Doctor of Physical Therapy Students,

On behalf of the faculty and staff of the UMHB Doctor of Physical Therapy Program, it is my pleasure to welcome you into our program. We are excited about the journey that awaits you as you navigate the doctoral education experience. The physical therapy program is a challenging program with high standards and expectations, and we have every confidence that each of you is capable of successfully completing the program.

We developed the DPT curriculum to reflect current physical therapy practice and to prepare an autonomous entry-level DPT practitioner. During the course of the program you will experience a number of unique learning opportunities, including interprofessional events, service learning activities, and experiential learning in the Cru Community Clinic, to facilitate engagement in the profession and the community. We encourage you to make the most of the opportunities provided.

The DPT faculty developed this handbook to assist you in navigating through the program over the next 28 months, from admission to graduation. Your DPT faculty advisor will be a source of guidance for you, but we encourage you to take responsibility for knowing and understanding the requirements.

We wish you the best of luck in your studies.

Sincerely,

Barbara Gresham

Barbara Gresham, PT, PhD
Board-Certified Geriatric Clinical Specialist
Director, Doctor of Physical Therapy Program
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UMHB’s Doctor of Physical Therapy Program informs students of its rules, policies, and guidelines through this student handbook, the DPT Program website, course syllabi and other sources. This handbook serves as a supplement to other University rules, policies and guidelines found in the UMHB Graduate Catalog, UMHB Student Handbook and other documents.

The handbook is available online from any computer with access to the university’s website. It is the responsibility of the DPT student to obtain, read, and comprehend the purpose, policies, and procedures of the DPT Program and of UMHB.

The DPT program and UMHB reserve the right at any time to create additional policies, or modify existing ones, as needs may dictate.

In the entirety of this handbook, the terms “university” or “UMHB” shall mean the University of Mary Hardin-Baylor.
STATEMENT OF NON-DISCRIMINATION

The University of Mary Hardin-Baylor (UMHB) admits qualified students of any race, color, sex, national, or ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not unlawfully discriminate on the basis of race, color, sex, religion, age, nationality, and ethnic origin in the administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs. Furthermore, UMHB does not unlawfully discriminate on the basis of handicap in the recruitment and admission of students and the operation of any of its programs and activities, as specified by federal laws and regulations.

UMHB is authorized under federal law to enroll non-immigrant alien students. The university is a private institution and reserves the right to deny admission to an applicant for any lawful reason.

The University is required not to discriminate unlawfully on the basis of sex by Title IX of the Education Amendments Act of 1972 and its implementing regulations at 34 C.F.R. Part 106. This requirement extends to admission, except that the University may discriminate on the basis of sex in undergraduate admissions and is exempt from provisions of Title IX which conflict with the University's religious tenets.

The University has grievance procedures to provide students, employees, or applicants an opportunity to file a complaint of illegal discrimination of any kind. In order to file a grievance, contact the appropriate person below or see the grievance procedures published online.

A student or applicant with a question about the university’s non-discrimination policies or who claims to have experienced unlawful discrimination in connection with any university program or activity should contact the designated coordinator for university compliance with nondiscrimination policies: Susan Owens, Vice President for Human Resources, Title IX Coordinator and non-discrimination compliance officer, Sanderford Administrative Complex, 900 College Street, Belton, Texas 76513, 254-295-4527, susan.owens@umhb.edu.
SAFETY AND SECURITY

Annual Security and Fire Safety Reports

UMHB’s Annual Security Report and its annual Fire and Safety Report, as required by federal law, may be accessed on the University’s Internet site at http://police.umhb.edu/policies/clery-act. A printed copy of these reports can be obtained by contacting the University of Mary Hardin-Baylor Campus Police Department at (254) 295-5555.

The reports include institutional policies concerning campus safety and security as well as statistics for the previous three years concerning crimes and fires reported to have occurred on campus, in or on off-campus buildings or property owned or controlled by the school, and on public property within or immediately adjacent to the campus.

Sexual Harassment, Sexual Assault, or Sexual Violence

The University strives to create a campus environment that is free from sexual violence, sexual assault, or sexual harassment, all of which are prohibited by university policy and by federal law. Detailed information about reporting crimes, sex offenses, or violations of the university’s policies on sexual harassment can be found in the UMHB Student Handbook and website.

Potential Health Risks and Standard Precautions

The DPT program and many of the contracted clinical facilities require that students have been educated about the dangers of blood borne pathogens and how to protect themselves and others, including the use of standard precautions. The DPT program will provide education on these topics in specific physical therapy courses during the first year of the program.

DPT Program students are expected to take precautions to prevent exposure to hazardous materials or substances, i.e. wear goggles/gloves, when performing certain procedures.

If a physical therapy student experiences an exposure, he/she should report it promptly to the university faculty member for the course and/or the clinical facility. Students are expected to follow all clinical facility and university policies regarding precautions and exposures.

Students in the DPT Program are required to perform cadaver dissection in the Gross Anatomy Lab. Training in anatomy lab safety procedures, including precautions and safety attire, is provided by DPT anatomy faculty prior to students entering the lab for the first time.
Institutional Mission Statement

The University of Mary Hardin-Baylor prepares students for leadership, service, and faith-informed discernment in a global society. Academic excellence, personal attention, broad-based scholarship and a commitment to a Baptist vision for education distinguish our Christ-centered learning community.

Mayborn College of Health Sciences Mission Statement

The mission of the Mayborn College of Health Sciences is to engage students in a Christ-centered learning environment where they will develop the knowledge, skills, and interprofessional competencies to become leaders in the complex and dynamic environment of health sciences. The college promotes the integration of health and restoration of the mind, body and spirit through the preparation of students in a supportive and rigorous academic setting. Our students learn in a student-centered, interprofessional, and innovative learning environment while engaging in opportunities to go beyond the classroom with hands-on-learning, research, and service.

Program Vision

The Doctor of Physical Therapy program aspires to be recognized as the program of choice for individuals seeking to become competent, effective and ethical physical therapy practitioners with a foundation based in Christian principles and values.

Program Mission

The mission of the University of Mary Hardin-Baylor’s Doctor of Physical Therapy Program is to prepare Doctors of Physical Therapy who demonstrate excellence in clinical practice as they collaborate with the interprofessional health care team, contribute to critical inquiry, advance societal health and wellness, advocate to promote change, and serve as leaders within the profession and community. Addressing the needs of underserved communities in a global society is a guiding principle for program faculty, staff, students and graduates. The program is offered in a Christian environment led by faculty who teach and mentor with integrity, sensitivity and a commitment to excellence.

Philosophy

The faculty body of the University of Mary Hardin-Baylor Doctor of Physical Therapy Program believes the following:

❖ Each member of society should have access to quality health care, including physical therapy services, and should participate to the fullest extent of his/her ability in making informed health care decisions. Physical therapy is a vital part of health care and encompasses all aspects of the movement system. Patients may access the health care system through a variety of entry points, one of which is physical therapy.

❖ Physical therapists participate as members of an interprofessional health care team who collaborate and consult with other health care professionals, patients/clients, caregivers and the community. Physical therapists use an evidence-based approach in all aspects of physical therapy practice.
Physical therapy education is adaptable, proactive and responsive in meeting the present and future needs of students, the health care system, and society. Physical therapy education includes the incorporation of modern technology and innovation into education and practice. The post-baccalaureate curriculum includes integration and expansion of knowledge in the sciences, the humanities, and applied sciences relevant to physical therapy practice. The PT program prepares self-directed, life-long, collaborative learners capable of using scientific and analytic approaches for clinical decision-making to achieve optimal patient care.

Active adult learning is a process by which students employ an ongoing interpretive and reflective process that synthesizes prior and current experiences into new learning. Students enrolled in the program recognize the challenging process involved in developing the requisite knowledge and skills of a physical therapist. Students display a commitment to learning, responsibility, professionalism, critical thinking, problem solving, and sound communication and interpersonal skills.

Program faculty model professional core values, personal and professional development, scholarship, leadership, and service. Faculty members demonstrate the characteristics of critical thinking, therapeutic presence, commitment to excellence, and acceptance of ambiguity.

Graduates are autonomous practitioners who are prepared to collaborate in a dynamic health care environment. As lifelong learners, they are committed to advocating for the public welfare, contributing to critical inquiry, serving as leaders and role models, and striving for excellence in all aspects of physical therapy.

Program Goals and Objectives

In order to accomplish the mission of the DPT program, the Program will:

1) Provide an innovative and dynamic curriculum that reflects contemporary practice and includes interprofessional and service learning.
   a. The program will coordinate student participation in interprofessional learning activities, including core training and elective experiences, throughout the program.
   b. The curriculum will include a service learning activity in at least one 1st and 2nd year course.
   c. The program will offer at least 5 elective options each year based on faculty and student input.

2) Promote and support diversity in all aspects of the program.
   a. The program will solicit and encourage applications from underrepresented groups in order to promote diversity in every cohort.
   b. The program will offer a variety of academic support opportunities each semester to promote student success.

3) Collaborate with local clinicians to promote continued competence for PTs within the community.
   a. The program will host at least one continuing competency course per year.

4) Address the health and wellness needs of the community.
   a. The program will collaborate with other health care programs to provide pro bono services to the community through the Cru Community Clinic at least one afternoon per week each semester.

5) Promote and support faculty and student development and leadership opportunities.
   a. The program will provide or support at least 10 hours of faculty development activities each
academic year.

b. At least 25% of core faculty will participate in the APTA Educational Leadership Conference each year.

c. The program will provide support to the student physical therapy organization to promote student participation in professional and leadership activities each year.

In order to accomplish the mission of the DPT program, the Faculty will:

6) Model professional behaviors that reflect commitment to service to the institution, profession and community.
   a. 100% of core faculty will serve on a university, school or department committee within 1 year of employment.
   b. 100% of core faculty will maintain membership in at least 1 professional association each year.
   c. 100% of core faculty who are licensed Physical Therapists will maintain membership in at least 1 APTA section each year.
   d. 50% of core faculty will serve in elected or appointed positions/committees within their profession at the local, state and/or national level each year.
   e. 100% of faculty members who are licensed Physical Therapists will participate in supervision of students in the Cru Community Clinic.

7) Maintain currency in physical therapy practice to contribute to an evidence informed contemporary curriculum.
   a. 100% of faculty members who are licensed Physical Therapists will participate in at least one of the following activities per year:
      i. Complete 10 CCUs in a topic related to an assigned course.
      ii. Conduct a scholarly activity (research project, article, presentation) in a topic related to an assigned course.
      iii. Participate in clinical practice in a physical therapy area related to an assigned course.

