

Using Mats and Equipment

- A **maximum** of three people are allowed on the low mat tables at any one time, low mat tables have a weight limit.
- Unplug all electrical equipment after use (at the end of each class).
- Do not stand on the tables unless the activity is related to formal instruction.
- Do not place shoes on any vinyl mat surface at any time.
- Do not place sharp objects, book bags, drinks, stools or other foreign objects on mat tables at any time.
- Do not put feet in chairs.

Straightening Labs

- Tidy the lab room after each class.
- Put tables and chairs into neat, organized positions.
- Place all pillows, sheets, equipment back in the cupboards or storage room after use regardless of whether you need them again that week.
- Use wastebaskets, trash bins, and recycling containers for water bottles, or other debris; or, remove them from the room.

Caring for Technology

- Turn off the computers/technology at the end of each use—the LCD should be *off*; the screen should be *blank*.
- Get instruction from your faculty member about *how to use* equipment; if you are not sure, please ask.
- Report technology problems immediately; use the “hotline” number provided.

Cleaning Labs

- Wipe mats and tables *at the end of each class* with disinfectant.

Food and Drink

- Do not bring food into the labs, e.g., candy, snacks, pizza, etc.
- Do not bring glass into the lab.
- Drinks in plastic or aluminum bottles/containers are allowed.

Taking Responsibility

- Caring for equipment and supplies in the labs is an individual and a shared responsibility.
- Any student who does not share responsibility or demonstrate compliance with these essential rules will risk losing professional development grades that semester.
- Faculty members have agreed to oversee compliance.
- Labs will remain open evenings and weekends for students’ use, contingent upon compliance with these rules.

22. CLINICAL EDUCATION POLICIES AND PROCEDURES

What is Clinical Education?

The curriculum includes four courses organized as one 8 week, 2 ten weeks and one 12 week full time clinical experiences. Specific assignments reflect current physical therapist practice and consideration of individual educational needs.

- Clinical Practicum I, **second year, fall semester (August - October)**
- Clinical Practicum II, **third year, fall semester (August - November)**
- Clinical Practicum III, **third year, spring semester (November - January)**
- Clinical Practicum IV, **third year, spring semester (January – April)**

Clinical education is a cooperative effort of students, clinicians, and the academic faculty. Typically the clinical facilities accept one student for an assignment; often only one MUSC student each year. The health care system today dictates that students become sensitive to the rapidly changing demands on the clinical faculty.

Why Clinical Education?

Clinical education provides opportunities for integration of didactic knowledge, psychomotor skills, clinical reasoning, time management, team management, and patient education principles within the confines of the current health care system and under the supervision of a licensed physical therapist. Experiences prepare the student for the entry-level practice of physical therapy.

Where Does Clinical Education Occur?

Primary care settings such as outpatient orthopedics and acute care outpatient orthopedics are appropriate for Clinical Practicum I. Experiences appropriate for Clinical Practicums II – IV include the above practices, as well as those that include pediatrics, geriatrics and individuals with neurological impairments. The Medical University of South Carolina Division of Physical Therapy has excellent partnerships with clinical facilities in urban and rural locations throughout the United States. Settings include medical centers, home health agencies, outpatient facilities, and educational systems.

Who is Involved with Clinical Education?

The **Director of Clinical Education (DCE)** is the primary core faculty responsible for the management of the clinical education portion of the curriculum. The DCE is available for advising and consultation, is willing to consider student requests and special needs, serves as the liaison between the academic program and the clinical facility, provides timely communication and documentation, and serves as a resource for continuous improvement in the clinical education program.

The **Assistant Director(s) of Clinical Education (ADCE)** works with the DCE to meet the needs of the program.

The **Center/Site Coordinator of Clinical Education (C/SCCE)** is an individual that the clinical facility designates as the liaison between academic institutions and the facility clinical instructors. The C/SCCE may or may not be a Physical Therapist.

The **Clinical Instructor (CI)** provides the student (while in the clinic) with opportunities to interact with individuals for examination and intervention, develops a schedule that incorporates opportunities for instruction, and supervises and evaluates student performance on a regular basis. The clinical instructor is a licensed physical therapist.

