

**The University of Findlay  
College of Health Professions  
Doctor of Physical Therapy Program  
Fall Semester, 2026**

**The mission of The University of Findlay is to equip our students for  
meaningful lives and productive careers.**

**Course Number/Title:** PHTH 730 Clinical Education III, Specialty

**Credit Hours:** 5 semester hours

**Class Time/Place:** Assigned Clinical sites (*40 hours/week, AT A MINIMUM*)

**Prerequisites, Co-requisites and Course Description:** Full-time, ten-week clinical experience supervised by a licensed physical therapist in a specialty setting chosen by the student (e.g. school system, MRDD facility, sports medicine clinic, home health agency, SNF). Designed to provide students with the opportunity to analyze and synthesize current knowledge and experience with clinical practice. In addition, experience with education, management, and research is provided, as available.

**Instructor:** Robyn Wilhelm, PT, DPT, DCE

**Instructor Contact Information:** 349 Trenton Ave., Findlay; [wilhelmr2@findlay.edu](mailto:wilhelmr2@findlay.edu) 419-434-5884 (office); 419-434-4336 (FAX)

**Office Hours:** Tuesdays and Thursdays 10am-11am; Also by appointment throughout the week

**Relationship to the Conceptual Framework:** Clinical education is considered an integral component of the Weekend PTA to DPT Bridge program curriculum. The clinical education experiences are designed to provide the student with a supervised, concentrated course of study in which he/she is given opportunities to apply theory and practice learned skills in the clinic setting. Three full-time clinical education experiences (total of 30 weeks) are required at the end of the student's academic course work. Experiences with all practice patterns, all age groups, and in both outpatient and inpatient settings are obligatory. In addition, the student has the opportunity to continue with a general experience or to specialize in an area of their choice for the final clinical experience.

## **PT Program Curricular Goals**

Course meets the following curricular objectives in whole or in part:

Following completion of the PT program curriculum, the graduate PT will be a generalist who will be able to:

1.0 Demonstrate an understanding of and ability to apply the knowledge, skills and values obtained in prerequisite, foundational science, and behavioral science course work in preparation for contemporary practice in physical therapy. **(7A, 7B, 7C)**

2.0 Establish effective culturally competent **communication** with all stakeholders, including patients/clients, family members, caregivers, practitioners, interprofessional team members, consumers, payers and policymakers, by demonstrating appropriate verbal, non-verbal and written communication. **(7D7, 7D8)**

3.0 Incorporate an understanding of the implications of **individual and cultural differences** when engaged in all physical therapy roles. **(7D8)**

4.0 Complete **screening** activities to determine the need for further examination or consultation by a physical therapist or referral to another health care professional. **(7D16)**

5.0 **Examine** movement related impairments in body structure and function, activity limitations, and participation restrictions across the lifespan and continuum of care by:

5.1 Using health informatics, the interview process, and other sources to appropriately complete a patient history. **(7D17, 7D20)**

5.2 Completing a relevant review of the musculoskeletal, neuromuscular, cardiovascular, pulmonary and integumentary systems in terms of their relationship to movement and movement dysfunction. **(7D18)**

5.3 Demonstrating knowledge of the scientific basis and effectiveness of physical therapy that utilizes the best evidence for tests and measures in the evaluative processes. **(7D11, 7D19)**

5.4 Selecting, administering and integrating the best evidence to support tests and measures that are appropriate to the patient's demographics, diagnosis, health status and culture. **(7D11, 7D19)**

6.0 **Synthesize** examination data to complete the physical therapy **evaluation** by:

6.1 Identifying body structure and function impairments, activity limitations and participation restrictions that can be minimized or alleviated through physical therapy using the ICF model. **(7D21, 7D22)**

6.2 Evaluate data from the examination to make clinical judgments. **(7D20)**

6.3 Specifying conditions beyond the scope of their abilities or the practice of physical therapy and referring to the appropriate professional. **(7D16)**

7.0 Efficiently establish a physical therapy **diagnosis** by:

7.1 Utilizing examination data and evaluation results to establish a differential diagnosis for patients across the lifespan and continuum of care. **(7D22)**

7.2 Considering the policies and procedures of the practice setting. **(7D28)**

7.3 Effectively communicating diagnostic results and clinical impressions with all stakeholders as appropriate. **(7D7, 7D22)**

8.0 Determine patient **prognoses** based on the results of the physical therapy examination, evaluation and diagnostic process. **(7D23)**

9.0 Develop and execute a safe and effective **plan of care** by:

9.1 Collaborating with clients, families, payers and other healthcare professionals to establish an appropriate and culturally competent plan of care, including a plan for discontinuation of care.