8) Participate in scholarly activities to advance the teaching, research, and practice of physical therapy through rigorous inquiry.
   a. 100% of core faculty will submit at least one scholarly product per year to a peer-reviewed journal or professional conference.

In order to accomplish the mission of the DPT program, Students will:

9) Demonstrate entry-level competency in clinical practice by the end of the program.
   a. 100% of students will be at entry level for each performance criterion by the end of their final clinical experience.

10) Complete the requirements for the Doctor of Physical Therapy degree.
    a. 90% of students entering the program will graduate from the program within 40 months of matriculation.

11) Demonstrate a commitment to service through community engagement.
    a. 100% of students will participate in patient care in the Cru Community Clinic each year.
    b. 25% of students will exceed the minimum number of volunteer hours required for graduation from the program.

12) Demonstrate a commitment to the profession of physical therapy.
    a. 25% of students will become members of an APTA section during the program prior to beginning their full-time clinical experiences.
    b. 90% of students will attend a local, state or national physical therapy conference/meeting
by the end of the program

13) Contribute to the body of knowledge in physical therapy.
   a. 25% of students in the final year of the program will participate in presentation of research
       beyond the requirements for graduation (Scholars’ Day, DPT Research Symposium).

In order to accomplish the mission of the DPT program, Graduates will:

14) Demonstrate competent, effective and ethical practice with consideration for serving
    underserved communities.
   a. 95% of graduates will pass the NPTE and achieve licensure.
   b. 100% of graduates seeking employment will be employed within 6 months of passing the
      licensure exam.
   c. 40% of graduates will be employed in settings within underserved communities.

15) Serve as leaders within clinical practice, the profession, and the community.
   a. 25% of graduates will serve as clinical instructors within 2 years following graduation.
   b. 25% of graduates will serve in a leadership role in their clinical practice within 3 years
      following graduation.

Program Accreditation Statement

The Doctor of Physical Therapy Program at University of Mary Hardin-Baylor is accredited by the
Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave. Suite 100,
Alexandria, VA, 22305-3085; telephone: 703-706-3245; email: accreditation@apta.org; website:
http://www.capteonline.org. If needing to contact the program/institution directly, please call (254) 295-
4940 or email bgresham@umhb.edu.
PROGRAM FACULTY AND STAFF

Core Faculty

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Trevor Carlson, PT, DPT
Kelly Keeney, PT, DPT
Meredith Kennedy, DPT
Paul La Bounty, PT, PhD
Tayla Nicholas, PT, MPT
Ann Pharr, PT, ScD
Sean Suttles, PT, DPT
Morgan Thomason, PT, DPT
Peggie Williamson, PT, DPT
Darryn Willoughby, PhD

Staff

Michelle Tarbet  
DPT Program Secretary  
Office: Hardy Hall 140  
254.295.4940  
mntarbet@umhb.edu
Faculty Titles and Roles

Academic Faculty Roles

The Program Director (PD) is a licensed physical therapist and experienced academic faculty member employed by the University to lead the DPT Program. The PD oversees all aspects of the program including meeting CAPTE accreditation standards, developing and managing the annual program budget, teaching courses in the program, and engaging in scholarship and service. The PD is also responsible for evaluating, mentoring, and fostering the development of academic faculty and the program as a whole.

The Director of Clinical Education/Assistant Director of Clinical Education (DCE/ADCE) is a licensed physical therapist and academic faculty member employed by the UMHB DPT Program to coordinate the clinical education aspects of the curriculum. The DCE/ADCE is responsible for organizing and planning the clinical experiences for the students as well as communicating with all of the Clinical Facilities about matters that relate to the clinical education. The UMHB DPT program may designate another academic faculty member to assist in decision-making related to clinical education or act in place of the DCE/ADCE in the event the DCE/ADCE is unavailable.

Clinical Faculty Roles

The Clinical Faculty are highly respected physical therapists that provide clinical education opportunities for the student physical therapists during their clinical practicum experiences. The clinical settings and facilities may range from acute care, inpatient rehabilitation, skilled nursing, long-term acute care, nursing homes, outpatient rehabilitation, assisted living, specialty clinics, and home based. Characteristics of effective physical therapists and clinical instructors include:

- professional, caring attitude
- maintaining a positive outlook
- strong interpersonal and communication skills
- confident in their abilities
- organized yet flexible
- empathetic to others
- open to new evidence and concepts
- approachable
- understanding that mistakes provide an opportunity for learning and growth

Site Coordinator of Clinical Education (SCCE) is the individual employed by the clinical facility to coordinate UMHB DPT student clinical rotations with a clinical instructor (CI) in the facility. The SCCE determines readiness for clinicians to serve as CIs and communicates with the academic program regarding clinical placements, availability, student performance, and other essential information about clinical education. The SCCE may or may not be a physical therapist.

Clinical Instructor (CI) is an individual employed by the clinical facility who instructs, supervises, and assesses students during their clinical learning experiences. Clinical learning experiences drive the students’ integration and application of academic knowledge into clinical practice. Minimum qualifications for serving as a CI include: current licensure in the state in which employed, one year of experience as a licensed physical therapist, evidence of active participation in formal and/or informal continued education, and a demonstrated ability to communicate strengths and weaknesses, both orally and in writing.
INFORMATION FOR INCOMING STUDENTS

Student Information Forms
Each student will complete a Student Information Form during program orientation. This form is intended to keep the program informed about student demographics and up-to-date contact information. Please notify your DPT advisor or the program director immediately if any information on the form changes during the program. If you do not wish to have certain information released to your classmates, you may note this on the form. However, you must provide this information to the program.

The program utilizes a clinical management platform called EXXAT. Students are required to provide and/or upload information into the EXXAT system as directed, including but not limited to personal information, required immunization records, CPR certification, required testing/screening, and proof of current and valid health insurance.

Program Orientation
Students will be required to attend program orientation prior to the beginning of their first semester in the program (Fall Semester 1). During orientation, students are provided with an overview of the DPT program, program policies and procedures, student support services, and program expectations.

Students will also have an opportunity to meet with their faculty advisor. Each student admitted to the DPT program will receive a copy of the DPT Student Handbook and must sign and submit the acknowledgement and agreement form at the back of the handbook.

Advising
Upon acceptance into the DPT program, each student is assigned a faculty advisor. Students are required to meet with the faculty advisor each semester to discuss academic progress and overall performance in the program. Additional meetings should be scheduled if the student or faculty advisor has concerns about student performance in the program or a particular course.

Program Costs (estimated)

<table>
<thead>
<tr>
<th>Academic Year</th>
<th>Tuition and Fees</th>
<th>DPT Scholarship</th>
<th>Academic Year Total</th>
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<tbody>
<tr>
<td>1st Academic Year</td>
<td>$57,085</td>
<td>$9800 (based on 49 cr hrs)</td>
<td>$47,285</td>
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<td>(Fall 1, Spring 1, Sum 1)</td>
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<tr>
<td>2nd Academic Year</td>
<td>$54,755</td>
<td>$9,400</td>
<td>$45,355</td>
</tr>
<tr>
<td>(Fall 2, Spring 2, Sum 2)</td>
<td></td>
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<tr>
<td>3rd Academic Year</td>
<td>$12,815</td>
<td>$2,200</td>
<td>$10,615</td>
</tr>
<tr>
<td>(Fall 3)</td>
<td></td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>$124,655</strong></td>
<td><strong>$21,400</strong></td>
<td><strong>$103,255</strong></td>
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</tbody>
</table>
Students are solely responsible for the following additional Costs:

- Textbooks and supply costs will vary but typically average $2,500 total for the program. The program makes every effort to provide resources through the library, such as Access Physiotherapy.
- Students are required to join the American Physical Therapy Association ($90 annually).
- Membership in the DPT Student Organization is $20 each fall and spring semester.
- Clinical clothing is required and will vary depending upon clinical assignments. Costs are variable.
- All costs associated with clinical experiences, including travel, food, lodging, health insurance, etc. are the responsibility of the student. The student is also responsible for any other costs that may arise during the clinical experience period, such as field trips, continuing education programs, meeting, etc.

Financial Assistance

The procedure for applying for financial aid can be found in the UMHB Graduate Catalog. Additional information can be obtained from the Student Financial Aid Office (http://financialaid.umhb.edu/).

Employment While Participating in the DPT Program

Enrollment in the physical therapy program is a full-time commitment, and employment while enrolled in the program is not recommended. If a student chooses to be employed while enrolled in the program, academic attendance, performance and participation standards will not be altered to accommodate employment. Students should be aware that the physical therapy program may occasionally require evening or weekend classes and activities.

A student who is employed as a physical therapy aide or technician must be aware that during the course of that employment, he/she is not acting in any capacity as a UMHB physical therapy student. A student may not wear a name tag or any other item identifying him/her as a UMHB physical therapy student while on duty at their place of employment.

Background Check

All incoming students must have a background check, which includes records of criminal activities and other items that may warrant further review, prior to first semester enrollment. The background check must also be conducted prior to beginning full-time clinical experiences in the second year of the program and may be required for specific clinical facilities. Enrollment and continued status in the DPT program are contingent upon satisfactorily passing all criminal background checks. Students will be responsible for the costs of background checks.

Liability Insurance

Student professional liability insurance is provided by the University at no additional cost to the student. The insurance will cover students during assigned clinical experiences as part of required UMHB DPT program academic coursework. The insurance does not cover activities outside of enrollment or a course requirement, such as other volunteer or work activities.
APTA Membership

Each student is required to join and maintain membership in the American Physical Therapy Association throughout the program. Students are also strongly encouraged to join an APTA Section in an area of interest (student costs for sections range from $0 - $50). Membership in the APTA provides students with access to publications, meeting, and other professional activities. Membership in a professional association is an important part of professional development.

Health and Training Policies

The DPT Program is both academic and experiential. Therefore, throughout the entire course of the program, students must demonstrate more than cognitive abilities. Areas of student evaluation include freedom from physical and mental health problems that, even with reasonable accommodation, would interfere with occupational functioning. Upon receiving an offer of admission, DPT students must complete the Essential Functions Statement to demonstrate physical, mental and emotional qualifications sufficient, with or without reasonable accommodation, to meet the academic and technical requirements of the physical therapy profession.

The purpose of the following health policies is to protect the student in the classroom and clinical setting as well as to protect the clients with whom the DPT Program student will be working.

**Note:** No student will be allowed to start a full-time clinical experience unless he/she has presented satisfactory proof of current CPR training and required vaccinations.

Immunizations

The program requires that all students maintain immunizations as required by state law and as recommended by the CDC for healthcare workers. Therefore, all DPT students must submit proof of completed immunizations or titers as applicable prior to program orientation, and must update verification (a) prior to participation in clinical education experiences, and (b) as requested thereafter during enrollment in the program.

