



MARSHALL UNIVERSITY
College of Health Professions

Student Handbook
School of Physical Therapy



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The Doctor of Physical Therapy Program at Marshall University is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: accreditation@apta.org; website: <http://www.captionline.org>.

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Marshall University Vision and Mission Statement

Marshall University's Vision Statement <http://www.marshall.edu/2020/> posits that "Marshall University, an exemplar of excellence in teaching and learning, will continue to place its highest priority on providing outstanding undergraduate and graduate education, resulting in national recognition in academics and in scholarly, artistic, and creative achievement. Marshall's students will graduate well prepared for the responsibilities of life within a culturally diverse and globally interdependent society. Marshall will address the changing needs of the state and region and will return to the community and state an outstanding value for the resources invested in the university."

The mission statement (<http://www.marshall.edu/strategic/university-mission-statement/>) includes the commitment to provide affordable, high quality education, foster and encourage faculty, staff and student to perform community outreach and seek to enhance health care in the region, provide safe and secure work and learning environments, educate the citizenry, and adhere to the Marshall Creed and Statement of Ethics.

Faculty are expected to support the mission of the university by remaining current in their fields, by providing improved instruction through innovative curricula, by contributing to the body of knowledge and by helping students to engage in scholarly, artistic, and creative endeavors, and to develop the ability to navigate through a rapidly changing society. Staff and administration are expected to support the university and personnel in all these endeavors.

The University seeks to provide students with the opportunity to use knowledge, creativity, and critical thinking skills to better their communities, to critically examine issues facing society in order to contribute to the betterment of society, to appreciate diversity, and to prepare themselves for graduate education in their chosen professions.

College of Health Professions (COHP) Vision and Mission Statement

The COHP Vision and Mission statements mirror those of the University, by being committed to offering quality undergraduate and graduate health professions education. The focus of the College of Health Professions is upon being interactive with the community, including rural and underserved areas, and responding to contemporary and future needs of society, and the health professions.

[\(https://www.marshall.edu/cohp/mission-statement/\)](https://www.marshall.edu/cohp/mission-statement/)

School of Physical Therapy Vision and Program Mission

SOPT Vision

To embody and exemplify each of the attributes we seek to instill in our students and to graduate Doctors of Physical Therapy who will be autonomous primary care practitioners, leaders in the profession, and facilitators of learning through preservation, discovery, synthesis, and dissemination of knowledge.

<https://www.marshall.edu/physical-therapy/vision-mission-philosophy/>

Program Mission:

To provide contemporary physical therapy education; to empower graduates and educators to exemplify excellence in clinical practice, scholarship, mentorship, leadership, and professionalism; and to engage all stakeholders in employing evidence-informed physical therapy that reflects and expands best practice.

<https://www.marshall.edu/physical-therapy/vision-mission-philosophy/>

DPT Program Goals and Outcomes:

In keeping with the Vision and Mission, the goals of the DPT program are:

1. To graduate exceptional autonomous practitioners, who are leaders in the profession and community, and capable of treating diverse populations.
2. To support and empower our educators to exemplify excellence in clinical practice, advocacy, mentorship, leadership, and professionalism.
3. To engage all stakeholders to employ evidence-informed decision making by seeking to discover, synthesize, preserve, apply, and disseminate knowledge that reflects best practice.

Given these goals our expected program outcomes for students and educators are as follows:

Graduates:

Outcome #1: Will demonstrate entry-level competence necessary to practice physical therapy as an independent member of the healthcare team in diverse settings, per the following metrics:

- obtaining an average final mark at or above “entry-level” performance on the Clinical Performance Instrument (CPI) for PT 793.
- accomplishing a first-time pass rate of 85% or greater on the National Physical Therapy Exam
- achieving an average score of 3.5/5 on the 6-month Employer Survey

Outcome #2: Will demonstrate a commitment to the profession by participating in professional organizations, scholarship, education, and advocacy, per the following metrics:

- achieve an average score of 3.5/5 on the 6-month Employer Survey, items #3 and #19.
- 85% of the respondents on the One-Year Graduate Survey report taking at least one continuing education course.
- 85% of respondents on the Five-Year Graduate Survey report participation in professional advocacy activities.

Outcome #3: Become effective communicators and teachers of patients, families, peers, students, and community, per the following metrics:

- achieve an average score of 3.5/5 or higher on the 6-month Employer Survey, items #1 and #5.
- achieve an average mark of “entry-level” performance on the PT 793 CPI, item #4 “Communication.”

Outcome #4: Will adhere to core values, legal and ethical standards, per the following metrics:

- achieve an average score of 3.5/5 or higher on the 6-month Employer Survey, items #2 and #3.
- achieve an average mark of “entry-level” performance on the PT 793 CPI, items #2 “Professional Practice- Professional Behavior” and #3 “Professional Practice - Accountability.”

Faculty:

Outcome #1: Will demonstrate excellence in preparation and delivery of quality PT education per the following metrics:

- score a minimum 3.5/5 on average on instructor peer evaluations
- score a minimum of 3.5/5 on average on student evaluations of teaching

Outcome #2: Will demonstrate contemporary expertise in clinical practice as measured by:

- 30% of the faculty will be ABPTS Certified Clinical Specialists
- 50% of the core faculty will practice part-time clinically
- All core faculty will obtain 24 hours of continuing education credits every two years.

Outcome #3: Will encourage “best practice” through engagement in the preservation, discovery, synthesis, dissemination and/or application of knowledge to said practice by:

- All core faculty will generate 5 or more peer-reviewed scholarly products in a 10-year period.

Outcome #4: Will participate on at least two School, College, University or professional committees (e.g., community, state, or national level).

Program:

Outcome #1: Will graduate 85% of the students entering the program each year.

Outcome #2: Will report that 85% of graduates taking the National Physical Therapy Examination (NPTE) pass on the first attempt.

Outcome #3: Will report that 95% of students are employed as a physical therapist 6 months after passing the NPTE licensure exam.

Outcome #4: Will report on the Clinical Education Annual Survey that 80% of clinical instructors (CIs) rate our students' clinical performance at or above students from other PT programs.

Outcome #5: Will report an average score of 85% or higher on Item #1 of the graduate exit survey indicating that students feel prepared to start Physical Therapy Clinical Practice.

Outcome #6: Will report 75% or higher average score on Item #10 of the One-Year Graduate Survey indicating overall quality of the education provided by the Marshall School of Physical Therapy Program

GENERAL POLICIES

Consumer Information and Disclosures

In order to help consumers, make well-informed decisions about postsecondary education, federal regulations require higher education institutions to disclose certain information. To assist in locating this information, Marshall University has created a Consumer Information and Disclosures launching point at <http://www.marshall.edu/disclosures/>. Among others, the following specific reports are available from the Marshall University Consumer Information and Disclosures web site: student financial aid information, drug, and alcohol abuse prevention program information, retention rates, and graduation rates. Prospective students may request printed copies of any report at no charge by calling the Office of University Communications at 304-696-7153.

Equal Opportunity Policy Statement

All SOPT faculty and students must be aware of our responsibility for **preserving the privacy, dignity, and safety of all people**, including patients, patients' families or care givers, students, faculty, and support staff who are involved in the program in any way. Involvement in the program includes in classrooms, laboratories, clinical education, patient care, research, and administrative activities.

It is the policy of Marshall University to provide equal education and employment opportunities for prospective and current members of its student body, faculty and staff on the basis of individual qualifications and merit.

In order to insure genuine equal opportunities for all:

- (1) Marshall University prohibits discrimination based on race, color, sex, sexual orientation, religion, age, national origin, veteran status, or disabilities.
- (2) Marshall University will, whenever appropriate, take affirmative actions to employ, advance in employment and otherwise treat without discrimination qualified women, minorities, individuals with disabilities, disabled veterans and veterans of the Vietnam era.
- (3) Marshall University will not affiliate with nor grant recognition to any individual, group or

organization having policies or practices that discriminate on the basis of race, color, sex, sexual orientation, religion, age, national origin, veteran status or disabilities.

All employees and contractors of the University are required to comply with this policy in the exercise of their functions. Anyone who believes that s/he has been denied the benefits of this policy should contact the Office of Equity Programs for appropriate action.

Any requests for information on the implementation of this policy should be addressed to:

Office of Equity Programs
206 Old Main
Marshall University
Huntington, WV 25755
(304) 696-2597

Equal Opportunity/Affirmative Action policies of Marshall University are stated in the Marshall University Student Handbook: <http://www.marshall.edu/eeoaa/files/Equal-Employment-Affirmative-Action-Policy.pdf>

The *Marshall Student Handbook* further identifies mechanisms for filing an inquiry or complaint regarding equal opportunity, as well as addresses and phone numbers of the Office of Equity Programs. This office also answers questions regarding equal opportunity at the College of Health Professions. Policies regarding reasonable accommodation for persons with a disability and policies protecting against sexual harassment also are outlined in the *Marshall Student Handbook*.

Title IX Complaints

Title IX complaints may be submitted online at <https://www.marshall.edu/eeoaa/complaint-form/>

Nondiscrimination: Marshall University Board of Governors Policy No. SA-1 Students Rights and Responsibilities Standard 3 states Marshall University students and student groups respect and honor the human rights, and dignity of other persons, groups, and organizations. This policy includes the following: Harassment/Bullying, Cyber bullying/Harassment, Discrimination based on race, sex, gender, color, national origin, religion, political affiliation, disability, age, or sexual orientation.

The School of Physical Therapy Academic Policies are published in subsequent sections of this Student Handbook. The *Marshall Student Handbook* outlines the academic policies in sections entitled “*Grading and Evaluation of Performance*,” “*Graduate Professional Scholastic Requirements*,” and “*Provisions for Academic Progression*.” Furthermore, the *Marshall Student Handbook* describes policies for Leave of Absence, Withdrawals, and Dismissals. The COHP “Statement of Satisfactory Academic Progress” and “Student Academic Appeals” are outlined in the *Marshall Student Handbook*. Policies and procedures for Academic Conduct are specified in the *Marshall Student Handbook POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT*.

Evaluation and retention of students are provided in an equitable manner. Policies and procedures regarding due process in the handling of student concerns and/or complaints of the program are outlined in the *Marshall Student Handbook*. In addition, the *Marshall Student Handbook POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT* explicitly outlines complete descriptions of academic misconduct and the consequences for such misconduct including due process for students. Similarly, the mechanisms for appealing decisions also are described in detail in the *Marshall Student Handbook*. The *Marshall Student Handbook* identifies mechanisms for filing an inquiry or complaint regarding equal opportunity or discrimination at Marshall University. The University has specific procedures that protect the rights of students including leaves of absence, dismissal, and academic misconduct and the policies are outlined for complaints regarding dismissals due to unprofessional conduct of any kind (*Marshall Student Handbook*). Receipts of complaints are rare but any complaint received is forwarded to the

proper University channel in accordance with established policies. Any complaint regarding research is forwarded to the Institutional Review Board (IRB) following specific IRB policy.

Program faculty members are responsible for ensuring that each student remains qualified based on his/her academic and clinical achievements as well as the student's professionalism. In order to monitor the appropriateness of each student's progression through the program, the student's faculty advisor and the APSC regularly reviews the students' performance. Any concerns by a faculty member or faculty advisor are reported to the SOPT APSC which reviews academic, professional and clinical performance at the end of each semester and at year end. Mid-term warnings are distributed to students who earn a grade below 70% on one or more individual mid-term examinations. These students are directed to meet with the course coordinator or faculty member responsible for that instructional unit.

Any student in academic difficulty shall take the responsibility to request counseling by his/her SOPT faculty adviser and/or the instructor(s) of the course(s) in which the difficulty occurs. Documentation of meetings of this nature is maintained in the individual student's file. A student in jeopardy of not remaining in compliance with the academic policies is notified in writing with a recommendation for the student to schedule a meeting with his/her faculty adviser to establish a plan to address any weaknesses.

Furthermore, objectives and requirements for satisfactory completion of each course in the curriculum are provided in writing in the course syllabus which is distributed at the beginning of the semester.

Criteria for successful completion of all clinical education courses are well delineated with the expectations and requirements of each clinical education course. All policies are applied equitably to ensure nondiscrimination by the School and College of Health Professions according to the regulations.

Safety

Marshall University provides for the safety of faculty, staff, students, and patients through policies, procedures, and education. The University has appointed committees with the responsibilities of ensuring that the rights of all employees and students are protected. Other committees ensure that employees and students adhere to safety policies. The *Marshall Student Handbook* delineates in detail the policies and procedures that protect the rights of students including leaves of absence, dismissal, and academic misconduct. Specific policies are outlined for complaints regarding dismissals due to unprofessional conduct of any kind (*Marshall Student Handbook*). Likewise, specific procedures are outlined for student academic appeals of final grades in the *Marshall Student Handbook*.

Marshall University Annual Security and Fire Safety Report

Marshall University is committed to assisting all members of the University community in providing for their own safety and security. The Annual Security and Fire Safety report is available at www.marshall.edu/disclosures/securityreport. A printed copy of the report is available by calling the Marshall University Police Department at 304-696-4357.

