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Welcome to the 2014-2015 school year!

The Department of Physical Therapy is proud to welcome you to the University of North Dakota and to our program.

The materials in this Student Handbook will help you understand the current policies and procedures of our program and the University of North Dakota, as well as your responsibilities in the program, university, and professional community. As in all specialized disciplines where patients place their trust and health in your professional abilities, you must meet unique and demanding standards. We shall endeavor to help you meet and when possible, surpass those standards.
**Department of Physical Therapy**

**Office Hours:** 8:00 a.m. to 4:30 p.m.

**Main Office:** 701-777-2831

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<tr>
<th><strong>Faculty Telephone Numbers:</strong></th>
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<tr>
<td>Dave Relling 777-4091</td>
<td>Affirmative Action Office 777-4171</td>
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<td>Cindy Flom-Meland 777-4130</td>
<td>Career Services 777-3904</td>
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<tr>
<td>Tom Mohr 777-3862</td>
<td>Chester Fritz Library 777-2617</td>
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<td>Beverly Johnson 777-3871</td>
<td>Disability Services for Students 777-3425</td>
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<td>Renee Mabey 777-4854</td>
<td>Health Sciences Library 777-3993</td>
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<td>Peggy Mohr 777-3689</td>
<td>Memorial Union Info Center 777-4321</td>
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<td>Sue Jeno 777-3662</td>
<td>School of Graduate Studies 777-2784</td>
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<td>Mark Romanick 777-3668</td>
<td>Student Financial Aid 777-3121</td>
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<td>Meridee Danks 777-3861</td>
<td>Student Health 777-4500</td>
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<td>Gary Schindler 777-6081</td>
<td>University Counseling Center 777-2127</td>
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<td>Michelle LaBrecque 777-6389</td>
<td>University Police 777-3491</td>
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<td>Schawnn Decker 777-6389</td>
<td>Writing Center 777-2795</td>
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<td>Alyson White 777-3873</td>
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<tr>
<td>Sherri Johnson 777-2831 (am) 777-4176 (pm)</td>
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<tr>
<td>Sandy Monette 777-4176 (am) 777-2831 (pm)</td>
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David Relling, PT, PhD.
Associate Professor and Chair: BSPT, University of North Dakota; M.S., Kinesiology, Kansas State University; Ph.D. Physiology, University of North Dakota. Dr. Relling became Chair of the Department of Physical Therapy in June 2014. He has served on numerous University committees and is active in the North Dakota Physical Therapy Association and Federation of State Boards of Physical Therapy. Dr. Relling teaches a number of courses in the areas of pathology, acute care, cardiopulmonary PT, exercise physiology and orthopedics. Areas of research interests include exercise physiology, orthopedics, EMG and motion analysis.

Cindy Flom-Meland, PT, PhD, NCS.
Associate Professor and Director of Clinical Education; BSPT, MPT, Ph.D., Teaching & Learning, University of North Dakota. Dr. Flom-Meland is the Director of Clinical Education program and primarily works with students and clinicians to arrange clinical experiences and obtain clinical sites for students. Dr. Flom-Meland is a credentialed trainer for the APTA Clinical Instructor Education and Credentialing Program. She is active in the North Dakota Physical Therapy Association, APTA, and University committees. Dr. Flom-Meland teaches in the areas of communication and professional behavior, therapeutic agents, motor control, psychological aspects, and neuro-rehabilitation. Areas of research interests include neuro-rehabilitation, clinical education, and professional behavior.

Thomas Mohr, PT, PhD.
Professor and Associate Dean for Health Sciences; BSPT, University of North Dakota; M.S., Physical Therapy, University of Minnesota: Ph.D. Physiology, University of North Dakota. Dr. Mohr served as Chair of the Department of Physical Therapy from 1993 to 2014. Dr. Mohr teaches in the areas of neuroscience, research, electrotherapy, and biomechanics. Areas of research are Neuroscience, Biomechanics, Electromyography, and Motion Analysis.

Beverly Johnson, PT, DSc, GCS.
Associate Professor and Assistant Director of Clinical Education; BSPT, M.S., Physical Education, University of North Dakota; Doctor of Science, Rocky Mountain University. She works with students and clinicians to arrange clinical experiences. She is a team leader for CAPTE’s onsite accreditation teams and a credentialed trainer for the APTA Clinical Instructor Education and Credentialing Program and Advanced Clinical Instructor Program. She presents a number of credentialing workshops for clinical instructors. Teaching areas include physical therapy administration, geriatrics, and prevention and wellness. Research interests are clinical education, interdisciplinary clinical education, and geriatrics (balance and falls).
Renee Mabey, PT, PhD.
Professor of Physical Therapy; BSPT; M.S. Health, Physical Education and Recreation; Ph.D., Teaching & Learning: Research Methods, University of North Dakota. Dr. Mabey is the Director of Outcome Assessment and has been instrumental in designing and implementing our outcome assessment program. Dr. Mabey has served on a number of university committees, particularly in the areas of student learning and program assessment. Dr. Mabey teaches in the areas of patient evaluation, statistics, cardio-pulmonary care, case management, and critical inquiry. Her research interests include outcome assessment and patient evaluation.

Peggy Mohr, PT, PhD.
Professor of Physical Therapy; BSPT, M.S., Ph.D., Special Education, University of North Dakota. Dr. Mohr is very involved in the Pediatric Section of the APTA and is currently on the Pediatric Section Board of Directors. Dr. Mohr has extensive grant writing experience which has benefited the Department and gained recognition for the Department within the University and across the nation. Dr. Mohr teaches in the areas of pediatrics and early intervention, pathology, therapeutic modalities, clinical examination, and soft tissue techniques. Her areas of research are pediatrics, early intervention and family involvement.

Susan Jeno, PT, PhD.
Associate Professor of Physical Therapy; BSPT University of Michigan-Flint: B.S. and M.A., Education/Kinesiology, University of Michigan; PhD, Anatomy and Cell Biology, University of North Dakota. Dr. Jeno serves as the University NCAA Faculty Athletics Representative and participates in numerous campus and professional committees. She chaired the University Senate, active in University governance, and maintains an active role in the PT profession. Dr. Jeno teaches anatomy, biomechanics, orthopedics, manual therapy, acute care, and administration. Areas of research interest are primarily in anatomy, biomechanics, electromyography, orthopedics exercise science, and alternative/complimentary medicine.

Mark Romanick, PT, PhD, ATC.
Associate Professor of Physical Therapy; BSPT and MPT, University of North Dakota. Ph.D. Physiology, University of North Dakota; Athletic Training, University of Idaho. Dr. Romanick has served as an officer and is a Hall of Fame member in the North Dakota Athletic Trainers’ Association. He served on the Board of Directors in the Mid-America Athletic Trainers’ Association and is current treasurer of the North Dakota Physical Therapy Association. Dr. Romanick teaches in the areas of biomechanics and kinesiology, clinical examination and evaluation, manual therapy, intervention techniques, prevention and wellness and advanced anatomy and sports physical therapy. Areas of interest are sports medicine, orthopedics, biomechanics, and biology of aging.
Meridee Danks, PT, DPT, NCS.
Assistant Professor of Physical Therapy; BSPT, MPT, and DPT; University of North Dakota. Dr. Danks has an extensive clinical background working with patients following spinal cord injuries, stroke, traumatic brain injuries and other neurological diseases. Dr. Danks is currently serving on the University's Institutional Review Board and is active in the North Dakota Physical Therapy Association. Dr. Danks teaches in the areas of motor control, applied movement science and rehabilitation, biomechanics and kinesiology, clinical examination and case management. Areas of research include balance training, gait analysis and pressure mapping.

Gary Schindler, PT, DPT, OCS, ATC, CSCS.
Assistant Professor of Physical Therapy; BA, Athletic Training, University of North Dakota; MS, Physical Therapy, University of Wisconsin-La Crosse; Transitional Doctorate degree in Physical Therapy Massachusetts General Hospital Institute of Health Professionals. Dr. Schindler is Director of UND PT Sports Residency. He was a clinical instructor and assisted with UW-Madison and Meriter Hospital's orthopaedic residency program. He is currently pursuing a PhD in Educational Leadership. Dr. Schindler teaches in the areas of orthopaedics, sports medicine, anatomy and therapeutic agents. Areas of interest include sports medicine, orthopaedics, and anatomy.

Michelle LaBrecque, PT, DPT.
Part-time Assistant Professor of Physical Therapy; BSPT, University of Minnesota; MPT and DPT University of North Dakota. Dr. LaBrecque is employed half-time in the Department of Physical Therapy and works part-time in a physical therapy clinic outside the University. Areas of teaching are motor control, clinical examination and evaluation, therapeutic agents, intervention techniques, and applied movement science and rehabilitation.

Schawnn Decker, PT, DPT.
Part-time Assistant Professor of Physical Therapy; BSPT, MPT, and DPT, University of North Dakota. Dr. Decker works half-time in a physical therapy clinic outside the university, and is employed half-time by the Department of Physical Therapy. Dr. Decker has been involved with a number of courses in the curriculum. Areas of teaching are clinical examination and evaluation, orthopedics, manual therapy, prevention and wellness and electrotherapy.
Alyson C. White, BSBA.
Administrative Officer and Coordinator of Admissions. Alyson has been with the Department since 1975. She has a Bachelor of Science in Business Administration from the University of North Dakota. Alyson works with budgets, WICHE, admissions and a variety of other duties. Alyson assists with the advisement of both pre-professional and professional students regarding registration, financial aid, graduation requirements, and housing.

Sherri Johnson
Administrative Secretary/Assessment Coordinator. Sherri has been with the Department of Physical Therapy since June 1997. She has served as coordinator for the Parents as Trainers Project. Sherri is responsible for front office duties and primarily assists with assessment data, development of the department alumni newsletter, and is involved with a number of department projects including setup of student/faculty events.

Sandy Monette, BS.
Administrative Secretary/Database Coordinator. Sandy joined the Department of Physical Therapy in March of 2012. She has a bachelor of science degree in Management from the University of Mary. Sandy is responsible for front office duties and primarily assists with the various functions of the clinical education program. She manages the database programs and is the web page coordinator for the department.
PHILOSOPHY STATEMENT

The UND Department of Physical Therapy seeks to graduate physical therapists concerned with restoring, maintaining, and promoting optimal physical function for all persons under their care, within a variety of practice environments. The graduate is to be an advocate for health and wellness at the individual and societal levels.

The guiding principle of the Department is that professional education is best accomplished through the interplay of curriculum, faculty, and students. The curriculum plan places particular value on the inclusion of liberal arts, foundational sciences, clinical sciences, and complimentary clinical education. The curriculum content is presented through traditional, problem solving, case scenario, and clinical experience formats. A progression in concept development from simple to complex is evident. The curriculum values and promotes skills for life long learning, encourages the critical analysis of current and new knowledge, supports research for the advancement of the profession, and advocates service to the community and the profession.

The principle role of faculty is to facilitate the teaching and learning process, and to enable and challenge the growth of the learner. The faculty, with diverse interests and experiences, are to model professional behaviors of education, research, service, and life-long learning. Students are expected to be self-aware, self-directed, and responsible for their learning. They are presumed to be intellectually curious and will desire to be reflective learners and practitioners. Students will demonstrate respect for self and others, and a commitment to the profession of physical therapy.

