

Request for Graduate Course Change

1. Prepare one paper copy with all signatures and supporting material and forward to the Graduate Council Chair.
2. E-mail one identical PDF copy to the Graduate Council Chair. If attachments included, please merge into a single file.
3. **The Graduate Council cannot process this application until it has received both the PDF copy and the signed hard copy.**

College: COHP

Dept/Division: Physical Therapy

Current Alpha Designator/Number: PT 731

Contact Person: Penny Kroll

Phone: 304-696-5614

CURRENT COURSE DATA:

Course Title: Professional Practice I

Alpha Designator/Number:

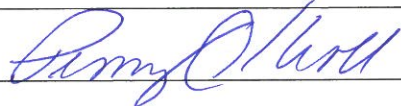

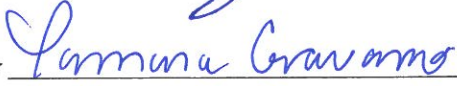
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Title Abbreviation:

C	I	I	N	I	C	A	L		S	K	I	L	L	S		I								
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1. Complete this **five** page form in its entirety and route through the departments/committees below for changes to a course involving: course title, alpha designator, course number, course content, credit hours, or catalog description.
2. If this change will affect other departments that require this course, please send a memo to the affected department and include it with this packet, as well as the response received from the affected department.
3. If the changes made to this course will make the course similar in title or content to another department's courses, please send a memo to the affected department and include it with this packet as well as the response received from the affected department.
4. List courses, if any, that will be deleted because of this change (*must submit course deletion form*).
5. If the faculty requirements and/or equipment need to be changed upon approval of this proposal, attach a written estimate of additional needs.

Signatures: if disapproved at any level, do not sign. Return to previous signer with recommendation attached.

Dept. Chair/Division Head <u></u>	Date <u>3/23/15</u>
Registrar <u></u>	Date <u>3/23/15</u>
College Curriculum Chair <u></u>	Date <u>4/3/15</u>
Graduate Council Chair _____	Date _____

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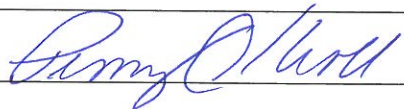

Course Title: Professional Practice I

Alpha Designator/Number: P T 7 3 1

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Registrar <u></u>	Date <u>3/23/15</u>
College Curriculum Chair _____	Date _____
Graduate Council Chair _____	Date _____

College: COHP Department/Division: Physical Therapy Alpha Designator/Number: PT 731

Change in CATALOG TITLE: ☒ YES ☐ NO

[illegible]

If Yes, Rationale	<p>The name of Clinical Skills II is being changed to Therapeutic Interventions so that the title will represent the content being taught in the course. Since there will no longer be a Clinical Skills II, we seek to remove the "I" from the title of PT 731.</p>
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From:

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 To:

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☐ YES ☒ NO

If Yes, Rationale	
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From:

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 To:

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If Yes, Rationale	
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Rationale	
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From

To

If Yes Rationale	
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Request for Graduate Course Change - Page 3

Change in COURSE CREDIT HOURS: ☐ YES ☒ NO If YES, fill in below:

NOTE: If credit hours increase/decrease, please provide documentation that specifies the adjusted work requirements.

From

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To

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Change in COURSE CONTENT: ☐ YES ☒ NO (May attach separate page if needed)

From

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To

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Rationale

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Request for Graduate Course Change-Page 4

College: COHP _____

Department: Physical Therapy _____

Course Number/Title PT 731 _____

1. REQUIRED COURSE: If this course is required by another department(s), identify it/them by name and attach the written notification you sent to them announcing to them the proposed change and any response received. Enter NOT APPLICABLE if not applicable.

Not Applicable

2. COURSE DELETION: List any courses that will be deleted because of this change. A *Course Deletion* form is also required. Enter NOT APPLICABLE if not applicable.

