PTA 9

CLINICAL PRACTICUM II

SYLLABUS AND COURSE INFORMATION PACKET

SUMMER 2016

3 credits
Full Time Clinical Rotation

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Course Description:
This course represents the students’ concluding full time clinical experience as assigned by the Academic Coordinator of Clinical Education. Under the supervision of clinical faculty at a facility providing physical therapy services, the student interacts with patients, provides physical therapy interventions, and assists the therapist in measurements and complex procedures. The student applies his/her knowledge and practices the skills of transfer and gait training, modalities application and therapeutic exercise. The students’ skills and competence in these areas are assessed by the program faculty prior to participation in this course. Students must be assessed as being competent in all previous course work prior to participating in this clinical practicum. This practicum is eight weeks in duration.

Prerequisites: PTA 7, PTA 8, PTA 25

Course Objectives

At the conclusion of this course, under the supervision of clinical faculty, the student will perform at entry or near-entry level demonstrating the ability to:

1.0 Implement physical therapy interventions as outlined in the physical therapist’s plan of care.

1.1. Perform a variety of therapeutic interventions consistent with patients’ status including, exercise, massage, hydrotherapy, electrotherapy, and developmental techniques, etc.

1.2. Perform physical therapy interventions demonstrating an understanding of the role of the physical therapist assistant in rehabilitation.

1.3. Administer interventions demonstrating an understanding of organizational structure, levels of authority, and fiscal considerations of the health care delivery system.

1.4. Implement therapeutic interventions demonstrating consideration of time management, therapeutic sequence, patient response, and rationale for intervention selection.

1.5. Perform therapeutic interventions demonstrating knowledge of universal and standard precautions.

1.6. Demonstrate appropriate sterile technique and bandaging.
1.7. Administer range of motion activities to patients with a variety of conditions.
1.8. Administer progressive resistive exercise using a variety of therapeutic equipment including manual resistance.
1.9. Effectively assist physical therapists in orthotic and prosthetic training.
1.10. Effectively administer therapeutic interventions including hydrotherapy and pulmonary therapy.
1.11. Perform basic assessment and check-outs of basic orthotic devices.
1.13. Teach patients various gait patterns with various assistive devices and appropriate weight-bearing status.
1.14. Use, select, and modify wheelchairs to meet specific patient needs.
1.15. Perform patient transfer activities safely.
1.16. Demonstrate effective body mechanics to insure clinician and patient safety.
1.17. Effectively and safely administer thermal agents including; cryotherapy, superficial heat modalities, ultrasound, and shortwave diathermy.
1.18. Effectively and safely administer electrotherapy including HVGS, iontophoresis, interferential, TENS, etc.
1.19. Provide interventions and interact with patients and families considering influencing factors (psychosocial, cultural, economic, legal, ethical, etc.)
1.20. Appropriately maintain therapeutic equipment to maximize efficacy potential and safety.
1.22. Assist in discharge and alternative levels of care decision making.
1.23. Analyze the effectiveness of employed operational strategies including PT-PTA team strategies, patient scheduling practices, the use of physical therapy aides, etc.
1.24. Devise and discuss operational strategies that may enhance the delivery of physical therapy services.

2.0 Assess patients’ rehabilitation/physical status and the efficacy of interventions.
2.1. Analyze the effectiveness of modalities and procedures in specific clinical situations.
2.2. Distinguish clinical responses and situations that require the attention of the supervising physical therapist or clinical instructor.
2.3. Perform appropriate assessment and measurement techniques to assist the supervising physical therapist in monitoring and modifying the plan of care including: manual muscle testing, goniometry, anthropometrics, segmental length, girth and volume, pain, cognitive and mental status changes, vital signs, gait, and posture.
2.4. Monitor vital signs as appropriate.
2.5. Observe the effects of fatigue and appropriately modify therapeutic exercise.
2.6. Appropriately act when untoward signs (cyanosis, SOB, HTN, etc.) are observed during therapy sessions.
2.7. Identify intervention precautions and contraindications and act accordingly.