The university assumes no responsibility for the effectiveness, contraindications, or adverse effects of required vaccinations. Always consult your own healthcare provider if you have questions about vaccinations.

<table>
<thead>
<tr>
<th>REQUIRED:</th>
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</thead>
<tbody>
<tr>
<td>Measles (rubeola), Mumps, Rubella (German Measles)</td>
<td>Proof of 2 dose MMR vaccination OR positive antibody titer</td>
</tr>
<tr>
<td>Chicken Pox (Varicella)</td>
<td>Proof of 2 dose varicella vaccination OR positive antibody titer</td>
</tr>
<tr>
<td>Tetanus/Diphtheria (Tdap/Td)</td>
<td>A minimum of one dose of <em>tetanus/diphtheria/pertussis</em> vaccine (Tdap) is required. In addition, one dose of a tetanus-containing vaccine must have been received within the last 10 years. Td vaccine is acceptable substitute if Tdap is medically contraindicated.</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Positive antibody titer; if student does not have immunity, the student is required to obtain a two-dose or three-dose Hepatitis B vaccination series, with a repeat titer 1-2 months later.</td>
</tr>
</tbody>
</table>
### Meningococcal

**MPSV or MCV4.** As of January 1, 2014, the State of Texas requires all first-time students (or transfer students if 21 years or younger) to obtain the meningitis vaccine or booster within five years prior to a student’s admission date.

### RECOMMENDED:

**Hepatitis A**

Two doses are recommended.

**Influenza**

UMHB does not require the flu vaccine; however, the Human Anatomy Lab is located at Baylor Scott & White Health (BSWH) Temple campus, and BSWH does require it. In order to participate in Human Anatomy Lab, students must meet this requirement.

**COVID-19**

UMHB does not currently require the COVID-19 vaccine; however, it is required by BSWH for participation in the Human Anatomy Lab, located at Baylor Scott & White Health (BSWH) Temple campus. In order to participate in Human Anatomy Lab, students must meet this requirement. Specific information will be sent to each student regarding timelines. This vaccine may be required by other facilities that host our DPT students for internships.

### Tuberculosis Screening

All students must be screened for TB before beginning clinical experiences. The student upon admission to the DPT Program will provide evidence of a negative TB skin test or a negative chest x-ray if the skin test is positive. The student having a negative TB skin test upon admission to the program must complete a two-step TB skin test (a) within 60 days prior to the start of the first clinical rotation, (b) annually, and if applicable (c) immediately and incrementally following any known exposure, as indicated by the health department.

The student who has had a negative skin test and converts to positive will be referred to the Bell County Health Department or his/her private physician for follow-up care. The student must contact the university’s Student Disability Services office regarding any follow-up care, and evidence of a negative chest x-ray must be provided to the Disability Services Office within 30 days of the positive skin test or as indicated by the health department.

The student having a documented positive TB skin test upon admission or at any point during the time enrolled in the program, must provide the program with evidence of a negative chest x-ray taken within the last 2 years. Negative chest x-rays more than 2 years old must be repeated. Students with a positive TB skin test must complete a Texas Department of State Health Services (TDSHS) symptom questionnaire annually.

**Health Care Provider CPR/AED Training**

The student must have successfully completed Healthcare Provider CPR instruction. Documentation of current CPR course completion must be on file in EXXAT prior to program orientation. The DPT Program requires Healthcare Provider CPR to be renewed before the beginning of the semester if the renewal date expires anytime during the current semester. Failure to provide this documentation before the semester starts means that the student will not be allowed to register.

**Changes in Health Status**

Any currently enrolled DPT student who has a change in his or her health status (other than a minor temporary condition) that may impact the student’s ability to perform required activities as outlined in
the DPT Program’s Essential Functions form must promptly contact the university’s Student Disability Services office to discuss options and possible accommodations.

**Affiliated Clinical Facility Requirements**

Various clinical facilities affiliated with the DPT Program may have specific requirements which must be met before students are permitted to care for clients within the given facility. Because requirements are agency specific and are subject to frequent change, more detailed information will be provided in individual course syllabi and/or by the clinical facility (prior to the start of clinical experiences when possible). This section outlines the student’s responsibility for the minimal requirements. Clinical facilities may have other requirements that are not listed below.

1. **DRUG SCREENING** – All students must successfully complete a negative drug screening prior to beginning clinical experiences. Testing location and other information will be provided prior to the testing time period. The Mayborn College of Health Sciences drug and alcohol policy is located in Appendix A.

2. **CERTIFICATION REGARDING SUBSTANCE ABUSE** – Students admitted to clinical experiences may be asked by a clinical facility to certify in writing that they are not engaging in any substance abuse behaviors. The student’s signature will acknowledge that in “for cause” situations, the facility may require the student to submit to additional drug screening. The refusal to sign this acknowledgement will result in the student being denied access to the clinical facilities that require this acknowledgement.

**Essential Functions (Technical Standards)**

Physical therapy is a demanding profession that requires a wide range of cognitive, sensorimotor, communication, and behavioral skills. A physical therapist is expected to independently perform all aspects of the physical therapy role. Core segments of the program include clinical experiences in which the student will be required to participate in and demonstrate proficiency in providing therapeutic services. Graduates of the UMHB DPT program who pass the licensure examination will be prepared to enter practice in a variety of settings and perform all responsibilities of the professional role. Based upon the expectations and requirements of the profession, this Essential Functions Statement includes a list of essential functions/skills that must be met for entry into and progression through the program.

The list of skills is illustrative and does not represent an all-inclusive listing of the functions of a physical therapist. Reasonable accommodations may be requested to enable an individual with disabilities to achieve these essential functions. The Essential Functions Statement is included in Appendix B.

**Faculty as Student Healthcare Providers**

Any individual who is in any capacity as faculty (academic, clinical, adjunct, CI, guest lecturer, or other paid or unpaid status) must not act as healthcare providers for the program students except as a basic responder in an emergency situation. Students are to be directed to their primary care provider, emergency department, or other health care provider.
Students With Special Needs (Disability Accommodations)

The UMHB Student Handbook and website provide specific information for students with special needs. Students who are otherwise qualified for a university program or course and who desire accommodation(s) for a disabling condition are responsible for providing acceptable documentation in a timely manner prior to the period of stated need. Contact:

Disability Services  
UMHB Box 8437  
900 College Street  
Belton, Texas 76513  
Office: (254) 295-4731  
Email: disabilityservices@umhb.edu

Students who have been granted disability accommodations by UMHB that are also needed for a clinical setting must present an approved UMHB Letter of Accommodation to the clinical facility. Students should be aware that many clinical facilities may not be able to provide the same accommodations for student clinical experiences that have been provided by UMHB for the academic portion of the DPT program. Students should promptly contact the Student Disability Services office directly to discuss any issues or concerns with a clinical facilities’ ability to implement student accommodations granted by UMHB or if a student requires different accommodations for the clinical experience.
## Curriculum Overview

The physical therapy program encompasses 7 semesters over a period of 28 months. The academic calendar for the program may differ from the calendar published by the University. Students will be provided with physical therapy class schedules each year by physical therapy faculty.

## Curriculum Outline

### FALL SEMESTER, 1ST YEAR

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Credits</th>
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<tbody>
<tr>
<td>PHTH 7711</td>
<td>Human Anatomy</td>
<td>7</td>
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<tr>
<td>PHTH 7412</td>
<td>Functional Anatomy</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7313</td>
<td>Applied Physiology I</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7314</td>
<td>Introduction to Patient Management</td>
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</tr>
<tr>
<td>PHTH 7126</td>
<td>Evidence Based Practice</td>
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### SPRING SEMESTER, 1ST YEAR

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<tr>
<td>PHTH 7421</td>
<td>Clinical Neuroscience</td>
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</tr>
<tr>
<td>PHTH 7422</td>
<td>Therapeutic Interventions</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7423</td>
<td>Applied Physiology II</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7424</td>
<td>Examination and Evaluation</td>
<td>4</td>
</tr>
<tr>
<td>PHTH 7137</td>
<td>Critical Inquiry I</td>
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</tr>
<tr>
<td>PHTH 7115</td>
<td>Introduction to Professional Practice</td>
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### SUMMER SEMESTER, 1ST YEAR

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<tr>
<td>PHTH 7331</td>
<td>Musculoskeletal Rehab I</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7325</td>
<td>Development of Human Movement</td>
<td>3</td>
</tr>
<tr>
<td>PHTH 7335</td>
<td>Integumentary Dysfunction &amp; Physical Agents</td>
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<td>PHTH 7333</td>
<td>Professional Communication &amp; Psychosocial Considerations</td>
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<tr>
<td>PHTH 7148</td>
<td>Critical Inquiry II</td>
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### FALL SEMESTER 2ND YEAR

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<tr>
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<tr>
<td>PHTH 7441</td>
<td>Cardiopulmonary and Acute Care Management</td>
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<tr>
<td>PHTH 7442</td>
<td>Musculoskeletal Rehab II</td>
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<tr>
<td>PHTH 7435</td>
<td>Neuromuscular Rehab I</td>
<td>4</td>
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<tr>
<td>PHTH 7244</td>
<td>Geriatrics</td>
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<tr>
<td>PHTH 7245</td>
<td>Health Policy</td>
<td>2</td>
</tr>
<tr>
<td>PHTH 7146</td>
<td>Issues in Underserved Communities</td>
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</tr>
<tr>
<td>PHTH 7156</td>
<td>Critical Inquiry III</td>
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</tr>
<tr>
<td>PHTH 7136</td>
<td>Clinical Practicum (Winter Term)</td>
<td>1</td>
</tr>
<tr>
<td>Semester</td>
<td>Credits</td>
<td></td>
</tr>
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<td><strong>SPRING SEMESTER, 2ND YEAR</strong></td>
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<td>PHTH 7751 Professional Experience I</td>
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<td>PHTH 7345 Neuromuscular Rehab II</td>
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<td>PHTH 7356 Management of Special Populations</td>
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<tr>
<td>PHTH 7254 Pediatrics</td>
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<td></td>
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<tr>
<td>PHTH 7255 Care Delivery and Practice Management</td>
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<tr>
<td><strong>SUMMER SEMESTER, 2ND YEAR</strong></td>
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</tr>
<tr>
<td>PHTH 7961 Professional Experience II</td>
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<tr>
<td>PHTH 7162 Wellness and Health Promotion (online)</td>
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<tr>
<td>PHTH 7191 Special Topics (Students select 2 topics)</td>
<td>0-2</td>
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<tr>
<td><strong>FALL SEMESTER, 3RD YEAR</strong></td>
<td>10-12 hrs</td>
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<tr>
<td>PHTH 7971 Professional Experience III</td>
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<tr>
<td>PHTH 7172 Professional Seminar</td>
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<td></td>
</tr>
<tr>
<td>PHTH 7191 Special Topics (Students select 2 topics)</td>
<td>0-2</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>107 hrs</td>
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**Course Descriptions**