The student is responsible for completion of all Clinical Practicum (I, II, III, and IV) assignments prior to and during the clinical practicum. The DCE determines appropriate educational goals and student physical therapists accomplish those goals during the experience. **As representatives of the Medical University of SC, students are expected to demonstrate exemplary professional behaviors at all times.**

Students are NOT to contact any clinical facility without prior approval of the DCE/ADCE.

The program Clinical Education Committee is comprised of the clinical education faculty, two students, and a clinical educator. This committee meets as needed to review the clinical education process and consider written student special requests.

How Are Clinical Sites Selected?

Contracts are developed and maintained with facilities that value clinical education. The clinical facility staff demonstrates an interest in clinical education, quality physical therapy service, professional role modeling, and a willingness to cooperate with clinical education requirements. The clinical education program includes an ongoing evaluation of facilities and clinical instructors.

Students may suggest new clinical sites to the DCE/ADCE to augment our current list. The faculty will consider all suggestions, but are under no obligation to pursue and institute clinical sites for the sake of students' convenience.

How Are Students Assigned to the Clinical Facilities?

Student requirements:

- Do not request clinical assignments at facilities where there has been previous employment, volunteer hours or is a contract for employment after graduation.
- Schedule at least one rotation outside the counties contiguous to the assigned campus.
- One rotation must be in an inpatient facility (acute care/rehabilitation) or a setting that provides opportunities to work with an underserved or rural population.
- The individual program should reflect a depth and breadth of experience
- **Attend all clinical education information sessions**

A computer-matching program is used to facilitate each of the assignments. Students submit a list of ten (10) sites where they are willing to accept assignment. **The academic clinical education faculty will assign those students failing to meet clinical education deadlines or requirements as stated.**

Clinical Practicum I is assigned during the second semester of the first year.

Clinical Practicum II and III during the summer of the second year, and IV assignments are made during the summer of the third year. Students and the facilities are notified of the assignments as soon as reasonable.

Is Housing Assistance Available?

Some facilities provide a list or offer guidance to find affordable housing. Students are responsible for their specific housing arrangements. The lodging type ranges from rooms in homes, to dormitories, or shared apartments. Students should be prepared for costs of \$500-900 per month for each rotation. Some students prefer to commute distances of 60-90 miles each way to avoid additional housing expenses.

How Does A Student Finance Clinical Education?

Students are responsible for all personal expenses incurred as a part of clinical education. Budgeting for travel, local transportation, and housing should begin the first semester of the first year.

What Are Attendance Requirements?

Daily, punctual attendance is expected. The CI determines if a one-day absence for CP I due to illness or emergency should be made up. **Absences of more than one day require that the student notify the DCE/ADCE;** the clinical facility determines the method to make up the absences. It may be appropriate to require make up during the week following the rotation. CP II allows for 2 days for absence while CP III and IV allow for up to 5 days of absence.

What is the Role of the Academic Faculty During A Clinical Rotation?

Within reason, the DCE/ADCE is reasonably available for consultation to students and clinicians during clinical experiences. The faculty contacts the student and CI to determine progress at the practicum midpoint. Should a student experience a problem prior to midterm, he/she should attempt to resolve the matter with the CI and/or the C/SCCE. Problems, particularly related to professional behaviors and safety, should be addressed early. The DCE/ADCE should be contacted if a satisfactory resolution is delayed. Concerns about sexual harassment should be directed to the C/SCCE, then the DCE/ADCE as quickly as possible. The CI, C/SCCE, or student should contact the program if problems with safety or professional behaviors occur.

Clinical Education Advising

During several semesters during the program, students are required to attend orientation and information sessions related to clinical education.

- Advisement concerning clinical education is available upon student request at any period during the student's enrollment in the Division of Physical Therapy.

The Assignment Process

The clinical practicum assignment process begins with an interest survey. Approximately two months before student physical therapists submit their final selection, students participate in a web-based survey noting interests from a list of those clinical sites that are appropriate for the practicum as well as geographical and population interests. The survey serves two purposes. First, the DCE/ADCE attempts to obtain practicums that are most appropriate for the student's needs. Secondly, students use the clinical site information in determining their final listing.