It is also the intent that the professional program be reviewed periodically and evaluated by academic and clinical faculty, students, practitioners, and other community and university personnel to maintain an optimal educational experience for students. It is expected that the program will continually evolve in response to political, social, economic and professional forces and emerging health care delivery trends.

MISSION STATEMENT

The mission of the Department of Physical Therapy is to prepare physical therapists who will provide quality physical therapy services. The professional services provided by a physical therapist demand a strong background in the liberal arts and clinical sciences as well as high moral and ethical standards. In addition to clinical practice expectations, teaching, service, and research responsibilities are an integral part of the educational experience.
GOALS & OBJECTIVES

STUDENTS

Goal 1: The student will demonstrate the skills necessary for the entry-level practice of physical therapy.

➢ Objective: The student will demonstrate entry-level competence on all written and practical examinations.
➢ Objective: The student will demonstrate entry-level competence in all clinical skills by the end of their clinical experiences.
➢ Objective: The student will demonstrate entry-level skill in physical therapy examination, evaluation, diagnosis, and the development of an appropriate plan of care and physical therapy intervention.
➢ Objective: The student will plan, initiate, coordinate and evaluate the efficacy of intervention programs to meet patient/client needs.
➢ Objective: The student will demonstrate effective written and oral communication skills.
➢ Objective: The student will demonstrate knowledge of basic administrative procedures.

Goal 2: The student is an advocate for service to the community and the profession.

➢ Objective: The student will develop an awareness of the importance of physical therapy in community health systems and participate in service learning projects and activities.

Goal 3: The student will develop critical inquiry skills related to clinical and basic science research.

➢ Objective: The student will demonstrate a commitment to evidence based practice, interpreting and applying the results of published research.
➢ Objective: The student will apply principles of the scientific method and collaborate with faculty and peers to design and implement a scholarly project.

Goal 4: The student will develop the skills required for life long learning.

➢ Objective: The student will demonstrate a commitment to evidence based practice, continuing education, continued competency and involvement in professional organizations.
➢ Objective: The student is expected to be self-aware, self-directed, and responsible for his or her learning.

Goal 5: The student is to be an advocate for health and wellness at the individual and societal levels, demonstrate respect for self and others, and a commitment to the profession of physical therapy.

➢ Objective: The student will demonstrate professionalism in the classroom and in the clinic.
➢ Objective: The student will demonstrate ethical behavior and proper concern for patient’s rights.
➢ Objective: The student will participate in an advocacy role regarding health, wellness, and societal needs.
FACULTY

Goal 1: Faculty members should role model a commitment to service activities to the community and the profession.

- Objective: Faculty members will demonstrate an active role in community and/or professional service involvement and encourage that same activity in the professional students.

Goal 2: Faculty members are to be engaged in scholarly activity, the promotion of evidence based practice and pursuit of professional advancement.

- Objective: Faculty members are expected to engage in research activities that will contribute to the body of knowledge in physical therapy.
- Objective: Faculty members should provide evidence for the methods, procedures and theories taught in the curriculum.
- Objective: Faculty members must show accomplishments in teaching, service and scholarly activity that is consistent with the expectations for promotion.

PROGRAM

Goal: The program, through its faculty and students, will show a commitment to the private and professional communities through activities of health promotion, continuing education, service and advocacy for the physical therapy profession.
The physical therapy program at the University of North Dakota School of Medicine and Health Sciences has a responsibility to society to graduate the best possible future physical therapists. All graduates of the physical therapy program must have knowledge, skills, and attitudes to function in a wide variety of clinical situations and to render a wide spectrum of patient care. The Department of Physical Therapy’s Technical Standards are designed to ensure the graduation of capable, well-rounded future clinicians.

It is the experience of the Department of Physical Therapy that a number of individuals with disabilities (as defined by Section 504 of the Rehabilitation Act and the Americans with Disabilities Act) are qualified to study and practice physical therapy with the use of reasonable accommodations. To be qualified for the study of physical therapy, those individuals must be able to meet both the department’s academic standards and technical standards with or without reasonable accommodation. Accommodation is viewed as a means of assisting students with disabilities to meet the standards by providing them with an equal opportunity to participate in all aspects of each course or clinical experience. Reasonable accommodation is not intended to guarantee that students will be successful in meeting the requirements of the course or the clinical experiences.

I. **Overview of Technical Standards**

Beyond the stated admission requirements, students must demonstrate with or without accommodations:

1. Adequate gross and fine motor ability to perform examination and intervention procedures. The physical therapy student must be able to:
   - Safely transfer individuals or equipment using proper body mechanics or instruct others in the proper procedures
   - Provide for individual’s safety and well-being in all therapeutic activities

2. Adequate sensory and cognitive skills to examine, evaluate, diagnose, and implement intervention strategies as applied to physical therapy.

3. Critical thinking and problem-solving abilities leading to mature, sensitive, and effective decisions in the academic and clinical environments.

4. Effective communication with peers, faculty, patients, clients, family members, caregivers, other health care providers, consumers, and payers using verbal, nonverbal, and written formats.

5. Mature behavioral and social attributes with the ability to:
   - Prioritize, organize, and effectively manage tasks within an appropriate timeframe
   - Establish and maintain mature, sensitive, and effective relationships with peers, faculty, patients, clients, family members, caregivers, other health care providers, consumers, and payers
   - Maintain intellectual and emotional stability and maturity under stress, while also maintaining appropriate performance standards
6. Sensitivity to individual and cultural differences in all professional interactions.

II. Description of Technical Standards

These skills apply to all candidates for admission and students within the professional program. The Committee on Admissions will consider for admission applicants who demonstrate the ability to perform, or to learn to perform, the essential skills listed in the Technical Standards. The Department must ensure that patients are not placed in jeopardy by students with impaired intellectual, physical, or emotional functions. Prospective and current students will be evaluated on their academic record in addition to their physical and emotional capacities to meet the full requirements of the curricula and to graduate and practice as skilled and effective professionals.

A candidate of or student in the curriculum must have the abilities and skills to perform in a reasonably independent manner. While attempts to develop creative ways of opening the curriculum to competitive qualified individuals with a disability is possible, the Department must maintain the integrity of its curriculum and preserve those standards deemed essential to the education of a student earning a Doctor of Physical Therapy degree.

To facilitate compliance with the Technical Standards developed by the Department of Physical Therapy, the following skills are set forth as examples. These are not intended to be all inclusive, rather present a basic understanding of each standard.

1. **Motor (gross and fine):** Candidates/students must have sufficient motor function to perform evaluation, treatment, and emergency procedures without injury to the patient or self. Students must be able to use their abilities to move to successfully complete classroom requirements, perform a physical examination, and provide physical therapy intervention for standard treatment, as well as to provide care during emergency situations. Please note that the terms "frequently" (frequent repetition for 1/3 to 2/3 of a full work shift) and "occasionally" (repetition for up to 1/3 of a full work shift) have been used. The following specific movement abilities are required:

- When not participating in clinical education, ability to sit between 2 to 10 hours daily.
- When not participating in clinical education, ability to stand for 1 to 2 hours daily.
- When not participating in clinical education, ability to walk intermittently for up to 2 hours daily.
- When participating in clinical education, ability to stand or walk for at least 7 hours daily and to sit for at least 1 hour daily – modifiable according to the schedule of the specific facility to which the student is assigned.
- Ability to relocate living arrangements outside the area in which the student customarily lives to complete 1 or more clinical rotations of up to 10 weeks in duration.
- Frequently lift items less than 10 pounds and occasionally lift items between 10 and 50 pounds.
- Carry up to 25 pounds while walking up to 50 feet.
- Frequently exert 14 pounds of push/pull forces to objects up to a distance of 50 feet and occasionally exert 27 pounds of push/pull forces for distances of up to 50 feet.
- Frequently twist, bend, stoop, and squat.
- Depending on what class is being taken, or depending on what setting a student is placed for clinical rotation, either occasionally or frequently kneel, crawl, climb stools, reach above shoulder level.
Frequently move from one location to another and from one position to another at a speed that permits safe handling of classmates and patients. Handling a workload efficiently and safely requires the ability to respond promptly with appropriate movement patterns.

In most cases, when required to travel from one floor to another in a building, a student will have access to an elevator. However, students must have the ability to negotiate stairs and uneven terrain when elevators are not available (for example, when participating in clinical assignments in patient homes) or when assisting patients to learn how to safely negotiate stairs.

Frequently use the hands with repetitive motions using a simple grasp and using a firm grasp and manual dexterity skills.

Frequently coordinate verbal and manual activities with large movement activities.

Ability to assess strength of patient.

Ambulation ability and balance sufficient to aid patients with or without assistive devices during transfers and gait training.

Ability to manipulate small items, dials, lines, tubes, etc. without disruption of care or injury to patient/self.

Upper and lower extremity strength and upright posture sufficient to perform patient evaluation/intervention, respond to emergency situations, and perform CPR.

2. **Visual Integration**: Adequate vision to be able to:

- Distinguish changes in symmetry, color, texture of body structures.
- Determine range of motion, edema, joint effusion, etc.
- Integrate examination and intervention techniques.
- Read charts, graphs, instrument scales, etc., in whatever form presented.
- Observe a patient at a distance and close at hand.
- Observe demonstrations, experiments, laboratory exercises.

3. **Sensation**: Enhanced ability in sensory skills is essential for a physical therapist. Tactile and proprioceptive abilities are necessary to perform a complete and thorough examination of and intervention for the patient including:

- Changes in skin temperature, texture.
- Palpation of body structures, distinguish body parts by touch.
- Assessment of arthro- and osteokinematic joint movement.
- Ability to provide appropriate resistance, timing, pressure, etc. during examination and intervention techniques.

4. **Cognitive Skills**: The candidate/student must have the:

- Ability to problem-solve one or more problems within specific timeframes (which are often very short).
- Ability to function effectively using all necessary cognitive and physical skills under normal working conditions and timeframes.
- Ability to meet deadlines.

5. **Critical Thinking and Problem Solving**: The candidate/student must possess the abilities to critically think and problem solve both in the classroom and in clinical settings. These skills include:
Ability to comprehend and apply mathematical principles for statistical concepts and solving clinical problems.

Ability to integrate examination findings into a comprehensive intervention strategy for the patient.

Ability to assimilate large amounts of material communicated through lecture, discussion, readings, demonstrations, and practice.

Ability to utilize statistical information to interpret published reports regarding efficacy of care and apply those findings in a rational manner.

Ability to develop research questions, collect data, perform and interpret statistical calculations, and formulate outcomes in a logical manner.

6. **Communication:** The candidate/student must be able to:

- Speak, hear, observe to gain information, examine patients, describe status of patient, changes in mood, activity, posture, etc.
- Perceive non-verbal communication.
- Speak, read, and write in English in an effective and professional manner to communicate to all members of the health care team.
- Maintain appropriate written records.

7. **Behavioral and Social:** The candidate/student must:

- Demonstrate sufficient emotional and mental health to fully utilize his/her intellectual and motor abilities.
- Exercise sound judgment in all situations, including under stress.
- Be able to promptly complete all duties involved in examination, evaluation, intervention, and discharge planning.
- Be able to develop mature/sensitive/empathetic relationships with the patient, family, caregivers, and other members of the health care team.
- Have the ability to cope with and tolerate heavy workloads, demanding patients, life-threatening clinical situations, rapidly changing environments and conditions; display flexibility; and function appropriately with the uncertainties involved in patient care.
- Maintain alertness and concentration during an 8- to 12-hour work period.
- Recognize and respond appropriately to potentially hazardous situations.
- Be able to work independently and with others under time constraints.
- Prioritize requests and work concurrently on at least two different tasks.
- Project image of professionalism at all times.