*Fall Semester, 1st Year*

**PHTH 7711 Human Anatomy** - Study of the structure and function of systems in the human body; provides an introduction to radiology, histology, and embryology; includes human cadaver dissection. (4 lecture, 9 lab)

**PHTH 7412 Functional Anatomy** - Introduction to biomechanical principles of human movement; includes mechanical principles of joint movement, posture and gait analysis; integration of anatomy and kinesiology with biomechanics is emphasized. (3 lecture, 3 lab)

**PHTH 7313 Applied Physiology I** - Part one of a two-part series; study of the physiology of the human body, including function at the molecular, cellular, tissue and systems levels in health and disease, as well as at rest and during work/exercise; addresses integration of physiological responses from multiple systems, cellular physiology, metabolism, and homeostasis; includes introduction to general pharmacology. (3 lecture, 1 lab)

**PHTH 7314 Introduction to Patient Management** – Introduction to the physical therapy model of clinical practice; includes the role of the physical therapist in health promotion, wellness and prevention, as well as basic patient management and documentation skills. (2 lecture, 3 lab)

**PHTH 7126 Evidence Based Practice** – Introduction to the concepts of evidence-based practice in physical therapy; includes accessing, reviewing, analyzing and critiquing the literature related to physical therapy practice; students will develop ideas for research projects. (1 lecture)
Spring Semester, 1st Year

PHTH 7421 Clinical Neuroscience – Study of the structure and function of the nervous system across the lifespan; includes cellular, systemic and clinical pathology discussions of peripheral and central neural components; includes basic examination of sensation, perception, cognition and motor control. (3 lecture, 3 lab)

PHTH 7422 Therapeutic Interventions – Emphasis on the development of skills in therapeutic interventions, including therapeutic exercise and joint mobilizations. (3 lecture, 3 lab)

PHTH 7423 Applied Physiology II – Part two of a two-part series; study of the physiology of the human body, including function at the molecular, cellular, tissue and systems levels in health and disease, as well as at rest and during work/exercise; addresses integration of physiological responses from multiple systems, cellular physiology, metabolism, and homeostasis; includes introduction to general pharmacology. (4 lecture, 1 lab)

PHTH 7424 Examination and Evaluation – Introduction to physical therapy examination, evaluation, and differential diagnosis within a clinical decision-making framework; includes introduction to diagnostic screening and imaging; incorporates the Guide to PT Practice. (3 lecture, 3 lab)

PHTH 7115 Introduction to Professional Practice – Introduction to physical therapy as a profession, core values, ethics and laws, professional behavior, communication; provides an overview of program expectations. (1 lecture)

PHTH 7137 Critical Inquiry I – Exploration of research methodologies utilized in physical therapy and health care research, including research design and statistical analysis. Students will implement research projects in collaboration with faculty. (1 lecture)

Summer Semester, 1st Year

PHTH 7331 Musculoskeletal Rehab I – In-depth study of examination, evaluation, and intervention strategies for patients/clients with spine and upper extremity musculoskeletal problems across the lifespan; includes orthotics and bracing techniques, manual therapy; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy diagnosis and interventions. (2 lecture, 3 lab)

PHTH 7325 Development of Human Movement – Study of the development of and changes in human movement throughout the lifespan based on principles of neuroscience, motor control, and motor learning. Tests and measures related to the development of human movement and the analysis of human movement patterns will be used to guide identification of impairments and development of treatment strategies to optimize movement and function. (2 lecture, 3 lab)

PHTH 7335 Integumentary Dysfunction and Physical Agents - Study of examination, evaluation and intervention strategies for patients/clients with integumentary and/or vascular problems; includes principles of prevention, diagnosis, prognosis, and outcomes; addresses management of wounds and investigates relationship between pharmacological management and physical therapy interventions. Includes development of skills in physical agents and electrotherapeutic modalities (2 lecture, 3 lab)

PHTH 7333 Professional Communication & Psychosocial Considerations - Introduction to key elements of professional communication, including foundations of communication, interpersonal and conflict resolution skills, and principles of teaching and learning; addresses study of individual response to illness and disability in the context of psychological, cultural, ethnic, social, and lifespan factors, as well as psychological behavior models in relation to physical therapy management; includes opportunity for service learning project. (3 lecture)
PHTH 7148 Critical Inquiry II — Continued exploration of research methodologies and application of scientific method to physical therapy; students will implement research projects in collaboration with faculty. (1 lecture)

Fall Semester, 2nd Year

PHTH 7441 Cardiopulmonary and Acute Care Management—In-depth study of examination, evaluation and intervention strategies for patients/clients with cardiovascular and/or pulmonary problems with emphasis on those in the acute setting; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy interventions. (3 lecture, 3 lab)

PHTH 7442 Musculoskeletal Rehab II – Advanced study of examination, evaluation and intervention strategies for patients/clients with spine and lower extremity musculoskeletal problems across the lifespan; includes orthotics and bracing techniques, manual therapy; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy diagnosis and interventions. (3 lecture, 3 lab)

PHTH 7435 Neuromuscular Rehab I – In-depth study of examination, evaluation and intervention strategies for patients/clients with neuromuscular problems across the lifespan; includes principles of prevention, diagnosis, prognosis, and outcomes; investigates relationship between pharmacological management and physical therapy interventions. (3 lecture, 3 lab)

PHTH 7244 Geriatrics — In-depth study of examination, evaluation and intervention strategies for older adults; incorporates theories of aging with principles of prevention, diagnosis, prognosis and outcomes; investigates the unique aspects of pharmacology in the elderly; includes opportunity for service learning project. (1.5 lecture, 2 lab)

PHTH 7245 Health Policy – Overview of current health care environment, existing payment and health care delivery systems, development of public policy and legislation, and scope of physical therapy practice; will include exploration of local, state and national influences and factors. (2 lecture)

PHTH 7146 Issues in Underserved Communities — Overview of major issues in underserved communities, including rural and impoverished areas; exploration of demographic, economic, and societal influences and factors impacting health care in underserved areas; includes opportunity for service-learning project. (1 lecture)

PHTH 7156 Critical Inquiry III – Continued exploration of research methodologies and statistical analysis of physical therapy research; students will continue to implement research projects and conduct data analysis in collaboration with faculty. (1 lecture)

PHTH 7136 Clinical Practicum - Introduction to clinical practice through clinical observation/reflection and opportunity to practice basic skills learned during the first year of the program; consists of 80 hours of supervised clinical exposure. (80 clinical hours)

Spring Semester, 2nd Year

PHTH 7751 Professional Experience I — First of three clinical experiences, consists of 8 weeks of full-time supervised clinical practice; emphasizes integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (320 clinical hours)

PHTH 7345 Neuromuscular Rehab II - Advanced study of examination, evaluation and intervention strategies for patients/clients with neuromuscular problems across the lifespan; includes discussion of rehabilitative and assistive technologies; includes in-depth exploration of current body of literature for
the practice of physical therapy with the designated populations. (2 lecture, 3 lab)

**PHTH 7254 Pediatrics** - In-depth study of examination, evaluation and intervention strategies for children and adolescents; incorporates study of normal development with principles of diagnosis, prognosis and outcomes; investigates the unique aspects of pharmacology in children and adolescents. (1.5 lecture, 2 lab)

**PHTH 7356 Management of Special Populations** – Case-based study of examination, evaluation and intervention strategies for patients/clients with complex medical problems spanning multiple systems. Special topics include amputation, spinal manipulation, pelvic floor dysfunction, peripartum management, chronic pain, oncology, lymphedema, and orthotics and prosthetics. (2 lecture, 3 lab)

**PHTH 7255 Care Delivery and Practice Management** – Exploration of issues facing autonomous practitioners including strategic planning, financial management, personnel management, resource management, marketing strategies, legal considerations for health care delivery, conflict resolution and clinical negotiation. (2 lecture)

**Summer Semester, 2nd Year**

**PHTH 7961 Professional Experience II** – The second of three clinical experiences; consists of 11 weeks of full-time supervised clinical practice; emphasizes progressing integration and application of learned physical therapy skills, knowledge and behaviors in a patient care environment. (440 clinical hours)

**PHTH 7162 Wellness and Health Promotion** – Exploration of fitness, wellness, and health promotion strategies in physical therapy; includes discussion of physical activity, nutrition, medical and complementary approaches to wellness, and risk factor/behavior modification; exploration of attitudes toward health, wellness, and disability and their impact on patient care. (1 lecture/online)

**PHTH 7191 Special Topics** - A course designed to permit the offering of topics of current interest in physical therapy. Students will select two topics - 1 credit each. Prerequisite: permission of DPT faculty advisor. (1 lecture) NOTE: Special Topics courses may be taken during Summer or Fall semesters during the last year of the program.

**Fall Semester, 3rd Year**

**PHTH 7971 Professional Experience III** – The last of three clinical experiences; consists of 11 weeks of full-time supervised clinical practice; emphasizes development of entry-level physical therapy skills, knowledge and behaviors in a patient care environment. (440 clinical hours)

**PHTH 7172 Professional Seminar** – Focus on the culmination of student clinical and professional development; preparation for licensure examination and graduate clinical practice; discussion of issues related to maintaining and expanding professional competence in physical therapy practice. (1 lecture)

**PHTH 7191 Special Topics** - A course designed to permit the offering of topics of current interest in physical therapy. Students will select two topics - 1 credit each. Prerequisite: permission of DPT faculty advisor. (1 lecture) NOTE: Special Topics courses may be taken during Summer or Fall semesters during the last year of the program.
Additional Curriculum Components

Service Learning/Cru Community Clinic
Service learning involves learning activities that combine traditional teaching and learning with meaningful community service. Service learning is an integral part of the DPT curriculum, and students will have several opportunities to complete service learning activities during the program in selected courses. Students will also provide supervised patient care at the university’s pro bono Cru Community clinic (https://go.umhb.edu/health-sciences/cru-community-clinic).

Interprofessional Education
Interprofessional education (IPE) is an experience that “occurs when students from two or more professions learn about, from, and with each other” (World Health Organization, 2010). The IPE curriculum at UMHB incorporates values/ethics, roles/responsibilities, interprofessional communication, and teams/teamwork. In addition, the IPE curriculum utilizes TeamSTEPPS® to provide a framework of tools to facilitate communication and teamwork skills in health care professional students. Students in the DPT program must complete the IPE core curriculum and at least 2 IPE elective experiences.