3.0 Effectively communicate with clinical instructor, physical therapy staff, and other members of the interdisciplinary healthcare team.
3.1. Effectively report patient progress in the medical record.
3.2. Effectively perform clerical and record keeping duties.
3.3. Effectively verbally report patient progress and status to clinical instructor and other health care personnel.
3.4. Inform the patient about the purpose, risks, and benefits of specific therapeutic interventions.
3.5. Demonstrate appropriate documentation of physical therapy interventions considering patient response, intervention parameters, long/short term goals, effectiveness and third party payer requirements.
3.6. Recognize aspects of the plan of care that may be outside the PTA’s scope of practice and act accordingly.
3.7. Participate in quality assurance/improvement activities.
3.8. Analyze environment and suggest opportunities for quality improvement.

4.0 Effectively participate in patient/family education, academic enhancement, healthcare team teaching, and general clinical education activities.
4.1. Teach patients and families intervention philosophies, the role of the physical therapist assistant, precautions, self-management, and home exercise programs.
4.2. Teach physical therapy and other health care personnel through formal presentation of case studies or in-service presentations as assigned by the clinical instructor.
4.3. Demonstrate appropriate sensitivity and action recognizing the varied and simultaneous roles of patients and families as health care seekers, consumers, informants, and knowledge pursuers.

5.0 Demonstrate appropriate professional behaviors.
5.1. Attend and report to clinic on time.
5.2. Be prepared and attend to all assigned tasks.
5.3. Accept constructive criticism and respond and/or follow through appropriately.
5.4. Express self in a clear and easily understood manner.
5.5. Maintain appropriate personal hygiene.
5.6. Treat others with positive regard, dignity, and respect.

Grade Determination

<table>
<thead>
<tr>
<th>Clinical Performance Instrument</th>
<th>80%</th>
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</thead>
<tbody>
<tr>
<td>ACCE Assignments and Visit</td>
<td>20%</td>
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<tr>
<td>100%</td>
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Grades for each affiliation are assigned and administered by the Academic Coordinator of Clinical Education based on the Clinical Performance Instrument (CPI) and other course criteria outlined below.

Clinical Performance Instrument
The Clinical Performance instrument is a standardized evaluation form which where the student is evaluated at an interim period and at the conclusion of the clinical experience. The student is assessed on clinical skills, communication skills and appropriateness of techniques. At the conclusion of the affiliation, a student must display a mark of 80% or
better (based on 100mm Visual Analog Scale) on all red flag items and numbers 8, 10, 12 and an overall score of 75% or better (based on 100mm Visual Analog Scale) on all criteria.

**Other Assignments**

**From the Facility**

Each student is responsible to complete all assignments from their Clinical Instructor (CI) and/or Center Coordinator of Clinical Education (CCCE) in a timely manner.

**Inservices/ Case Study**

During each affiliation, the student is required to present at least one case study or inservice decided upon by the CI and student. The student is required to follow any format or procedure regarding these presentations that the facility may mandate.

**From the Academic Coordinator of Clinical Education**

**Self Evaluation**

The student is responsible for completing self evaluation on the CPI form at the midterm and final stage of the affiliation. This self evaluation is to be reviewed with the clinical instructor and then submitted to the ACCE at the end of the affiliation.

**Weekly Journal**

The student submits a journal consisting of weekly entries. The journal is submitted the sixth week of the affiliation. Each entry should consist of the following:
- list the pathological/surgical conditions of your patients
- list three interventions you have given a pt. that week and discuss how each intervention addressed the patient’s problems
- discuss two new treatment activities you and/or your patient performed during the week
- write three personal goals you would like to achieve the following week (e.g. I will increase my productivity by seeing 8 patients within the scheduled day.)
- discuss the strengths and weaknesses of the week

**Web-Based Discussions**

The student participates in instructor generated web-based discussion related to clinical topics. Discussion are facilitated via the student’s BlackBoard account.

**Site Evaluation Form**

At the end of the affiliation, the student is required to submit an evaluation of their CI and the facility to the ACCE in person or by mail.