Students who need accommodations should contact Disability Services for Students at 701-777-3425 or refer to their website at: http://www.und.edu/dept/dss/ for more information on the services offered at the University of North Dakota.

Approved, UND PT Department January 2009
As you begin your experience as a student in the Physical Therapy Program, it is the intent of this institution to inform you of any risks or any potential health hazards that you may encounter during your educational and/or clinical experiences. It is also the intent of the department, whenever possible, to inform students of potential risks to their safety in future professional practice. It is the practice of the Physical Therapy Department to obtain informed consent from all students prior to beginning the educational program. Therefore, your careful review of the information in this document is important for your personal knowledge and safety and mandated by Department standards.

Your decision to enroll in this program is voluntary. Should you have questions regarding any of the information below, please contact the Department of Physical Therapy to express your concerns so that an explanation may be provided (contact information provided at the end of this document).

**Student Responsibilities:** You will be assisted in your study by qualified faculty. Appropriate resources (access to library, equipment, etc.) will be provided for your use and benefit. However, the responsibility for your learning will remain with you, with the expectation that you will complete each of the required classes and clinical experiences with a letter grade of "C" (2.00 on a 4 point scale) or better. However, once you are admitted to the Graduate School, you must maintain a "B" (3.0 on a 4 point scale) grade point average. You will also be required to participate in all classroom and laboratory activities with an attitude that reflects a high degree of professionalism and a commitment to learning the practice of physical therapy. If you experience difficulty in a course or require accommodations, it is your responsibility to bring the matter to the attention of the faculty member in charge of the course and provide appropriate documentation.

**Student Requirements:** As a student in the Physical Therapy program, you will be required to complete a three year educational program of didactic work and clinical experiences. You will be required to complete clinical practicum experiences as a component of your educational experience. Students should be aware that completion of the educational program does not guarantee licensure. The costs for the program include physical therapy tuition and fees, books, room and board. Costs associated with your clinical experiences such as travel, room and board as well as any drug screens, background checks and/or immunizations required by clinical affiliation sites or jurisdictions. You are also responsible for obtaining CPR training for the Healthcare provider at your expense, and maintaining appropriate health insurance coverage as mandated by the university and/or clinical affiliation facilities. You will be expected to become a student member of the American Physical Therapy Association and maintain your membership throughout your professional training.

**Technical Standards:** As you complete the professional program, you will be required to be in compliance with the UND PT Technical Standards.

**Educational Experiences:** You will study and apply examination, evaluation and intervention strategies, therapeutic modalities and clinical skills that are consistent with approved, standard clinical practice. In addition, you will also be required to experience clinical practice activities in the role of a "patient." Examples of these activities may include therapeutic modalities such as ultrasound, electrical stimulation, and hydrotherapy. You will be expected to perform and be a
subject for assessment techniques such as strength testing, body fat composition assessment, and neurological testing. You will be performing a variety of intervention activities such as resistive exercises and joint mobilization. In the role of a "patient", you may also be required to expose portions of your body for appropriate application of examination or intervention procedures. During such activities, appropriate draping procedures will be used to prevent any undue exposure or discomfort.

**Research Activities:** You will have opportunities to participate in research as both an investigator and subject. All human subject research activities will be submitted to the University of North Dakota’s Institutional Review Board for review and approval; and written documentation of subjects’ informed consent is mandated prior to the initiation of any research activities.

**Confidentiality:** Confidentiality of and restricted access to student records are mandated by the Family Educational Rights and Privacy Act of 1974 and subject to the policy guidelines established by the University of North Dakota as defined in the Code of Student Life. All information contained in University student records is considered confidential, except for directory information, the release of which may be restricted by the student. Restricted access to such information will be strictly maintained by the Department of Physical Therapy in accordance with these policies and mandates.

**Accommodations:** Students planning to use accommodations must complete a DSS application and submit current documentation of disability. Information regarding accommodations can be obtained from Disability Support Services on campus.

**Dress Code:** As a professional in training, students are expected to dress appropriately both in class and while on their clinical experiences. Appropriate laboratory clothing will be required. Information regarding professional dress in the clinic will be provided by the Director of Clinical Education. No caps or hats will be allowed in the classroom or laboratory during lecture or laboratory sessions, otherwise casual dress is acceptable for normal classroom activities; and professional dress will be expected for more formal presentations or when you are acting as a teaching assistant.

**Risks:** The risks from participation in this educational program are considered to be minimal. There is a limited risk of exposure to infectious agents due to the fact that in your classroom and clinical experiences and future professional practice, you will be interacting with individuals with both diagnosed and undiagnosed conditions. You may also be exposed to potentially hazardous materials during laboratory and clinical experiences. You will receive instruction about and practice in implementing preventative measures to limit the risks of exposure and, during your educational experiences, appropriate universal precautions and prevention protocols will be consistently implemented to prevent any unnecessary exposure.

You may experience some discomfort or embarrassment when portions of your body must be exposed for examination or intervention procedures. Appropriate draping procedures and professionalism in interpersonal relationships will be consistently modeled by faculty and be required of all students and participants. In addition, efforts will be made to minimize the necessity and extent of personal exposure and to prevent any personal discomfort.

Should any injury or emotional or psychological concerns emerge as the result of your participation in this educational program, you will be provided with emergency medical intervention and will be
referred to appropriate health care professionals for medical intervention similar to the emergency and follow-up intervention available to a member of the general public in similar circumstances. You and/or your third party payer must provide payment for any intervention necessary.

Each clinical site or institution will have policies describing confidentiality of records and other personal information as well as policies and procedures regarding the use of subjects in research if applicable. Students will be required to be in compliance with these policies and procedures and will benefit from the protection such policies provide for students in these settings.

**Licensure Requirements:** It is the student’s responsibility to check with the jurisdiction in which he/she desires to practice regarding the requirements for licensure, including drug screens, criminal background checks, and verification of physical therapy education.

**Benefits of Student Participation:** As a student in the Physical Therapy Department at the University of North Dakota, you will participate in a rigorous curriculum that is based on the mission, philosophy and values of this institution. The curriculum is designed to facilitate your achievement in both the academic coursework and clinical practicum components of this program. As such, this curriculum provides an organized approach to academic study and clinical learning with educational strategies and experiences that will facilitate your accomplishment of the specific professional practice, patient/client management and practice management skills that will be required of a graduate of this Department.

There are many benefits associated with completion of this educational program, including receiving the training and knowledge required to sit for the National Physical Therapy Examination. An additional benefit is that your interactions with the academic and clinical faculty associated with this Department will provide opportunities to establish an excellent support network of mentors and future colleagues. You will be provided with opportunities to learn from numerous clinicians and faculty who have expertise in a variety of areas and who are committed to facilitating your growth as a professional. In addition, as a student in this Department, professional liability coverage will be provided for you during your clinical experiences through University of North Dakota’s professional liability insurance. You will also have opportunities to engage in research with experienced mentors and use extensive experimental tools and equipment. Your experience will also provide you with opportunities to be active in both professional and student organizations.

**Termination of Participation:** You have the right to withdraw from the program at any time and without penalty. Your decision to withdraw will not result in any prejudice or influence your relationship with the Department of Physical Therapy or the University of North Dakota. However, students are expected to participate in ALL lectures, laboratories and discussion sessions as applicable. Failure to participate appropriately may result in a dismissal from the program. The Department of Physical Therapy retains the right to dismiss you from this program based on academic performance and/or unprofessional behavior and in accordance with the policies and requirements of the University of North Dakota as defined in the Code of Student Life and the Departmental Scholastic Standards.

Should you have concerns regarding departmental decisions, confidentiality of student records, grades, educational experiences/outcomes or other issues, you have the right to have your concern addressed by the faculty involved and/or the departmental chairperson. Should such efforts be unable to resolve the issue(s), you have the right to appeal decisions and/or file grievances in
accordance with the Departmental Scholastic Standards and/or the University policies as outlined in the Code of Student Life.

If you have questions or concerns regarding the information above, please contact one of the individuals listed below for further explanation. Please keep your copy of this document with your educational records for future reference.

Approved, UND PT, May 2006

SCHOLASTIC STANDARDS

POLICIES

1. **Modifications to Policy.** The Scholastic Standards Committee reserves the right to make modifications to the Scholastic Standards policies. Policies take effect on the date of approval by the Committee of the Whole. Students will be notified of the new policies at the date of approval.

ATTENDANCE

1. **Class Attendance.** Class attendance is expected 100% of the time.

2. **Notification of Absence.** Students who must be absent are to notify the instructor in person or via telephone or e-mail prior to class time. The reason for the absence should be given. Every effort should be made to communicate directly with the instructor; messages should be left on voice mail only in emergency circumstances.

3. **Responsibility for Course Content.** It is the student’s responsibility to acquire the information missed due to absence. The student will be held responsible for all materials, notes, and course information presented in the course.
   a) The student should check with the instructor to determine how best to compensate for missed material.
   b) To ensure the student’s knowledge base, the instructor has the option to assign additional work for laboratories or lectures not attended.

4. **Examination Make-up:**
   a) If an absence is anticipated on the date of a scheduled examination, the student is expected to make arrangements for a make-up examination prior to the absence.
   b) If an absence is unexpected, arrangements for make-up examinations must be made by the student within three (3) days of the student’s return to class.
   c) If the student fails to take the responsibility for scheduling a make-up examination, the total point value of the examination is forfeited.
5. **Extended Absences** (i.e. more than 3 days). The student is required to prepare a written notification prior to the absence and submit it to the Department Chair. The request will be reviewed by the Committee of the Whole and placed in the student’s file.

6. **Promptness.** Students are expected to be on time for classes and in appropriate attire (i.e., in lab, in lab clothes, at the start of class). Promptness is also expected following breaks within a class period.

7. **Unexcused Absences and Tardiness.** Unexcused absences and tardiness will be addressed in the following manner:

   a) The instructor and/or chairperson will discuss the issue with the student.

   b) Unexcused absences and repeated tardiness are considered unprofessional behavior and will be documented in the student’s file.

**COURSE, GRADE POINT AVERAGE AND CANDIDACY REQUIREMENTS**

1. **Minimum Grade Requirement.** A grade of ‘C’ is the minimal passing grade. Failure to pass a course will result in dismissal from the professional program. Students dismissed from the program who want to re-enter the program must apply for readmission to the program. See section titled ‘Readmission.’ A student may not progress in the program until all sequential coursework has been successfully completed.