The report contains information regarding campus security and personal safety including topics such as crime prevention, university police law enforcement authority, crime reporting policies, fire safety policies, disciplinary procedures and other matters of importance related to security on campus. The report also contains information about fire statistics in MU Residence Halls and crime statistics for the three previous calendar years concerning reported crimes that occurred on campus; in certain off-campus buildings or property owned or controlled by MU; and on public property within, or immediately adjacent to and accessible from the campus. This information is required by law and is provided by Marshall University. In addition, because the School of Physical Therapy is located on the

campus of St. Mary's Center for Education, the St. Mary's Medical Center conducts a yearly fire safety inspection in conjunction with the Huntington City Fire Marshall.

Security Information

Students are advised of security contact information during new student orientation. Important phone numbers include:

- **St. Mary's Campus security 304-526-1649**
- **Marshall Campus Police 304-696-HELP**
- **Emergency Response 911**

All students are made aware of safety issues as part of the new student orientation, and security information is posted on the placard at the entrance of the building.

SPECIFIC SAFETY REGULATIONS FOR THE SOPT FACILITIES AS PART OF THE ST MARY'S CENTER FOR EDUCATION:

1. Report any unsafe condition(s) immediately to the SOPT Chairperson and staff.
2. Report any foreign material on the floor or remove it to prevent someone from falling or tripping.
3. Walk, do not run. Keep to the right and use caution at intersecting corridors.
4. Know the location of the fire extinguishers, fire alarms and the proper procedure for calling a fire code. These will be reviewed as part of the new student orientation.
5. Know what to do in the case of a fire:
 - * Rescue students, faculty, staff, and others to safety
 - * Alarm (activate the electronic alarm system)
 - * Contain the fire (close all doors in your immediate area)
 - * Extinguish a small fire (know the location of the fire extinguishers) or Evacuate if a large fire
6. Be careful when opening doors. Observe through the glass window if present.
7. Report all injuries to yourself or patient, no matter how slight.
8. No horseplay or practical jokes will be tolerated.
9. When in doubt about what should be done, ask the SOPT Chairperson, faculty, or staff.
10. Only authorized personnel are allowed to use restricted equipment. Students are not allowed to use equipment until they have been formally trained and given permission to use the equipment.
11. Smoking is not permitted in the SOPT or the St Mary's Center for Education.
12. Students will complete safety orientations at each clinical site as required by the host facility.
13. Students are expected to follow the safety policies of the SOPT, Marshall University, and St Mary's Center for Education.

Fire Evacuation Plan

The designated fire drill code for St. Mary's Medical Center is **"Code RED, location. Code RED, location."** The complete St. Mary's Center for Education Student Handbook may be found at:

<https://www.st-maryscdn.net/pdfs/ST. MARYS CENTER FOR EDUCATION STUDENT HANDBOOK 2018 - 2019 UPDATE - FINAL.pdf>

Active Shooter Policy

If an active shooter is outside your building or inside the building you are in, you should: try to remain calm, warn other faculty, staff, and students to take shelter immediately, proceed to a room or area that can be locked or barricaded, turn off the lights and any devices that might emit sound. It is important to keep yourself out of sight, stay away from windows and take adequate cover/protection. You should wait patiently until a uniformed police officer, or a university official provides an "all clear." Unfamiliar voices may be an active shooter trying to lure you from safety; do not respond to voice commands until you can verify with certainty that they are being issued by a

police officer or university official. Contact emergency services by dialing 911, or 304-696-4357 when it is safe to do so. A student may review all Marshall University Emergency Management Procedures at <https://www.marshall.edu/emergency/emergency-management/>

Marshall University Emergency Management information pertaining to safety, health, weather, and emergency response can be found at <https://www.marshall.edu/emergency/emergency-management/>

Schedules

The academic calendar for the School may be different from that published in the *Catalog* and so is provided to students by the SOPT Chairperson prior to the start of each semester. All courses in each semester are prerequisite for the following semester and for continued enrollment.

POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT

The policies of Marshall University are presented in the following:

Graduate Catalog (http://www.marshall.edu/catalog/files/Gr_2018-19_Published_10-01-18_rev.pdf)
Marshall Student Rights & Responsibilities (http://www.marshall.edu/student-conduct/files/2300_Student_Conduct.pdf).

Students are expected to be familiar with this information and should pay particular attention to attendance, grading, dismissals, and scholastic requirements.

SCHOOL OF PHYSICAL THERAPY POLICIES

Academic and Professionalism Policies

In many courses, a portion of the student's grade is termed professional behavior or class participation. Criteria used to determine this grade include class attendance, student attitude, contribution to creating a learning atmosphere in the course, submitting written assignments on time, quality of discussion concerning topics contained in outside readings or other assignments, proper attire, and interpersonal relationships with faculty members and classmates. This portion of the student's grade also includes professionalism.

Academic and Professionalism Standards Committee (APSC)

It is the responsibility of the APSC to recommend the overall academic and professional standards and policies to the SOPT Chairperson (e.g., Program Director) for consideration by the Marshall University School of Physical Therapy core faculty. The APSC shall review the progress of all students and recommend appropriate action when warranted. The APSC reviews student performance and makes recommendations to the SOPT Chairperson. In turn, the SOPT Chairperson makes recommendations to Provost or his/her designee in the Office of the Provost. The APSC reviews the students entire academic and professional record related to academic deficiencies, promotion, and unprofessional behaviors. The APSC reviews the academic and professional progress of all students and recommends appropriate action for students who have one or more academic and/or professional deficiencies. Considerations of student performance is cumulative and comprehensive.

The APSC reviews and recommends guidelines for the promotion and or dismissal based on the evaluation of all aspects of student progress in the areas of academic performance and professionalism. The Committee consists of 3 core faculty appointed by the SOPT Chairperson. The meetings are closed, except for invitees. All deliberations are confidential.

Professional Behavior

Students represent the Marshall University School of Physical Therapy and are expected to uphold the standards of professionalism to internal and external stakeholders. Physical therapy students are expected to attempt to do that which is right when interacting with fellow students, faculty, other health care professions, and patients. They are expected to promote the highest possible standard of behavior and moral conduct by adhering to the following Core Values and Code of Ethics by the American Board of Physical Therapy (see appendix). These standards include Altruism, Accountability, Compassion, Integrity, Excellence, Professional Duty, Honor, and Dignity.

The APTA Code of Ethics is provided in the appendix and can also be found at:

[http://www.apta.org/uploadedFiles/APTAorg/About Us/Policies/Ethics/CodeofEthics.pdf#search=%22Code of Ethics%22](http://www.apta.org/uploadedFiles/APTAorg/About%20Us/Policies/Ethics/CodeofEthics.pdf#search=%22Code%20of%20Ethics%22)

The student is encouraged to see himself or herself as a perpetual learner and to respect the professional aspirations of the other class members. Each student is expected to participate and assist in creating a learning atmosphere in all classroom and clinical settings.

Students are expected to act in a professional manner at all times. Although professionalism is difficult to define, it includes such things as honesty, integrity, respect of others, being helpful and courteous in the classroom and clinic, prompt attendance at all scheduled classes and meetings, behaving in the appropriate and necessary manner which is consistent with a clinical/academic setting. In other words, it is behavior which reflects your view of yourself and your profession.

Students MUST maintain a professional attitude at all times, including, above all honesty and integrity. Students must also demonstrate respect for others at all times, including during classes, labs, clinics, etc. Failure to do so will result in disciplinary action, which may include dishonorable dismissal from the program. Students must also uphold the CODE of ETHICS and the GUIDE for PROFESSIONAL CONDUCT of the American Physical Therapy Association (Appendix). Professional conduct in the classroom, clinic, and citizenship as a student of Marshall University's School of Physical Therapy is of utmost importance.

Professional conduct offenses may fall into one of two categories, which may not be mutually exclusive:

1. Major offense:

May include but are not limited to:

- Abuse of power such as sexual harassment and/or physical violence
- Misrepresentation including but not limited to lying, cheating, and commission of fraud
- Conduct unbecoming of a student physical therapist that jeopardizes the public perception of the School of Physical Therapy and Marshall University
- Breach of confidentiality
- Arriving to class or clinic under the influence of drugs and/or alcohol or other substances that impair clinical reasoning

2. Minor Offenses:

May include but are not limited to:

- A minor disruption in a class setting
- Improper language to a person of authority, including but not limited to displays of superiority and self-importance and failure to accept and utilize constructive feedback
- Lack of conscientiousness including but not limited to failure to arrive on time and prepared for class and/or clinical duties
- Unexcused absence*
- Improper attire**
- Failure to report any condition/situation which might compromise one's ability to participate fully in a classroom or clinical environment

*Please see the policy on absence in this handbook. (add page numbers)

** Please see the policy on attire in this handbook.

Students are considered in good professional standing if they are rated as Meeting or Exceeding Expectations by the SOPT faculty and Director of Clinical Education.

Students will be provided with feedback regarding their professional standing during the annual completion of the Professional Behaviors Profile, twice during each clinical internship, and whenever deemed necessary by faculty and/or the APSC. Students who are rated as “Not Meeting Expectations” will be asked to meet with their advisor to review the concern. Students who are rated as Not Meeting Expectations multiple times and who do not show active efforts to utilize feedback to improve performance will be referred by the advisor to the APSC for further action.

Correcting Professional Behavior Deficiencies

MUSOPT follows a progressive disciplinary procedure for addressing deficiencies. Initially, if a student or faculty member identifies a professional behavior offense, the violation will be discussed with the student and with the student's advisor by the faculty member noting or responding to the report of an infraction. If the student's advisor is also the faculty member reporting the infraction, then a second faculty member will be present for this initial discussion.

Actions which may be taken by the faculty involved in the disciplinary discussion include the following:

- If the two attending faculty members determine that no violation has been committed, then no remediation or documentation of the discussion will be required.
- If the two attending faculty members determine that a violation has been committed but agree that the violation was minor in nature, an anecdotal letter will be reviewed with the student and placed in their file. After the first incident, the student will be placed on probation for one academic year (summer to spring). Please see the policy on promotion in this handbook.
- Should the student refuse to sign the anecdotal report or, after signing the report is still aggrieved, the incident will be referred to the APSC for further consideration.
- If after an investigation by the APSC it is determined that the anecdotal letter was appropriate, yet the student continues to refuse to sign the report, the APSC may recommend further disciplinary action to the SOPT Chairperson that could include suspension or dismissal from the School of Physical Therapy.
- A second minor professional behavior incident will result in the actions outlined in the four preceding bullets in this section.
- A third minor professional behavior incident will result in a referral to the APSC as a major offense.
- For a major professional incident or an accumulation of three minor incidents, the APSC shall review the incident and make recommendations to the School Chairperson regarding disciplinary action which may include sanctions up to suspension or dismissal from the School of Physical Therapy.

- The School Chairperson may either accept or overturn the recommendation of the APSC, and subsequently, inform the student.
- A student may formally appeal the School Chairperson's decision to the Dean of the College of Health Professions within 3 University business days. Students should refer to the appeals process in the University Graduate handbook.

Academic Dishonesty

Academic exercise is defined as an assignment, either graded or not graded, that is given in an academic course or one that must be completed toward the completion of degree or certification requirements. An assignment includes, but is not limited to, the following academic exercises: exam, quiz, homework assignment, log, paper, oral presentation, lab assignment, data gathering exercise and analysis, practicum and creative work of any kind.

Academic Dishonesty, which includes but is not limited to the following actions, is prohibited and is considered a violation of Academic and Professionalism Standards:

- The unauthorized use or distribution of any materials to other students for the purpose of assisting academic or clinical performance (i.e., notes, sources of information, study aids, technologies or tools) before, during, or after an academic exercise;
- The unauthorized assistance of a person other than the Course Coordinator or his/her designee during an academic exercise;
- The unauthorized viewing of another person's work during an academic exercise;
- The unauthorized securing of all or part of assignments or examinations, in advance of submission by the Course Coordinator or his/her appropriate designee;
- The unauthorized invention or alteration of any information, citation, data, or means of verification in an academic exercise, official correspondence or university record;
- The submission as one's own work of any material or idea wholly or in part created by another. This work is, but not limited to, oral, written, and graphical material and both published and unpublished work. It is the student's responsibility to clearly distinguish his/her own work from that created by others. This includes the proper use of quotation marks, paraphrase and the citation of the original source. Students are responsible for both intentional and unintentional acts of plagiarism;
- Attempting to unfairly influence a course grade or the satisfaction of degree requirements through any of these actions is prohibited;
- Helping or attempting to help someone commit an act of academic dishonesty.

Accusations of academic dishonesty or violation of Components of Professionalism should be reported directly to the Course Coordinator, advisor, APSC, or SOPT Chairperson. Upon receipt of an accusation, the Course Coordinator and/or the APSC is charged with joint investigation. All reports will be held in confidence.

Should a Course Coordinator or his/her designee observe a student in violation of this policy, the Course Coordinator will place an anecdotal report in the student file and may impose: a lower or failing project/paper/test grade, a lower final grade or failure of the course/internship.

Should additional action be warranted, a petition may be filed by the Course Coordinator with the APSC. The petitioner may recommend additional sanctions. The APSC will review the petition and shall refer it to the SOPT Chair. The School Chairperson may also jointly originate the petition. Upon review of the petition, the APSC and SOPT Chairperson may impose, but not be limited to, academic probation, academic suspension or dismissal from the School of Physical Therapy.