Research Project
Critical inquiry is an important aspect of physical therapy practice, and students will be required to complete a series of courses and a research project. Students will learn the basics of research methods as well as the importance of critical inquiry to current physical therapy practice during PHTH 7126 – Evidence Based Practice. Students will also develop ideas for a research project in collaboration with faculty members. Students will complete a series of 3 Critical Inquiry courses that will culminate with a presentation of a research project during the last semester. The purpose of the research project is to familiarize students with clinical research and instill in them a desire to participate in critical inquiry as clinicians.

Comprehensive Examinations
Students will complete the first comprehensive examination after the first 3 semesters of the program. This examination serves as a formative assessment of the student’s retention of first year foundational information. Feedback from this examination will be provided to the student to identify areas of needed focus for review in order to facilitate learning through the remainder of the program.

During the 5th semester of study, students will complete another comprehensive examination using the Practice Exam and Assessment Tool (PEAT). The purpose of this examination is to establish a baseline of the student’s level of preparation for the National Physical Therapy Examination and to familiarize students with the format and difficulty level of the licensure examination. Students who do not meet the program’s expected score on the comprehensive examination or specific sections of the examination will be required to create a guided study plan in collaboration with their faculty advisor. The guided study plan will be related to areas of deficiency identified by performance on the comprehensive examination. The student and advisor will select the specific activities that must be completed prior to graduation. In order to graduate, the student must complete the selected activities.
Student Expectations

Students in the DPT program are expected to demonstrate consistent professional and ethical conduct, attend all classes/clinical experiences punctually, participate in all laboratory and additional learning experiences, and complete/submit all assignments on time. Students will abide by the policies of the university, the graduate school, and the program.

Each student is responsible for reading all materials distributed electronically to his/her UMHB student email address or through Canvas notifications/announcements. This will be the principal means of communication regarding program information. The university expects that every student will receive e-mail at his or her university email address and will read email on a frequent and consistent basis. A student’s failure to receive and read university communications in a timely manner does not absolve that student from knowing and complying with the contents of such communications.

Students will practice various therapeutic techniques in the course of required lab and, occasionally, lecture or classroom courses. In order to provide students both a complete perspective on various therapies and the opportunity to learn specific skills, students are expected to practice physical therapy techniques on one another. Any required participation in such exercises will be under the supervision of university faculty, instructors, or clinicians. A student who is uncomfortable with any classroom or lab exercise should discuss his or her concern with the instructor or DPT Program Director.

Additional student expectations are addressed in the Student Participation Agreement in Appendix C of this Handbook. Students are required to review and sign the Student Participation Agreement prior to the first class day of the first semester in the program.

Professional Behaviors

Professionalism is the conduct or qualities that characterize a profession or a professional person. Students in the DPT program must learn the professional behaviors that are required to be a competent and caring practitioner, in addition to academic knowledge and psychomotor skills. The Normative Model of Physical Therapist Professional Education states that behavior is equal in importance to knowledge and skill for a clinician. The professional behaviors development process begins upon matriculation into the DPT program, continues through graduation, and provides the foundation for exemplary career professionalism. Examples of expected professional behaviors for students include, but are not limited to, integrity, accountability, respectful consideration for others, punctuality, active participation in educational activities, personal and academic preparedness, contributing to a positive environment within and outside of the classroom, and professional appearance. Program faculty clearly communicate expectations to students through written materials and verbal instruction, and students will be evaluated and graded on their professionalism in both academic and clinical courses.

Academic Integrity

See Graduate Catalog at www.UMHB.edu.
Professional Appearance

Students are required to dress in a manner that maintains the image of a professional physical therapist while on campus and in the clinical setting. Students should routinely dress in a “business casual” manner for classes. Students may wear scrubs or UMHB DPT shirts with conservative shorts/pants.

Attire considered inappropriate for class includes: jeans with holes, bicycle or yoga pants/shorts, tights, athletic shorts, excessively short shorts, excessively short skirts or dresses, halter tops, off-shoulder or low-cut tops, transparent or translucent clothes, “flip-flops” or slides, tight, ill-fitting or revealing clothing. The trunk region should be covered at all times and in all body positions in classroom and clinical situations. Clothing which displays sexually suggestive materials, or advocates alcohol, drug use, profanity, tobacco, racism, or other concepts in conflict with Christian principles is strictly prohibited.

Faculty may specify that students dress in professional attire for special occasions, such as guest speakers, invited guests, or interaction with patients on campus. Students will be expected to wear dress pants/slacks and a DPT polo shirt or dress shirt (with tie for men). Women may wear a dress that presents a professional image. Student name tags should also be worn.

**Gross Anatomy Lab:** Students are expected to wear appropriate clothing during lab times, including long pants, close-toed shoes, and a lab coat. Additional personal protective equipment (PPE) and safety attire will be required at specific times, including apron, goggles, and gloves. Dress code specifics will be outlined in the syllabus and reinforced by the instructor.

**Physical Therapy Lab:** Students are expected to be prepared for lab during every lab session, which includes being properly dressed for lab activities. All students must wear loose-fitting gym shorts and a short-sleeved shirt during lab times. In order to expose the spine and shoulder for observation, palpation, etc. females will wear a two-piece swimsuit top or a sports bra with a back strap no more than 2 inches wide. Socks and athletic-type shoes are required. Lab attire should not be worn outside of the lab area. Students should obtain more than one set of lab clothes to ensure that one set is clean and readily available on campus at all times. Individual lab instructors may have additional requirements for lab attire during specific lab or classroom activities.

DPT Faculty reserves the right to make further recommendations or requirements for specific experiences.

Personal Appearance and Habits

Students are expected to demonstrate exemplary grooming and hygiene. Students will abide by the following guidelines at all times:

1. Hair must be neatly groomed or styled; extreme hairstyles or colors are not acceptable. Long hair should be tied back to avoid interference with lab or patient care activities.
2. Fingernails must be clean, well-maintained, and trimmed. Fingernails should not extend beyond the tip of the finger.
3. Beards must be well-maintained and neatly trimmed. Beards may interfere with the proper use of certain required safety equipment, such as particulate respirator masks.
4. Facial make-up should be professional. No body odors (including smoke) should be detectable.
5. Perfumes, colognes, and aftershaves should be used sparingly or not at all.

6. Jewelry in piercings other than the ears is prohibited during academic and clinical activities. Earrings are limited to no more than 2 per ear, and long earrings may not be worn. Any jewelry that might interfere with patient simulation or patient care should be avoided.

7. Students are not to eat/drink/chew gum while in clinical or laboratory settings.

**Attendance**

Course attendance and punctuality are expected behaviors and contribute to determining readiness for clinical practice. Students are expected to attend all special and regularly scheduled lectures, labs, and clinical sessions and be on time. If a student must miss class or be tardy due to extenuating circumstances, the student must notify the instructor prior to the start of class or clinical time. The instructor may be notified through email, voice mail on office phone, or voice mail on main DPT department number - (254)295-4940. Texting another student and asking him/her to notify the instructor is not acceptable professional behavior. Notification of the instructor does not excuse an absence or tardy.

Students with excused absences granted by the DPT faculty will be permitted to make up work that was missed and should coordinate with faculty as soon as they return from the absence. Students should request excused absences from faculty in advance unless extreme circumstances prevent advance communication.

Students should promptly contact the Student Disability Services office directly to request excused absences for serious medical conditions. Such approved disability accommodations are not applied retroactively.

Students should promptly contact the Title IX office directly to request excused absences for pregnancy.

Refer to the UMHB Graduate Catalog for additional information regarding absences.

**Please note that regular, on-time attendance in class and laboratory is an important component of professional behavior, and students may be penalized on the professionalism component of a course grade for being tardy or for non-participation in learning activities due to missing class.**

**Use of Personal Technology**

Use of personal technology devices for anything other than academic purposes in the classroom, lab, or clinical setting during instructional or patient care time is prohibited. Students must refrain from using cell phones, tablets, laptops and similar devices for non-educational purposes (i.e. messaging, games, email, web browsing) during class and clinical time. A faculty member may instruct the student to put the device away, or may direct the student to leave the classroom. The faculty member may choose the action deemed most appropriate for the situation.

If a student is expecting an emergency phone call, the student must notify the faculty member prior to the beginning of class or clinical time. The student must step outside of the room before answering an emergency phone call, or wait until a more appropriate time to return the call.
Social Media

Students should refer to the UMHB Student Handbook policy on the use of social media. Students in the Doctor of Physical Therapy program are expected to exercise discretion in the use of social media and respect the professional reputation of the student, faculty, and program. Students are not permitted to post any course related materials on any public website or social media or send such materials to another person within or outside of the DPT program (e.g. students in the same or different cohort, clinical instructors, friends). Course materials include, but are not limited to, photos/videos of instructor lectures or demonstrations; photos/videos of faculty, students, volunteers or others during any type of learning activity; homework assignments, quizzes, or examinations; any materials related to research projects. Discussion of tests and other course assessment techniques through these types of venues is also prohibited. Students who violate academic integrity standards through social media will be subject to appropriate sanctions under the Academic Integrity policy.

Student Use of Classroom/Lab Space and Equipment

Hardy Hall will routinely be open from 7:30 a.m. until 5:30 p.m. Monday through Friday. Students may use classroom and lab space for study and practice during those hours when no class is scheduled.

Under normal circumstances, students will have badge access to Hardy Hall and specific DPT lab areas when the building is closed.

Students will have access to equipment for learning purposes. **Students may not access or practice on any piece of equipment unless they have been instructed in its use by a faculty member.** Students are expected to return all equipment to storage and clean up the space used before leaving. Students may not remove any university/department equipment, supplies or learning models from Hardy Hall without written permission from a faculty member. If equipment or models are checked out, they must be returned at the designated time and in the same condition; otherwise, the student is responsible for the cost of that equipment.

Authorization by the university or by the clinical facility housing the gross anatomy lab is required to enter the gross anatomy lab. No unauthorized visitors are allowed. No individual (faculty, student, lab assistant) will provide access to the lab to any unauthorized individual, including but not limited to high school students, undergraduate students, graduate students in other programs, and relatives or friends of students. **This policy will be strictly enforced.**

Students are responsible for maintaining a clean and orderly space in the classrooms and labs. Students should leave the classroom or lab ready for use by the next group of students. Faculty members will provide specific information for classrooms and labs regarding the placement of chairs, tables, stools, equipment, and other lab or classroom items.