2. **Requirements for Candidacy.**

   a) In Fall and/or Spring semesters of Year 1 in the professional program, students with less than 3.00 cumulative GPA are placed on departmental probation and must continue to improve their GPA in subsequent semesters.

   b) If the student does not improve his or her GPA, they will be at risk for advancement to candidacy.

   c) If the student has a cumulative GPA of less than 3.00 at the end of Year 1 Spring Semester, the student must achieve a ≥ 3.00 term GPA in Summer Session Year 1. Students who have a cumulative GPA of ≥ 3.00 after the Spring semester are not required to have a Summer Session GPA of 3.00, but they must successfully pass all Summer Session coursework.

   d) Each student must successfully pass the Year 1 Competency Examination given at the end of the first summer session.

   e) **Rights to candidacy are earned by meeting the GPA requirements listed in c) above AND by the successful completion of the Year 1 Competency Examination.**

   f) Students who fail to advance to candidacy will be dismissed from the professional program.

   g) Students meeting all of the requirements will advance to candidacy at the end of the first Summer Session prior to beginning their first clinical experiences.
h) The physical therapy department chairperson will forward the completed forms on each student to the School of Graduate Studies verifying the completion of all requirements for advancement to candidacy at the end of the first Summer Session.

3. **School of Graduate Studies Requirements.** Once the student has advanced to candidacy, the School of Graduate Studies will begin monitoring the student's cumulative GPA, which must be \( \geq 3.00 \) for each term thereafter. If the cumulative GPA is not \( \geq 3.00 \), School of Graduate Studies policies on Academic Standards and probation will be in place at that time. See the School of Graduate Studies catalog regarding Academic Standards.

**EXAMINATIONS**

1. **Laboratory.** For each laboratory examination, a score of 80% is required. If the student fails a laboratory examination, the examination must be retaken. The student will have only two opportunities to achieve the required 80% score. However, the score received on the first examination is maintained for grading purposes. The second attempt of a laboratory examination will be with two faculty members. Failure to pass a laboratory examination on the second attempt will result in failure of the course.

2. **Lecture.** Students are expected to pass all written examinations. Students who fail a written examination may be asked by the course instructor to retake the examination to show competency of the lecture material. However, the score received on the first examination will be used to compute the final, cumulative grade.

3. **Quizzes.** It will be at the instructor's discretion whether or not missed quizzes may be completed. Quiz points may be forfeited if absent.

4. **Cumulative.** The final grade in a course will be determined by the course instructor and the grading criteria will be outlined in the course syllabus. To pass a course, the cumulative examination scores (e.g. lecture, quizzes and laboratory) must achieve the minimum competency level of 76%. Failure to achieve this competency level results in failure of the course.

5. **Final Comprehensive Examination.** The Comprehensive Examination taken during the fall semester of the third year serves as the comprehensive examination required by the School of Graduate Studies (Refer to the School of Graduate Studies Catalog regarding the requirement of a Comprehensive Examination.)

**ASSIGNMENTS**

Assignments are to be turned in during class on the due date specified in the syllabus, unless the instructor has provided other instructions. Late assignments are subject to penalties at the instructor's discretion. Late Assignments or failure to participate in or complete assignments will be addressed as *Unprofessional Behavior* and will be documented in the student's file.
CLINICAL EXPERIENCE

1. **Attendance.** Clinical attendance is expected 100% of the time. Clinical experiences are scheduled to end on a Wednesday, allowing Thursday and Friday for travel or to make up any time that may have been missed (i.e. illness, funeral, personal leave).

2. **Notification of Absences.** Students who must be absent are to notify the clinical instructor as soon as possible. Students must also inform the Director of Clinical Education (DCE) as soon as possible. The reason for the absence must be provided. Strategy to make up the lost time must be approved by the DCE and the Clinical Coordinator of Clinical Education (CCCE) or Clinical Instructor (CI).

3. **Extended Absences** (i.e. more than 3 days). The student is required to prepare a written notification prior to the absence and submit it to the DCE and Department Chair. The request will be reviewed by the Committee of the Whole and placed in the student's file.

4. **Promptness.** Students are expected to arrive each day at the clinical site early enough to be prepared for the arrival of the first patient/client and to be organized for the upcoming day (recommend 15 minutes).

5. **Pre-clinical Coursework.** All course work must be successfully completed prior to starting any clinical experience.

6. **Clinical Experience Course Requirements.**

   a) For a Grade of less than “C” on any one nine week experience:

   - If a student fails the first clinical course in the two course sequences, his/her performance will be reviewed by the DCE and the Committee of the Whole to determine if that student can progress to the second course in the sequence. The student is placed on academic probation and must petition to repeat the experience. Petition must include specific strategies to address areas of weakness and capitalize on strengths to assist with successful completion of the experience on the second attempt.

   - If a student is not allowed to progress to the second course, he/she will be required to complete the entire sequence at a later date to be determined by the faculty and the DCE.

   - If the student is allowed to continue on to the second course, he/she will repeat the first clinical experience at a date determined by the faculty and the DCE.

   - A student who fails the first course due to safety concerns will not be allowed to progress to the second clinical course until he/she verifies competency by successfully passing a comprehensive practical examination and/or appropriate coursework to ensure that he/she is competent and safe to continue on in the professional program and complete the required clinical experiences.
• In the case of PT 528 and PT 529, if a student fails one of these courses he/she will not be able to repeat the course(s) until the following fall semester and therefore will not move forward in the progression of the curriculum until successful completion of the clinical course work. This will delay graduation by at least one year. Specific written or practical examinations may be required by the faculty and/or clinical site to ensure clinical competency has been maintained during the interim between first and second attempt. Competency tests must be passed on the FIRST attempt or the student will be dismissed from the program.

• In the case of PT 552 and PT 553, the course(s) will be repeated upon availability of placement within a clinical site delaying graduation until August or December.

b) Grade of less than “C” on more than one nine week experience:

• Failing more than one nine week experience will result in dismissal from the professional program. Students dismissed from the program, who want to re-enter the program, must apply for readmission to the program. See section titled Re-admission.

c) For any course completed 3.5 years or more prior to a clinical experience, competency in the course content MUST be verified through appropriate written and/or laboratory practical examinations as determined by the Committee of the Whole.

d) Red Flag Issues. Five (5) criteria of the Clinical Performance Instrument (CPI) are considered “red flag” items addressing safety, professional behavior, accountability, communication, and clinical reasoning.

• Safety of patients and of the student must be maintained. If safety concerns become evident, the clinical experience will be terminated and the student will have failed the nine week rotation.

• Violating the APTA Code of Ethics or Standards of Practice are grounds for dismissal from the clinical setting and considered failure of the nine week rotation.

SCHOLARLY PROJECT POLICIES

1. Quality of Written Work. The manuscript should be written as if for publication. Manuscript drafts and final copy are to be submitted in a timely manner, as outlined by the advisor. AMA Style is required.

ACADEMIC DISHONESTY

Department of Physical Therapy Honor Code Pledge: “Upon my honor as a professional student in the physical therapy program at the University of North Dakota, I pledge that I will not give nor receive unauthorized aid on written examinations, laboratory practical examinations, written assignments, take home assignments or clinical assignments”

Examination disclaimer: “I affirm that I have adhered to the Honor Code in this assignment”
1. **Forms of Academic Dishonesty.** Academic dishonesty includes, but is not limited to:

   a) Copying or distributing examination items
   b) During testing, using crib notes or various forms of technology not authorized by faculty
   c) Copying another student’s written paper or examination, with or without their knowledge
   d) Helping someone else cheat on a test
   e) Communicating or collaborating during a test by electronic means such as telephone, texting or PDAs
   f) Discussing test items or answers (written or laboratory) with students who have not yet taken the examination
   g) Cutting and pasting text from any source without giving proper citation to that source
   h) Plagiarism of any materials
   i) Fabricating or falsifying written materials
   j) Falsely reporting information or actions in clinical or classroom laboratories
   k) Submitting the same paper, or a substantially similar paper, for the requirements of more than one course without the approval of the instructor(s) concerned
   l) Submitting term papers or assignments written by another person
   m) Consenting to having one’s work used by another student as his or her own
   n) Collaborating on a project (in person or via electronic means) when the instructor asked for individual work
   o) Using a false excuse to obtain an extension on a due date or delay an examination
   p) Depriving other students of necessary course materials by stealing books, periodicals, or other materials from libraries, AV centers, etc.

2. **Consequences.** Academic dishonesty may result in one or more of the following:

   a) possible remediation examination and/or coursework
   b) the loss of credit for the test or work in question
   c) a failing grade in the course
   d) probationary status for a prescribed period of time
   e) suspension or dismissal from program
   f) additional consequences as deemed appropriate by the *Code of Student Life* and the Scholastic Standards Committee

3. **Disciplinary Action.** The level of disciplinary action will be determined by the chairperson or academic dean.

4. **Collaborative Work.** In collaborative work, all students are expected to participate equally and contribute to the learning experience. Agreement must be reached within the group for communication, expectations, and the division of work.

**REPORTING INCIDENCES OF ACADEMIC DISHONESTY**

1. **Submission of Written Statement.** Faculty will only accept a signed written statement from a student who is alleging academic dishonesty of a classmate.

2. **Code of Student Life.** The matter will be handled by the PT faculty, Scholastic Standards Committee, or the Dean of Students, as outlined in the *Code of Student Life.*
DISMISSAL POLICIES

1. **Unsatisfactory Academic Work or Unprofessional Conduct.** Unsatisfactory academic coursework or unprofessional conduct as defined in this document may result in dismissal from the Physical Therapy program.

2. **Evidence of Academic Dishonesty.** Evidence of cheating on assignments or examinations will make the student liable for the above consequences and those outlined in the Code to Student Life.

3. **Confidentiality.** Disregarding the rights and confidentiality of patients/clients may result in dismissal from the program.

4. **Standards of Care.** Disregarding standards for quality of care may result in dismissal from the program.

PROBATION

1. **Probation.** Probation results from unsatisfactory performance in professional coursework or during clinical experiences, low cumulative GPA, or unprofessional conduct.

2. **Cumulative GPA requirements.** The cumulative GPA requirements for the professional physical therapy program are found in the Course and Grade Point Average Requirements section of this document.

3. **Monitoring of Student.** The UND Physical Therapy Department Scholastic Standards Committee will review the progress of probationary students and make recommendations to the Committee of the Whole regarding the student’s progress at the end of each semester. Once a student advances to candidacy, usually after completing the first summer session, the School of Graduate Studies will begin monitoring the cumulative GPA, which must to be ≥ 3.00. The School of Graduate Studies Academic Standard policies will be in effect at that time. See the School of Graduate Studies catalog regarding Academic Standards.

4. **Time Period.** Probationary periods will be determined on the basis of individual circumstances, recommendations of the Scholastic Standards Committee and decisions of the chairperson. Students will be notified of the duration of probationary periods and any requirements or criteria for successful completion of the probationary period.

5. **Expiration of Probation Period.** At the end of a probationary period, probationary status is terminated or the student is dismissed, based on a review of the student’s progress by the Committee of the Whole and the decision of that Committee. It will be the student’s responsibility to provide the Scholastic Standards Committee with evidence of the successful completion of the requirements of probation, which will be presented to the Committee of the Whole for review.

6. **Recurrence of Behavior Resulting in Probationary Status.** A recurrence of the behavior which led to a probationary status, additional unsatisfactory completion of academic work or unprofessional conduct will result in dismissal from the Physical Therapy program unless otherwise specified by the Committee of the Whole.
7. **Appeal Process.** A mechanism for appeal is available, as specified by Code of Student Life.