In cases where an offense is particularly flagrant, or where there are other aggravating circumstances, additional non-academic sanctions may be pursued through the APSC. Non-academic sanctions may include, but not limited to denial of graduate assistantships, conference funding, choice of elective courses, selection for competitive clinical internships, eligibility for student awards and leadership positions.

The Physical Therapy School will maintain a record of any academic dishonesty and violations of professionalism incidents within each student file.

Appeals regarding sanctions imposed by the APSC will be processed in accordance with the Appeals Policy of the SOPT and Provost.

Satisfactory Academic and Professional Progress

Students are expected to make continuous and successful academic and professional progress toward graduation requirements, as reviewed annually by the APSC (first and second-year students) and the advisor of third-year students. The concept of satisfactory progress mandates monitoring of a student's academic and professional performance as defined by the policy on Year-end Promotion.

The APSC reserves the right to review the academic and professional progress of any student at any time. Failure to maintain satisfactory academic and/or professional progress will result in an additional review and possible action by the APSC. Failure to make "satisfactory academic or professional progress" as defined by the APSC may result in immediate dismissal and/or other action. Students are expected to adhere to all standards of conduct policies and procedures as set forth by the School of Physical Therapy, the Marshall University Board of Governors, and the American Physical Therapy Association. These standards apply to each student's entire academic and professional record at the School of Physical Therapy, irrespective of leave status.

Correcting Academic Deficiencies

For remediable deficiencies, students are referred to the APSC and placed on academic probation. The advisor and student will then determine an academic plan for the student, which will be submitted to the APSC for approval and may include, but not be limited to, one or more of the following actions:

- Reflect on a personal improvement plan to demonstrate the ability to increase the student GPA (Grade Point Average) to 3.0 or above
- Meet with an advisor and/or the course coordinator as determined by the APSC
- The APSC may advise the student regarding additional university resources such as an evaluation from a learning specialist, participation in a skill development program(s), or medical evaluation/treatment.

Failure to successfully remediate academic deficiencies will result in further sanctions by the APSC. Should an attempt at correcting a deficiency be unsuccessful, the student may be dismissed from the School of Physical Therapy.

GRADING AND EVALUATION OF PERFORMANCE

Grading

In each course in the curriculum, the student's performance is evaluated by a variety of assessment tools as indicated in each course syllabus. The final grade is submitted to the Office of the Registrar, according to the published schedule for grade submission. The single final grade to be assigned to a student on completion of the course work should be determined by considering all important attributes of that student's performance in the course.

Faculty are responsible for grading course materials in each respective course and determining the final grade to be assigned according to the Graduate Catalog grading system, (A, B, C, F, W, I, and Pass/Fail).

According to the *Marshall University Graduate Student, Grade Information and Regulations*:

Grades of *A* and *B* indicate satisfactory graduate work.

A grade of "*C*" is not considered satisfactory graduate work. See Requirements for Graduation below.

A grade of "*F*" indicates failure in a course and will lead to an automatic dismissal from the MUSOPT. See Academic Dismissal. Students who receive a grade of "*F*" and who are dismissed may re-apply to the program through PTCAS in subsequent years.

An "*I*" grade (Incomplete) is given to students who do not complete course requirements because of illness or for some other valid reason. The *I* grade is not considered in determining the Grade Point Average. The student has the responsibility of completing the work within the period defined by the instructor, not to exceed twelve calendar months from the date of receipt of the incomplete. If the work is completed satisfactorily, one of the four passing marks will be awarded. If the work is unsatisfactory or the student fails to complete the work within the twelve-month period, an *F* or failing grade will be recorded. All grades remain on the student's permanent record as originally submitted by the course instructor. Any grade change is added to the permanent record.

"*Pass*"/"*Fail*" courses are designated with CR (credit)/NC (no credit) grading.

"*Pass*" and "*Fail*" are not considered in determining the Grade Point Average.

A *NC* grade may lead to suspension or dismissal from the MUSOPT.

Letter grades are assigned strictly on the basis of the following distribution:

89.50 - 100%	A
79.50 - 89.49%	B
69.50 - 79.49%	C
≤69.49%	F

The SOPT grading policy and procedure follow the stipulations outlined in the *Marshall University Graduate Student Grade Information and Regulations* in the *Graduate Catalog* and further outlined in the *SOPT Student Handbook* and as reviewed during *Orientation* upon matriculation in the DPT Program:

1. A failing grade of either a "Fail" or "NC" in a course results in automatic dismissal from the program. The student's academic record will be reviewed by the APSC, which will consider possible conditions of reinstatement to the program on an individual case basis.
2. A minimum cumulative GPA of 3.0 is required for continued successful progression towards graduation.

Provisions for academic progression are further outlined in the Graduate Catalog and SOPT Student Handbook. Academic progression is reviewed during orientation upon matriculation in the DPT Program and includes, but is not limited to the following details regarding Academic Progression (probation, dismissal, re-entry, and deceleration):

1. Summer (DPT Semester 1) of First Year:

- A student whose grade point average falls between 2.99-2.90 will be recommended for academic probation by the APSC and approved by the SOPT chairperson.
- A student whose grade point average falls between 2.89-2.75 will be recommended for academic probation. The student may request to restart the DPT program with the following cohort*, continue the program on academic probation, or switch to the 4-Year Deceleration Pathway†. **(See 4-Year Deceleration Pathway POS on page 47).** The APSC will review the academic/professional performance of all students and counsel the student on the pros and cons of each option. The student will make the decision within seven (7) days of the last day of class.
- A student whose grade point average falls below 2.75 will be recommended for dismissal from the MUSOPT. The student may reapply to the program through PTCAS in the following year.

*A student who restarts the program with the following cohort (automatic or through PTCAS application) will start with a clean GPA slate upon re-entering the program.

†A student who continues the DPT program on either the 3-Year regular pathway (probation) or the 4-Year deceleration pathway must complete the semester. The student will retain all earned grades and must come off probation in the required time period.

2. Fall (DPT Semester 2) of First Year:

- A student who was not on probation after the summer semester (DPT Semester 1) and whose cumulative grade point average falls between 2.99 to 2.90 will be recommended for academic probation by the APSC.
- A student who was not on probation after the summer semester (DPT Semester 1) and whose cumulative grade point average falls between 2.89 to 2.75 will have the option to continue on the 3-Year regular pathway or switch to the 4-Year deceleration pathway. A student who continues the DPT program on either the 3-Year regular pathway or the 4-Year deceleration pathway must complete the semester. The student will retain all earned grades and must come off probation in the required time period.
- A student who was on probation after the summer semester (DPT Semester 1) and whose cumulative grade point average falls below 2.75 will be dismissed from the program. The student may reapply to the program through PTCAS in the following year.

3. Any Semester thereafter (after Fall of First Year):

- A student whose cumulative grade point average falls between 2.99 - 2.75 will be

recommended for academic probation by the APSC.

- A student whose cumulative grade point average falls below 2.75 will be dismissed from the program and may reapply through PTCAS.
4. Any student who is on probation will have one semester to correct academic deficiencies. If a student has demonstrated academic progress and improved their cumulative grade point average from 2.90 to 2.99 during the semester of probation, the student may appeal to the APSC for an additional consecutive semester of probation. Students are allowed a maximum of two semesters of academic probation as part of the DPT curriculum.
 5. Following notification of probation and before the start of the next semester, the student will be counseled by their faculty advisor or the APSC. During this initial counseling session, the student will be advised of his/her deficiencies and the requirements for removing the deficiencies by the end of the following semester.
 6. The SOPT Chairperson may either accept or overturn all recommendations by the APSC, and will subsequently inform the student of the final recommendation to the Provost (Provost designee).
 7. The Provost (Provost designee) makes the final decision regarding academic dismissal.
 8. If the student disagrees with the SOPT Chairperson's decision, the student may appeal the decision in writing to the Provost (Provost designee) within 3 University business days after notification of dismissal.
 9. In the event a student is placed on probation in the final fall semester (DPT semester 8) and is mathematically unable to achieve a 3.0 GPA, the student will not be permitted to attend the intermediate internship (PT 792) and will be referred to the APSC for review and make a recommendation to the SOPT Chairperson.

The MUSOPT APSC is responsible for determining candidacy for Academic Probation. Students may be placed on probation for no more than two semesters during the entire DPT curriculum. The APSC will make decisions regarding any disciplinary or remediation action based on the student's academic, professional, and clinical performance.

4- Year Deceleration Pathway

The 4-Year Deceleration Pathway has the same degree requirements and the same number of credits to graduate, but the curriculum is sequenced over 4-years rather than 3-years. To ensure that students remain full-time, semester 10 has one additional course (PT 798 1-credit Independent Study) that will allow the student to retain full-time status (6 credits)/semester. The 4-Year Deceleration Pathway is only available to students who have demonstrated academic difficulty (cumulative GPA 2.89 to 2.75) in the summer or fall semesters of Year 1. The 4-Year Deceleration Pathway provides students with an additional option allowing them to remain in the program but with a lighter course load per semester. The student will take some courses with their original cohort, and they will take some courses with the cohort that is one year behind. The student will graduate with the cohort that is one year behind the matriculating cohort. All SOPT program policies and procedures remain in effect for the students on the 4-Year Deceleration Pathway. See Appendix 1 for the 3-Year and the 4-Year DPT curricula. Students will have seven (7) days from the end of the summer (year 1) or fall (year 1) to make a decision to switch to the deceleration program. The student must sign an educational contract signifying that they are switching to the deceleration pathway. Once a student has switched from the 3-year to the 4-year deceleration pathway, they are unable to switch back. The student who elects to participate in the 4-Year deceleration pathway will incur an additional year of tuition. While the SOPT has made every effort to work with the financial aid office in the development of the deceleration pathway, the student is responsible for communicating with the Marshall University Financial Aid Office and insurers of any third-party scholarships.

Provisions for Restarting the Program

The DPT degree is offered in a professional cohort format, and each new cohort starts in May. Students who restart will do so in the following cohort. Those students who are granted the opportunity to restart the program due to academic deficiency or professionalism issues will not be granted additional opportunities to restart the program. The provisions for any future probation for those students restarting will otherwise be consistent with the procedures for the first attempt. Students who restart the program will be placed on probation in the DPT program based on the cumulative GPA calculated using only the grades obtained since restarting the program with the new cohort. Grades obtained during the first attempt will NOT be counted in the SOPT GPA calculation. It is possible that a student can be on probation in the DPT program but not on probation with the university, as the university GPA formula includes all prior course grades. In an effort to protect the public and ensure competence, all APSC decisions will be based on the cumulative GPA after restarting the program. Students are responsible for exploring the financial aid ramifications of restarting by contacting the Financial Aid Office.

Practical Examinations

At the conclusion of practical examinations, any video files are to be submitted to *Ensemble* or other predetermined electronic storage space for faculty access by a designee appointed in advance. These files are available for review by faculty graders. Graders are to score the practical examination according to the grading rubric supplied by the case author. Score sheets shared with each individual student, and a paper copy is placed in their academic file. If the grade is non-passing, the faculty member will arrange with the student a remediation attempt. If the remediation is still below passing, the faculty member will notify the APSC of the outcome in order for the committee to initiate action. Students have the opportunity for two retake examinations if they fail the initial practical exam.

The appeal of Final Grades

Students may appeal final grades by following the Grades Appeals policy and procedures outlined in the Graduate Catalog, <http://www.marshall.edu/graduate/graduate-student-appeals-process/>

The APSC is considered the School level committee responsible for the review of grade appeals. Please see the *Graduate Catalog* under ACADEMIC RIGHTS AND RESPONSIBILITIES OF STUDENTS: ACADEMIC APPEALS for the full description of the procedure. The APSC, after receiving the written appeal from the student will meet to review the circumstances of the case and will make a recommendation to the SOPT Chairperson, who will notify the student in writing regarding the decision. As stated in the *Graduate Catalog*, should the issue not be resolved at School level, either the student or instructor may appeal in writing to the Provost (Provost designee) within ten (10) days of receipt of the APSC decision.

The Chairperson of the APSC will report any actions to the faculty at the following SOPT faculty meeting.

Academic Progression

The doctoral student of physical therapy will find that the expectations, requirements, and responsibilities of the clinical graduate program far exceed those of undergraduate school. The following sections outline some of the students' academic responsibilities and the process by which students are evaluated, and the curricular objectives carried out.

Academic Requirements and Notification of Progress

The APSC meets at the end each semester to review each student's academic, clinical and professional performance in the curriculum as determined by examinations, faculty and staff reports, and other available means of appraisal. In addition, during the summer semester of each year, the committee will

complete a year-end assessment of each student's performance. During this meeting, the Committee makes a determination to promote or not promote a student to the next academic year, and utilizing recommendations of the Clinical Education Committee, will decide if they should recommend that the individual student proceed to clinical rotations. Following this meeting, the students are notified of their promotion status in a written letter from the APSC.

Prior to graduation, a Comprehensive Assessment Verification Form will ensure that each student has completed all academic, clinical, and professional performance requirements for the Doctor of Physical Therapy degree. The form will require the signature of the student's academic advisor, the Capstone advisor, the Director of Clinical Education, and the SOPT Chairperson.