**(7D23, 7D24, 7D26)**

9.2 Constructing physical therapy goals and functional outcomes within available resources (including applicable payment sources) and specify the time frame for achievement. **(7D23, 7D24)**

9.3 Complying with the administrative policies and procedures of the practice environment. **(7D28)**

9.4 Evaluating and modifying treatment plans and goals according to patient feedback and response and the analysis of outcome measures. **(7D24, 7D30, 7D31)**

9.5 Maintaining a fiduciary responsibility for all patients/clients. **(7D42)**

10.0 Competently provide physical therapy **intervention** by:

10.1 Selecting and executing appropriate therapeutic procedures in order to achieve defined goals. **(7D27)**

10.2 Carrying out all physical therapy procedures safely. **(7D27)**

10.3 Incorporating effective teaching methods and strategies in all physical therapy roles. **(7D12)**

10.4 Completing accurate written documentation of the physical therapy examination, evaluation, diagnosis, prognosis, intervention and outcomes. **(7D32)**

10.5 Applying principles of risk management and taking appropriate action in an emergency in any practice setting. **(7D33, 7D37)**

11.0 Appropriately utilize **outcome assessment** data by:

11.1 Selecting measures that are reliable and valid and take into account the practice setting, individual differences and societal influences. **(7D19)**

11.2 Collecting accurate information to allow for analysis of individual patient/client outcomes. **(7D19)**

11.3 Analyzing and applying results to allow for modification of the plan of care. **(7D31)**

12.0 Identify, assess and promote the health needs of individuals, groups and communities, including screening, prevention and wellness programs that are culturally appropriate within the practice of physical therapy. **(7D34)**

13.0 Provide and manage care in a variety of **care delivery systems** by:

13.1 Providing physical therapy through direct access or referral based on patient/client goals, expected functional outcomes, and knowledge of one's own and other's capabilities.

**(7D34, 7D35)**

13.2 Managing human and material resources and services to provide high-quality, efficient physical therapy services based on the patient/client's goals, expected outcomes, and plan of care. **(7D28, 7D29, 7D30, 7D31, 7D36, 7D42)**

13.3 Interacting with patients, clients, family members, other healthcare providers and community-based organizations for the purpose of coordinating activities to facilitate culturally competent, efficient and effective patient or client care. **(7D7, 7D34, 7D39)**

13.4 Participate in patient centered interprofessional and collaborative practice with active participation from the patient in aspects of his/her care and treatment. **(7D39)**

14.0 Demonstrate appropriate **professional behavior** by:

14.1 Demonstrating behavior congruent with the APTA *Core Values* and *Code of Ethics* during interactions with others. **(7D4, 7D5, 7D6)**

14.2 Adhering to the standards of practice, state and federal laws. **(7D1)**

14.3 Reporting to appropriate authorities suspected cases of fraud and abuse. **(7D2, 7D3)**

14.4 Reflecting upon and appropriately addressing self and peer assessment outcomes. **(7D5, 7D38)**

14.5 Participating in both integrated and full-time terminal clinical education activities. **(6L)**

14.6 Formulating and implementing a plan for personal and professional career development. **(7D15)**

14.7 Becoming involved and demonstrating leadership in professional organizations and activities through membership, service and advocacy for the profession and healthcare needs of society. **(7D13, 7D14)**

14.8 Demonstrating professional judgment and consideration of patient/client values in the application of current theory and knowledge to patient/client management. **(7D10, 7D11)**

14.9 Utilizing information technology to access appropriate sources of information in support of clinical decisions. **(7D9)**