**RE-ADMISSION**

1. **Application for Re-admission.** Students who voluntarily withdraw or are dismissed must apply for re-admission under the following procedures:

   a) The student must notify the department chairperson of his or her desire to apply for re-admission by completing the Re-Admission Application for Graduate School which can be downloaded from the School of Graduate Studies website.

   b) Included with the Re-Admission Application form, the student must write a petition outlining his or her rationale for re-admission and the objectives and strategies which will optimize success should he or she be re-admitted to the program. The student may be given an opportunity to present the petition in person if he or she so desires.

2. **Ruling on Re-Admission.** The Committee of the Whole will review the Application and the petition and rule on the request. The request for re-admission does not assure re-admission. The re-admission application must be approved by the department and department chair before forwarding the application to the School of Graduate Studies for final approval.

3. **Re-admission.** If the application is accepted, a contract will be drawn up between the department and student outlining the steps necessary for re-admission. This contract may include but is not limited to a delay of re-admission, repetition of course work, competency testing for previously completed course work, GPA requirements or other criteria to be determined by the Committee of the Whole. Re-admission will be under probationary status. Violation of probation stipulations will be grounds for permanent dismissal from the program.

   For any course completed 3.5 years or more prior to a clinical experience, competency in the course content MUST be verified through written and/or laboratory practical examination before the student enrolls in the upcoming clinical experience.

**ACCOMMODATIONS**

1. All students must meet UND-PT Technical Standards.

2. **Student Responsibility.** It is the student’s responsibility to inform the chairperson in writing of any need for program accommodations. Supportive documentation will be required.

3. **Accommodations.** The student and program will work together to reasonably accommodate the student's need(s) as mandated by ADA regulations.

**STUDENT RESPONSIBILITIES**

1. **Professional Behavior.** Professional behavior and judgment in all activities is evidenced by:

   a) timely arrivals and attendance;
   
b) being prepared, paying attention, and participating in class discussions;
   
c) showing respect for patients/clients, peers, instructors, staff and guests;
d) dressing appropriately, as determined by class activities or events and as required for clinical experiences.

2. **Core Values.** Students are expected to adhere to/demonstrate the APTA core values of accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility.

3. **Code of Ethics.** Student Adherence to APTA *Code of Ethics* is expected.

4. **Agency Regulations.** Students are expected to know and adhere to regulations within the agencies and/or facilities to which they are assigned.

5. **Working Relationships.** Students are expected to promote honest and harmonious working relationships with colleagues, faculty, staff, supervisors, and patients/clients.

6. **Attitude Toward Others.** Students are expected to maintain an attitude of respect and courtesy toward colleagues, faculty, staff, supervisors, and patients/clients.

7. **Competence.** Students are expected to engage in only those procedures in which they have demonstrated competence through lecture, laboratory, and comprehensive examination passing scores.

8. **Integration of Material.** Students are expected to integrate material from all courses.

9. **Supplemental Materials.** Students are expected to take the initiative for learning supplemental materials in addition to required course content.

10. **Clinical Manuals.** Students are expected to review and analyze information in clinical manuals of the sites to which they have been assigned.

11. **Unprofessional Behavior.** Unprofessional behavior, as referred to in this document, will result in Scholastic Standards Committee action which may include dismissal from the program.

**GRIEVANCES**

1. **Grievance from a student.**

   a) Issue (personal or academic) must first be addressed with the involved person(s).

   b) If issues remain unresolved, the Chairperson of the department should be notified. A meeting to seek resolution will then be arranged.

   c) Procedural chain of command for academic grievances should be followed: Student → Instructor → Chairperson.

   d) An academic grievance not resolved within the department, and/or those related to admissions, probation, suspension and/or dismissal from the professional program, will utilize the procedural chain of command outlined in the School of Medicine and Health Sciences Grievance Policy. A copy of this policy is available from the Chairperson of the Department or the Dean of the School of Medicine and Health Sciences.
2. **Grievance from a Clinical Experience Site.** It is understood that concerns from the Clinical Site may initially be addressed verbally, and come to closure at that level. For any concerns that are not resolved at this level, the following guidelines for resolution will be followed:

a) Resolution. Grievances should be submitted in writing, with the signature of the person making the complaint. Such grievances will be logged within the department and will be addressed with the procedures outlined below:

**Regarding student behavior or performance:**
- i. The complaint must first be addressed with the student.
- ii. If resolution is not achieved, the Director of Clinical Education (DCE) will be notified, and will assist in resolution of the issue.
- iii. If resolution is not achieved, the department chairperson will be notified, and a meeting to seek resolution will be arranged. Meeting participants may include additional UND-PT faculty with insight and/or experience relative to the grievance topic.
- iv. Documentation of the resolution proceedings will be kept in the Department of Physical Therapy.

**Regarding the student's academic preparation:**
- i. The DCE of the department will be notified, and will assist in resolution of the issue.
- ii. If DCE is not resolved, the department chairperson will be notified, and a meeting to seek resolution will be arranged. Meeting participants may include additional UND-PT faculty with insight and/or experience relative to the grievance topic.
- iii. Documentation of the proceedings will be kept in the Department of Physical Therapy.

b) All grievances. Any of the above grievances not resolved within the department will utilize the procedural chain of command outlined in the School of Medicine and Health Sciences Grievance Policy. A copy of this policy is available from the Chairperson of the Department or the Dean of the School of Medicine and Health Sciences.

c) Any grievance not resolved within the School of Medicine and Health Sciences will follow the procedural chain of command outlines as follows: The President’s Office will be notified. The written complaint will be logged in an electronic format and referred to the appropriate vice president (VP): VP for Academic Affairs; VP for Student & Outreach Services; or VP for Finance and Operations.

3. **Grievance from a Parent or Other Source.** FERPA Guidelines will be followed in all circumstances. It is understood that concerns from a parent or other source may initially be addressed verbally, and come to closure at that level. For any concerns that are not resolved at this level, the following guidelines for resolution will be followed:

Grievances should be submitted in writing, with the signature of the person making the complaint. Such grievances will be logged within the department and will be addressed with the procedures outlined below.
4. **Additional Information.** Any person may submit to the Commission on Accreditation in Physical Therapy Education (CAPTE), a complaint about an accredited physical therapy program. CAPTE will investigate and take action on any complaint filed in accordance with section 11.2(a) of the Accreditation Handbook. Complaints must allege violation of one or more of the following: (1) one or more of the Evaluative Criteria for Accreditation, (2) CAPTE’s *Statement on Academic Integrity in Accreditation:* regarding plagiarism and failure to report honestly by presenting false information or by omission of essential information to CAPTE, or (3) CAPTE’s *Statement on Academic Integrity Related to Program Closure.* For more information, please refer to the Accreditation Handbook found on the CAPTE website at: www.apta.org

**Complaints regarding the Department of Physical Therapy:**

i. The complaint should be addressed directly to the Chairperson of the Department of Physical Therapy.

ii. The Chairperson will communicate with the parties involved and a meeting to seek resolution will be arranged.

iii. Any grievance not resolved within the department will utilize the procedural chain of command outlined in the School of Medicine and Health Sciences Grievance Policy. A copy of this policy is available from the Chairperson of the Department or the Dean of the School of Medicine and Health Sciences.

iv. Any grievance not resolved within the School of Medicine and Health Sciences will follow the procedural chain of command outlines as follows: The President’s Office will be notified. The written complaint will be logged in an electronic format and referred to the appropriate vice president (VP): VP for Academic Affairs; VP for Student & Outreach Services; or VP for Finance and Operations.

v. Documentation of the proceedings will be kept in the Department of Physical Therapy.

**Complaints regarding the University or its functions:**

The department Chairperson will provide contact information for the party so that they can directly contact the entity involved in the complaint.

Revised and Approved by Department of Physical Therapy:
**DPT CURRICULUM**

**YEAR 01**

**Year 01– FALL SEMESTER (16 CR.)**

- PT 401 Intervention Techniques I (2)
- PT 402 Professional Communication & Behavior (2)
- PT 422 Anatomy for Physical Therapy (5)
- PT 423 Neuroscience for Physical Therapy (4)
- PT 513 Intervention Techniques II (3)

**YEAR 01 – SPRING SEMESTER (19 CR.)**

- PT 409 Clinical Pathology I (4)
- PT 412 Biomechanics and Kinesiology (4)
- PT 413 Exercise in Health and Disease (3)
- PT 415 Motor Control (3)
- PT 417 Clinical Examination and Evaluation I (4)
- PT 426 Manual Therapy I (2)

**YEAR 01 – SUMMER SESSION (10 CR.)**

- PT 410 Clinical Pathology II (3)
- PT 512 Therapeutic Agents (3)
- PT 514 Case Management I (2)
- PT 519 Electrotherapy and Electrodiagnosis (2)

**PT 510 Integrated Clinical Experience (1 cr.) - taken sometime during the first year of the program.**
Year 02 – FALL SEMESTER (19 CR.)

PT 528 Clinical Experience I (9)
PT 529 Clinical Experience II (9)
PT 521 Critical Inquiry I (1)

YEAR 02 – SPRING SEMESTER (17-19 CR.)

PT 522 Administration in Physical Therapy (3)
PT 523 Lifespan I (3)
PT 524 Psychological Aspects of Disability (2)
PT 525 Clinical Examination & Evaluation II (3)
PT 527 Critical Inquiry II (2)
PT 540 Cardiopulmonary Physical Therapy (2)
PT 584 Evidence in Practice (2)
Electives (0-2)

YEAR 02 – SUMMER SESSION (10 CR.)

PT 535 Lifespan II (2)
PT 562 Readings: Imaging / Pharmacology (2)
PT 591 Research in Physical Therapy (2)
PT 592 Case Management II (2)
Electives (1-2)
**Year 03 – FALL SEMESTER (12 CR.)**

PT 511 Applied Movement Science/Rehab Procedures \(4\)
PT 541 Clinical Examination and Evaluation III \(3\)
PT 526 Manual Therapy II \(2\)
PT 539 Prevention and Wellness \(2\)
PT 561 Seminar in Physical Therapy \(1\)

*** PT 490 Interprofessional Health Professions Course \(1\)

(Will be taken as assigned either spring year 02 or fall year 03)

***1 credit of elective coursework at some point during the program is required

**YEAR 03 – SPRING SEMESTER (19 CR.)**

PT 552 Clinical Experience III \(9\)
PT 553 Clinical Experience IV \(9\)
PT 995 Scholarly Project \(1\)
**CORE VALUES**

**Accountability:** Active acceptance of the responsibility of the diverse roles, obligations, and actions of the self-including self-regulation and other behaviors that positively influence outcomes, the professional and the health needs of society.

**Altruism:** Primary regard for or devotion to the interest of others, assuming the fiduciary responsibility of placing the needs of others ahead of self-interest.

**Compassion and Caring:** Compassion: the desire to identify with or sense something of another’s experience; a precursor of caring. Caring: the concern, empathy, and consideration for the needs and values of others.

**Excellence:** Practice that consistently uses current knowledge and theory while understanding personal limits, integrates judgment and the other’s perspective, embraces advancement, challenges mediocrity, and works toward development of new knowledge.

**Professional Duty:** The commitment to meeting one’s obligations to provide effective services to (others), to serve the profession, and to positively influence the health of society.

**Integrity:** Steadfast adherence to high ethical principles or professional standards; truthfulness, fairness, doing what you say you will do, and ‘speaking forth’ about why you do what you do.