Year End Promotion

All of the following criteria must be met satisfactorily for a student enrolled in the School of Physical Therapy to be eligible for promotion to the next academic year or graduation:

1. Satisfactory completion of all didactic and clinical course work and requirements specified for the academic level.
2. Fulfilling all requirements established by the faculty of each course within the academic year
3. Satisfactory completion of that year's required component parts of the Student Portfolio (as determined by the student's academic advisor)
4. Approval for promotion by the APSC

Requirements for Graduation

1. Satisfactory completion of all course work and requirements specified in the curriculum with a final cumulative GPA of 3.0 or greater.
2. Completion of the SOPT Verification Form with signatures from the student's academic advisor, the Capstone Advisor, the Director of Clinical Education, and the SOPT Chairperson
3. Satisfactory status concerning obligations to Marshall University

Statement of Satisfactory Academic Progress

A student who is allowed to continue enrollment in the School of Physical Therapy is considered making satisfactory academic progress. The APSC meets at the end of the summer semester and early in the spring semester and review the qualitative and quantitative academic progress of each student. A student not satisfactorily completing all course requirements will go through a full review by the APSC, and a decision will be made regarding possible disciplinary or remedial actions that will be taken.

Academic and Professional Standards Committee

The Academic and Professional Standards Committee (APSC) performs full scale reviews of the performance of students enrolled in the School of Physical Therapy. The committee will be appointed by the School Chairperson and will consist of at least three Core Physical Therapy faculty members. The SOPT Chairperson will assign a Chairperson of the committee. The APSC will meet at least once a semester but may call additional meetings any time throughout the year if deemed necessary by the APSC or SOPT faculty and/or SOPT Chairperson. During these meetings, the APSC may vote and make recommendations on the current enrollment status of any student in the respective year.

During the summer meeting, the APSC reviews the student records of all students in the program and discusses the performance of individual students in all three domains (academic, clinical, and professional). The committee will summarize each student's performance and potential for promoting to the next academic year given current performance levels. If a student's performance is considered to be marginal or below minimal course standards, the student's faculty advisor and/or a member of the APSC may arrange for a personal conference with the student involved to discuss deficiencies observed and to suggest corrective measures to be taken. In each committee, a majority vote (2/3) is required in

order to promote a student to the next academic year or to recommend graduation. These rulings are then furthered to the SOPT Chairperson for final approval.

The APSC has the responsibility for final action relating to student promotions. They also have an obligation to conduct a comprehensive review of the records of students who have acquired deficiencies, using all pertinent data available from any appropriate source, such as student files. In order to assure that the committee has adequate information for making a proper decision, it may seek comments from a student's faculty advisor or any other faculty member.

In reaching a decision on action to be taken in connection with a student who has incurred deficiencies, the committee shall give due consideration to the nature, extent, and significance of the deficiencies manifested. It shall take into account the relationship of the activity and time required for completion of the measures for removal of deficiency specified by the SOPT or faculty involved. It shall also evaluate the influence of other factors which relate to the best interest of the student and the SOPT.

Potential Actions of the APSC:

1. Promotion with no deficiencies noted
2. Promotion after removal of all deficiencies as specified
3. Permission to repeat the year taking only those courses in which deficiencies occurred.
4. Permission to repeat the year taking the entire course work of that year
5. Dismissal for failure to meet the requirements in a satisfactory manner
6. Special procedure which may be indicated in exceptional cases

Year-end Promotion Status

The three potential categories of promotion, based on performance, are:

1. Promotion with Accolades
2. Promotion
3. Promotion with Remediation

The level of promotion is dependent upon a student's composite performance across four major areas of performance. These areas are 1) Academic, 2) Practical/Clinical performance, 3) Professional conduct, and 4) Consistency of performance. The committee will perform a comprehensive review of each student file in order to determine which classification the student will receive. The definitions of each of the categories are listed below.

1. **Promotion with Accolades:** To receive this distinction all three requirements MUST be met:
 - a. The student maintains an overall GPA of $\geq 3.75/4.00$:
 - b. The student has had NO professional issues in his/her file within the academic year.
 - c. The student completed all CASE Series practical examinations and/or clinical rotations with the minimum passing score on a first attempt within the academic year.
2. **Promotion:** To receive this distinction all three requirements MUST be met:
 - a. The student maintains a minimum GPA of 3.00/4.00.
 - b. The student has had NO professional issues in his/her file within the academic year.
 - c. The student completed all CASE Series practical examinations and/or clinical rotations with the minimum passing score on a first attempt within the academic year.

3. **Promotion with Remediation:** To receive this distinction one, or more, of the following statements, apply:
- The student does not meet the minimum GPA of 3.00/4.00, but is actively on, or is eligible for academic probation.
 - An active professional issue was opened in the student's file within the academic year.
 - The student required remediation to pass one or more CASE Series practical examinations and/or clinical rotations.

Promotion with Remediation

If the APSC renders a decision of "Promotion with Remediation," this is indicative of deficiencies (academic, clinical or professional) on the part of the student. All academic deficiencies must be removed before a student is eligible for promotion. This requires additional work or some corrective action on the part of the student. Permission to remove a deficiency is granted the student by the APSC. The manner in which a deficiency may be removed and the length of time to be allowed for the removal is to be specified by the APSC. The student may be allowed to continue in the program as usual while remediating the identified deficiencies and continue to promote regularly contingent upon satisfactory remediation of these deficiencies.

Procedure for Remediation of CASES Practical Examinations

Course Skill Checks and Practical Examinations

Individual courses may require clinical skill checks or practical examinations. These assessments are designed to assess safety, proficiency in clinical skills, and/or clinical decision-making related to a patient case scenario. Students are required to score a minimum of 70% per section on the grading rubric and 4/5 on the safety component. Any student who scores less than 70% overall or less than 4/5 on the safety component will be required to remediate and retake the skills check or practical examination. Grading will be subject to the individual course syllabus.

CASES Practical Examinations and Rotational Testing Points (RTP)

All CASES courses will require a final practical examination and in some cases may be designated as a rotational testing point. An RTP occurs prior to students going out on a full-time clinical rotation. Students MUST successfully pass these RTP in order to be cleared by the core faculty to participate in the assigned clinical rotation. Any student who scores less than 70% overall on a final practical exam or RTP, or who scores less than a 4/5 on the safety component of the grading rubric is considered to have failed the practical exam. The student will be afforded the opportunity to remediate their deficiencies and retake the practical exam a maximum of two times. If the student fails to successfully pass the practical examination or RTP on the third attempt (2nd remediation), a grade of "F" will be received in the course. A score on the final practical examination that falls between 70-80% on the grading rubric will require the student to undergo a minimum of 2 hours of guided laboratory practice with a faculty member or a graduate teaching assistant. All students will have their practical examination performance tracked on a master spreadsheet to identify any ongoing deficiency in clinical performance.

In some cases, remediation may postpone progression to clinical education courses. The student may miss a scheduled clinical rotation. The missed rotation(s) will be scheduled at the end of all other rotations; therefore, graduation may be postponed by one semester or longer. See the Clinical Education Student Handbook for specific details.

If a student is eligible for remediation, a grade of "I" may be assigned and a memorandum is sent by the course coordinator to the ASPC stating the approximate course completion date. If the course is successfully remediated, the "I" grade will be changed to the correct grade; if the student does not

successfully remediate the course (e.g., fails all remediation attempts), the “I” grade will be changed to an F or NC and referred to the APSC for further action.

The remediation will be given at the discretion of the course coordinator in which the student did not successfully pass. Exam format of and/or length of time scheduled for remediation is determined by the faculty member and must be approved by the SOPT Chairperson.

A score of less than 70% on the remediation of any practical exam will result in a grade of NC in CASEs courses and F in didactic courses, and the student must meet with the APSC to determine a course of action. If the student successfully completes the remediation (makes at least 70% on the practical exam AND completes all assignments in the remediation agreement), a grade of “Pass” will be given for CASEs, or a maximum score of 70% will be factored into their didactic grade for that assignment.

Comprehensive Assessment

The Comprehensive Assessment for graduation with the Doctor of Physical Therapy degree. At the conclusion of last semester of the DPT program, students must obtain the signatures of the following individuals to ensure completion of all requirements for graduation: Faculty Advisor, Capstone Project Facilitator, Director of Clinical Education, and the SOPT Chairperson. This review will include completion of the Plan of Study, academic artifacts such as the Professional Behaviors Portfolio, the First-year Patient Case Study, the Second-year Service Learning Project, the completed Capstone research project and Presentation, and performance on the Clinical Performance Instruments from each clinical rotation.

For all students, an exception to the above policies may be approved by the Provost (Provost designee) on an individual basis. The Provost (Provost designee) will notify the Chairperson of the Marshall University’s Graduate council of any exceptions which were approved and give the reasons for each exception.

Comprehensive Examination/Mock Board Examination

All students are required as part of PT 799 to take a comprehensive examination/mock Board Examination and achieve a minimum passing score as outline by the PT 799 course syllabus. PT 799 is a pass/fail course, and failure to achieve the minimum passing score on the comprehensive examination with allowance for a repeated attempt may result in failure of the course and dismissal from the program.

Academic Dismissal

If the APSC concludes that a student should be dismissed because the student has failed to meet academic requirements satisfactorily, a recommendation for dismissal will be sent to the SOPT Chairperson who will forward the recommendation to the Provost (Provost designee). Appeals of decisions must be conducted within the policy and procedures outlined in the Graduate Catalog http://www.marshall.edu/catalog/files/Gr_2018-19_Published_10-01-18_rev.pdf. In addition, the Financial Aid package may be affected by an academic dismissal decision. The guidelines and procedures related to appeals of Satisfactory Academic Progress for DPT students may be found in the Graduate catalog noted above.

Disciplinary Action

For a student who has engaged in cheating, unprofessional conduct, or other improper behavior, occurring within or outside the confines of the teaching program, dismissal or other specified disciplinary action may be recommended, and if so, policy and procedures outlined in the Graduate Catalog http://www.marshall.edu/catalog/files/Gr_2018-19_Published_10-01-18_rev.pdf will be followed.

Requests for Short-term Class or Clinical Absences

A student who needs to miss a single course may seek an excused absence from the course coordinator. Students needing to miss two or more class sessions in two or more courses or time during a clinical rotation MUST request a formal short-term absence from the Administrative Committee. A student may request a short absence (< 1 week) from class or clinical rotation by submitting a leave request form to the Chair of the Administrative Committee. The Administrative Committee will monitor all absences to ensure that absence requests are approved in an equitable manner.

Medical Leave of Absence

A student who is in good academic standing may request a medical leave of absence if the absence involves more than 20% of any one course. A medical leave of absence may be granted for physical or psychological medical conditions that require medical attention in order for the student to be successful in the program. The student may be granted re-entry into the program in the following cohort. Medical Leave of Absence is at the discretion of the SOPT Chairperson.

Non-Medical Leave of Absence

Leave of absence may be granted to a student in good standing for reasons of a personal nature or to participate in a special program of research or other activity designed to augment the student's academic training. Specific arrangements must be made on an individual basis with the SOPT Chairperson before beginning a leave of absence. The student may be granted re-entry into the program in the following cohort.

Withdrawal from the DPT Program

Students are permitted to withdraw from the Doctor of Physical Therapy program at any time.

Readmission Process

Students who have voluntarily withdrawn or who have been dismissed from the Doctor of Physical Therapy program may elect to apply for readmission through PTCAS.

STUDENT ATTENDANCE

General Attendance

Promptness and attendance are mandatory for all classes and laboratory sessions. Excessive absence, regardless of the cause thereof, may be construed as sufficient reason for considering a student as academically deficient. Excessive absence is defined as non- participation in 10% of lecture or lab time.

Each **unexcused absence** will result in the loss of three (3) percentage points from the student's final grade in the course in which the class or laboratory session was missed, and an anecdotal report will be generated by the course coordinator to be placed in the student's SOPT file. If the student is unable to participate in 10% of the course lecture or lab time, whether excused and/or unexcused, the student will be required to meet with the APSC, and an official warning will be placed in their file. Students who are unable to participate in 20% or more of lecture or lab time, whether excused and/or unexcused, have missed a significant portion of the course and may be required to retake the course(s) or be dismissed from the program or granted re-entry into the following cohort.

An excused absence includes (but is not limited to) illness, accident, medical emergency or death in the immediate family. Other reasons for class/lab absences may be deemed as excused absences at the discretion of the instructor/course coordinator. Regardless of the reason for the excused absence, the student who is going to be absent or tardy from a class or a laboratory session shall notify the

instructor **prior to** that class or lab.

An absence occurs when a student misses all or part of any **one** scheduled class or lab session or is unable to participate due to medical or physical limitations. Please see the technical standards on page 30 for further details. Approval of an **excused absence** is by the course coordinator in which the absence occurred. **Tardy** means that the student arrives after the class or laboratory session has started. When a student comes to class more than five minutes after the class has started, the student shall write and deliver a note of explanation to the mailbox of the course coordinator by the end of the day. The instructor can then decide whether it constitutes an excused/unexcused absence.

Attendance and promptness are also mandatory during all clinical assignments. Absences from any clinical assignments must be rescheduled by the DCE and/or CI. A student who is going to be absent or tardy from a clinical assignment must notify the Director of Clinical Education (DCE) **and** the clinical instructor as early as possible. Attendance at all scheduled examinations is mandatory (see policy for Examinations).