14.10 Critically evaluating current literature and information sources related to contemporary physical therapy practice, research, administration, consultation, and education. **(7D9, 7D11 7D40)**

14.11 Participating in scholarly activities that contribute to the body of physical therapy knowledge. **(7D9, 7D15 )**

15.0 Function in the role of an **administrator** by:

15.1 Appropriately delegating to and supervising physical-therapy-related services to support personnel, physical therapist assistants and caregivers. **(7D25, 7D29)**

15.2 Demonstrating understanding of the history, current status and future projections for health care delivery in the United States and assessing health care policies and their potential implications in the healthcare environment. **(7D41)**

15.3 Participating in practice management functions appropriate for a given practice setting, including marketing, public relations, regulatory and legal requirements, risk management, staffing and continuous quality improvement. **(7D36, 7D43)**

15.4 Participating in the financial management of practice settings including billing and payment for services. **(7D42)**

15.5 Establishing a business plan on a programmatic level within a practice. **(7D43)**

15.6 Participating in activities related to marketing and public relations. **(7D43)**

16.0 Function as an effective **educator** by applying teaching and learning theories in designing, implementing and evaluating learning experiences for individuals, organizations and communities **(7D12)**

17.0 Demonstrate the ability to function in the role of **consultant** by providing consultation to individuals, case managers, businesses, schools, government agencies or other organizations. **(7D13)**

18.0 Function as a **self-directed lifelong learner** by:

18.1 Completing projects requiring selection of a topic and independent integration of information from a number of sources. **(7D9)**

18.2 Understanding the dynamic nature of the knowledge base of physical therapy and the need to stay current through practice, professional literature, and education. **(7D15)**

18.3 Seeking out new information regarding the practice of physical therapy. **(7D9)**

19.0 Use **critical thinking skills** to:

19.1 Assess and critically analyze scientific literature and apply best evidence for practice with clinical judgment to determine the best care for a patient. **(7D9, 7D10, 7D11)**

19.2 Explain one's reasoning and conclusions. **(7D10, 7D11)**

19.3 Monitor, reflect on and question one's own thinking in order to minimize errors and enhance patient/client outcomes. **(7D38)**

**PT Program Course objectives:**

**Following completion of the course, the graduate PT will be a generalist who will be able to:**

1. Practice according to the Code of Ethics for the Physical Therapist; demonstrates respect for self, the patient/client, and colleagues in all situations. **CPI skill # 1**
2. Practice according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management. **CPI skill #2**
3. Accept and be receptive to feedback; participates in planning and/or self-assessment to improve clinical performance; contributes to the advancement of the clinical setting through educational opportunities; seeks out opportunities to improve knowledge and skills. **CPI skill # 3**
4. Demonstrate professional verbal and nonverbal communication with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues); adapts to diverse verbal and nonverbal communication styles during patient/client interactions; utilizes communication resources (e.g., translators) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients/clients and others; facilitates ongoing communication with physical therapist assistants regarding patient/client care. **CPI skill # 4**
5. Deliver physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; Provides equitable patient/client care that does not vary in quality based on the patient's/client's personal characteristics (e.g., ethnicity, socioeconomic status). **CPI skill # 5**
6. Strategically gather, interpret, and synthesize information from multiple sources to make effective clinical judgments; applies current knowledge and clinical judgement leading to accurate and efficient evaluations including: selection of examination techniques, diagnosis, prognosis, goals, and plan of care; ensures patient/client safety via medical screening during the episode of care and when making discharge and progression decisions; presents a logical rationale for clinical decisions with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues). **CPI skill # 6**
7. Perform evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rules out other pathologies and refers to or consults with other healthcare professionals as necessary; evaluates data from the patient/client examination (e.g., history, systems review, tests and measures, screening, and outcome measures) to make clinical decisions, including the determination of a diagnosis to guide future patient/client management. **CPI skill # 7**