Not Applicable

3. ADDITIONAL RESOURCE REQUIREMENTS: If your department requires additional faculty, equipment, or specialized materials as a result of this change, attach an estimate of the time and cost etc. required to secure these items. (NOTE: approval of this form does not imply approval for additional resources. Enter NOT APPLICABLE if not applicable.

Not Applicable

Request for Graduate Course Change - Page 5

Please insert in the text box below your course change summary information for the Graduate Council agenda. Please enter the information exactly in this way (including headings) based on the appropriate change:

COURSE DESCRIPTION CHANGE

Department:
Course Number and Title:
Rationale:
Course Description (old)
Course Description: (new)
Catalog Description:

COURSE NUMBER CHANGE

Department:
Current Course Number/Title:
New Course Number:
Rationale:
Catalog Description:
Credit hours:

COURSE TITLE CHANGE

Department:
Current Course Number/Title:
New Course Title:
Rationale:
Catalog Description:

COURSE DESCRIPTION CHANGE

Department: Physical Therapy
Current Course number and Title: PT 731 Clinical Skills I
New Course Title: PT 731 Clinical Skills

Rationale:

The name of Clinical Skills II is being changed to Therapeutic Interventions so that the title will be represent the content being taught in the course. Since there will no longer be a Clinical Skills II, we seek to remove the "I" from the title of PT 731.

Course Description : Theory/practice of essential physical therapy skills, including clinical decision making , interview, postural and functional assessment, safe patient handling techniques of positioning, bed mobility, transfers, and use of assistive devices.

(New)

Course Number	PT 731
Title	Clinical Skills
Semester/Year	Fall 2014
Days/Time	Mondays/Wednesdays 9-12 3 credits, 45 adjusted hours
Location	SMEC Room 113
Instructor	Saurabh Mehta, PT,
Office	SMEC Room 129
Phone	304-696-5620
E-Mail	Mehta@marshall.edu
Office/Hours	TBD
Co-Instructor	Tamara N. Gravano, PT, DPT, GCS
Office	SMEC Room 135
Phone	304-696-5616
E-Mail	Gravano@marshall.edu
Office/Hours	Tuesday and Thursday 10-12 and by appointment
University Policies	By enrolling in this course, you agree to the University Policies listed below. Please read the full text of each policy by going to www.marshall.edu/academic-affairs and clicking on "Marshall University Policies." Or, you can access the policies directly by going to http://www.marshall.edu/academic-affairs/?page_id=802 Academic Dishonesty/ Excused Absence Policy for Undergraduates/ Computing Services Acceptable Use/ Inclement Weather/ Dead Week/ Students with Disabilities/ Academic Forgiveness/ Academic Probation and Suspension/ Academic Rights and Responsibilities of Students/ Affirmative Action/ Sexual Harassment

Course Description: From Catalog

Credits: 3

This course uses both lecture and laboratory to cover basic evaluation skills including clinical decision making, history taking, postural and functional assessment, and safe patient handling techniques of positioning, bed mobility, transfers, and use of assistive devices. The student must have successfully completed all prior curricular course work.

Course Student Learning Outcomes Upon Completion of this course, the student will:	How Practiced in this Course	How Assessed in this Course
1. Formulate and conduct an effective and efficient physical therapy interview and physical examination of mock patients with movement and/or related dysfunctions.	Reading assignments Lecture/class discussion Case studies (including small group discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Class Participation Written Exam Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
2. Articulate, verbally and in writing, the findings obtained from examination of patients with movement and/or related dysfunctions.	Reading assignments Lecture/class discussion Case studies (including small group	Written Examination Mini Skills Check-offs Clinic Documentation

	discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Clinic Visit Skills Performance
3. Demonstrate cultural competence during mock patient-therapist communication episodes.	Reading assignments Lecture/class discussion Case studies (including small group discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Class Participation Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
4. Collect appropriate health information from a patient or client's medical record, subjective history, and data from quantitative and qualitative tests/measures necessary to formulate a complete physical therapy evaluation, diagnosis, and prognosis.	Reading assignments Lecture/class discussion Case studies (including small group discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
5. Perform a complete basic patient/client examination of cognitive, neuromusculoskeletal, cardiopulmonary and integumentary integrity, and functional mobility in a safe and efficient manner.	Reading assignments Lecture/class discussion Case studies (including small group discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Class Participation Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
6. Recognize and implement safety precautions and direct examinations to improve safety and reduce risk of injury and infection in the clinical setting.	Reading assignments Lecture/class discussion Case studies (including small group discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills Peer grading	Class Participation Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
7. Formulate appropriate clinical questions to guide physical therapy practice decisions.	Reading assignments Lecture/class discussion Case studies (including small group discussions about case studies) Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Class Participation Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
8) Effectively and efficiently evaluate and perform dependent and assisted mobility skills with patients and/or caregivers.	Reading assignments Lecture/class discussion Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Class Participation Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance

9) Evaluate basic aspects of correct wheelchair fit and functional mobility under various conditions with regard to the lifespan.	Reading assignments Lecture/class discussion Demonstration/Lab experiences Peer teaching of didactic information and psychomotor skills	Written Examination Mini Skills Check-offs Clinic Documentation Clinic Visit Skills Performance
10) Demonstrate effective skills in applying therapeutic massage as appropriate.	Participate in student-led group learning sessions, where a group of students will prepare and deliver content in lecture and lab session facilitated by the course advisor.	Group presentation Participation in lab Quiz Skills Check-off

Required Texts, Additional Reading, and Other Materials

1. (J) Johansson, C & Chinworth, S.(2012). *Mobility in Context: Principles of Patient Care Skills*. FA Davis.
2. (R) Reese, N. *Muscle and Sensory Testing*.(2012) Third Ed. Elsevier.
3. Other handouts as provided.

All components of the Physical Therapist's Essentials "PT Kit" will be required. Kits and individual components are provided by the SOPT.

Kit includes:

- 54" gait belt
- 12" goniometer
- 6" goniometer
- Dual head stethoscope
- Sphygmomanometer (adult cuff)
- Taylor percussion hammer (reflex hammer)
- Measuring tape
- Pen light
- Stop Watch
- Pulse Oximeter

Course Requirements / Due Dates

Course Requirements

Class participation is demonstrated by timely completion of all assigned readings and/or written homework assignments prior to the class for which they are assigned. Points for class preparation and participation will be based on the student's individual performance during each scheduled class session.

Other assignments may include but are not limited to: documentation from clinic visits and professionalism demonstrated during peer and instructor interactions is factored into your final grade.

A portion of the grades earned for completion of documentation and participation during Clinic Visits will also be reflected in the overall course grades. See below for further details.

See Course Schedule Below for due dates

Grading Policy

Grading Criteria:

(2) Written Exams; Mid-Term (20%), Final (20%)	40%
Quizzes 4	20%
Mini Skills Check-offs (3)	30%
2 Clinic Visit Skills Performance	10%
	100 %

SOPT Grading Criteria:

89.50 – 100	A
79.50- 89.49	B
69.50-79.49	C
<69.50	F

Attendance Policy

Please see the School of Physical Therapy Student Handbook for details. Lab attire is required on days where we have lab in class. Please consider clothing which allows full unrestricted access and movement as necessary. Refer to Student handbook for details. If lecture only, please wear lecture attire.