A student who anticipates missing one scheduled class session due to a planned event (e.g., medical appointment, family event) may request an excused absence by communicating with the course coordinator. A student who anticipates missing two or more scheduled courses on the same or subsequent days must request an excused absence by submitting an absence request form to the Chairperson of the SOPT Administrative Committee. The Administrative Committee will review the absence and determine if the absence is excused and provide any necessary requirements associated with the approved absence. This includes a student who anticipates missing time during a clinical education rotation.

Attendance for Examination and Testing

Attendance at all scheduled examinations is mandatory. A student who is unable to take any particular scheduled and required examination is expected to notify (by phone or in person) the course coordinator (and the SOPT course coordinator in cases of courses taught outside the SOPT) **AT ONCE**. The reason for your absence must subsequently be submitted in a letter to the course coordinator (course coordinator). A student who does not appear for a regularly scheduled examination may, at the discretion of the SOPT, be allowed to take a make-up exam, which may be an essay or an oral examination.

Before a make-up examination is given, a student absent from an examination because of illness must give the instructor a written note from his/her physician on the first day the student returns to school. The note should include an explanation of the illness that justifies his/her absence on the exam day.

All make-up examinations must be taken no later than one week after the student returns to class, **or** as scheduled by the course coordinator. Absence from an examination for any other reason must be excused by the course coordinator before the time of the scheduled examination. Unexcused absence from examination results in a score of ZERO for that exam.

1. Absolutely no communication of any type between students will be allowed during an examination.
2. Each student must complete the examination prior to leaving the room.
3. The student will be permitted to have at his/her desk only those materials necessary for completing the examination.
4. Unprofessional conduct of any kind, including cheating on examinations, plagiarism, cheating in any class exercise or unprofessional conduct in classes, laboratories or in the clinical setting will subject the offending student to disciplinary action and policy and procedures as outlined in the Graduate Catalog <https://www.marshall.edu/catalog/graduate-catalogs/> to report and deal with such conduct will be

followed.

5. The student's signature on all examination papers indicates that he/she is abiding by the following Pledge: "I have neither received nor given any assistance on this examination, nor have I seen anyone else do so nor will I communicate anything about an examination (includes any format written, practical, oral, etc.) with anyone other than Marshall University Physical Therapy academic faculty and that doing so will be considered unprofessional conduct which will be reported to the APSC."

GENERAL SCHOOL OF PHYSICAL THERAPY POLICIES

1. Under no circumstance is anyone who has not obtained prior authorization from the Department of Anatomy allowed to enter the gross anatomy laboratories. This includes, but is not limited to, visiting undergraduate college students, and friends or relatives of students enrolled in gross anatomy courses in any of the schools within the University. Under no circumstances are high school students allowed access into the gross anatomy laboratories.
2. The student is encouraged to see himself or herself as a perpetual learner and to respect the professional aspirations of the other class members. Each student is expected to participate and assist in creating a learning atmosphere in all classroom and laboratory sessions.
3. Students are expected to act in a professional manner at all times. Although professionalism is difficult to define, it includes such things as honesty, integrity, respect of others, being helpful and courteous in the classroom and clinic, prompt attendance at all scheduled classes and meetings, behaving in the appropriate and necessary manner which is consistent with a clinical/academic setting. In other words, it is behavior which reflects your view of yourself and your profession. Students must maintain a professional attitude at all times, including, above all honesty and integrity. Students must also demonstrate respect for others at all times, including during classes, labs, clinics, etc. Failure to do so will result in disciplinary action, which may include dishonorable dismissal from the program. Students must also uphold the Code of Ethics and the Guide for Professional Conduct of the American Physical Therapy Association (appendix).
4. Whenever you are in the presence of a patient, you are expected to respect the dignity, individuality, and privacy of that patient. All information regarding any patient is considered private and confidential and is not to be discussed outside of the academic or clinical setting.
5. Since certain materials, located at the American Physical Therapy Association (APTA) website and restricted to members only, will be utilized in various courses, all students will be required to join and maintain membership in the APTA.
6. Students will be provided with access to laboratory facilities after hours provided they have been given clearance by a faculty member to utilize the equipment. At no time is a student to practice any technique or procedure on anyone other than a classmate. Physical Therapy students may be allowed to be in specific classrooms and study areas after hours and on weekends but only if the privilege is not abused and the premises are left clean and orderly. The doors must be locked upon departing from the room.
7. Textbooks are considered required unless otherwise stated. Students must purchase required texts. A Textbook list will be sent to students within 1 month of the start of the next semester.
8. Students are required to purchase short white lab jackets (consultation length) during the first fall semester for the subsequent White Coat Ceremony to be held in the spring of that academic year. Any additional items that may be required will be outlined in the course syllabi.

9. Each student is assigned a faculty adviser who may be contacted by the student as needed. It is required that the student schedule a counseling session with his/her advisor twice a semester (after midterm and after finals – either directly after or at the beginning of the next semester). It is the student's responsibility to make appointments with his/her advisor as needed. In addition to the student's assigned advisor, all other members of the faculty are available for consultation.

10. Privacy of patients should be respected at all times. Students should obtain permission from the attending therapist before entering any treatment area.

11. Smoking and use of any form of tobacco is not permitted in the building. Students who find it necessary to do so may smoke in the designated "smoking areas" outside of the building.

12. Equipment and telephones in the SOPT Office are for business use and not for student's use. Incoming calls to the P.T. Office should only be in case of an emergency.

13. Bringing firearms (or other weapons) is subject to state law and university policy. Because the safety and well-being of our faculty, staff, students, and visitors to our campus are of utmost concern, this message is a reaffirmation of our policy of no unauthorized firearms on the campus properties and at university- sponsored functions

14. The calendar of scheduled classes for the School of Physical Therapy may vary from the College of Health Professions and University calendars published elsewhere. Students should contact the SOPT Chairperson for information concerning the actual dates of holidays, and when classes begin/end, etc. The academic calendar is posted on the SOPT website <https://www.marshall.edu/physical-therapy/students/>

15. Students are provided a locker in which ALL personal items and valuables not carried with you should be secured at all times. Students may not apply stickers or tape to the lockers. Magnets may be used to post necessary messages. The SOPT is not responsible for any lost or stolen property.

16. Due to the disruptive nature of mobile phones and pagers, all phones and pagers must be turned off or kept in the silent/quiet mode during all class periods and during all patient care times (observations, clinical internships. If you are expecting an emergency-type call, place the phone/pager on the silent mode. Leave the room before answering it. Also, prior to the beginning of class, inform the faculty that you may be leaving the room due to a potential emergency call. Mobile phones are not to be utilized in any form or purpose during an examination. If you are expecting an emergency phone call during an examination, inform the proctor of the exam, and you may leave your phone with the proctor on silent or vibrate to receive the call. At this point, you may leave your exam with the proctor and leave the room to use your mobile phone. Your exam will be returned to you upon re-entering the examination room.

17. Standards of Conduct for the Use of Electronic/Social Media: The School of Physical Therapy recognizes that social networks and other electronic media can be beneficial to the delivery of quality healthcare. However, inappropriate use of electronic media such as social networks, chat rooms, forums, etc., violate a patient's right to confidentiality and privacy. It may also cross the professional boundary between a therapist and his/her patient. Therefore, the School of Physical Therapy has adopted the following guidelines to minimize the risks associated with the use of social networks and all other electronic media:

A. Students must recognize they have an ethical and legal obligation to maintain patient privacy

and confidentiality at all times.

- B. Students are strictly forbidden from transmitting any patient-related image via electronic media.
- C. Students must not share, post, or otherwise transmit any patient information, including images, unless there is a patient care related need to disclose information or other legal obligation to do so.
- D. Patients should not be identified by name or any other method (such as nickname, room number or diagnosis) that could lead to the identification of the patient. Limiting access to postings through privacy settings is not sufficient to protect the patient's privacy.
- E. It is not acceptable to post any information about a patient even if their name is not identified.
- F. Students should never refer to a patient in a derogatory or disparaging manner, even if the patient is not identified.
- G. No photos or videos of patients may be taken on a personal device, including cell phones.
- H. Students must always maintain appropriate professional boundaries with patients. On-line contact with patients or former patients blurs the distinction between a professional and personal relationship. Inappropriate communication via electronic media is discouraged. This includes instances where the patient contacts the student first. If this should happen, the student should notify their instructor as soon as possible.
- I. Students should understand patients, colleagues, institutions and prospective employers may view postings on social media websites. Students should not make threatening, harassing, profane, or other offensive comments or disparaging remarks about patients, instructors, other students or facilities, even if they are not expressly identified.
- J. Students should bring content that could harm a patient's privacy, rights, or welfare to the attention of the faculty.
- K. If the student has any doubt about the appropriate use of electronic/social media, they should contact their instructor for further guidance.

Inappropriate use of Electronic/Social Media can lead to disciplinary action including but not limited to formal reprimand, suspension or dismissal from the program. Students can also be held personally liable. Such violations may result in civil and criminal penalties including fines or possible jail time in accordance with state and federal laws.

ADA Accommodations:

Students who need "Reasonable Accommodations" through the Federal Americans with Disabilities Act (ADA) should contact the Office of Disability Services (<http://www.marshall.edu/help/>) or 304-696-2288 to request disability testing and/or examination accommodations. A written confirmation of specific accommodations from the Office of Disability services must be received by the School of Physical Therapy and placed in the student's academic file prior to implementation of the accommodation. Depending on the specific accommodation granted, those students who are allowed accommodations for written examinations may have additional time for written exams or written components of practical examinations, as indicated by the Office of Disability Services. In an effort to reduce distractions, students allowed extra examination time may be placed in a seminar room, or another quiet environment to take the exam, with signage placed outside indicating a quiet testing zone. In order to ensure adequate time is allowed, a video recording system may be used to monitor time elapsed. Psychomotor examination skills and clinical application of skills during Practical examination time is not subject to additional time, as indicated in the Technical Standards policy below.

In order to assure that the appropriate academic accommodations are met the SOPT faculty will adhere to the accommodations granted by the Office of Disability Services.

Should any student have any problems related to their academic accommodations they should,

immediately speak directly to faculty with whom they have the issue, or if they prefer, speak to the Chairperson of the SOPT to address the issue with the faculty and/or student.

Student Employment During PT School

Due to the exacting requirements of *the Physical Therapy curriculum*, it is unwise for students to expect to meet their expenses by outside work. The School does not specifically forbid such additional duties but does definitely discourage working extensive hours. Students are strongly advised to avoid work during the first two semesters of the DPT curriculum.

Student Attire

1. Students are required to wear attire which conforms to the image of the professional physical therapist. The School of Physical Therapy is a setting where patients, other professionals, and the general public form an impression of us which is based on our appearance and conduct.
2. The trunk region should be covered at all times, except when exposure is required for laboratory purposes in the classroom. This includes classroom and clinical situations.
3. Clinical attire – this applies to dress to be worn during clinical work or during class visits to different clinical settings. Minimally appropriate clinical attire consists of Marshall University polo shirts, name tags, cotton twill full-length slacks, and flat shoes with closed heels and toes. The students are responsible for contacting their clinical instructors in advance for any other dress requirements that clinic might have (e.g., lab coats, neckties, scrubs, etc.). Any specific clinic dress code requirements supersede the Marshall University SOPT dress code while at that facility.
4. Classroom attire –students are not permitted to wear t-shirts, flip-flops, hats, short skirts, sweatpants, athletic shorts or pants or yoga pants in the classroom during normal working hours. Faculty members may require specific dress for a specific class related to activities during class that supersedes the SOPT dress code. On days you have a guest speaker: you should wear clinic attire, that is: a polo shirt or buttoned shirt or a nice blouse, nice slacks, close-toed shoes. Instructors will inform students of specific dress codes and subsequent enforcement policies for those classes.
5. Laboratory attire – the following attire is required for all physical therapy laboratory settings. Males and females should wear loose-fitting gym shorts with an elastic waist band; those with sewn-in underwear are preferred. In order to expose the spine for observation, palpation, etc., females should wear a two-piece bathing suit top or may wear a sports bra with a back strap of no more than two inches in width. Students should obtain several sets of lab clothes so that one set is at school at all times. The lab instructor may have other specific instructions for lab attire in a specific lab (e.g., must wear low, closed and stable shoes, etc.). Students in lab attire should remain in the laboratory except when going to and from the dressing room or student lounge. Students should not go into the reception room or stand in the halls while dressed in laboratory attire. Students may come to school or leave school in their lab clothes if the lab session begins or ends the day. If the lab ends the morning session and then begins the afternoon session and students wish to go to the student lounge, they may keep their lab clothes on as long as they are appropriately covered. Lab attire needs to be covered any time the student leaves the SOPT with the attire on.
6. Marshall University identification should be worn or carried at all times.
7. Enforcement – if an instructor believes that a student is not dressing appropriately in his or her class or lab, the following will occur 1). The student will first be given a verbal warning by the faculty member who realized that you are not dressed correctly. 2). If it occurs again, the student will then be given a

written warning, and it will be noted as unprofessional behavior in your record. 3. If it occurs a third time, the student will be told to leave the class—that class absence will be regarded as an unexcused absence and therefore could result in % points taken off your final grade in the class.