8. Establish a physical therapy plan of care that is safe, effective, patient/client-centered, and evidence-based while also considering prognostic factors; adapts plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients/clients are progressing toward discharge goals. **CPI skill # 8**
9. Select and perform appropriate physical therapy interventions (e.g., therapeutic exercise, therapeutic activity, neuromuscular re-education, application of modalities, manual therapy) that are evidence-based and completed in a competent and efficient manner; consults with interprofessional colleagues as appropriate (e.g., nurse, physician, occupational therapist, speech-language pathologist, orthotist-prosthetist) to seek advice or an opinion; educates patients/clients and caregivers using multimodal approach based on patient's/client's learning style; educates healthcare team on relevant topics by taking an active role in activities (e.g., journal clubs) or in-service opportunities. **CPI skill # 9**
10. Produces quality documentation that includes changes in the patient's/client's status, descriptions and progressions of specific interventions used, and communication among providers; maintains organization of patient/client documentation. **CPI skill # 10**
11. Identify financial barriers and limitations to patient/client care (e.g., authorization limits, cost to patient); adjusts plan of care and schedule frequency based on the patient's/client's financial concerns or needs; understands nuances of insurance including copay, co-insurance, out-of-pocket max, deductible, etc.; appropriately bills patients/clients according to legal guidelines and insurance regulations; demonstrates appropriate understanding of other fiscally responsible behaviors, including time management and appropriate use of clinical supplies and equipment when providing physical therapy services. **CPI skill # 11**
12. Actively participate in caseload discussions with interprofessional colleagues to optimize patient/client outcomes; delegates tasks to support staff as appropriate; identifies patient/client complexity model of care when scheduling patients/clients with a physical therapist assistant versus a physical therapist. **CPI skill # 12**

*Taken from:*

*American Physical Therapy Association Revised Clinical Performance Instruments: APTA Clinical Performance Instrument for PTs (PT CPI) 3.0; 2023*

**Required Textbooks and other materials:**

**Required:**

*American Physical Therapy Association Revised Clinical Performance Instruments: APTA Clinical Performance Instrument for PTs (PT CPI) 3.0; 2023*

PT Faculty. *Student Handbook*. The University of Findlay.

**Recommended:**

**Curricular Books**

American College of Sports Medicine. *ACSM's Guidelines for Exercise Testing and Prescription*. 10th ed. Philadelphia, PA: Wolters Kluwers; 2018. ISBN: 978-1496339072.

American Physical Therapy Association. *The Guide to Physical Therapist Practice*. 4<sup>th</sup> ed. Alexandria, VA: American Physical Therapy Association; 2015. ISBN: 978-1-931369-85-5. Available online at: <http://guidetoptpractice.apta.org/>

American Medical Association. *AMA Manual of Style*. 10th ed. Oxford, NY: Oxford University Press; 2007. ISBN: 978-0195176339.

Tecklin JS. *Pediatric Physical Therapy*. 5th ed. LWW; 2014. ISBN: 978-1451173451

**Knowledge Base:**

Anderson DK, Irwin KE. Self-assessment of professionalism in physical therapy education. *Work*. 2013; 44: 275-281.

APTA. *Clinical Education: An Anthology I*; 1992.

APTA. *Clinical Education: An Anthology II*; 1996.

APTA. *Clinical Education: An Anthology III*; 2000.

Buccieri KM, Pivko SE, Olzenak DL. How does a physical therapist acquire the skills of an expert clinical instructor. *J Phys Ther Educ*, 2011; 25:17-25.

Buccieri KM, Schultze K, Dungey J, Kolodziej T, et al. Self-reported characteristics of physical therapy clinical instructors: a comparison to the American Physical Therapy Association's Guidelines and Self-Assessments for Clinical Education. *J Phys Ther Educ*, 2006; 20: 47-55.

Deusinger S. Establishing clinical education programs: a practical guide. *Journal of Physical Therapy Education*. 1990; 4(2): 58-61.

Deusinger S. Evaluating effectiveness of clinical education. *Journal of Physical Therapy Education*. 1990; 4(2): 66-70.

Emery MJ. Effectiveness of the clinical instructor: student's perspective. *Physical Therapy*. 1984; 64: 1079-1083.

Ettinger ER. Role modeling for clinical educators. *Journal of Optometric Education*. 1991; 16(2): 60-62.