**Clinical Site Visits**

On-site visits by the ACCE or other faculty members provide the student, clinic, and the college with the opportunity to exchange views of your needs, performance, etc. and to insure correlation between the academic and clinical learning experiences. The ACCE or other faculty member will make an appointment with the Clinical Instructor (CI) and student. The ACCE may observe the student treating a patient. The ACCE will talk to
the CI and student individually and then may meet with both CI and student together. In the event that the ACCE or other faculty member cannot meet with the student and CI in person, a phone meeting will incur. The academic faculty assesses the students’ clinical skills and abilities by observing a patient interaction. These meetings are to assist the student and the clinical instructor in identifying and dealing with real or potential problems. In addition, the ACCE will make additional site visits in the event of special circumstances such that a visit is considered necessary by the CCCE, CI or student.

**Group Meetings**

The student is required to attend and participate in three class meetings. One class meeting will be held prior to each affiliation and the remaining two meetings will take place in the evening during the affiliation. The purpose of these sessions is to discuss experiences in the clinical facilities, participate in resume writing and interview skills workshops, and complete and submit initial licensure documents. Patient interventions as well as interpersonal skills between patients and/or personnel are explored.

**Student Instructions**

No later than one month prior to the start of the clinical course the student receives a packet containing: a notification of clinical site, course objectives, student evaluation forms, and a clinical site evaluation form.

Each student must meet with the Academic Coordinator of Clinical Education no later than two weeks prior to the start of the clinical course.

Students must call their assigned facility no later than one week prior to the start date. Students must speak to the Clinical Instructor or the Clinical Coordinator of Clinical Education to clarify, start date and time, dress requirements, pre-requisite assignments, directions to the facility, etc. Additionally, students formally present an in-service or case study to physical therapy or other health care personnel as determined by the Clinical Instructor.

**Keys to Success In The Clinic**

**Be on time!**

Remember, when in the clinic, you are expected to perform as a practicing clinician. This means that you must be punctual. If the day starts at 8:30 AM, plan to be at the site by 8:15 AM. Chronic lateness will not be tolerated in the clinic. If you know that you will be late to clinic, remember to call and speak with your clinical instructor.

**Don’t miss clinic!**

The clinical facility makes special plans to accommodate you. Absences from clinic disrupts educational and patient care activities. Absences from clinic must be made up.
Clinical education is vital to becoming a physical therapist assistant. Make sure you attend all clinical sessions.

**Communicate with your Clinical Instructor!**
Your Clinical Instructor (CI) has primary responsibility for your supervision, and learning in the clinic. You must communicate openly with your CI. If you have any questions concerning a particular assignment, speak with your CI before beginning. Be open to constructive criticism and be flexible. Your CI wants you to succeed and is there to help you. If there is a problem that cannot be resolved with your CI, contact the program’s Academic Coordinator of Clinical Education immediately.

**Always dress appropriately!**
Remember, you are expected to act as you would as a practicing physical therapist assistant. You are expected to exhibit professional behavior and practices at all times. This includes appropriate dress.

*Access-Ability Services (AAS) serves as a liaison and resource to the KCC community regarding disability issues, promotes equal access to all KCC programs and activities, and makes every reasonable effort to provide appropriate accommodations and assistance to students with disabilities. Please contact this office if you require such accommodations and assistance. Your instructor will be glad to make the accommodations you need, but you must have documentation from the Access-Ability office for any accommodations.*

**Academic dishonesty is prohibited in The City University of New York and is punishable by penalties, including failing grades, suspension, and expulsion. Additional information can be found in the College catalog [http://www.kingsborough.edu/sub-registration/Pages/catalog.aspx](http://www.kingsborough.edu/sub-registration/Pages/catalog.aspx). Plagiarism is a violation of academic integrity. Plagiarism is the intentional theft(s) of someone else’s intellectual property without attribution (proper credit). Determination and penalty – ranging from grade reduction to course failure – will be decided by the instructor.**

***Attendance is a vital part of the clinical learning experience. If a student is to be absent from the clinic, the student must call the facility (to speak with the clinical instructor or designee) and the Academic Coordinator of Clinical Education (ACCE) immediately. If a student misses more than one day of clinic, the day(s) must be made up after the affiliation, unless specific arrangements have been made. For each day absent, the student must make up two days. A student needing to make up days after the affiliation will receive an incomplete (INC) grade for the course and will be held from taking any further courses as per the Program Grading Policy. This procedure is part of the Student Responsibilities during Clinical Affiliation policy.***