**Social Responsibility:** The promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.
Clinical experiences are a crucial component of the UND-PT curriculum. These experiences meld the academic information with the “hands-on” clinical experience. The student will participate in direct delivery of physical therapy services in a variety of settings under the direction and supervision of one or more clinical instructors. A licensed Physical Therapist must be on site during the delivering of any service by a student physical therapist. The clinical component of the UND-PT curriculum is comprised of:

1. One one-week integrated clinical experience (sometime during the first year of the program);
2. Two nine-week clinical experience (fall semester of the second year in the professional program); and
3. Two final nine-week clinical experience (spring semester of the third year in the professional program); focus of these clinical experiences are neuro and the students’ “area of interest.”

Clinical experiences are set up by the Director of Clinical Education (DCE) and the Assistant DCE. Students are asked to study the clinical experience files in the Conference Room and/or online via the PT clinical Education Community Blackboard to familiarize themselves with the approximately 300 available clinical experience sites. Determination of the student’s particular clinical experience sites will take into consideration student preference, availability of the clinical site, student’s state of residency, and previous clinical experiences to ensure maximal diversity of experience. The DCE or school representative is responsible for contacting the sites and securing the clinical experiences. The student is responsible for transportation and setting up living arrangements.

**Clinical Experiences - 2nd Year**

Scheduling for these clinical experience arrangements will be started in October, at which time students will be asked for tentative clinical experience selections. This early selection will allow time for the DCE and school representative to work out possible conflicts and attempt to secure additional clinical spots, where necessary. This extended time is to allow students and the DCE the opportunity to alter selections to meet students’ needs and availability in clinical sites. Once confirmation is received from the clinical sites, selections will not be altered. Selections of these clinical experiences include: 1) acute care/rural hospital, or 2) general outpatient orthopedic clinic.

**Clinical Experiences - 3rd Year**

Selection of “final clinical experiences” is implemented in the spring semester of the second year. Selection options include neuro-rehabilitation, pediatric or adult, and an area of interest. Please refer to PT: 552: Clinical Internship II Options for more specifics.
GENERAL INFORMATION

CLINICAL SITE SELECTION

A file is available (currently in the PT conference room) and/or online via the PT Clinical Education Community in Blackboard for each clinical site. The files contain information sent by the facility, previous student evaluations of the clinical experience, and a CSIF (Clinical Site Information Form) which is a brief overview of the site.

Consider the following criteria when selecting your sites: finances, travel distances, quality of the learning experience, your short- and long-term goals, previous experience, spouse and/or family commitments. Once a site is confirmed, changes will not be made.

Students from the ND pool are encouraged to do at least one clinical experience in the state of ND. Students from WICHE states are strongly encouraged to do at least one clinical experience in their home state.

ASSIGNMENTS

1. The DCE is responsible for assignment of students for clinical experiences and for official contact and correspondence with the clinical education center. Students are not to contact a clinic concerning establishing an clinical experience or changing scheduled clinical rotations. Once the clinical experience is officially established, the student should feel free to contact the Clinical Coordinator of Clinical Education (CCCE) and is expected to contact the CCCE/CI a minimum of 6-8 weeks prior to the start of the clinical experience. The student will also send (electronically) a biography/student information form to the CCCE/CI.

2. The student is responsible for knowing the hours, where, and to whom he/she reports for each facility. The student is responsible to travel to and from each clinical site, and for room and board while at the clinical site (a few clinical sites do offer housing or a stipend). Please check CSIF for further information, however; keep in mind these offerings are subject to change.

3. You are responsible for arranging housing. The assistance that clinical sites offer for housing arrangements is variable. Some facilities offer housing, others will send a list of recommended housing options for which the student is responsible to contact and set up, and some expect the student to secure their own housing. The DCE and the assistant DCE are available to assist you with ideas for exploring housing arrangements. Housing arrangements should be secured at least six weeks in advance of your clinical experience and it is recommended that you consider up to six months in advance.

4. The student is to be prompt for all scheduled clinical experience assignments (e.g., clinics, demonstrations, rounds, in-service programs, etc.). The student must be prepared for the start of each day; it is recommended you arrive 15 minutes early most days to be ready for the start of the day. All hours of assigned clinical education must be completed. Clinical experiences are generally 40 hours per week for nine weeks. Please note the last week is 3 days with Thursday and Friday open as “make-up” days.
Clinical evaluation forms, proof of liability insurance, and a copy of the syllabus for the courses and course objectives are available on our website. You will have access to the electronic Clinical Performance Instrument (CPI) once you have completed the on-line training and assessment and have been paired with your clinical instructor. The DCE or Assistant DCE will review the evaluation criteria with you prior to your leaving campus. Students should be familiar with the criteria for evaluation prior to his/her clinical experiences.

Evaluation forms for you to evaluate the Clinical Facility and the Clinical Instructor (CI) will be available to you online. At the mid-term and the end of each clinical experience, the evaluation forms are to be discussed with your CI, signed, and returned to the DCE. If you feel you are unable to discuss the evaluations with the CI, please contact your assigned DCE or Assistant DCE prior to the end of your clinical experience.

The following forms are to be signed and submitted to the DCE by the specified due dates.

- Student Clinical Performance Instrument (mid-term and final)
- Student Evaluation of Clinical Site
- Student Evaluation of Clinical Supervisor (mid-term and final)
- Diagnoses Treated in the Clinical Setting
- Two-Week Clinical Experience

Credit will not be given for PT 528, PT 529, PT 552 or PT 553 without meeting the above requirement. All evaluation material will be submitted electronically.

**FIRST WEEK OF CLINICAL EXPERIENCE**

Send an e-mail to the DCE or Assistant DCE (whomever is assigned to you):

- Name of your CI(s)
- Phone number and e-mail if applicable for your CI
- Phone number to contact you in case of an emergency
- A statement of how your first week is going

If you arrive at your clinical and the type of setting is different from notation on your student affiliation report or some aspect of your setting is of concern contact your assigned DCE or Assistant DCE ASAP.

**ABSENCES**

1. In case of illness during a clinical rotation, you must notify the DCE at UND-PT, and either the CI or CCCE at the beginning of the work day.
2. Absences must be made up on weekend days, Thursday and Friday of the last week, or by extending the time. Make-up time will be arranged by the DCE and the CCCE/CI.
3. Attendance at professional conferences during week days should be cleared through the DCE. The DCE in cooperation with the CCCE may be able to make arrangements for the student to attend the conference during the clinical rotation.
4. Additional time between clinical experiences must be cleared through the DCE prior to the start of the clinical experience.
5. Absences due to funerals or for personal reasons must be approved by the DCE. The DCE in cooperation with the CCCE will assist with arrangements to make up the time on an individual basis.
6. Time off from a clinical experience for the purpose of a job interview is NOT an excused absence. Interviews should be scheduled at times other than scheduled clinical experience days or hours.

**INTRODUCTION TO PATIENT OR CLIENT**

Identify yourself as a student; patient has the right to refuse to participate in the clinical education program. The patient should also realize the clinical instructor is the Physical Therapist in charge of his/her care and services provided to them.

**DRESS AND APPEARANCE**

Students are expected to use discretion and good judgment in their personal appearance and grooming. The goal is to present a professional appearance and maintain a safe environment for both the student and the patient.

1. Professional dress for females consists of dress slacks or skirt and conservative top. (Low cut, close fitting, or short tops which do not go below the waistline are unacceptable.) You should be able to raise your hands above your head and bend over without any skin in the “midriff” area showing. Males should wear shirt and tie and dress slacks. Lab coats should be worn during rotations in the acute care setting and at the request of your CI in any other setting. It is much easier for a clinician to tell you to dress down than to look more professional.
2. UND-PT student name tag should be worn at all times during your clinical experiences, unless otherwise specified by the CI. If you should lose your student name tag contact the department secretary for a replacement. The student is responsible for the replacement cost.
3. Footwear should be professional. Tennis shoes, hiking boots, and clogs are unacceptable. White leather athletic shoes are acceptable in many clinics. Socks or hosiery must be worn.
4. If jewelry is worn, it must be plain and simple.
5. Avoid strong perfumes or shaving lotions when in the clinic. Olfactory sense is often enhanced when ill.
6. Some facilities may have additional criteria related to dress and appearance; you will be responsible to follow clinical site policy if the dress code is more specific than UND PT.

**HOLIDAYS**

While on clinical experiences, students follow the holidays observed by the facility; these may not be the same as UND holidays. For example, the day after Thanksgiving is not typically a holiday at most clinical sites. You will be expected to report to the clinic if it is not an observed holiday at that clinical site. If UND closes you are expected to follow the schedule of the clinical site.

**HEALTH INFORMATION**

1. It is the student’s responsibility to maintain continuous health insurance coverage during clinical experiences. Submit a copy of your health insurance to the DCE. For information on
policies available to students, contact Student Health Services on campus (777-4500) or the APTA or other insurance companies in your area.

2. Students must either obtain Hepatitis B Vaccine (3 dose series) or sign a Hepatitis B Vaccine Waiver prior to clinical experiences. Information to assist you in the decision to obtain the vaccine or not will be presented in PT 401: Intervention Techniques I, PT 409: Clinical Pathology I, and PT 513: Intervention Techniques II.

3. The student will provide current medical/immunization records as follows:
   a) Evidence of immunity to rubella (red measles) as demonstrated by one or more of the following:
      1) Physician documentation of two doses of live measles vaccine on or after the first birthday;
      2) Documentation of physician diagnosed measles;
      3) Laboratory evidence (blood titer) of immunity to measles; and/or
      4) A date of birth that is before January 1, 1957.
   b) Evidence of immunity to rubella as demonstrated by:
      5) Laboratory evidence (rubella titer) of immunity/ or
      6) Documented immunization with live virus vaccine on or after the first birthday.
   c) Evidence of the absence of tuberculosis as demonstrated by a negative Mantoux test within the year preceding entrance into the clinical facility. In the event that the Mantoux test is positive, students will be required to provide documentation of having received a negative chest x-ray after the positive Mantoux test. Alyson White, Administrative Officer, will schedule group times when a Mantoux test will be given by a nurse for Student Health Services with the Department of Physical Therapy. There is no charge to the student when the Mantoux test is completed during this group time. Students may elect to go to Student Health; however, the student will be responsible for the cost.

4. It is the student’s responsibility to be able to provide verification of health information to the clinical site if requested. Failure to do so may result in delay in the scheduled completion of the clinical experience or in termination of the clinical experience.

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**STUDENT PROFESSIONAL LIABILITY INSURANCE**

The UND School of Medicine and Health Sciences provides professional liability insurance for UND-PT students while on their clinical experiences. Proof of insurance will be sent to the clinical site in advance of your arrival.

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**CPR CERTIFICATION**

CPR Certification for the Healthcare provider is required while on clinical experiences. The student will be responsible for obtaining CPR Certification at his/her own expense.

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**CRIMINAL BACKGROUND CHECK**

The University of North Dakota requires background checks of its students in selected health-related programs prior to admission and repeated prior to clinical assignment. Failure to submit a background check will suspend the admission to the program and assignment to a clinical experience.
The background check report must be completed by Verified Credentials, Inc. Instructions will be provided to you. You will be required to provide identifying information as well as a payment source for the fee. You will be directed through the application process and results will be returned to you (if you request) as well as to the director of clinical education in the Department of Physical Therapy. Information must be submitted by the assigned due date to assure a timely progression to fall and spring clinical experiences.