George D. Bridge program: An alternative education. *Journal of Continuing Higher Education*. 2012; 60 (2): 66-79.

Giberson TR, Black B, Pinkerton E. The impact of student-clinical instructor fit and student-organization fit on physical therapist clinical education experience outcomes. *J Phys Ther Educ*. 2008; 22: 59-64.

Graham CL. Conceptual learning processes in physical therapy students. *Phys Ther*, 1996; 76: 856-865.

Gwyer J. Rewards of teaching physical therapy students: clinical instructor's perspective. *Journal of Physical Therapy Education*. 1993; 7(2): 63-66.

Hall M, McFarlane L, Mulholland S. Positive clinical placements: perspectives of students and clinical educators in rehabilitation medicine. *Int J Ther Rehabil*. 2012; 19: 549-556.

- Haskins AR, Rose-St Prix C, Elbaum L. (1997). Covert bias in evaluation of physical therapist students' clinical performance. *Phys Ther.* 1997; 77:155-163.
- Hayes KW, Huber G, Rogers J, Sanders B. Behaviors that cause clinical instructors to question the clinical competence of physical therapist students. *Phys Ther.* 1999; 79: 653-667.
- Healey WE. (2008). Physical therapist student approaches to learning during clinical education experiences: a qualitative study. *J Phys Ther Educ.* 2008; 22: 49-58.
- Higgs J. Managing clinical education: the programme. *Physiotherapy.* 1993; 39(4): 239-246.
- Housel N, Gandy J, Edmondson D. Clinical instructor credentialing and student assessment of clinical instructor effectiveness. *J Phys Ther Educ.* 2010; 24: 26-34.
- Jarski RW, Kulig K, Olson RE. Allied health perceptions of effective clinical instruction. *Journal of Allied Health.* 1989; 19: 469-478.
- Jette DU, Bertoni A, Coots R, Johnson H, et al. Clinical instructors' perceptions of behaviors that comprise entry-level clinical performance in physical therapist students: A qualitative study. *Phys Ther.* 2007; 87: 833-843.
- Jette DU, Portney LG Construct validation of a model for professional behavior in physical therapist student. *Phys Ther.* 2003; 83: 432-443.
- Ladyszewsky RK, Barrie SC, Drake VM. A comparison of productivity and learning outcome in individual and cooperative physical therapy clinical education models. *Phys Ther.* 1998; 78:1288-1298.
- Laitinen-Vaananen S, Taltitie U. (2007). Clinical supervision as an interaction between the clinical educator and the student. *Physiother Theory Pract.* 2007; 23: 95-103.
- McCallum CA, Mosher PD, Jacobson PJ, Gallivan SP, Giuffre SM. Quality in physical therapist clinical education: A systematic review. *Phys Ther.* 2013; 93: 1298-1311.
- Moore A, Hilton R, Morris J, Caladine L, Bristow H. *The Clinical Educator - Role Development.* New York, NY: Curchill Livingston; 1997.
- Morren KK, Gordon SP, Sawyer BA. The relationship between clinical instructor characteristics and student perceptions of clinical instructor effectiveness. *J Phys Ther Educ.* 2008; 22: 52-63.
- O'Connor A, Cahill M, McKay EA. Revisiting 1:1 and 2:1 clinical placement models: Student and clinical educator perspectives. *Aust Occup Ther J.* 2012; 59: 276-283.
- Page GG, MacKinnon JR. (1987). Cost of clinical instructors' time in clinical education--physical therapy students. *Phys Ther.* 1987; 67: 238-243.
- Plack MM. (2008). The learning triad: potential barriers and supports to learning in the physical therapy clinical environment. *J Phys Ther Educ.* 2008; 22: 7-18.
- Rindflesch A, Hoversten K, Patterson B, Thomas L, et al. Students' description of factors contributing to a meaningful clinical experience in entry-level physical therapist professional education. *Work.* 2013; 44:



265-274.

Roach KE, Frost JS, Francis NJ, Giles S, et al. Validation of the revised physical therapist Clinical Performance Instrument (PT CPI): Version 2006. *Phys Ther.* 2012; 92: 416-428.