Students enter a final rank, ordered list of 10 sites into the computerized matching program on the assigned date and time. The computer program randomly assigns students to sites. The computer program makes assignments matching student selections to available offers for practicums. Occasionally, students are not assigned by the program. Those students are assigned by the DCE with student preferences and educational goals considered. Placement options are discussed with the student through email, phone, or personal communication.

When all students have been placed, the listing will be posted. Students may discuss options with the DCE/ADCE during the first week that assignments are posted. Student options are carefully reviewed and other options may be considered. Students may formally request changes to their assignment by sending an email to the DCE/ADCE. The DCE/ADCE will collaborate with others from the Clinical Education Committee to determine if the request is in the best interest of the student and the clinical education program. The Committee may suggest options to the student. However, alterations in assignments are seldom warranted. After one week, all clinical education placements are considered final for the student. **Please note:** there are occasions when the clinical site must request a change.

Prerequisites for Each Clinical Practicum

Clinical Practicum I

The student has:

- Demonstrated appropriate professional behaviors as judged by the program faculty.
- Achieved a minimum cumulative GPA of 3.0 for the first four semesters of didactic courses.
- Submitted clinical education documentation that is complete and received by the established deadlines (including but not limited to: advising form, preference survey, clinical selection survey, clinical packet)
- Attended required clinical education meeting(s).
- Completed and submitted all pre-requisite forms and requirements.

Clinical Practicum II, III and IV

The student has:

- Demonstrated appropriate professional behaviors as judged by the program faculty.

- Achieved a 3.0 cumulative GPA for all didactic courses taken to date.
- Completed requirements for all previous clinical experiences.
- Submitted satisfactory documentation according to assigned deadlines (including but not limited to: advising form, preference survey, clinical selection list, clinical packet).
- Attended all required clinical education meetings.
- Completed and submitted all pre-requisite forms and requirements.

Discontinuation of the Clinical Practicum Prior to Completion

Clinical Probation and Dismissal Since patient well-being is a major concern of the Division, College, and University, action will be taken when a student's clinical practice poses a potential threat to patient health, welfare, or safety. Students, therefore, are subject to department and program specific regulations governing clinical practice and may be placed on clinical probation and/or dismissed for unsatisfactory clinical behavior. Refer to division and department publications for specific regulations.

Discontinuation of the Clinical Practicum Prior to Completion

Student medical or family emergency:

The clinical experience may be discontinued if the student has a medical or significant family emergency that prohibits continuation of the clinical practicum. The plan to complete the clinical practicum will be determined by the DCE/ADCE and Division Director with input from the CI, C/SCCE and division faculty. The individual student reassignment will be based on the timing of the emergency and the student's historical performance (both clinically and academically). Provisions in the individualized plan may not require further clinical experience or may require a specified time period at the same or different facility. Completion of the clinical experience will be scheduled as soon as possible based on the nature of the emergency and availability of clinical reassignment.

Ethical or legal concerns:

The clinical experience may be discontinued if the student reports substantive concerns about safety, legal or ethical issues. The procedures to complete the clinical experience are:

- The DCE/ADCE will advise the student and investigate as deemed appropriate.
- The DCE/ADCE will determine a course of action that is in the best interest of the student, the division and the clinic.
- The student will be reassigned to a quality clinical facility in a timely manner. The specifics of the reassignment will be determined by the DCE/ADCE and the Division Director with input from the division faculty after careful consideration of all pertinent factors.

If student behaviors are unsafe or unacceptable:

If a clinical faculty (CI or C/SCCE) identifies concerns about student performance, the following procedures will be followed:

- The CI/C/S\CCE contacts the DCE/ADCE immediately when the concern involves a red flag item (CPI items 1-5), particularly those related to safety, legal or ethical issues. Additionally, professional behavior concerns warrant alerting the DCE/ADCE for action.
- The DCE/ADCE and/or division faculty will consult with the clinical faculty and student. Outcomes of the meeting may include a comprehensive learning contract or immediate termination of the clinical experience.
- The learning contract will include a account of deficits and expectations to improve his/her performance as specified above.
- The student will be removed from the clinical experience if behaviors are such that the CI deems patient safety is impaired, voices frustration and unwillingness continue, or reports that the student's behavior is interfering with the CI's ability to meet professional responsibilities.
- If the experience is terminated, the division faculty will determine an appropriate plan of action.