Classroom and Seminar Room Computers

Computers in the classroom and seminar rooms MUST be used carefully and with courtesy for all students. The following are rules for using SOPT or University computers:

1. The person to use a computer last is responsible for appropriately shutting it down before he/she leaves the room.
2. No food or drinks may be near the classroom or seminar room computers for obvious reasons. Drinks may be brought into classrooms and seminar rooms only if with a lid or cap. Any spills must be reported to the SOPT faculty or staff IMMEDIATELY. NO FOOD is allowed in the classrooms or seminar rooms.
3. No one may change the programs or layout of the departmental computers without the written approval of the SOPT Chairperson.
4. No one may load or download any programs onto departmental computers without the written approval of the SOPT Chairperson.
5. No one should be using any departmental computer which has not been trained and authorized in its specific use.
6. Only professional uses of the Internet or other programs will be allowed.

Laptop /Tablet Computer Use

Students are required to purchase a laptop computer that meets program specifications that are outlined in the orientation package. Computers are used in the classroom or laboratories for school class-related activities only. In addition, students should not communicate (e-mail, instant message, blog, etc.) with others (including professors) during class time or review other lectures or materials other than that being covered in the class in which they are participating.

Students failing to comply with this policy will be reported to the SOPT Chairperson and / or appropriate designee for disciplinary action (including the APSC) and may be subject to dismissal from continuing their education at the COHP. It may also be the decision of the APSC or faculty member to prohibit the student from utilizing their laptop during designated classes for a designated period of time.

Email Use

Faculty, students, and staff are expected to use the Marshall assigned e-mail system for university communications. The use of electronic mail should be consistent with the instructional, research, public service, and administrative goals and mission of the COHP. Failure to use the Marshall e-mail system is not an excuse for students to be unaware of important university and SOPT messages.

Prohibited use of E-mail:

1. Sending copies of documents or including the work of others in electronic mail communications in violation of any law, including copyright laws, is prohibited.
2. "Snooping" (i.e., obtaining or attempting to access) the files or electronic mail of others, or capturing or attempting to capture and "open" the electronic mail of others, except as required in order for authorized employees to diagnose and correct delivery problems, is prohibited.
3. Use of electronic mail to harass or intimidate others, threaten, or to interfere with the ability of others to conduct Health Sciences Center business is prohibited.

4. Use of electronic mail systems for any purpose that is restricted or prohibited by laws or regulations is prohibited.

5. Unauthorized "Spoofing" (i.e., constructing an electronic mail communication, so it appears to be from someone else) is prohibited.

6. "Spamming" (i.e., sending unsolicited E-mail to lists of people you do not know) is prohibited. Bulk mailing is almost always considered Spam and places considerable stress on the E-mail system. Bulk mailings can be selectively used for Marshall University related information but must be approved at a level appropriate to the scope of the mailing, and the mailing must be handled in such a way that the E-mail systems are not adversely impacted. For example, it would be appropriate that a mailing to all of the College of Health Professions be approved by the Dean's office. The mailing would be carried out in such a way as to avoid causing damage or disruption to the mail system.

7. Sending or forwarding chain-letters is prohibited. Most E-mail messages that ask you to forward it on to others fall into this category, including virus warnings.

Violations: Violation of this policy in any part may be sufficient grounds for disciplinary action and/or termination. Disciplinary action may include dismissal of computer privileges on an individual basis, or in extreme cases, dismissal from the SOPT.

Use of Classroom During and Outside Scheduled Class Time

The Classrooms in the School of Physical Therapy are available to faculty, staff, and students for educational purposes. Those classes which are scheduled to meet in the room have priority for the use of the space and anyone wanting to use the space during this class time must have the permission of the class instructor. If the classroom appears vacant, those persons wishing to use the room or its equipment must first obtain permission from the instructor who is scheduled to use the space.

If the classroom is scheduled to be vacant, SOPT faculty, staff, and students may use the room for educational purposes, with the faculty and staff having priority over student use. After hours, students will be able to gain access to the SOPT using an ID Keyless Entry. Once in the SOPT, students will have open access to the classrooms but will need to request from the appropriate faculty, that specific equipment be made available. The Anatomy laboratory at the MU Medical School VA location will be able to be accessible by students on a 24/7 basis with an ID key entry.

All persons who use the classrooms must maintain the appearance of the space and return any items to their original location after use. Any linen used during classes or for study purposes must be brought to the laundry room for laundry service. A representative from each class will be appointed for this duty. In addition, a class representative will be named responsible for maintaining the classroom's appearance, and any issues regarding the cleanliness or order of the room will be brought to the representative's attention for resolution. No eating, drinking, or smoking is allowed in the classrooms. No storage of food or drink is allowed on shelves, desks, countertops, or cabinets.

To protect the equipment from tears or marks, no shoes are to be worn on the examination mats. All students using the lab must be dressed appropriately according to the Marshall University School of Physical Therapy Student Handbook.

Personal belongings should be stored in individual lockers or removed from the classroom at the end of each day.

Clinical Research Laboratory

The primary function of the laboratory is to provide equipment and space for research, and to that end, research activities have absolute priority over all other activities.

To gain access to the laboratory area, the area and equipment must first be reserved. Admittance is possible only via a faculty member who has agreed to be responsible for activities to be performed, and that the lab is locked at all times.

Each research advisor/investigator is responsible for providing student investigators with all necessary materials and supplies, including computer disks, printer paper, and videotapes. No individual is permitted to use any equipment before properly trained on said equipment by a faculty member or designate. Students must have faculty supervision, either directly or indirectly when utilizing SOPT equipment. All equipment will be maintained as specified in the user's manual of each piece of equipment. Originals of all equipment manuals will be kept in the research laboratory.

A faculty member must be accessible during all data collection, and no data collection on human subjects may proceed prior to Institutional Review Board (IRB) approval.

All lab users are responsible for their own computer files or data banks. It is necessary that data be saved to external storage disks or drives to avoid overloading the computers own hard drive. All subject files are the responsibility of the principle investigator/advisor. All subject information is confidential and is to remain in a locked area when not in use. The lab director will survey the faculty annually to determine needs for space and equipment and present this information to the SOPT Chairperson for budgetary consideration.

Equipment should be calibrated and recalibrated only with the presence of appropriate faculty and labeled to indicate the action performed and date, and initialed by faculty.

Complaints

The public or any other stakeholder of the program has the right to file a complaint that falls outside the realm of due process. At this time the policy and procedures for filing such complaints can be found in the SOPT Policy and Procedures Manual, and the Clinical Education Student Handbook, and is posted online at the SOPT website and includes the following statement:

"The College of Health Professions School of Physical Therapy encourages any individual who is unhappy with their experience or encounter with any student, faculty or staff member of the School of Physical Therapy to file a written complaint against the School or program. The School takes all program related complaints seriously and will act upon any complaints in an expedient manner. Once a complaint has been made, the SOPT Chairperson will be directly involved in gathering information and addressing the complaint. The complaint and resolution will be kept on file in the School Chairperson's files under "Program Complaints for a period of 5 years."

Complaints should be addressed to:

SOPT Chairperson
School of Physical Therapy
2847 5th Avenue

A Quality Improvement Process and Tracking Form (Appendix: Quality Improvement Process and Tracking Form) will be completed anytime a problem, complaint, or opportunity for improvement of the SOPT or program presents itself. Once initiated, this form serves as a record and tool for ensuring that identified problems, complaints or opportunities are addressed by the proper entities in a timely and efficient manner. These forms are available in the SOPT Policy and Procedures Manual, the Clinical Education Manual, and in the School of Physical Therapy Reception Office.

Procedures for handling a complaint against the School:

When possible, the SOPT Chairperson will discuss the complaint directly with the party involved within 14 business days. If at all possible, the matter is reconciled at this point. A letter from the SOPT Chairperson acknowledging the resolution of the complaint will be filed with the complaint and a copy sent to the complainant.

If dissatisfied with the discussion with the SOPT Chairperson, or if the complaint is against the SOPT Chairperson, the involved party may submit a written complaint to the Dean of the College of Health Professions. The SOPT Chairperson will meet with each party separately and may schedule a joint appointment with the two parties in order to attempt to resolve the issue. A letter outlining the resolution by the Dean shall be filed with the complaint in the SOPT Chairperson's office. If the party feels that additional complaint is necessary, then the last line of complaint is then to the Vice-President of Academic Affairs.

Outside of the institution, a complaint can also be filed with the physical therapy accrediting body: Commission on Accreditation in Physical Therapy Education, American Physical Therapy Association, 1111 N. Fairfax Street, Alexandria VA. 22314.

With regard to problems, complaints or opportunities identified through the Quality Assurance Process Form, all Quality Improvement Forms will be routed through the Administration committee to be distributed to the appropriate party for resolution. The committee will also follow-up with the resolving party within a reasonable amount of time for a progress report on any action taken.

This information will be shared during student orientation, will be available in the Student Handbook, and Clinical Educational Manual, and may be obtained through the SOPT Chairperson at any time.

Education Records: Rights of Parents and Students (FERPA)

As Per the Marshall University Student Handbook, the Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. They are:

1. The right to inspect and review the student's education records within forty-five days of the day the University receives a request for access.
 - Students should submit to the registrar, dean, head of the academic department, or other appropriate official, written requests that identify the record(s) they wish to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

2. The right to request the amendment of the student's education records that the student believes are inaccurate or misleading.

- Students may ask the University to amend a record that they believe is inaccurate or misleading. They should write the University official responsible for the record, clearly identify the part of the record they want to be changed, and specify why it is inaccurate or misleading.
- If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent.

- One exception that permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks.
- A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.
- Upon request, the University discloses education records without consent to officials of another school in which a student seeks or intends to enroll.

4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by Marshall University to comply with the requirements of FERPA. The name and address of the office that administers FERPA are:

Family Policy Compliance Office
U.S. Department of Education
600 Independence Avenue, SW
Washington, DC 20202-4605

The Marshall University office that coordinates FERPA issues is:
Student Affairs, Room 2W38, 304- 696-6422.

Technical Standards Policy *

MARSHALL UNIVERSITY SCHOOL OF PHYSICAL THERAPY Technical Standards (Essential Functions) Policy *

The American with Disabilities Act (ADA – PL 101-336) enacted by Congress in 1990 ensures the qualified applicant with a disability the opportunity to pursue program admission at public institutions. To determine whether an individual is a qualified applicant for programs or services, the ADA states that applicants must meet essential eligibility requirements. The following performance standards are set forth so that the student will understand the essential eligibility requirements for participation and progression in the physical therapy curriculum. Standards

address interpersonal skills, communication, psychomotor skills, and cognitive skills. The ability to observe, evaluate, analyze, synthesize, and treat a patient independently, while ensuring patient safety at all times is an expectation of the School of Physical Therapy.

The purpose of this policy is to ensure that all physical therapy students are able to provide swift, safe, and competent evaluation and treatment to patients. All students will be held to the same standards and must be able to perform the technical standards of their positions with or without reasonable accommodation.

Upon request of persons with disabilities, Marshall University will provide reasonable accommodations. However, the School of Physical Therapy is unable to make accommodations that impose an undue burden, are outside of the standard practice of physical therapy, present a threat to the health or safety of the individual or others, or fundamentally alter the nature of the curriculum including didactic components, laboratory sessions, clinical affiliations, and the assessment of student competence.

Each accepted applicant must complete an affidavit that attests to their ability to fulfill the technical standards of the Physical Therapy School. The procedures for submitting a request for an accommodation is located in the Student Handbook. Questions about the accommodation process may be directed to the SOPT Chairperson: 304-696-5614.

TECHNICAL STANDARDS: PERFORMANCE REQUIREMENTS FOR DPT STUDENTS

* Adapted with permission from Howard University

The information below delineates the cognitive, affective and psychomotor skills deemed essential to completion of the Physical Therapy degree programs at Marshall University and to perform as a competent generalist physical therapist.

If a student cannot demonstrate the following skills and abilities, it is the responsibility of the student to request an appropriate accommodation. The University will provide reasonable accommodations as long as it does not fundamentally alter the nature of the program offered and do not impose an undue hardship such as those that cause significant expense, difficulty or are unduly disruptive to the educational process.

Cognitive Skills

The student must possess and demonstrate the following technical abilities upon admission to the program and notify the SOPT Chairperson immediately of any change in status:

1. Read, receive, interpret, remember, reproduce and use written, auditory, non-verbal, and visual information in

the cognitive, psychomotor, and affective domains of learning to solve problems and generate new ways of processing or categorizing information as listed in course objectives. This includes: a) the ability to read, interpret, synthesize, and analyze medical records (printed chart or electronic health record) in a timely manner in order to safely and effectively plan for a patient encounter; b) the ability to read, interpret, and analyze data obtained in simulated patient cases, examination questions, textbooks, and scientific literature in a timely manner to safely and effectively provide appropriate physical therapy services.

2. Perform a physical therapy examination including synthesis and analysis of physiologic, biomechanical, behavioral, cultural and environmental factors in a timely manner, consistent with the norms of clinical settings.

3. Use examination findings to execute a plan of care in a timely manner, appropriate to the problems identified consistent with the acceptable norms of clinical settings.