Roach K, Gandy J, Deusinger SS, Clark S, Gramet P et al. The Development and Testing of APTA Clinical Performance Instruments. *Phys Ther.* 2008; 82: 329-353.

School of Allied Health, Seminar 1 - *Teaching Guide and Learner's Workbook.*

School of Allied Health, Seminar 2 - *Teaching Guide and Learner's Workbook.*

Stith JS, Butterfield WH, Strube MJ, Deusinger SS, Gillespie DF. (1998). Personal, interpersonal, and organizational influences on student satisfaction with clinical education. *Phys Ther.* 1998; 78: 635-645.

Strohschein J, Hagler P, May L. Assessing the need for change in clinical education practices. *Phys Ther.* 2002; 82: 160-172.

Triggs M, Shepard KF. Physical therapy clinical education in a 2:1 student-instructor education model. *Phys Ther.* 1996; 76: 968-981.

Vendrely A, Carter R. The influence of training on the rating of physical therapist student performance in the clinical setting. *J Allied Health.* 2004; 33: 62-69.

Wolff-Burke M. Clinical instructors' descriptions of physical therapist student professional behaviors. *J Phys Ther Educ.* 2005; 19: 67-76.

**Instructional Strategies:**

Case Analysis		Library and Internet Research	
Debate		Practice/drill	
Discovery/Independent Research	X	Problem solving	X
Discussion/Questioning/Interviewing	X	Reading assignments	
Experiential Learning		Role playing/simulation games	
Field Experience	X	Service Learning	
Group Presentation		Video/Audio Review and Critique	
Laboratory Experiences		Other	
Lecture			

**Methods of Assessment:**

Method of Evaluation	Course Objective #	Points or Percentage
Abstracts		
Attendance		
Capstone Project		
Case Study		
Exams		
Group Projects		
Homework Assignments		
Internet Research		
Journaling		
Lab Performance		

Oral/written review of literature		
Participation		
Peer Evaluation		
Portfolio		
Portfolio Lab Performance		
Presentations		
Professional Evaluation		
Quizzes		
Research project		
Other: <b>Clinical Performance Instrument</b>		
<b>Method of Evaluation</b>	<b>Course Objective #</b>	<b>Points or Percentage</b>
<b>CPI skill #1</b>	#11	N/A – Satisfactory grade
<b>CPI skill #2</b>	#16	
<b>CPI skill #3</b>	#17	
<b>CPI skill #4</b>	#2	
<b>CPI skill #5</b>	#4	
<b>CPI skill #6</b>	#21	
<b>CPI skill #7</b>	#1, #22	
<b>CPI skill #8</b>	#5	
<b>CPI skill #9</b>	#6	
<b>CPI skill #10</b>	#7	
<b>CPI skill #11</b>	#8, #9	
<b>CPI skill #12</b>	#10	
<b>CPI skill #13</b>	#12, #14	
<b>CPI skill #14</b>	#19, #20	
<b>CPI skill #15</b>	#3	
<b>CPI skill #16</b>	#13	
<b>CPI skill #17</b>	#18	
<b>CPI skill #18</b>	#15	

### Description of Assignments:

Grading is satisfactory/unsatisfactory. To obtain a satisfactory grade the student must have completed the following assignments/activity:

1. Satisfactory attendance record – 35 to 40 hrs. per week MINIMUM & follows CI SCHEDULE (See the policy on attendance in *Student Handbook*)
2. Completion of Letter of Intent and cover page (CE site & CI)
3. Completion of *Clinical Education Experience Evaluation Report*, online.
4. Completion of Clinical Education Data Collection Forms on a daily basis.
5. Completion of Weekly Reflection forms with CI.
6. Completion of Clinical Site Information Form-Minimum Data
7. Completion of two inservices per CE series; minimum.
8. Satisfactory completion of clinical skills from Physical Therapist Clinical Performance Instrument.
9. There must be NO evidence of significant concerns and performance that does not show forward movement. In addition, the student needs to show performance at the following levels:
  - FOR Clinical Education Experience THREE: A MINIMUM of Entry-level Performance for ALL Skills; **Number 5 or higher**

- ALL students must show entry-level performance in ALL skills by the end of the clinical education series.
10. All practice patterns concerning clients across the lifespan also must be addressed. If there is no opportunity or minimal opportunity to work on a certain skill, practice pattern, or age group, then a mini-clinical or an extension of a clinical will need to occur.