- Students completing a remediation program will be assigned to either the first available clinic selected as appropriate by the faculty or to the next assigned rotation.
- The assigned facility will be notified by the DCE with information about the general nature of the concerns about the student by the previous clinical faculty.
- The student must revise goals for the next clinical practicum based on the areas of weakness identified at the unsuccessful clinic and this information must be shared with the CI prior to the first day of the practicum.
- An entire practicum must be completed with professional demeanor and appropriate level of performance for that particular clinical practicum.

General Requirements For Satisfactory Completion of All Clinical Experiences

The student should demonstrate:

- A valuation of documentation by submitting all required forms before the deadline.
- Professional behaviors during their interactions with anyone involved in their clinical education. (Dress, attendance, communication courtesy, ethical and legal behaviors).
- Recognition of their ability to perform safe and effective physical therapist practice in the clinical setting.
- Competence in the practice of physical therapy, based at the level appropriate for the specific clinical rotation and the complexity of the individual patient.
- A strong desire to learn, as evidenced by formulation of clinical questions, discussions of self-directed reading, and initiative in the clinical practice.
- An interest in improving proficiency in physical therapist practice by demonstrating progress from midterm to final evaluation based on the Clinical Performance Instrument (CPI) documentation.
- A respect for the required clinical education documentation by submitting information by the assigned due dates after the clinical rotation has ended.
- Respect for the clinical environment by adhering to attendance requirements.

Pass/Fail Grade Assignment

A clinical practicum may be deemed unsatisfactory (failure) if any combination of the following occur:

- No progress is noted from midterm to final evaluation or regression in level of performance from midterm evaluation is identified.
- Unable to attain required level of performance for criteria in the CPI.
- Concerns about any red flag behavior is brought to the attention of the DCE/ADCE prior to the final evaluation and is not resolved by the completion of the rotation.
- Comments and anecdotal information on the CPI are accompanied by a suggestion of extended time by the Clinical Instructor.

The clinical faculty will consider the options/issues and make suggestions to the core division faculty at a scheduled meeting. The core faculty will determine the educational plan for the student based on issues/concerns documented by phone calls and the CPI. The options available to remediate, with a passing grade, include but are not limited to:

- Additional time at that particular facility.
- An additional clinical assignment with the length of time as determined by the Physical Therapy Academic Committee.
- A successful remedial program followed by another clinical experience assignment.

Specific Course Requirements

Please refer to the syllabus for Clinical Practicum I-IV.

23. PROFESSIONAL LIABILITY

All students are required to hold professional liability insurance throughout their tenure as a student at MUSC. It is the student's responsibility to ensure continued coverage through annual renewal of their policy. A group policy has been established and is maintained by the Departmental Clinical Education Administrative Assistant.

24. COMMUNICATION

Communication with faculty is strongly encouraged and may occur through a variety of methods. Students may make an appointment with faculty, and / or contact faculty by email. Faculty frequently communicate with students by email, and students **should check their MUSC email account** several times a day, and on weekends. In an expedient situation, phone messages can be left for faculty by calling the faculty member's office phone published in a course syllabus.

25. ACCREDITATION STATUS

The Physical Therapy Educational Program is accredited by the American Physical Therapy Association Commission on Accreditation in Physical Therapy Education (CAPTE) through 2020. Questions, concerns, or complaints about the program can be made to CAPTE at accreditation@apta.org

26. THE AMERICAN PHYSICAL THERAPY ASSOCIATION

Students in the Division of Physical Therapy are required to be members of the American Physical Therapy Association (APTA), and the South Carolina Chapter of the APTA. The benefits of membership will be explained multiple times throughout the curriculum. Students can establish membership at the following website: <http://www.apta.org/CurrentStudents/>

Addition websites of importance to students are:

<http://www.apta.org> (APTA Home page)

https://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/HOD/Ethics/CodeofEthics.pdf (Code of Ethics)

<http://www.apta.org/CurrentStudents/ActivitiesEvents/> (Student events and activities)

<http://www.apta.org/Policies/MinorityAffairs/> (Minority Affairs)

<http://www.apta.org/CurrentStudents/> (Information for current PT students)

<http://www.apta.org/benefits/> (12 benefits of being a member)

27. STUDENT AWARDS AND SCHOLARSHIPS

The Medical University of South Carolina (MUSC) Division of Physical Therapy recognizes outstanding third year students for their service, leadership, clinical excellence, and research activities while a student in the program.