Students are not permitted in any faculty office or faculty designated space without a faculty member being present.

Beverages may be consumed in class but must be in a spill-proof container. Students are not to eat/drink/chew gum while in clinical or laboratory settings.
Grading Policy

The UMHB DPT Grading Scale is as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
<th>Interpretation of Grades</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>89.50-100</td>
<td>Excellent</td>
</tr>
<tr>
<td>B</td>
<td>79.50-89.49</td>
<td>Average</td>
</tr>
<tr>
<td>C</td>
<td>69.5-79.49</td>
<td>Below Average</td>
</tr>
<tr>
<td>F</td>
<td>Below 69.50</td>
<td>Failing</td>
</tr>
</tbody>
</table>

Syllabi for individual courses will outline the various elements that will be included to determine the course grade and the weight of each element.

Expectations for Examinations

If a student misses an exam due to unexpected brief illness or other extenuating circumstances AND notifies the instructor ahead of time, a make-up exam must be scheduled as soon as possible but no later than 1 week from the original date of the exam. If a student misses an exam and does not notify the instructor ahead of time, the student will receive a grade of “0” on the exam and will not be allowed a make-up exam.

Students who have chronic or serious health issues and wish to request accommodations should contact the Student Disability Services office promptly. Approved disability accommodations are not applied retroactively.

Students who are authorized to take exams in the UMHB Testing Center must comply with the Center’s testing rules and protocols as well as the program expectations outlined below.

Online Written Exams:

Online exams will be administered through ExamSoft and will be proctored in some format. Students will be informed by the instructor whether they may use any resources. For exams with no resources, the student will ensure that no resources are present and no items are on or under desks during the exam. Students must complete a 360⁰ and up/down view of the test taking area, including the desk surface, when the first question appears on the screen. The only items allowed on the desk during the exam are the device on which the student is testing and a bottle of water. No cell phones or smart devices, including watches, may be present during the exam. No caps, hats, or sweaters/jackets that open in the front are permitted. Students may not leave the testing area and no one else is permitted in the testing area during the exam time. Additional expectations listed below also apply to online lecture exams.

In-person Written Exams:

All cellular devices must be powered off (not on silent) and placed in backpacks. All books and personal items, including smart watches, must be placed in backpacks. No caps, hats, or sweaters/jackets that open in the front will be permitted during the exam. No items may be under desks during the exam. At least 5 minutes prior to exam time, students will place backpacks and other items in the front of the classroom. The only items allowed on the desktop during an exam are a laptop/tablet, a blank sheet of paper/dry erase board provided by the instructor, a pen or pencil, and a bottle of water. In order to begin lecture exams on time, students must be in seats with laptops open and exams downloaded 5
minutes before exam time. Students may not leave the room during an exam.

Any student who fails a written exam must, at a minimum, complete a test review with the instructor to review questions missed. Failure of 2 or more written exams will require the development of a remediation plan. The remediation plan will outline the expectations for remediation and the requirements to demonstrate improved performance.

**Online Lab Skills Assessments:**

Faculty may utilize a variety of formats to conduct lab skills assessments while classes are being conducted online. These may include, but are not limited to, written assessments, video demonstrations, and Zoom interactions. During this testing, students may not utilize any resources unless explicitly instructed to do so by the instructor. If the instructor allows resources, the student may utilize only those resources that have been identified by the instructor as acceptable to use. Use of resources not approved by the instructor will result in a grade of zero on the lab exam. Additional expectations listed below also apply to online lab assessments.

**On-campus Lab Skills Assessments:**

Lab skills assessments are designed by the instructor to assess student competence in performing clinical skills, and students are required to demonstrate competence in all skills for each course.

During the lab assessment, students may not bring any items into the exam prep area except those items approved by the course instructor. Cellular devices are not allowed and may not be carried in pockets. Smart watches are not allowed. Any student who enters the prep area with prohibited items (cell phone, smart watch, books, notes or other materials, other personal items), or who arrives late for the lab skills assessment without prior notification of the instructor, will fail the assessment with a grade of zero (0). A retake exam must be scheduled as soon as possible but no later than 1 week from the original date of the exam for a maximum score of 70%. A student who fails a lab skills assessment will be required to retake the assessment with a different patient scenario for a maximum score of 70%. A student who fails the retake skills assessment will receive a grade of zero (0) on the second failed attempt.

A student who fails both a lab skills assessment and a retake has not demonstrated competence in the skills being assessed; therefore, a remediation plan is required. The remediation plan will outline the expectations for remediation and the requirements to demonstrate skill competency. A student who is unable to demonstrate skill competency following remediation will be dismissed from the program.

**Program Progression and Retention**

**Requirements for Graduation**

In order to graduate from the DPT program, students must meet the following requirements:

1. Successfully complete all coursework with a grade of “C” or better and maintain a 3.00 GPA
2. Complete comprehensive examinations and any required guided study activities
3. Complete a professional portfolio presentation
4. Present research group findings in an approved format
5. Complete a total of 60 hours of volunteer/service learning activities approved by the program
6. Complete the IPE Core Curriculum and at least 2 IPE electives
Academic Performance and Progression

The purpose of this policy is to provide clear expectations on requirements related to academic performance and progression. The program will evaluate the progress of DPT student attainment of didactic and clinical competencies, and will collaboratively promote successful academic progression through remediation when needed.

Students in the DPT program must maintain enrollment in all course and clinical education experiences listed in the curriculum outline for each semester in order to proceed through the curriculum and progress toward graduation from the program. All courses in each semester are prerequisites for the following semester and for continued enrollment in the program.

The physical therapy program adheres to the requirements of the university regarding minimum academic standards for graduate students. A grade point average (GPA) of 3.00 or above must be maintained throughout the program.

Academic Progression Levels

At the end of each semester, the program will designate each student’s academic standing in the program.

Good Standing:
Students in good standing in the program are demonstrating satisfactory progression in achieving competencies and demonstrate professionalism commensurate with their stage of education.

Satisfactory progression and professionalism can be further defined as:
- Cumulative and semester GPA of 3.0 or higher
- Absence of serious and/or multiple academic warnings or academic alerts
- Absence of serious and/or multiple remediation plans

Academic Probation:
A student with a semester GPA of less than 3.00 will be placed on probation. In addition, a student whose cumulative GPA is below 3.00 at the end of a semester will be placed on probation. Any physical therapy student placed on probation will be required to meet with the faculty advisor and program director to develop an Individualized Remediation Plan. During the subsequent semester, a student must achieve a semester GPA of 3.00 or better and improve the cumulative GPA to 3.00 or better in order to be removed from academic probation. Two consecutive terms of enrollment with a semester or cumulative GPA of less than 3.00 will result in dismissal from the program. A second incidence of probation will also result in dismissal from the program.

The following will be required for a student to be removed from probation to good standing:
- Semester GPA of 3.0
- Cumulative GPA of 3.0

Any student on probation with a cumulative GPA that falls below 3.0 will not be assigned to a full-time clinical experience. During the semester following the grading period in which the cumulative GPA dropped below 3.0, the student will enroll in academic coursework but will not be allowed to enroll in
Professional Experience I, II, or III. The student will enroll in an Independent Study course that will provide learning experiences based on clinical scenarios. The specific learning experiences for the Independent Study course will be determined by the academic advisor and the student. The Independent Study course will not substitute for the full-time clinical experience. If the student’s cumulative GPA is 3.0 or higher at the end of the semester, the student will be assigned to the missed full-time experience (I, II, or III) during the subsequent semester. In order to complete the remaining clinical experiences, the student’s graduation will be delayed at least one semester. If the student’s cumulative GPA remains below 3.0 at the end of the semester, the student will be dismissed from the program.

**Student Remediation Process**

**Academic Alert:**

Written academic alerts may be given to a student at any point during the student’s enrollment. Academic alerts are provided to support and assist the student in academic success, when his/her academic performance in one or more areas requires attention. Outcomes and specific action steps are included in the Academic Alert (Appendix D).

**Academic Warning:**

Written academic warnings may be given to a student at any point during the student’s enrollment. Reasons for academic warnings include but are not limited to: academic probation (see below), elevation of academic alert, failure to comply with a remediation plan, violation of program policies or procedures. Outcomes and specific action steps are included in the Academic Warning (Appendix E).

**Individualized Remediation Plans:**

Individualized Remediation Plans are created to specifically address areas where a student needs improvement to attain, maintain, or re-attain good academic standing in the program. Students can be placed on an Individualized Remediation Plan during a semester or following a semester of low performance (whether or not the low performance resulted in academic probation). Students may be recommended for individualized remediation for a variety of reasons, including but not limited to: unsatisfactory grades, professional performance issues, academic alerts, academic warnings, or academic probation. The Individualized Remediation Plan may be recommended by a faculty member, the DCE/ADCE, or the program director, and must be approved by the program director.

An Individualized Remediation Plan is required when a student is issued an Academic Warning, but a student may be placed on an Individualized Remediation Plan at other times as well. Once approved, the program director or DCE/ADCE will oversee the Individualized Remediation Plan or will assign its oversight to the student’s faculty advisor or other appropriate faculty member.

If the student fails to complete remedial work, if the remediation is not successfully completed within the specified period of time, or if the student fails to attain/re-attain academic good standing, the student may be dismissed from the program.

The Committee for Student Engagement and Retention will be informed when a student is placed on an Individualized Remediation Plan in order to track student progression in collaboration with the faculty member overseeing the Individualized Remediation Plan. The outcomes will be documented and provided to the Committee as notification whether the student successfully completed the Individualized Remediation Plan.
Violation of Program Policy

Students who violate DPT program policies, rules and procedures will be subject to sanctions, remediation, dismissal from a clinical facility, and program dismissal.

Incidents of student misconduct as outlined in the UMHB Student Handbook will also be referred to the UMHB Dean of Students.

Dismissal from the Program

Students may be dismissed from the program for academic or non-academic reasons. Academic reasons include, but are not limited to, academic dishonesty, academic performance that does meet program standards including Professional Behaviors, being placed on academic probation more than one time, failure of one DPT academic course (grade less than 70 or less than “C”), failure to successfully complete required remediation, or failure of more than one full-time clinical experience (grade of NC). Students may appeal academic decisions by following the Academic Appeal Process. Reasons for non-academic dismissal include, but are not limited to, student misconduct. The policies, expectations, and procedures which apply to matters of student conduct are contained in the UMHB Student Handbook.

Readmission to the Program

A student dismissed from the DPT program due to academic probation or failure of one DPT academic course may apply for readmission to the program.