**Grading:** Failure to complete any of the requirements will result in an unsatisfactory grade. Unsatisfactory grade in two clinical education experiences will result in dismissal from the program. However, the DCE and the Director have the right to review the requirements and make concessions on an individual basis.

**Grading Scale/Distribution:**

<b>Grade</b>	<b>Points</b>	<b>Grading Scale</b>
A	4.00	93-100
A-	3.67	90-92
B+	3.33	87-89
B	3.00	83-86
B-	2.67	80-82
C+	2.33	77-79
C	2.00	73-76
C-	1.67	70-72
D+	1.33	67-69
D	1.00	63-66
D-	0.67	62-60
F	0.00	below 60
U	0.00	

**University Honor Code:**

Each and every student of the University will adhere to the following Honor Code:

“I will not knowingly engage in any dishonorable behavior, cheat, steal, lie, or commit any act of plagiarism during any academic work, course, or endeavor. If I observe an act which I believe violates the University’s Honor Code, I may, at my discretion, report it to the appropriate personnel.”

**Student Acknowledgement of University Honor Code:**

“I acknowledge that I have fully complied or will comply with all aspects of the University’s Honor Code in submitting this work.”

**Student Rights and Responsibilities Statement, Article VIII-Academic Integrity:**

<http://catalog.findlay.edu/en/current/Undergraduate-Catalog/Student-Rights-and-Responsibilities-Statement/VIII-Academic-Integrity>

**University Diversity Statement:**

As part of our commitment to achieve excellence, the University of Findlay values and actively promotes a welcoming and supportive environment that honors the many aspects of diversity. We aspire to foster acceptance of, respect for, and appreciation of all persons in our campus community. We celebrate our commonalities and unique differences, and we acknowledge that diversity broadens learning, stimulates creativity, promotes the exchange of ideas, and prepares our students for meaningful lives and productive careers.

**Course Policies and Practices:** (Please refer to the DPT Student Handbook for a complete list of policies)

**Attendance:** Faculty devote much time and energy to preparing and teaching their courses, designing appropriate assignments and examinations, and evaluating students' progress. Excessive absence in a course can seriously threaten a student's academic progress and may result in suspension from the program course. More importantly, however, every absence represents a risk to the student's investment, both financial and intellectual, in a course. Faculty are under no obligation to offer extraordinary assistance to students who are persistently absent.

**Dress Code:**

Follow dress code of clinical site. If no dress code from the clinical site, then: Professional casual dress, close toed shoes and name tag. Tattoos must be covered. Simple jewelry and clean tennis shoes are acceptable.

**Email Etiquette:**

It is expected that all email correspondences to the instructor will be conducted in a professional manner. When utilizing email for this class, students should: (1) include the course name and number in the email subject heading, (2) address the recipient in an appropriate manner, (3) utilize proper spelling, grammar, and punctuation, (4) close with your full name, and (5) name file attachments by including the course name and number, student last name, and assignment/document title.

**Failed technical skill:** Any failed technical skill may require a learning contract with a reexamination of that technique before the remedial clinical will be approved. Failure to complete the learning contract with a satisfactory grade (as specified by the instructor(s)) will result in dismissal from the program.

Only one remedial clinical affiliation may be scheduled after satisfactory completion of the learning contract. See the policy on Rescheduling of Clinical Affiliations in the Student Handbook, Clinical Education section.

**Late Assignments:**

Any student whose assignment is not received by the course instructor prior to the due date and time will have a **minimum 10%-point reduction for EACH CALENDAR DAY that the assignment is late**. Faculty have the right to create more strict late assignment penalties on a per assignment basis as well. Students who fail to pass the course at a minimum of 70% level may be asked to undergo a formal remediation of the course. The course instructor reserves the right to not offer remediation to any student.