It is essential that the Department of Physical Therapy be able to document this background check for you when requested by your affiliating hospital, clinic, and other non-UND training site.

CORE VALUES

Students are expected to uphold high ethical and moral standards during clinical experience including interactions with all parties involved. Adherence to the APTA code of ethics, APTA standards of practice and your class’s core value document are expected and failure to do so may result in termination of the clinical experience and could result in dismissal from the program. Actions which jeopardize the safety of the patient, clinical faculty or the student are considered grounds for termination of the clinical experience.

CANCELLATION OR CHANGE POLICY

Once the clinical experience is confirmed no change will be made unless it is considered an “extreme circumstance.” A change requires a written request which the DCE will bring to the faculty as a whole for determination of appropriate action.

Clinical experiences are confirmed with the CCCE at the clinical site from 3 months to a year in advance. Clinical sites are encouraged to contact the DCE of any staffing changes or administrative changes that may impact the student leaving experience. If changes have occurred after the confirmation, the implication of these changes will be discussed among the DCE, student, and CCCE. A quality learning experience for the student will be the prime determinant if cancellation or change is necessary. The DCE will work with the student on setting up an appropriate alternative clinical experience.

STANDARD PRECAUTIONS

As discussed in previous academic course work Student should be aware of and comply with OSHA standards and HIPAA regulations during all clinical experiences. In addition students will follow the standard precautions as stated in the Policies and Procedures of each clinical facility.

Any information used for educational purposes (i.e. case studies) must follow confidentially and HIPAA regulations. All identifying personal information must be removed prior to any use. Also you must follow facilities policies and procedures.

RESPONSIBILITY AND RIGHTS OF THE CLINICAL FACULTY

The following are the responsibilities of the clinical faculty as stated in the University of North Dakota clinical agreement with the clinical facility:
II. THE AGENCY AGREES:

2.1 To collaborate with the University in the selection of learning assignments which meet the educational needs of the students.

2.2 To supervise and instruct the students during the clinical education experience. Upon request, the Agency shall submit vitae of persons supervising or instructing students to the University.

2.3 To conduct student performance evaluations as directed by the University.

2.4 To notify the University immediately if a student is not performing satisfactorily. The Agency will follow any oral notice made under this paragraph with a written memorandum.

2.5 To provide the students with appropriate office space and resources, including access to the Agency’s library, to carry out their assigned duties.

2.6 To orient students and, as needed, the faculty liaison to the Agency and its policies, procedures, rules and regulations applicable to their conduct while in the Agency.

2.7 To notify the University prior to student placement in the Agency of any requirements for student immunizations or medical insurance coverage.

2.8 To maintain all licenses, permits, certificates, and accredited statuses held at the time of execution of this Agreement which are applicable to performance of this Agreement.

2.9 To collaborate in identifying specific clinical education experience objectives, the student assignments, and learning activities for each student placed in the Agency.

2.10 That the Agency may exclude from participation any student whose performance is determined to be detrimental to the Agency’s clients; who fails to comply with proper channels of communications, with established Agency policies and procedures, or with the American Physical Therapy Association’s Code of Ethics; or whose performance is otherwise unsatisfactory, including any student who is unable to maintain compatible working relationships with the Agency’s employees, or whose health status may prevent required attendance and student’s successful completion of the clinical education experience.

The Clinical Instructor has the right to expect the student to come to the facility prepared to apply academic knowledge in the clinical environment and to demonstrate professional behavior in all activities. The Clinical Instructor has the right to expect the student to respect the needs of the patient/client, clinical faculty, and the facility. The Clinical Instructor has the right to expect the student to perform in a manner that does not jeopardize the safety of the patient/client, the clinical instructor or the student. The CI or CCCE has the right to contact the DCE at any time for any reason related to the clinical education or safety of the student.

COMPLAINTS

Any complaints or concerns related to clinical education (PT 510, 528, PT 529, PT, PT 552, or PT 553) should follow University policy and procedures. Complaint in writing first to Director of Clinical Education, if not resolved to Department Chair Physical Therapy. If complaint or concern is
not resolved in the Department of Physical Therapy a written notice may be sent to the Dean of School of Medicine and Health Sciences and then to the President of the University.

FINANCIAL

1. Payment of tuition is required for all clinical course work.
2. For those students receiving financial aid, forms are available to show expenses above and beyond normal. Alyson White is available to assist you in completing these forms. For Fall Semester experiences, the forms should be sent to Financial Aid by March 1st. For Spring Semester affiliations, the deadline is September 15th.

AUTOBIOGRAPHY/STUDENT INFORMATION FORM

A student biography/Student Information Form will be sent to the clinical coordinator at your clinical site prior to your arrival (this will be sent by the student 6-8 weeks prior to the start of the clinical experience).

ADDITIONAL IDEAS AND SUGGESTIONS

✓ Six to eight weeks prior to the start of your clinical experience, send a short letter or note. Include phone number and address at which you may be reached if any additional information needs to be relayed. Acknowledge information sent from the school and any other information you would like to share. KEEP IT SHORT!

✓ If you receive information from a clinical site, send a note of recognition of receipt. Be sure to send back any requested information as soon as possible.

✓ Following your clinical experience, send a thank-you or appreciation note.

✓ This is your learning experience. Respect the knowledge of the experienced clinicians. If you are not receiving feedback or supervision necessary for learning, ask questions. If this does not yield the desired response contact the DCE.

Clinical rotations are an extremely important aspect of your professional program. These experiences can be very exciting and rewarding. While on your clinical experiences, you are not only representing yourself, but also your classmates and UND-PT. In the past, due to the excellent quality of students, the reputation of UND-PT students has been good to excellent. This has allowed us to maintain numerous and quality affiliation sites. I trust that we can continue to build on that reputation.
Occasionally problems and/or concerns do arise during clinical experiences. Remember, we at UND-PT are here to assist you. If you have any questions or concerns, please contact:

1. **DCE:** Cindy Flom-Meland  
   Work: (701) 777-4130  
   Home: (701) 775-2476  
   Cell: (218) 779-4141  
   E-mail: cindy.flom.meland@med.und.edu

2. **Assistant DCE:** Bev Johnson  
   Work: (701) 777-3871  
   Home: (701) 772-8375  
   Cell: (701) 610-8845  
   E-mail: bev.johnson@med.und.edu

3. **Department Chair:** Dave Relling  
   Work: (701) 777-2831  
   Cell: (701) 741-3481  
   E-mail: david.relling@med.und.edu
Policy Title: Disability Accommodation in the Academic and Clinical Setting

Approval Date: March 28, 2011

Primary Responsibility: Director of Clinical Education

Secondary Responsibility: UND PT Committee of the Whole

Policy Summary:

The Department of Physical Therapy has a responsibility for the welfare of patients treated or otherwise affected by students enrolled in the program as well as the educational welfare of its students. The technical standards developed for the Doctor of Physical Therapy program established the essential functions necessary for students to achieve the knowledge, skills, and abilities of novice physical therapists and meet the expectations of the Commission for Accreditation of Physical Therapy Education. Thus, students must meet the technical standards of the program with or without reasonable accommodations throughout the course of study, including the clinical setting. Reasonable accommodations will be made for students with documented disabilities in accordance with federal disability laws (Section 504 and ADA) committed to the principle of equal opportunity. Each student must meet all of the physical therapy program standards with or without reasonable accommodation.

Policy Purpose:

Describe responsibilities of the student and the University of North Dakota Department of Physical Therapy faculty in requesting reasonable accommodations in the academic and clinical settings.

Procedure:

Students requesting accommodation for a disability in the academic and/or clinical setting are expected to register with Disability Services for Students (DSS). Contact the office at 701-777-3425 or www.und.edu/dept/dss for how to register.

1. Student registers with DSS, which includes providing documentation of disability that verifies the need for accommodations.

2. The disability specialist, in discussion with the student, identifies the accommodations the student will request.

3. The disability specialist provides the student with a Verification of Accommodations Form that describes the accommodations needed.

4. The student requests accommodation from the primary faculty member for each course requiring accommodation.
5. To prepare for the clinical settings the student contacts the DCE as soon as the need for accommodation is identified (clinical experiences are set up one year in advance). Typically, the foundation for setting reasonable accommodations/adjustments in the clinical setting starts in the academic setting classrooms and laboratories.

6. For the clinical settings, the student will be asked to share the Verification Form with the Director of Clinical Education (DCE) along with accommodations/adjustments identified in each academic class including the associated laboratory setting. The student and the DCE will determine disclosure and any safety concerns. The DCE will work with the clinical site and the student to arrange for the site accommodations the student will request. Once reasonable options for accommodation have been established, the student will request the accommodation in the clinical setting.

7. The DSS contact is available to consult with the DCE, primary faculty member and student, if requested.

Related Policies/References:
Department of Physical Therapy Scholastic Standards
Policy on Informed Consent-Students Responsibilities and Requirements
Technical Standards University of North Dakota Department of Physical Therapy
Eligibility for Disability Accommodations http://und.edu/disability-services/eligibility.cfm
Disability Rights and Responsibilities at the University of North Dakota http://und.edu/disability-services/responsibilities.cfm
Section 504 of the Rehabilitation Act
Protecting Students with Disabilities www.2.ed.gov/about/offices/list.ocr.504faq.html. (accessed 12-01-2010)

Draft 12-02-2010, modified 1-23-2010, modified 3-23-2010
Instructors: Cindy Flom-Meland PT, PhD, NCS and Beverly Johnson PT, DSc, GSC

Description:
Full-time clinical experience (two nine-week segments) in selected physical therapy provider centers throughout the United States. (9 credit hours each)

Course Objectives:

Upon completion of the course, the student will be able to:
1. Practice in a safe manner that minimizes risk to patient, self and others.
2. Present self in a professional manner.
3. Demonstrate professional behavior during interactions with others.
4. Adhere to ethical practice standards.
5. Adhere to legal practice standards.
6. Communicate in ways that are congruent with situational needs.
7. Produce documentation to support the delivery of physical therapy services.
8. Adapt delivery of physical therapy care to reflect respect for and sensitivity to individual differences.
9. Apply the principles of logic and the scientific method to the practice of physical therapy.
10. Screen patients using procedures to determine the effectiveness of and need for physical therapy services.
11. Perform a physical therapy patient examination.

Upon completion of the course, the student will begin to:
12. Evaluate clinical findings to determine physical therapy diagnoses and outcomes of care.
13. Design a physical therapy plan of care that integrates goals, treatment, outcomes, and discharge plan.
14. Perform physical therapy interventions in a competent manner.
15. Educate others (patients, family, care givers, staff, students, other health care providers) using relevant and effective teaching methods.
16. Participate in activities addressing quality of service delivery.
17. Provide consultation to individuals, businesses, schools, government agencies, or other organizations.
18. Address patient needs for services other than physical therapy as needed.
19. Manage resources (e.g., time, space, equipment) to achieve goals of the practice setting.
20. Incorporate an understanding of economic factors in the delivery of physical therapy services.
21. Use support personnel according to legal standards and ethical guidelines.
22. Demonstrates that a physical therapist has professional/social responsibilities beyond those defined by work expectations and job description.
23. Implement a self-directed plan for professional development and lifelong learning.
24. Address primary and secondary prevention, wellness, and health promotion needs of individuals, groups and communities.