Applying for readmission does not guarantee that a student will be re-admitted. In order to apply for readmission consideration, a student must submit a re-application form for the DPT program by the deadline listed below:

- Fall re-entry deadline: February 1
- Spring re-entry deadline: July 1
- Summer re-entry deadline: November 1

The student must also submit a letter to the program director that includes a self-assessment of why he/she did not successfully complete the course(s), a description of how he/she has or will prepare for re-entering the program including remediation, and why student believes he/she will be successful when completing the course(s) for a second time. The DPT faculty is responsible for making the decision regarding student readmission to the program.

A student dismissed from the DPT program for student misconduct, academic dishonesty, failure of more than one DPT academic course, or failure of more than two full-time clinical experiences is not eligible to apply for readmission to the program.

Leave of Absence

Under extenuating circumstances, a leave of absence may be granted. Students should understand that a leave of absence will likely delay progression through or graduation from the program. If approved, a leave of absence will typically be granted for a maximum of 12 months. If a student wishes to request a leave of absence as a medical/disability accommodation, he/she must contact the Disability Services Office. If a student wishes to request a leave of absence for pregnancy
accommodation, she must contact the Title IX Office. In these situations, the Office of origin will evaluate, and if applicable, coordinate the leave with the program director.

If a student wishes to request a leave of absence for any other reason, he/she must submit the request in writing to the DPT Program Director. Requests should be submitted within 30 days prior to the requested leave, or as soon as practicable. The university does not guarantee that the student’s place in the cohort will be available upon return to the program.

The DPT Program Director, in consultation with the Dean of the School of Health Professions and other appropriate faculty/staff, will review the request and will notify the student in writing of the decision as soon as possible, typically within 2 weeks of the request. All university policies regarding withdrawal, grades and refunds will apply.

A student preparing to return from a leave of absence must request reinstatement in writing to the office where the request was originally made ( Disability Services, Title IX, or DPT Program Director) as soon as is practicable. The program director, in consultation with the Student Engagement and Retention Committee, will make an academic determination whether the student should re-enter the program at the point when the leave of absence began, at some other appropriate point, or whether the student must submit a program readmission application and enter the program at the beginning. The program director’s decision shall be made on the basis of the length of the absence, the student’s academic performance prior to the absence, the point in the program at which the absence began, and any other relevant academic criteria.

If a leave of absence is granted for a contiguous period of time within a single semester, the amount of leave requested will be reviewed to determine if independent study format is a viable option. If the leave of absence is requested for an entire or significant portion of a semester or spanning more than one semester, the next opportunity for reinstatement will be the beginning of the next academic year’s sequence.

If a student who takes leave either (1) did not request a leave of absence as outlined in this policy or (2) elected to take leave although the leave request was denied, the student will be required to reapply for program admission.

**Academic Appeals Process**

See Graduate Catalog for the Appeal process at www.UMHB.edu.

**Human Subjects/Volunteers in Program Activities**

Subjects for demonstrations and activities in the classroom or laboratory setting have the right to informed consent and must complete a General Liability Waiver or General Liability Waiver for Minor form prior to participation. Course faculty are responsible for ensuring completion of the appropriate forms for individuals invited to participate in a course or lab activity. Completed forms are maintained by the program.

Policies and procedures related to the use of human subjects in research falls under the purview of the UMHB Institutional Review Board (IRB). Prior to beginning any research with human subjects, a research proposal and application must be submitted to the IRB. Subject information is confidential and must be properly protected.
Policies regarding patient/client rights within the clinical setting are established by that institution, and should allow the clients to refuse to participate in clinical education.
Philosophy of Clinical Education

The UMHB DPT program considers Clinical Education to be an essential part of the curriculum and overall development of the student physical therapist (SPT). It is the program’s desire to work with clinical faculty and facilities to provide clinical education opportunities that support the mission of our program. Clinical education provides each student with the opportunity to shape and develop their patient care skills in an active treatment environment under the guidance of practicing clinicians. Through the integration of scientific background knowledge, problem solving, communication and interpersonal skills, students learn to make professional decisions regarding physical therapy. Students learn to develop their professional judgment and application of critical thinking within a nurturing environment that provides them the opportunity to seek advice from practicing clinicians.

Arrangement of Clinical Experiences

In preparation for clinical practicum experiences, students are exposed to the clinical setting through the Cru Community Clinic on campus. Students begin in the clinic during the 1st semester in the program, where they observe second-year students providing patient care under faculty supervision. Beginning in the 2nd semester of the program, students begin to work with clinic patients with gradually increasing patient care responsibilities over the next semesters.

The clinical practicum experiences are 32 weeks in total. The initial clinical rotation is a part-time experience of 80 hours and will take place during the fourth semester of the program. The primary intent of this rotation is to provide the student with an opportunity to begin to experience the clinical setting with the knowledge and skills they have obtained during their first year in the program. The 3 full-time clinical experiences are respectively 8, 11, and 11 weeks in length. They occur after the majority of the didactic curriculum is complete. Patient management courses are completed prior to the final 3 clinical placements. The program requires each student to complete one outpatient and one inpatient fulltime clinical placement.

Clinical Facility Criteria

Clinical facilities will be determined and retained by their delivery of high-quality patient care services, sensitivity to student needs, reliable acceptance of students for clinical education experiences and regular and timely communication with the UMHB DPT Program. Clinical facilities in geographically appropriate areas and clinical sites that provide distinctive opportunities for students to practice in specialized areas of physical therapy will be developed when such additions will enhance student opportunities. The program aim is to assure that each student is exposed to a variety of high-quality clinical settings; therefore, it is imperative to retain clinical experience sites that have historically provided outstanding clinical education opportunities.

Clinical Facility Considerations

1. Facility must hold appropriate licensure and accreditation by local, state, or federal entities.
2. Staffing must be adequate for the patient load and types of disabilities encountered.
3. Types and numbers of patients are adequate to meet the general or specific needs of the students.

4. Administration’s attitude toward clinical education, inclusive of recognition of the time and effort required by the staff, promotes the clinical education program.

5. Atmosphere is conducive to learning as demonstrated through the availability of supervision, space, equipment, and educational resources.

6. Facility demonstrates incorporation of physical therapy with other services in the facility.

7. Personnel policies encourage continuing education and staff willingness to participate with clinical education.

8. Facility must be able to establish a written clinical affiliation agreement with the UMHB DPT Program.

NOTE: A facility cannot be used for a student’s clinical experience unless an executed clinical affiliation agreement between the university and the facility is on file and current.

Establishing a Clinical Education Site

Students may propose clinical facilities to be considered for potential addition to existing clinical education sites. The acquisition must be based on the needs of the clinical education program as a whole. Students wishing to suggest a site should speak to the DCE, ADCE, or other designated faculty member. The student should provide the information necessary on the Clinical Facility Information Form. Ideally, the facility should be located within central Texas and/or in close proximity to previously established active clinical facilities. The clinical facility must meet the clinical facility criteria previously listed. Final decisions regarding the use of clinical facilities for student clinical experiences are at the sole discretion of the university.

Steps for Initiating Potential Clinical Education Sites

To initiate the process for attaining new clinical facilities, students are to speak with the DCE or ADCE. Upon approval, the student may contact the site, ask for the appropriate contact information for the SCCE or rehab director/owner if the SCCE is not available or the site does not have a designated SCCE. The Clinical Facility Information Form (Appendix F) should be used to document the site information and appropriate contact information. This form should be given to the DCE or ADCE.

The DCE or ADCE will contact the SCCE/Rehab director to learn more about the site and to discuss how to proceed. Sites should be willing to accept future UMHB students, not just the student making the request. The DCE or ADCE will collect information necessary to determine if the site is a good match for the DPT Program and its students. If the site is a good match, a standard UMHB clinical facility agreement will be sent to the SCCE. If the agreement is acceptable, it is signed and returned to UMHB. If the facility requires changes to the agreement or has its own agreement, the amended agreement may require additional review by UMHB’s legal department prior to signing.

Program Responsibilities to the Clinical Facility (“Program”)

1. Assure that all students selected for participation in the Program have satisfactorily completed all portions of the University’s curriculum that are a prerequisite for participation in the Program.

2. Develop criteria for the evaluation of the performance of University students participating in the Program and provide those criteria, with appropriate reporting forms, to the Facility personnel and University personnel who are responsible for supervising those students.
3. Assign grades to students participating in the Program.

4. Inform all University students and personnel participating in the Program that they are required to comply with the rules and regulations of the Facility while on the premises of the Facility and comply with the requirements of Federal and State laws and regulations related to Facility, including without limitation, privacy laws.

5. Provide information requested by Facility related to students participating in the Program unless prohibited by Federal or State law. The University shall provide the Facility with name(s) of each student assigned to the Facility, as well as scheduled assignment dates (to be agreed upon by University and Facility).

6. Assign a faculty representative to coordinate the Program activities at the Facility, in collaboration with the Facility.

7. Provide the Facility with the current curriculum, clinical experience period and dates, course objectives, and syllabus of the Program, as well as all forms regarding students’ clinical experience and instructions for completion of these forms, if applicable.

8. Maintain a commercial general liability insurance policy and a professional liability insurance policy each in the amounts of $1,000,000 each occurrence and $3,000,000 in the annual aggregate for its personnel and students who participate in the activities of the Program.

9. Other responsibilities may be specified in the fully executed affiliation agreement between the Program and Facility. It is each entity’s responsibility to adhere to specific requirements.

Responsibilities of Clinical Faculty

The UMHB DPT Affiliation Agreement outlines the responsibilities for each entity involved in the clinical education experience. Below are specific expectations of the Site Coordinator of Clinical Education (SCCE) or designated individual, and the Clinical Instructor (CI). The clinical education site will designate one member of the professional physical therapy staff to serve as the SCCE or fulfill the SCCE responsibilities. The SCCE is responsible for assigning a specific CI for each PT student.

**Supervision Guidelines and Models:** UMHB DPT program supports planned and strategic clinical experiences applicable for the level of knowledge, previous clinical experience and learning style of each student. Weekly objectives agreed upon by the student and CI assist with formative evaluation, tracking progress and can be adjusted as needed. Consistent constructive and affirmative feedback strengthen student learning and help clarify CI expectations. UMHB will provide information, forms and tools for use during the clinical experience to help streamline expectations.

UMHB believes each facility, SCCE and CI should explore use of a variety of models to meet the student and clinical site expectations for clinical education. While most students work 1-on-1 with a CI, alternative models may include 1 CI to 2 or more students, 2 part-time CIs to 1 student, or the use of PT residents and fellows to assist the CI in working with students. A student may also rotate between 2 services at the same facility, such as pediatric and adult.
**SCCE (or designated individual) Responsibilities**

1. Maintain files containing curriculum content, insurance forms, physical forms and contract information for the UMHB DPT program.