**Final Exam Date:** Final CPI scoring in lieu of final examination.

**Special Services:** If you are a student with a disability, it is your responsibility to inform your instructor and register with the Office of Accommodation and Inclusion (oai@findlay.edu) at least one week prior to a needed service so reasonable accommodations can be made.

**Course and Instructor Evaluation:** Each student is expected to complete the course and instructor evaluation which is sent electronically to the student.

**Last Date of Attendance Policy:** A student's last date of attendance is the date he/she was last present in class. If the student attends all classes, the official last date of the class, as determined by the institution, will be used for reporting purposes. (Note, instructors of online courses must be able to meet the federal expectation for tracking Last Date of Attendance. The federal guideline states: the last

date of attendance is calculated by the last time a student participated in an online discussion or made contact with a faculty member.)

### **Tentative Course Outline:**

#### **Week One**

- Completion of the letter of intent
- Completion of cover page (CE site & CI)

#### **Week Four**

- Completion of online self-assessment of CPI midterm & notify CI of its completion
- Call DCE for midterm contact

#### **Midterm, Week Five**

- Completion of online CPI by the CI
- Make sure the CPI is signed off on
- Completion of Clinical Site Information Form-Minimum Data

#### **Week Nine**

- Completion of online self-assessment of CPI final & notify CI of its completion

#### **Final, Week Ten**

- Completion of online CPI by the CI
- Completion of online CEEER; share with CI
- Make sure the CPI is signed off on by all parties
- POST on SHARE POINT:
  - Daily CEF data sheets & cover
  - Weekly reflections
  - Clinical Site Information Form-Minimum Data
  - Inservice proof (needed for 2 clinicals; PP & feedback forms)
  - and the signature page of the CEEER
- Completion of Certificate of supervision for the CI & turn in with TY note to the CI

### **Additional Information**

#### **PT Program Mission**

The mission of the physical therapy program at The University of Findlay is to empower students to help transform society by optimizing movement and function to improve the lives and well-being of those they serve.

**Course Content** is focused on the following CPI skills:

Professionalism: **Ethical Practice**

Professionalism: **Legal Practice**

Professionalism: **Professional Growth**

Interpersonal: **Communication**

Interpersonal: **Inclusivity**

Technical/Procedural: **Clinical Reasoning**

Technical/Procedural: **Examination, Evaluation, and Diagnosis**

Technical/Procedural: **Plan of Care and Case Management**

Technical/Procedural: **Interventions and Education**

Business: **Documentation**

Business: **Financial Management and Fiscal Responsibility**  
Responsibility: **Guiding and Coordinating Support Staff**

### **Responsible Employee Duty**

I am a responsible employee at UF, which means I am not a confidential resource. Therefore, I am required to report any information that I am aware that may violate UF's Sex Discrimination, Sexual Harassment, and Other Forms of Sexual Misconduct Policy. If you would like to speak with someone confidentially, please contact Counseling Services, Cosiano Health Center or Campus Ministries. Other resources include Open Arms and Blanchard Valley Hospital. Otherwise, if you would like to report an incident involving a possible violation of UF's Sex Discrimination, Sexual Harassment, and Other Forms of Sexual Misconduct Policy, please contact UF's Title IX Coordinator at 419-434-4739.

### **Classroom Environment, Language, and Behavior Expectations**

In order to promote an inclusive and constructive learning environment, demeaning, marginalizing, and otherwise negative language and behavior will not be tolerated in the classroom. Respect and courtesy toward the instructor, classmates, and classroom guests are expected. Language and behaviors that are disruptive, abusive, or harassing may result in disciplinary action as specified by the Student's Rights and Responsibilities Statement.

*Please be aware that due to the continuing COVID-19 pandemic, a change to fully online delivery may be required. If such a change occurs, all classes will be administered in Canvas. Changes to the schedule, with the exception of the scheduled final examination for the course, may also be required and will be communicated through Canvas & email. Please be sure to pay attention to Canvas notifications & emails from your instructor.*

**Note: This syllabus is subject to change at the discretion of the instructor.**

Syllabus Template Approved by Faculty Senate 26 October 2020

Modified 31 January 2022