Psychomotor Skills

The student must demonstrate the following abilities:

1. Locomotion:

- a. Get to lecture, laboratory and clinical locations, and move within rooms as necessary to change groups, partners and workstations.
- b. Physically maneuver in required clinical settings to accomplish assigned tasks.

2. Manual skills:

- a. Maneuver another person's body parts to perform examination and treatment techniques effectively.
- b. Manipulate common tools used for screening and examination tests, e.g., sphygmomanometer, goniometer, cotton balls, safety pins, reflex hammer.
- c. Safely and effectively guide, facilitate, inhibit and resist movement and motor patterns through physical facilitation and inhibition techniques, including the ability to give urgent verbal feedback.
- d. Safely manipulate another person's body in transfers, gait, positioning, exercise and mobilization techniques.
- e. Manipulate examination and intervention equipment and safely and accurately apply to patients.
- f. Manipulate bolsters, pillows, plinths, mats, gait assistive devices, and other supports or chairs to aid in positioning, moving or treating a patient safely and effectively.
- g. Competently perform and supervise cardiopulmonary resuscitation (CPR) using guidelines issued by the American Heart Association or the American Red Cross.

3. Fine motor skills:

- a. Legibly record/document examinations, patient care notes, referrals, etc. in standard medical charts in clinical settings in a timely manner and consistent with the acceptable norms of the clinical setting.
- b. Legibly record thoughts for written assignments and tests.
- c. Sense subtle changes in an individual's muscle tone, skin quality, joint play, and temperature to gather accurate and objective information in a timely manner.
- d. Safely apply and adjust settings on therapeutic modalities.
- e. Use a telephone, computer, and other electronic devices that are required for safe and effective physical therapy practice.

4. Visual acuity to:

- a. Receive visual information from classmates, faculty, and patients regarding movement, posture, body mechanics

and gait necessary for comparison to normal standards for purposes of examination and evaluation of movement dysfunctions.

b. Receive visual information from the treatment environment, including but not limited to dials on modalities and monitors, assistive devices, furniture, flooring, and structures.

5. Communication:

a. Effectively communicate with other students, faculty, patients, peers, staff, and personnel to ask questions, explain conditions and procedures, teach home programs, and for patient safety. Communication must be provided in a timely manner and within the acceptable norms of the academic and clinical settings.

b. Independently read, receive and interpret written communication in both academic and clinical settings in a timely manner consistent with the demands of entry-level clinical practice.

c. Receive and send verbal communication in life-threatening situations in a timely manner and within acceptable norms of clinical settings.

Affective Skills

The student must be able to:

1. Demonstrate appropriate affective behaviors and mental aptitude in order not to jeopardize the emotional, physical, mental and behavioral safety of clients and other individuals with whom they interact in the academic and clinical settings.

2. Comply with the ethical standards of the American Physical Therapy Association (APTA).

3. Sustain the mental and emotional rigors of a demanding educational program in physical therapy, which includes academic and clinical components that occur within set time constraints. This includes a demonstration of attitudinal, behavioral, interpersonal, and emotional attributes including but not limited to:

- Emotional health and maturity
- The ability to establish mature, honest, professional relationships with patients, families, and colleagues
- The ability to self-assess one's own abilities and competence and to seek help from the appropriate resource
- The ability to self-assess one's own physical, mental and emotional readiness for professional education and supervised physical therapy practice
- The ability to manage stress effectively and seek assistance when needed
- The ability to accept constructive criticism both in the classroom and in the clinical setting.
- Acknowledge personal-biases, respect cultural differences, and adapt behavior accordingly

4. Acknowledge and respect individual values and opinions in order to foster harmonious working relationships with colleagues, peers, and patients.

By signing below, I hereby certify that I have read and understand the Marshall University School of Physical Therapy Standards. My signature also indicates that I understand if I do not meet the above technical standards and I choose not to seek help through disability services and/or seek accommodations; then this may jeopardize my success in the physical therapy program.

Name (Print)

Name (Signature)

Date

Student ID Number

Reviewed and adopted by the School of Physical Therapy on February 27, 2019.

Marshall University is an Equal Opportunity/Affirmative Action employer and educational institution and does not discriminate on the basis of age, race, color, religion, sex, sexual orientation, disability, national origin or Vietnam era or other veteran status, in the admission to, or participation in, any educational program or activity which it conducts, or in any employment policy or practice. Any complaint arising because of alleged discrimination should be directed to the Office of Disability Services, Marshall University, Prichard Hall, Room 117, Huntington, WV 25755, (304) 696-2271, or the Director of the Office for Civil Rights, U.S. Department of Education, Philadelphia, PA.

Additional Sources

1. APTA BOD G11-05-20-49 Minimum Required Skills of Physical Therapist Graduates at Entry-Level
2. CAPTE Standards and Required Elements for Accreditation of Physical Therapist Education Programs. Revised 11/11/16; 3/4/16; 10/31/17; 12/7/17.
3. Ingram D. Opinions of Physical Therapy Education Program Directors on Essential Functions. *Phys Ther* 1997;77:37-45.

Marshall University
School of Physical Therapy
Policy on Class Officer Election, Responsibility & Recall/Removal

I. Class Officer Election

Class officers are elected at the beginning of the fall semester of the first year. The Class Faculty Liaison who runs the elections solicits nominations from the class at the end of the summer semester of the first year. If any officer does not earn more than 50% of votes, a second round of voting will be held and top two candidates will be on the ballot.

Class Officers include:

- President
- Vice President
- Treasurer
- Social Chair
- Year Book Committee
- APTA Liaison

The term of office is three years unless a class officer elects to resign or is recalled/removed from office.

II. Class Officer ResponsibilityPresident (1)

- is the representative/spokesperson between the class and faculty.
- attends faculty meetings (if invited and available) to voice any concerns from the class.
- organizes and conducts both officer and class meetings.
- oversees the work of other officers.

Vice President (1)

- reports directly to the President.
- assists the President with all duties.
- attends meetings in President's behalf IF/WHEN the President is unable to attend.
- assists other officers with their duties IF/WHEN one of the officers becomes unavailable.

Treasurer (1)

- reports directly to the President and Class.
- sets up an account for the class or runs the account through the MU Foundation.
- oversees the class account.
- handles any money raised from events.
- withdraws money from the class account to pay any class-related expenses.
- updates the class periodically as to the account status.

Social Chair (2)

- report directly to the President.
- create an inclusive social atmosphere and ensure that class events reach a wide range of students.
- organize and implements plans for both fundraiser and non-fundraiser class events.

Yearbook Committee (2)

- report directly to the President.

- take/collect/compile pictures or videos (both casual and professional) for a slide show or have a yearbook at the end of the tenure at Marshall University.

APTA Liaison (1)

- reports directly to the President and Class.
- attends State and/or National meetings.
- keeps the class informed (through social media outlets, emails or verbal communication) about policy changes that APTA/WVPTA is promoting that will impact the profession.
- encourages the Class to participate in APTA/WVPTA events/activities.

- III. **Recall of an elected officer:** Any elected officer may be recalled through one of the following procedures:
- a. A recall petition of a specific officer can be initiated by 10% of the class members. The Class Faculty Liaison will conduct a recall vote, which will require at least 75% of the class participating in voting. More than 50% of the class must vote in favor of a reelection for the officer to be recalled.
 - b. A recall of an elected officer may be petitioned by the Class Faculty Liaison with the consent and approval of the majority of the Faculty. The Program Director will not vote as part of the faculty, but will serve to hear all appeals. The Program Director will make the final decision regarding the recall.
- IV. **Removal of an elected officer:** Serving as a class officer is a privilege. A class officer will be removed from office,
- a. if he/she is placed on probation due to academic deficiency or professional behavior violation, or
 - b. if he/she is not promoted with his/her class.
- V. A reelection will be held within two weeks if any class officer is recalled or removed from office as a result of III or IV.

Approved: 5/14/2020

Appendix

APTA Code of Ethics for the Physical Therapist

HOD S06-09-07-12 [Amended HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24]

Preamble

The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.
2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive. All students will publicly sign the APTA Code of Ethics during the White Coat Ceremony; however, all students are expected to follow the APTA Code of Ethics upon matriculation in the program.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document, the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

Principles

Principle #1: Physical therapists shall respect the inherent dignity and rights of all individuals.
(Core Values: Compassion, Integrity)

1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

1B. Physical therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

Principle #2: Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients. *(Core Values: Altruism, Compassion, Professional Duty)*

2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.

2B. Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.

2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.

2D. Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.

2E. Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

Principle #3: Physical therapists shall be accountable for making sound professional judgments. *(Core Values: Excellence, Integrity)*

3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.

3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.

3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.

3D. Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.

3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

Principle #4: Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public. *(Core Value: Integrity)*

4A. Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations.

4B. Physical therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g., patients/clients, students, supervisees, research participants, or employees).

4C. Physical therapists shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D. Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.

4E. Physical therapists shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.

4F. Physical therapists shall not harass anyone verbally, physically, emotionally, or sexually.

Principle #5: Physical therapists shall fulfill their legal and professional obligations.

(Core Values: Professional Duty, Accountability)

5A. Physical therapists shall comply with applicable local, state, and federal laws and regulations.

5B. Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.

5C. Physical therapists involved in research shall abide by accepted standards governing protection of research participants.

5D. Physical therapists shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.

5E. Physical therapists who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.

Principle #6: Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors. *(Core Value: Excellence)*

6A. Physical therapists shall achieve and maintain professional competence.

6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, health care delivery, and technology.

6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.

6D. Physical therapists shall cultivate practice environments that support professional development, lifelong learning, and excellence.

Principle #7: Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society. *(Core Values: Integrity, Accountability)*

7A. Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.

7B. Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.

7C. Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.

7D. Physical therapists shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.

7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.

7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/clients.

Principle #8: Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally. *(Core Value: Social Responsibility)*

8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.

8C. Physical therapists shall be responsible stewards of health care resources and shall avoid overutilization or underutilization of physical therapy services.

8D. Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.

Verification of Receipt of Student Handbook

I, _____ have received a copy of Marshall University, College of Health Professions, School of Physical Therapy Student Handbook. I have reviewed the handbook and have had an opportunity to ask questions or voice concerns.

Student Signature

Date

SOPT Chairperson (Program Director)

Date

*Note: The policies and procedures are reviewed at least annually by the Administrative Committee. Interim changes are made by the SOPT Chairperson when needed. Please make any comments below as to how well these policies and procedures meet the needs of the faculty, students, and/or staff of the program.

Comments:

Marshall University Graduate College

Plan of Study – School of Physical Therapy

Class of 2027

Deceleration Pathway [NOT THE STANDARD CURRICULUM]

Doctor of Physical Therapy Degree

Course No.	Hrs.	Year	Term	Semester	Course Title	Grade	Completion Date	Comments
PT 700	5	1	Summer	1	Gross Anatomy for Physical Therapy			
PT 710	3	1	Summer	1	Clinical Skills I			
PT 750	2	1	Summer	1	Foundations of Physical Therapy Practice			
PT 761	2	1	Summer	1	Evidence Based Practice I			
	12							
PT 711	3	1	Fall	2	Kinesiology and Biomechanics in PT			
PT 720	3	1	Fall	2	Advanced Clinical Physiology			
PT 731	3	1	Fall	2	Clinical Skills II			
PT 741	2	1	Fall	2	Medical Pathology in PT I – General			
PT 751	2	1	Fall	2	Legal/Cultural Issues in PT			
	13							
PT 732	3	1	Spring	3	Therapeutic Exercise			
PT 742	2	1	Spring	3	Medical Pathology in PT II –MSK			
PT 745	1	1	Spring	3	Imaging in Physical Therapy			
PT 763	2	1	Spring	3	Evidence-Based Practice II			
PT 781	3	1	Spring	3	Orthopedics in PT I			
PT 790	1	1	Spring	3	Integrated Clinical Education in PT I			
	12							
PT 747	2	2	Summer	4	Pharmacology in Physical Therapy			
PT 771	1	2	Summer	4	Clin Application Sem & Experiences I			
PT 782	4	2	Summer	4	Orthopedics in PT II			
PT 733	1	2	Summer	4	Therapeutic Modalities			
PT 734	1	2	Summer	4	Clinical Skills III			
	9							
PT 701	4	1	Fall	5	Neuroanatomy			
PT 758	1	2	Fall	5	PM & BC in PT			
PT 764	1	2	Fall	5	Evidence-Based Practice III-Capstone			
PT 772	1	2	Fall	5	Clin Application Sem & Experiences II			
	7							
PT 712	3	1	Spring	6	Motor Control and Development in PT			
PT 744	3	1	Spring	6	Medical Pathology in PT III- Neuro			
PT 755	1	2	Spring	6	Service-Learning Practicum			
PT 765	1	2	Spring	6	Evidence-Based Practice IV-Capstone			
PT 773	1	2	Spring	6	Clin Application Sem & Experiences III			
	9							