These student awards are presented during the graduation hooding ceremony.

Nomination Criteria

Each award has its own specific criteria. A nominee must meet the following criteria during his/her enrollment in the program to be considered:

1. Ability to work with others, including peers, faculty, fellow health care professionals, and clients.
2. Represent MUSC, the College of Health Professions, and the Division of Physical Therapy with a positive image of dedication, professional behavior, and dignity.

Selection Process

The faculty will evaluate all nominations for awards and determine recipients by majority vote.

AWARDS

Excellence in Clinical Performance

The Excellence in Clinical Performance Award recognizes a student who has demonstrated excellence in clinical performance in both the laboratory and clinical settings. A Student may be nominated by the faculty for this award based upon all the following criteria:

- The student must demonstrate exceptional clinical skills during clinical practicums as noted by the evaluation submitted by the clinical instructor.
- The student must demonstrate initiative and integrity in all clinical interactions.
- The student demonstrates exceptional clinical skills in laboratory classes as noted by faculty evaluation and grades earned.
- The student must exhibit mastery of clinical techniques.

Excellence in Leadership and Professionalism

The Excellence in Leadership and Professionalism Award recognizes a student who has demonstrated exceptional leadership abilities and demonstrates professionalism in the manner described by the American Physical Therapy Association. Third year physical therapy students or faculty may nominate a student for this award; however, final selection will be determined by the physical therapy faculty. Nominees are expected to meet a minimum of two of the following four criteria:

- The student demonstrates outstanding leadership skills within his/her class and is recognized as a leader by his/her peers and by the faculty.
- The student exhibits leadership characteristics as evidenced by active participation in the South Carolina Chapter of the American Physical Therapy Association (SCAPTA) and the American Physical Therapy Association (APTA)
- The student demonstrates integrity and initiative in all interactions with faculty and peers.
- The student serves as a class officer and actively participates in organizing or facilitating class events.

Graduate Research Award

The Graduate Research Award recognizes students who have participated in and excelled in a graduate research project while enrolled in the physical therapy education program. Students will be nominated by the faculty for this award based on meeting at minimum of two of the following three criteria:

- The student demonstrates significant participation in a research project with a faculty mentor.
- The student presents original research at a national or regional conference or at MUSC student research day.
- The student submits a manuscript with the faculty mentor to a peer-reviewed journal.

Excellence in Service Award

The Excellence in Service Award recognizes students who have had outstanding contributions to their community through volunteerism while enrolled in the physical therapy education program. Students will be nominated by the faculty for this award based on meeting a minimum of two of the following five criteria:

- The student actively participated in a meaningful manner in multiple fundraising projects;
- The student actively participated in a meaningful manner in a large fundraising project;
- The student actively participated in a significant number of volunteer activities inside or outside of school;
- The student participated in a medical mission trip or trip to teach physical therapy;
- The student actively participated in service to the college or university by serving on a university or college wide committee, task force, or other such activity.

Pro Bono Honor Society Recognition

The Pro Bono National Honor Society recognizes those students who demonstrate commitment to providing underserved clients and communities with quality physical, occupational, and speech therapy and other related fields while maintaining the standards and requirements of their curricula and their professions. The Pro Bono National Honor Society endeavors to encourage the development of altruism and social responsibility.

Criteria for students to be considered for induction into the Pro Bono National Honor Society are as follows:

- Complete a minimum of 20 (80 hours) visits to the CARES clinic over the course of their time on campus.

And one of the following:

- Actively engage in research and present the research at a professional meeting; or
- Be a part of a special task force or project for the Cares Clinic.

Students must submit a form detailing their hours and special projects/presentations and pending meeting the criteria, students' names will be sent forward to be inducted into the Pro Bono National Honor Society.