Course Prerequisites:
Description of Teaching Methods and Learning Experiences:
Full-time clinical experience; the student follows the schedule of the supervising clinical instructor.

Outline of Content:
Supervised experience in clinical instruction including patient/client management, prevention, education and patient/therapist relationships. The student participates in two separate nine-week clinical experiences including acute care, with an emphasis either in outpatient or inpatient care, and outpatient orthopedic center or rural setting.

Required and Recommended Readings:
No specific text is required. During the affiliations, students are encouraged to utilize personal, clinical department, local medical libraries and on-line services through UND Medical Library for reference materials to assist in clinical decision-making and problem-solving.

Method of Evaluation:
The attached CPI reiterates the clinical objectives for clinical experiences at UND. Each objective on the form is, in fact, a criteria for assessment of the student's performance. Specific grading criteria are a passing grade will be given to a student who satisfies the following course requirements.

1. Communicate with assigned CCCE or CI 6-8 weeks prior to the start of each clinical experience.
2. Completion of student information form prior to clinical experience.
4. Maintains health insurance coverage.
5. Upload requested health requirements to our student system (Acadaware) and provide to clinical sites as requested.
6. Forms to be signed and submitted to the DCE by the specified due dates.
   a. Student Clinical Performance Instrument (mid-term and final)
   b. Student Evaluation of Clinical Site
   c. Student Evaluation of Clinical Supervisor (mid-term and final)
   d. Diagnoses Treated in the Clinical Setting
   e. Two-Week Clinical Experience
7. Compliance with Clinical Experience Guidelines as documented in the Physical Therapy Student Handbook (attendance is mandatory).
8. Completion of CPI by clinical instructor with a performance rating of all criteria below the “Intermediate Performance” for a letter grade of ‘C’; performance rating of all criteria at “Intermediate Performance “for a letter grade of ‘B’; and performance rating of all criteria above “Intermediate Performance” for a letter grade of ‘A’. Any safety issues will constitute failure of the clinical experience. The expectation is independence in examination, development of plan of care and treatment of patients with simple conditions.

*All paperwork will be completed and submitted electronically; if it is not submitted by the assigned due date it may affect the course grade.
Instructors: Cindy Flom-Meland PT, PhD, NCS and Beverly Johnson PT, DSc, GSC

Description:
Full-time clinical experience (two nine-week segments) in selected physical therapy provider centers throughout the United States. (9 credit hours each)

Course Objectives:
Upon completion of the course, the student will be able to perform the following at entry level:

1. Practice in a safe manner that minimizes risk to patient, self and others.
2. Present self in a professional manner.
3. Demonstrate professional behavior during interactions with others.
4. Adhere to ethical practice standards.
5. Adhere to legal practice standards.
6. Communicate in ways that are congruent with situational needs.
7. Produce documentation to support the delivery of physical therapy services.
8. Adapt delivery of physical therapy care to reflect respect for and sensitivity to individual differences.
9. Apply the principles of logic and the scientific method to the practice of physical therapy.
10. Screen patients using procedures to determine the effectiveness of and need for physical therapy services.
11. Perform a physical therapy patient examination.
12. Evaluate clinical findings to determine physical therapy diagnoses and outcomes of care.
13. Design a physical therapy plan of care that integrates goals, treatment, outcomes, and discharge plan.
14. Perform physical therapy interventions in a competent manner.
15. Educate others (patients, family, care givers, staff, students, other health care providers) using relevant and effective teaching methods.
16. Participate in activities addressing quality of service delivery.
17. Provide consultation to individuals, businesses, schools, government agencies, or other organizations.
18. Address patient needs for services other than physical therapy as needed.
19. Manage resources (e.g., time, space, equipment) to achieve goals of the practice setting.
20. Incorporate an understanding of economic factors in the delivery of physical therapy services.
21. Use support personnel according to legal standards and ethical guidelines.
22. Demonstrates that a physical therapist has professional/social responsibilities beyond those defined by work expectations and job description.
23. Implement a self-directed plan for professional development and lifelong learning.
24. Address primary and secondary prevention, wellness, and health promotion needs of individuals, groups and communities.
**Course Prerequisites:**
Registered in Professional Physical Therapy Curriculum

**Description of Teaching Methods and Learning Experiences:**
Full-time clinical experience; the student follows the schedule of the supervising clinical instructor.

**Outline of Content:**
Supervised experience in clinical instruction including examination, evaluation, diagnosis, prognosis, intervention, outcomes, consultation, community service, and patient/therapist relationships.

**Required and Recommended Readings:**
Students are required to read clinical files and Physical Therapy Student Survival Guide prior to the start of the semester. No additional text is required. During the affiliations, students are encouraged to utilize personal, clinical department, local medical libraries and on-line services through UND Medical Library for reference materials to assist in clinical decision-making and problem-solving.

**Methods of Evaluation:**
The attached CPI reiterates the clinical objectives for clinical experience at UND. Each objective on the form is, in fact, a criteria for assessment of the student’s performance. Specific grading criteria are as follows. A passing grade will be given to a student who satisfies the following course requirements.

1. Communicate with assigned CCCE or CI 6-8 weeks prior to the start of each clinical experience.
2. Completion of student information form prior to clinical experience.
4. Maintains health insurance coverage.
5. Upload requested health requirements to our student system (Acadaware) and provide to clinical sites as requested.
6. Forms to be signed and submitted to the DCE by the specified due dates.
   a. Student Clinical Performance Instrument (mid-term and final)
   b. Student Evaluation of Clinical Site
   c. Student Evaluation of Clinical Supervisor (mid-term and final)
   d. Diagnoses Treated in the Clinical Setting
   e. Two-Week Clinical Experience
7. Compliance with Clinical Experience Guidelines as documented in the Physical Therapy Student Handbook (attendance is mandatory).
8. Completion of CPI by clinical instructor with an average score between advanced intermediate and entry level grade C. Grade of B requires entry level on all criteria. A letter grade of A requires all criteria at entry level with at least 3-5 criteria noted as beyond entry level.
Two-Week Clinical Experience Form

Name: ________________________________
Type of Clinical Experience: _____________________________

<table>
<thead>
<tr>
<th>Week 1</th>
<th>Medical Dx</th>
<th>PT Dx (from The Guide to PT Practice)</th>
<th>Special Tests &amp; Functional Assessments</th>
<th>Interventions</th>
<th>Avg. # Pts/day</th>
<th>Other Educ. Exper.</th>
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<tr>
<th>Week 2</th>
<th>Medical Dx</th>
<th>PT Dx (from The Guide to PT Practice)</th>
<th>Special Tests &amp; Functional Assessments</th>
<th>Interventions</th>
<th>Avg. # Pts/day</th>
<th>Other Educ. Exper.</th>
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Title of In-Service Presented: ________________________________
Audience: ____________________________ Date: ____________
## Diagnoses Treated in the Clinical Setting

### Student Name:  

### Facility Name:  

### Clinical Education:  

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<tr>
<th>Type of Clinical Rotation</th>
<th>Acute</th>
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<th>Ortho</th>
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</tbody>
</table>

(Circle)

### Please indicate next to the diagnosis listed the number of different patients you treated with this as their primary diagnosis and secondary diagnosis if applicable.

#### Musculoskeletal:

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Primary Diagnosis</th>
<th>Secondary Diagnosis</th>
<th>Age Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotator Cuff Tear or Repair</td>
<td></td>
<td></td>
<td>0-12</td>
</tr>
<tr>
<td>Shoulder Impingement Syndrome</td>
<td></td>
<td></td>
<td>13-21</td>
</tr>
<tr>
<td>Total Shoulder Replacement</td>
<td></td>
<td></td>
<td>22-60</td>
</tr>
<tr>
<td>Elbow, wrist or hand pain/pathology</td>
<td></td>
<td></td>
<td>over 60</td>
</tr>
<tr>
<td>Low Back Pain - nonsurgical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low Back Pain - post surgical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cervical Dysfunction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Hip Replacement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Knee Replacement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ACL Reconstruction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patellofemoral Dysfunction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ankle or Foot Pathology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ankle Sprain</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Musculoskeletal Diagnoses: (list)</td>
<td></td>
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</table>

#### Neuromuscular:

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Primary Diagnosis</th>
<th>Secondary Diagnosis</th>
<th>Age Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>CVA</td>
<td></td>
<td></td>
<td>0-12</td>
</tr>
<tr>
<td>Brain Injury</td>
<td></td>
<td></td>
<td>13-21</td>
</tr>
<tr>
<td>Parkinson’s Disease</td>
<td></td>
<td></td>
<td>22-60</td>
</tr>
<tr>
<td>Spinal Cord Injury</td>
<td></td>
<td></td>
<td>over 60</td>
</tr>
<tr>
<td>Multiple Sclerosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guillain Barre</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vestibular Disorders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muscular Dystrophy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cerebral Palsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spina Bifida</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Developmental Delay</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Neuromuscular Diagnoses: (list)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Cardiopulmonary:

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Primary Diagnosis</th>
<th>Secondary Diagnosis</th>
<th>Age Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>CABG/Valve Replacement</td>
<td></td>
<td></td>
<td>0-12</td>
</tr>
<tr>
<td>Congestive Heart Failure</td>
<td></td>
<td></td>
<td>13-21</td>
</tr>
<tr>
<td>Myocardial Infarction</td>
<td></td>
<td></td>
<td>22-60</td>
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<tr>
<td>Hypertension</td>
<td></td>
<td></td>
<td>over 60</td>
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<tr>
<td>Peripheral Vascular Disease</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumonia</td>
<td></td>
<td></td>
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<tr>
<td>COPD</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respiratory Failure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lung Cancer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Cardiopulmonary Diagnoses: (list)</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

#### Integumentary:

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Primary Diagnosis</th>
<th>Secondary Diagnosis</th>
<th>Age Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arterial Wound</td>
<td></td>
<td></td>
<td>0-12</td>
</tr>
<tr>
<td>Venous Wound</td>
<td></td>
<td></td>
<td>13-21</td>
</tr>
<tr>
<td>Skin Grafts</td>
<td></td>
<td></td>
<td>22-60</td>
</tr>
<tr>
<td>Burns</td>
<td></td>
<td></td>
<td>over 60</td>
</tr>
<tr>
<td>Amputations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Integumentary Diagnoses: (list)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Other:

- Individuals for Health Promotion/Wellness Consult Visits
- Obesity
- Women’s Health
- Worksite Evaluation
- Others
- Additional Comments:
Weekly Planning Form

Date: ___________________________  Week #: ___________________________

Summary of Previous Week:
(Progress, Feedback)
Student: ___________________________

Clinical Instructor: ___________________________

Goals for the Upcoming Week:

____________________________________
Student’s Signature

____________________________________
Clinical Instructor’s Signature
STUDENT EVALUATION: CLINICAL EXPERIENCE AND CLINICAL INSTRUCTOR

www.apta.org/uploadedFiles/APTAorg/Educators/Assessments/StudentPTEvaluationForm.doc

CLINICAL PERFORMANCE INSTRUMENT

www.med.und.edu/physical-therapy/cpi-pt_final_revision_11-30-2010.pdf

UND CLINICAL AGREEMENT

www.med.und.edu/physical-therapy/clinical-education.cfm