Course No.	Hrs.	Year	Term	Semester	Course Title	Grade	Completion Date	Comments
PT 713	2	2	Summer	7	Outcome Measures in PT			
PT 748	1	3	Summer	7	Pain Science			
PT 766	1	3	Summer	7	Evidence Based Practice V –Capstone			
PT 787	2	3	Summer	7	Prosthetics & Orthotics			
PT 784	2	3	Summer	7	Integumentary			
	8							
PT 702	1	2	Fall	8	Neuroevaluation			
PT 721	3	2	Fall	8	Applied Exercise Physiology			
PT 754	1	2	Fall	8	Healthcare Delivery Systems			
PT 791	4	2	Fall	8	Clinical Internship I			
	9							
PT 704	4	2	Spring	9	Neurorehabilitation			
PT 767	1	3	Spring	9	Evidence-Based Practice VI- Capstone			
PT 786	3	2	Spring	9	Pediatrics & Geriatrics in PT			
PT 783	4	2	Spring	9	Cardio-Pulmonary Physical Therapy			
	12							
PT 756	3	3	Summer	10	Administration in PT			
PT 774	1	3	Summer	10	Clin Application Sem & Experiences IV			
PT 799	1	3	Summer	10	Integration & Review			
PT 798	1	4	Summer	10	Independent Study			
	6							
PT 788	1	3	Fall	11	Special Topics in Physical Therapy			
PT 714	1	3	Fall	11	Movement Integration			
PT 789	2	3	Fall	11	Orthopaedics in PT III			
PT 794	1	3	Fall	11	Integrated Clinical Experiences in PT II			
PT 792	6	3	Fall	11	Clinical Internship II			
	11							
PT 785	2	3	Spring	12	Health Promotion and Nutrition (Distance)			
PT 793	6	3	Spring	12	Clinical Internship III			
	8							

TOTAL HOURS 115 + 1 hr. Independent Study*

School of Physical Therapy: DPT Course Descriptions**Deceleration Pathway**

Semester	#	Credits	Course Title	Course Description
Year 1 Summer 1 Semester 1	PT 700	5	Gross Anatomy for Physical Therapy	Lecture and laboratory focusing on anatomical structure and function of the human body. Cadaveric dissection provides practical experiences allowing students to develop working images of the body and its function.
	PT 710	3	Clinical Skills I	Lecture and laboratory introducing students to basic histology of connective, nervous, epithelial and muscle tissue utilized in human movement, palpations skills, goniometry, and manual muscle testing.
	PT 750	2	Foundations of PT Practice	Introduces students to medical terminology, historical foundations, and contemporary practice of physical therapy, traditional and emerging roles and responsibilities and professional behaviors of the physical therapist and issues of self-awareness and communications.
	PT 761	2	Evidence-Based Practice I	Decision making, diagnosis, and hypothesis development, utilization of information sources, and principles, concepts, and skills required to critically analyze and conduct clinical research in physical therapy.
	12			

Year 1 Fall 1 Semester 2	PT 711	3	Kinesiology & Biomechanics in PT	Biomechanical principles, muscle actions, joint mechanics, joint segments, and whole-body movement pattern analysis including normal and abnormal gait.
	PT 720	3	Advanced Clinical Physiology	Reviews normal human cellular- and organ-level physiology, histology, and function, and introduces related topics of pathophysiology including: clinical signs and symptoms, clinical laboratory science, medical management, and pharmacological issues.
	PT 731	3	Clinical Skills II	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.
	PT 741	2	Medical Path in PT I- General	Pathological conditions, and medical and surgical considerations for treatment of genetic, gastrointestinal renal, endocrine, and metabolic, immune, hematologic, and infectious disorders in patients treated by physical therapists.
	PT 751	2	Legal-Cultural Issues in PT	Development of cultural competence, analysis, and practice of communications skills including documentation, professionalism, group dynamics and leadership to assume roles of practitioner, instructor, supervisor, and leader.
	13			

Year 1 Spring 1 Semester 3	PT 732	3	Therapeutic Exercise	This 3-credit hour course introduces students to teaching and learning principles through the application of physical, thermal, and mechanical modalities and therapeutic interventions. Therapeutic interventions include activities to improve joint and muscles.
	PT 742	2	Medical Path in PT II- Musculoskeletal	Pathological conditions, and medical and surgical considerations for treatment of musculoskeletal disorders in patients treated by physical therapists.
	PT 745	1	Imaging in Physical Therapy	This course combines lecture and lab practice to familiarize students with the use of medical imaging by physical therapists. Content covered includes plain film radiographs, as well as advanced imaging modalities of MRI, CT, Bone Scan, and Ultrasound. Course content emphasizes clinical decision making and inclusion of imaging findings into the overall patient exam.
	PT 763	2	Evidence-Based Practice II	Students are guided through the process of a Systematic Literature Review development on a topic selected by the student and their Faculty Research Advisor and learn to apply principles of research to the clinical decision-making process and to make recommendations for practice.
	PT 781	3	Orthopedics in PT I	The basic principles of orthopedic medicine including an overview of etiology, diagnosis, and surgical management will be covered. Physical Therapy examination, evaluation, diagnosis, and treatment of extremities and spine will be emphasized.
	PT 790	1	Integrated Clinical Experiences in PT I	Supervised clinical experiences and seminar sessions designed to provide exposure to the clinical practice of physical therapy, focused on psychomotor skills and affective behaviors, while applying previously acquired didactic information.
	12			

Year 2 Summer 2 Semester 4	PT 747	2	Pharmacology in Physical Therapy	Examination of the effects of commonly used prescription, over the counter and homeopathic drugs. Focus on method of action, indications, contraindications, side effects and impact on physical therapy patients.
	PT 771	1	Clinical Application Seminar and Experiences I	Continued application of information and clinical skills learned in concurrent and prior DPT coursework in a small group discussion and pseudo-clinical setting. Focus on upper and lower extremities.
	PT 782	4	Orthopedics in PT II	Advanced concepts of musculoskeletal examination, evaluation, diagnosis and treatment of the extremities and spine will be covered. An evidence-informed/clinical reasoning-based manual therapy approach will be used including mobilization and manipulation.
	PT 733	1	Therapeutic Modalities	Physiological effects and the clinical application of therapeutic modalities (biophysical agents) in physical therapy practice.
	PT 734	1	Clinical Skills III	Comprehensive patient/client management approach for conditions in acute care involving clinical decision-making, effective communication, safety, patient management, discharge planning, and introduction to equipment, lines & tubes, lab values, and medications.
	9			

Year 2 Fall 2 Semester 5	PT 701	4	Neuroanatomy	Normal and abnormal structure and function of central, peripheral, and autonomic systems, neurodevelopment, and neural mechanisms mediating motor control and pain with emphasis on clinical relevance to physical therapy.
	PT 758	1	PM & BC in PT	Introduction to patient motivation and behavioral change in physical therapy practice. Emphasis on practical strategies to promote healthy patient/client change leading to improved human movement and overall health.
	PT 764	1	Evidence-Based Practice III- Capstone	Continuation of Evidence-Based Practice II where students receive continued guidance in the completion of the faculty-led capstone project begun in EBP II. Presentation of capstone required before graduation.
	PT 772	1	Clinical Application Seminar and Experiences II	Continued application of information and clinical skills learned in concurrent and prior DPT coursework in a small group discussion and pseudo-clinical setting. Focus on general interventions in interdisciplinary management with complex concerns
	7			

Year 2 Spring 2 Semester 6	PT 712	3	Motor Control and Development in PT	Reviews maturation of movement systems, lifespan motor skills development, and contemporary theories of motor control and learning to build evidence-based foundations for evaluation and management of movement dysfunction.
	PT 744	3	Medical Path in PT III- Neuro	This course reviews the functional neuroanatomy and neuropathology correlated with select neuropathological conditions or injury, focusing on etiology, epidemiology, medical/surgical considerations, neural substrates of cognitive, perceptual, and sensorimotor function in patients treated by physical therapists.
	PT 755	1	Service-Learning Practicum	Allows participation in service-learning programs developed in Professional Practice III, emphasizing advocacy for the health needs of the region, as well as coordination with community agencies.
	PT 765	1	Evidence-Based Practice IV- Capstone	Continuation of Evidence-Based Practice III where students receive continued guidance in the completion of the faculty-led capstone project begun in EBP II. Presentation of capstone required before graduation.
	PT 773	1	Clinical Application Seminar and Experiences III	Continued application of information and clinical skills learned in concurrent and prior DPT coursework in a small group discussion and pseudo-clinical setting. Focus on cardiopulmonary and intra-disciplinary management of patients with complex concerns.
	9			

Year 3 Summer 3 Semester 7	PT 713	2	Outcome Measures in PT	Assessment of constraints to normal movement, application of standardized tools for assessment of movement dysfunction, examination of statistical data (population-specific reliability, validity, sensitivity, specificity, odds ratios) of said tools.
	PT 748	1	Pain Science	A study of the multidimensional nature of pain using a biopsychosocial approach that includes contemporary pain science theories, concepts and principles, and the holistic assessment and management of pain in physical therapy practice.
	PT 766	1	Evidence-Based Practice V- Capstone	Continuation of Evidence-Based Practice IV where students receive continued guidance in the completion of the faculty-led capstone project begun in EBP II. Presentation of capstone required before graduation.
	PT 784	3	Integumentary	Review of structure, function, and applied pathophysiology of integumentary system. Translate knowledge towards PT examination and management of common integumentary impairments with a focus on prevention, restoration, and optimizing independence.
	PT 787	2	Prosthetics & Orthotics	Principles of evaluation and management of patients with amputation and/or neuromuscular disorders to maximize functional independence. Focus on prosthetic and orthotic prescription, components, fabrication, fit, and use during functional activities.
	8			

Year 3 Fall 3 Semester 8	PT 702	1	Neuroevaluation	Comprehensive screening, exam, and evaluation of patients with neurological dysfunction with focus on selection and interpretation of examination components in order to discern underlying pathophysiology reflective of neurological dysfunction.
	PT 721	3	Applied Exercise Physiology	Physiological effects of exercise and training in healthy individuals and individuals with pathological dysfunction.
	PT 754	1	Healthcare Delivery Systems	Micro and macro principles of healthcare delivery systems, sites, and organizations and pro bono services. Legalities of appropriate documentation for third-party payers and federal insurance programs are addressed.
	PT 791	4	Clinical Internship I	Supervised clinical education experience emphasizing continued development and reinforcement of clinical skills in clinical settings. Competence is expected in areas of the material presented to date in the curriculum.
	9			

Year 3 Spring 3 Semester 9	PT 704	4	Neurorehabilitation	Theoretical basis and clinical application of neurophysiological approaches to treatment utilizing motor control, sensorimotor development, and integration principles, including discussion and practice of current methods of evaluation and intervention.
	PT 767	1	Evidence-Based Practice VI- Capstone	Continuation of Evidence-Based Practice V where students receive continued guidance in the completion of the faculty-led capstone project begun in EBP II culminating with presentation of completed capstone.
	PT 783	4	Cardio-Pulmonary Rehabilitation	An overview of cardiovascular and pulmonary systems pathologies, medical diagnosis and management and physical therapy diagnosis, examination, assessment, and management of related physiological and movement dysfunctions.
	PT 786	3	Rehabilitation Consideration in Selected Patient Population I	Principles of evaluation and treatment in the areas of pediatrics and geriatrics. Emphasis placed on biopsychosocial aspects of developmental disabilities, coordination of care and complexities of multi-system and multi-organ disease.
	12			

Year 4 Summer 4 Semester 10	PT 756	3	Administration in PT	Emphasis on administration of clinical practice in multiple settings. Information about licensure, attainment and retention of employment, professional organization membership, residency and fellowship programs, and specialization.
	PT 774	1	Clinical Application Seminar and Experiences IV	Continued application of information and clinical skills learned in concurrent and prior DPT coursework in a small group discussion and pseudo-clinical setting-Focus on neurological, integumentary dysfunctions, and prosthetic & orthotic prescription.
	PT 799	1	Integration & Review	Integration and review of clinical physical therapy principles and concepts in preparation for the National Physical Therapy Board Examination.
	PT 798	1	Independent Study	
	6			

Year 4 Fall 4 Semester 11	PT 788	1	Special Topics in Physical Therapy	Principles of physical therapy management of select patient populations including bariatrics, women's health, oncology, and selected progressive and chronic diseases.
	PT 714	1	Movement Integration	This course introduces students to Integrative knowledge of the movement system with synthesis of physiological functions and patient specific movement patterns. Focus on identification of movement impairments, adaptive strategies, and imbalance, as well as effective movement analysis for appropriate evaluation and treatment of movement dysfunction. The course prepares students to identify as movement system experts upon culmination of a doctorate in physical therapy.
	PT 789	2	Orthopaedics in PT III	Advanced diagnosis and management approaches for complex orthopedic, and sports PT populations will be covered. Differential diagnosis of upper and lower quarter pathology, along with specialized treatments unique to this population will be emphasized.
	PT 794	1	Integrated Clinical Experiences in PT II	In development
	PT 792	6	Clinical Internship II	Supervised clinical education experience emphasizing continued development and reinforcement of clinical skills in various clinical settings. Competence is expected in areas of the material presented to date in the curriculum.
11				

Year 4 Fall 4 Semester 11	PT 785	2	Health Promotion and Nutrition (Distance)	Development and maintenance of healthy lifestyles for patients and clients. Focus on disease prevention, nutritional needs, and the benefits of exercise as well as managing individuals with injury or disease.
	PT 793	8	Clinical Internship III	Supervised clinical education experience emphasizing continued development and reinforcement of clinical skills in various clinical settings. Competence is expected in areas of the material presented to date in the curriculum.
	10			