28. WHITE COAT CEREMONY

The summer of the second year of the curriculum students participate in a White Coat Ceremony. This will be explained to you by the class advisor or Division Director.

29. CLASS ADVISOR

The class advisor periodically meets with the class to convey information and serves as a resource to students.

30. MUSC STUDENT HANDBOOK AND STUDENT GOVERNMENT ASSOCIATION (SGA)

Students have the opportunity to participate as an officer in the student government associations for the University, the College of Health Professions, and their class in the Division of Physical Therapy. Class officers are elected the summer semester in the Foundations of Physical Therapy course.

Information about student governance is located in the MUSC Student Handbook and at the SGA website:

MUSC Bulletin: <https://education.musc.edu/students/enrollment/bulletin>

SGA: <https://education.musc.edu/students/spsd/sga>

31. MUSC SUPPORT SERVICES / OPPORTUNITIES

Information about various student support services can be found at the following websites:

MUSC Office of Student Life / Student Services:

<https://education.musc.edu/students/esl>

Student Programs and Student Diversity:

<https://education.musc.edu/students/spsd>

MUSC Wellness Center:

<https://web.musc.edu/resources/health-and-wellness/wellness-center>

Center for Academic Excellence:

<https://education.musc.edu/students/cae-and-writing>

Counseling and Psychological Services:

<https://education.musc.edu/students/caps>

Presidential Scholars:

<https://education.musc.edu/students/interprofessional-initiatives/presidential-scholars>

32. MUSC OFFICE OF DIVERSITY

The Office of Diversity exists to serve all students at the Medical University of South Carolina in order to support a diverse, collaborative educational experience for all students. Information concerning the Office of Diversity can be found at: <https://education.musc.edu/leadership/diversity>

33. IMPORTANT POLICY LINKS*

Financial Information (Tuition):

<https://education.musc.edu/students/enrollment/bulletin/tuition-and-fees>

Financial Aid:

<https://education.musc.edu/students/enrollment/financial-aid>

Health Professions Covenant:

<https://education.musc.edu/students/enrollment/bulletin/colleges-and-degrees/health-professions>

MUSC Academic Policies:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines>

Registration for courses:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/registration>

Full-time status:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/full-time-status>

Student academic records:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/student-academic-records>

Leaving the University (LOA, withdrawal):

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/leaving-the-university>

Graduation requirements:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/graduation-and-honors>

Academic standards:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/academic-standards>

Grading system:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/grading-system>

Academic review:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/academic-review-and-appeal>

Conduct standards:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/professionalism-and-standards-of-conduct>

Student Arrest Policy:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/student-arrest-policy>

MUSC Policy for Substance Abuse Prevention and Intervention:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/alcohol-and-other-drugs>

MUSC Policy for Serving Alcoholic Beverages:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/student-alcohol-service-policy>

Computer Use Policy (including using the MUSC network with a personal computer):

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/electronic-communications>

Criminal Background Check Policy: <https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/criminal-background-check>

Electronic Communications Policy:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/electronic-communications>

English Fluency Policy:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines>

Family Educational Rights and Privacy Act:

<https://education.musc.edu/students/enrollment/bulletin/policies-and-guidelines/family-educational-rights-and-privacy-act>

Sexual Harassment Policy:

<https://education.musc.edu/leadership/diversity/title-ix/reporting-prohibited-conduct>

Student Research Involving Human Subjects:

<https://education.musc.edu/students/enrollment/bulletin>

34. CONTACT INFORMATION

College of Health Professions

Zoher F. Kapasi, PhD, PT, MBA

Office: A326

Phone: 2-3328

Department of Health Professions

Rick Segal, PT, PhD, FAPTA

Professor and Chair

segal@musc.edu

B339

792-6505

Division of Physical Therapy

Division Fax Number 792-0710

CORE FACULTY

Mark Bowden, PT, PhD

Division Director

bowdenm@musc.edu

B310

792-5036

Debora Brown, PT, DPT
Division Assistant Director and DCE
brownded@musc.edu
B305
792-3939