Course Schedule

Week	Content	Required Prior to Class
1 Mon 8/18	Qualitative Data Collection: Chart Review, Initial Patient Interview Gross Cognitive Assessment, (1.5hr lecture, 1.5 hr lab)	J&C: 16-36, Diff. Dx Text: 31-87
Wed 8/20	Vitals Assessment (1hr lecture, 2 hr lab)	J&C: 108-136
2 Mon 8/25	Integumentary Assessment (1hr lecture, 2 hr lab)	
Wed 8/27	Neuro Exam 1: Deep Tendon Reflexes, Gross Balance screening Dermatomes-Light touch only, Myotomes (3hr lecture)	Quiz 1, Reading on MUOnline
3 Mon 9/01	No Class Labor Day	-----
Wed 9/03	Neuro Exam Lab and Upper/Lower Qtr Screen(3 hr lab)	R: 507-514, 487-489, 492-493
4 Mon 9/08	Mini Skills Check off 1 (Vitals, integ, neuro)	
Wed 9/10	Lifespan Considerations in Measurement: Pediatrics (1hr lecture, 2 hr lab)	Quiz 2 R: 401-435 Add. Reading on Blackboard/MUOnline
5 Mon 9/15	<i>Clinic Visit: Patient/Client assessment (vitals/integ/neuro) (Each student is assigned one hour time slot in a small group of 3)</i>	Clinic Attire
Wed 9/17	Adv. Functional Strength Measures (1hr lecture, 2 hr lab)	R: 378-399
6 Mon 9/22	Lifespan Considerations in Measurement: Geriatrics (1hr lecture, 2 hr lab)	R: 329-377
Wed 9/24	Review day- practice lab cases	<i>Open lab with lab assistants</i>
7 Mon 9/29	Dead Day	

Wed 10/01	Practical exam	
Friday 10/03 TIME TBA	Midterm Written Exam	-----
8 10/6-10	Fall Break Week- No Class	-----
9 Mon 10/13	Bed Mobility and Positioning (Lecture and Lab)	J&C: Chap 2, 10
Wed 10/15	Bed Mobility and Transfers (Lab)	J&C Chap 8 –pp201-219, Chap 11
10 Mon 10/20	Wheelchair Management (Lecture and Lab) (Guest: Paula Voithofer of Pride Mobility)	J&C: Chap 12
Wed 10/22	Wheelchair Management (Lecture and Lab) Quiz 3	J&C Ch 8 pp 181-200
11 Mon 10/27	Skills Check off 2: Bed mobility/Transfers/WC management Each student assigned 20 min time slot	
Wed 10/29	Power-assist devices Demonstration and Lab: Mitchell Moore of Arjo Huntleigh	J&C Review Chap 8
12 Mon 11/3	Gait with Assistive Devices I; (Lecture and Lab)	J&C: Chap 14
Wed 11/5	Gait on Stairs and uneven surfaces with AD (lab)	J&C: Chap 14
13 Mon 11/10	Gait/Mobility Skills check off 3 Each student assigned one 20 min time slot (3 graders)	
Friday 11/14 1:30-4:30	Clinic Visit: Transfers & Gait Assessment (Each student is assigned one hour time slot)	Clinic Attire
14 Mon 11/17	Therapeutic Massage (Lecture and Lab) Lab attire Quiz 4	Reading on Black Board (Andrade: pp 153-213, 307-395)
Wed 11/19	Alternate Date: Hospital/clinic visit- Transfers, GT w/AD Each student assigned 1 hr time slot. (Open Lab if not needed)	Wear Clinic attire.
15 Mon 11/24	Practical Case review Day-Open Lab	Lab assistants available
Wed 11/26	Thanksgiving No Class	
16 Mon 12/1	Dead Day	

Tues 12/2	Practical Exam <i>Each individual student time TBA</i>	
Wed 12/3	Written Exam day	

*** Schedule subject to change.

(OLD)

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Office	SMEC Room 129
Phone	304-696-5620
E-Mail	Mehta@marshall.edu
Office/Hours	TBD
Co-Instructor	Tamara N. Gravano, PT, DPT, GCS
Office	SMEC Room 135
Phone	304-696-5616
E-Mail	Gravano@marshall.edu
Office/Hours	Tuesday and Thursday 10-12 and by appointment
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