Sandra Brotherton, PT, PhD
brothers@musc.edu
B307
792-2930

Jesse Dean, PhD
deaje@musc.edu
C106A
792-9566

Cindy Dodds, PT, Ph.D., PCS
doddscb@musc.edu
B317
792-5731

Chris Gregory, PT, PhD
gregoryc@musc.edu
C308
792-1078

Sara Kraft, PT, DPT
kraftsv@musc.edu
B303
792-0091

Stephanie McGowan, PT, DScPT, OCS
mcgowan@musc.edu
B320
792-7356

Addie Middleton, PhD, DPT
middlja@musc.edu
[843-792-0235](tel:843-792-0235)
B-318

Eric Monsch, PT, DPT, NCS
monsch@musc.edu
C217
792-1628

David Morrisette, PT, PhD
[morriscd@musc.edu](mailto:morrisdc@musc.edu)
B309
792-2940

Gretchen Seif, PT, DPT
seif@musc.edu
B306
792-9345

David Sword, PT, DPT
sworddo@musc.edu
B304
792-0315

Jack Thomas, PT, EdD
thomaskj@musc.edu
B341
792-4426

Holly Wise, PT, PhD
wisehh@musc.edu
B312
792-4051

Administrative Assistant

Terri Bozzelli
Assistant for Division Director and Program
bozzelta@musc.edu
B336
792-2961

Student Services Coordinator

Susan Johnson
Student Services Coordinator
johnsoss@musc.edu
B419
792-5377

Melissa Serrano
Assistant for Clinical Education
serranom@musc.edu
B337
792-4036

Additional contact information can be found on-line with the MUSC Directory at
<https://web.musc.edu/about/staff-directory>

Appendices:
ADVISING/CONCERN DOCUMENTATION FORM
MUSC Division of Physical Therapy

Student Name:

DPT Class of

Please document details related to area(s) of concern

Academics:

Professionalism:

School/Life Balance:

Technical Skills/Standards:

Other:

Describe parameters of Recommendations/Action Plan:

CAE

CAPS

Tested for possible accommodations

Other

Student Signature: _____

Date: _____

Advisor Signature: _____

Date: _____

Please submit a copy to the DPT Professional Performance Committee within 7 days

Professional Self-Assessment

__ Summer year 1 __ Spring year 1 __ Fall year 2 __ Summer year 3

Core Abilities	Behavioral Criteria Continuum		
	Please check all behaviors that you demonstrate on a CONSISTENT basis. All behavioral examples of abilities from preceding categories should be included as you progress along the continuum.		
	Early	Intermediate	Clinical Readiness
Accountability: The active acceptance of the responsibility of your roles, obligations and actions	__ Responds to feedback from multiple sources __ Takes steps to remedy errors in a timely manner; __ Strives to provide service beyond expected standards	__ Accepts responsibility for actions in classroom setting __ Applies time management principles to classroom setting	__ Identifies, seeks and responds to feedback from multiple sources __ Accepts responsibility for actions in clinical setting __ Appropriately delegates duties to support personal __ Applies time management principles to clinical setting
Clinical Reasoning: The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.	__ Develop EBP questions __ Pursue new evidence to expand knowledge __ Use evidence consistently to support professional decisions __ Submit classroom assignments using best available evidence	__ Presents logical rationale for clinical decision __ Utilizes information from multiple data sources to make clinical decisions __ Recognizes when POC and interventions are ineffective; identifies areas needing modification and implements changes accordingly	__ Uses a logical rationale for clinical decisions __ Exhibits openness to contradictory ideas; __ Demonstrates ability to make decisions in ambiguous situation where values may be in conflict __ Selects interventions based on best available evidence, clinical expertise and patient preferences
Communication: The ability to communicate effectively (i.e., speaking, body language, reading, writing, listening) for varied audiences and purposes.	__ Demonstrates competency of the English language (verbal and written) __ Exhibits non-verbal messages that are consistent with intended message __ Utilizes active listening	__ Exhibits non-verbal messages that are consistent with verbal message __ Initiates communication in difficult situations	__ Interprets and responds to the non-verbal communication of others and self __ Evaluates the effectiveness of communication and modifies as needed

Professional Self-Assessment

__ Summer year 1 __ Spring year 1 __ Fall year 2 __ Summer year 3

Core Abilities	Behavioral Criteria Continuum		
	Please check all behaviors that you demonstrate on a CONSISTENT basis. All behavioral examples of abilities from preceding categories should be included as you progress along the continuum.		
	Early	Intermediate	Clinical Readiness
	__ Avoids unnecessary use of cellphone/computer during class, meetings and conversations __ Adjusts communication based on target audience		__ Demonstrates effective professional written and verbal communication __ initiates communication in difficult situations and responds appropriately
Constructive Feedback Use: The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.	__ Seeks continuous improvement in learning __ Seeks multiple sources of feedback __ Displays a positive attitude toward constructive feedback __ Openly critiques own performance __ Displays mutual respect	__ Self- assesses performance accurately __ Utilizes feedback to enhance professional development __ Exhibits non-defensive attitude/ not blaming others	__ Seeks continuous improvement in learning and applies information in effective manner __ Seeks feedback from clients/ peers/team members/advisor/ etc __ Manages conflict in constructive ways
Continuing Professional Development: The obligation to engage in lifelong learning and are ultimately responsible for meeting or exceeding contemporary performance standards within their area(s) of practice	__ Utilizes self-reflection for identification of areas of needed growth __ Embraces quality improvement	__ Assumes responsibility for learning and change	__ Assumes responsibility for learning and change and evaluates effectiveness __ Strives for continuous quality improvement
Integrity: The adherence to high ethical principles, professional standards, truthfulness, doing what you say you	__ Adheres to code of ethics, honor code etc __ Confronts bias and harassment in ourselves and others	__ Adheres to the highest standards of the profession __ Is trustworthy	__ Knows own limitations and acts accordingly __ Recognizes the limits of one's expertise and making referrals appropriately

Professional Self-Assessment

__ Summer year 1 __ Spring year 1 __ Fall year 2 __ Summer year 3

Core Abilities	Behavioral Criteria Continuum		
	Please check all behaviors that you demonstrate on a CONSISTENT basis. All behavioral examples of abilities from preceding categories should be included as you progress along the continuum.		
	Early	Intermediate	Clinical Readiness
will do (Speaking up when there are possible cheating)	__ Demonstrates a tolerance for ambiguity		__ Makes clinical decisions within the context of ethical practice
Professional Behavior: Acting in a manner consistent with the profession of physical therapy.	__ Accepts feedback without defensiveness __ Demonstrates initiative by approaching course faculty for clarification of information __ Arrives prepared for class every day __ Is punctual __ Establishes professional relationships with peers, faculty and others __ Wears attire consistent with dress code	__ Offers assistance and mutual support __ Arrives prepared for activities and expectations of each day __ Maintains professional relationships with peers, faculty and others	__ Manages conflict in constructive ways __ Demonstrates initiative via seeking new learning opportunities __ Arrives prepared for patient encounters __ Establishes professional relationships with clinical faculty and patients/clients __ Advocates for health and wellness needs of society __ Wears attire consistent with practice environment
Stress management: The ability to identify sources of stress and to develop effective coping behaviors.	__ Recognizes need for healthy school-life balance __ Participates in healthy behaviors to appropriately manages overall health and professional behaviors __ Seeks assistance as needed	__ Develops, practices, and manages a healthy school-life balance __ Continues to participate in health behaviors and coping strategies to appropriately manage overall health	__ Prioritizes multiple commitments __ Responds calmly to urgent situations __ Tolerates inconsistencies in health care environment
Team Skills: The ability and willingness of a group of people to work together to achieve a common aim.	__ Demonstrates awareness of team composition __ Understands importance of clear, accurate and respectful communication __ Monitors and reflects on team	__ Articulates team composition __ Demonstrates leadership skills specific to expertise	__ Practices team interprofessional skills within a classroom and clinical setting and reflects on performance __ Advocates for the patient

Professional Self-Assessment

Summer year 1
 Spring year 1
 Fall year 2
 Summer year 3

Core Abilities	Behavioral Criteria Continuum		
	Please check all behaviors that you demonstrate on a CONSISTENT basis. All behavioral examples of abilities from preceding categories should be included as you progress along the continuum.		
	Early	Intermediate	Clinical Readiness
	behaviors and interactions <input type="checkbox"/> Provides mutual support to team member		

End of Handbook January 2020