2. Remain current with changes and trends in clinical education, and ensure that clinical faculty take advantage of courses and seminars offered by affiliating programs.

3. Ensure that each therapist chosen as a Clinical Instructor (CI) meets the minimum requirements, which include:
   a. holding current licensure in the state in which employed
   b. employment as a licensed physical therapist for one year
   c. evidence of active participation in formal and/or informal continued education, and
   d. demonstrated ability to communicate strengths and weaknesses, both orally and in writing.

4. Respond in a timely manner to requests for student placement and confirmation of student placements. For multi-site facilities, maintain communication with the various sites to determine appropriate assignment of students.

5. Provide regularly updated information about the facility to the DCE or ADCE; revise CSIF, Clinical Site Information Form, or Clinical Facility Update Form as needed to keep information accurate and current.

6. Ensure that each PT student receives an orientation to the facility, including facility policies and procedures relevant to student training, prior to the student participating in patient care.

7. Ensure that students receive communication from the facility at least 2 weeks prior to the clinical experience.

8. Request any additional student records other than TB skin test and Hepatitis B vaccine (such as MMR, physical exam, background checks etc.) from the student, DCE, or ADCE.

**CI Responsibilities**

1. Complete free online webinar about utilizing the CPI, which is available through the APTA. Upon successful completion the CI will receive 2 hours of continuing education through the APTA. This does not need to be repeated when supervising subsequent students. The CPI is used only during full time clinical experiences.

2. Organize and plan the student’s program to include clinical work, in-services, clinics, rounds, and other learning experiences as available (sample learning assignments can be found in Appendix G).
   a. Establish a client caseload and assist in formulating the student’s schedule.
   b. Introduce students as such to patients/clients and provide access to pertinent background information.
c. Assure that individual patient has the opportunity to opt-out of the clinical education experience.

3. Provide appropriate supervision for each student and arrange for supervisory coverage by another PT during any CI absence.

4. Deliver clinical supervision and instruction in the form of assessment and intervention demonstration utilizing hands-on techniques.

5. Provide quality learning experiences in the areas of patient care, research, and administration. Become familiar with the student’s curriculum and level of education/training by reviewing information provided by the academic institution prior to the student’s arrival.

6. Discuss the clinical education goals and expectations of the student for the facility including those of the academic institution. Introduce student to forms and procedures of the physical therapy facility.

7. Offer an advantageous learning environment that encourages the student to ask questions and share insights. Provide opportunities for student demonstration of his/her level of understanding of the theoretical concepts underlying the interventions. Provide timely feedback through constructive criticisms and guidance for improvement. Although not required, written feedback to the student beyond the use of the CPI at midterm and final is strongly encouraged, especially for students who are experiencing difficulty.

8. Review and discuss the student’s examination and intervention techniques, treatment rationale, long-term and short-term objectives. Constructively review documentation of examinations, consultations, progress/daily notes and justifications for insurance coverage of recommended equipment.

9. If a student experiences academic difficulty during a clinical experience, the SCCE, CI, and DCE or ADCE will collaborate to develop a learning contract or remediation plan.

10. Perform midterm and final summative evaluations of the student’s performance utilizing the CPI or other assigned assessment tool. Encourage open and authentic communication with the student in reviewing the evaluations and comparing it to the student’s self-evaluation.

11. Communicate with the DCE or ADCE at UMHB as needed. Provide specific feedback to DCE, ADCE, or faculty about the student’s performance, and include feedback about perceived strengths and weaknesses of the academic program concerning clinical education.

12. Submit the completed CPI or other assigned assessment tool to the DCE or ADCE at UMHB at the conclusion of the clinical experience.

Rights and Privileges of Clinical Faculty

Clinical faculty members of the UMHB physical therapy program have the following rights and privileges associated with their voluntary participation in PT clinical education:

1. Continuing Education or Competency Units (CCUs): Approved by the state of Texas for CIs of full-time clinical rotations as follows:
a. 5 CCUs for 6-11 weeks of one full-time clinical experience (240 - 440 hours)
b. 10 CCUs for 12 weeks or longer of one full-time clinical experience (480+ hours)
c. Maximum of 10 CCUs for PTs per renewal period. Contact DCE/ADCE for more information.

2. **In-Service Presentations:** The DCE, ADCE, or other faculty may provide in-service presentations on site at clinical education sites (when mutually appropriate) for clinical instructor development.

3. **Clinical Instructor Presentations and Training:** The UMHB DPT Program will host open clinical instructor workshops at the university periodically for clinical instructor development. Such courses will provide continuing education for those clinicians serving as clinical instructors.

4. **Consultation** in planning and implementing clinical experiences.

5. **Student-led in-services or special projects** on a topic agreed upon by the CI to meet the needs of the affiliating site.

6. Potential **opportunity to serve** on the DPT Advisory Committee and/or DPT admissions interviews.

7. Potential **consultation and/or collaboration** with UMHB DPT faculty members on research projects.

8. Potential **requests to participate in labs and lectures in the curriculum.**

**Texas Consortium for Physical Therapy Clinical Education**

The University of Mary Hardin-Baylor DPT Program is a member of the Texas Consortium for Physical Therapy Clinical Education. The Primary purpose of this group is to coordinate all aspects of physical therapy clinical education in Texas. The Consortium functions with the financial support from the participating Universities. The Consortium has reduced the time, effort and cost of maintaining quality clinical education for the state's physical therapy students. In addition, The Consortium provides continuing education opportunities and training workshops for Clinical Instructors as well as SCCEs and DCE/ADCEs from all parts of the nation.

**Texas Consortium Awards**

Each year the consortium honors several Outstanding Clinical Educators from around the state who are APTA members, have an active contract with at least two Consortium programs and have taken students for 2 or more years. The winners are announced at the TPTA Annual Conference. Sites may nominate themselves for the Exemplary Clinical Education Site award, honoring a department or clinic that has provided outstanding, innovative clinical education experiences for students. Applications will be posted on The Texas Consortium website when applicable.

**Clinical Instructor Certification and Credentialing Courses**

The Texas Consortium provides continuing education opportunities and training workshops for Clinical Instructors as well as Academic Coordinators of Clinical Education from all parts of the nation. The CI Certification Course consists of two parts: Part I is a six-hour online course and Part II is a half-day onsite/virtual course. CCUs are given. Part I must be completed prior to taking Part II. CI Certification courses are given throughout the state each year and at TPTA Annual Conference. To check on
upcoming courses or to register for a course, see The Texas Consortium website, www.TexasConsortium.org.

The American Physical Therapy Association also provides a 2-day, CI Credentialing course called the Credentialed Clinical Instructor Program (CCIP) and a subsequent Advanced CI course. UMHB DPT Program will periodically host a credentialing course for the CI/CCCEs affiliated with our clinical education program.

The Student Physical Therapist (SPT)

Definition of Student Physical Therapist (SPT)

A student physical therapist is a graduate-level learner who participates in clinical education to practice what he or she has learned in the Doctor of Physical Therapy Program. The student physical therapist is required to introduce him/herself as a student and sign all documentation with the designation of SPT during clinical rotations. A patient has the right to refuse treatment by an SPT and/or participation in clinical education practices.

Selection of Clinical Experience/Practicum

Students complete a comprehensive survey to provide information on their clinical preferences. The DCE, ADCE, or designated faculty is responsible for assigning the clinical placements and will use the available requests, student interests, and curriculum design to determine the assignments. Clinical sites that offer first come first serve slots will potentially be assigned as needed by the DCE or ADCE.

Rescheduling a Clinical Experience

In the event a student is unable to begin an arranged clinical experience, the student must submit a written request to the DCE, ADCE or designated faculty, along with proper documentation, prior to the starting date to request rescheduling of the rotation. Rescheduling of the postponed rotation will be at the discretion of the DCE, ADCE, or designated faculty and potentially the clinical facility. Assurance of the same clinical placement is not feasible if rescheduling occurs.

Student Responsibilities Prior to Clinical Experiences

1. INTRODUCTION LETTER: The student is responsible for sending a letter or email of introduction to the designated individual at the assigned clinical facility prior to start date.

2. STUDENT PROFILE: The student is responsible for the completion of a Student Profile, which is part of the online database system used by UMHB DPT Clinical Education. The Student Profile seeks to give the prospective CI additional information about the student, which may not be apparent in the letter of introduction.

3. CLINIC CONTACT: The student is responsible for completing a telephone or email contact with the designated individual at the assigned clinical facility two to four weeks prior to their scheduled arrival at the site.

4. STUDENT GOALS: The student is responsible for developing a list of personal and professional goals prior to each clinical experience, and the student is encouraged to share the list with the clinical instructor. The purpose of this assignment is to have the student reflectively review his/her clinical education needs and take an active role in determining objectives for each clinical experience related to
individual professional goals.

Prerequisites for Participation in Clinical Education
(including Health and Wellness Requirements)

1. ACADEMIC PERFORMANCE: Students must have earned a grade of C or higher in all physical therapy coursework. Any student on academic probation due to an overall GPA below 3.0 may not enroll in a fulltime clinical education experience.

2. REGISTRATION: Students must be officially registered for clinical education courses before they can begin a clinical education experience/practicum. Each student’s name must appear on the class roster in order to begin the clinical experience/practicum.

3. INFORMATION ABOUT CLINICAL EDUCATION SITES: The DCE, ADCE, or designated faculty will inform students of the location of information related to each clinical facility. Students should review available information related to their assigned clinical site. It is the student’s responsibility to respond to any specific request made by the facility that has been approved by the program. If a student has not been contacted by their CI or the facility 2 weeks prior to the clinical experience, the student should contact the facility or CI and notify the DCE/ADCE.

4. REQUIRED PAPERWORK/TESTING: The student must meet immunization and other requirements of the school and clinical facility as set by the clinical affiliation agreement. Students will undergo a criminal background check at companies/providers approved by UMHB prior to their first semester in the program and prior to the 1st clinical experience at the student’s expense. In addition, students will undergo a drug screen at companies/providers approved by UMHB prior to their first clinical practicum at the program’s expense. If a clinical facility requires a more recent criminal background check or drug screen, the student is responsible for the cost of providing these to the clinical facility, with a copy to the DPT Program Director.

   a. Proof of health insurance (if required by clinical facility), biographical data forms, current CPR certification, and results of current TB tests must be submitted by the date assigned by the DCE, ADCE or designated faculty.

   b. Up-to-date immunizations (see chart page 12).

   c. Both CPR certification and TB tests must be current through the final day of the clinical experience or internship.

5. HIPAA AND OSHA TRAINING: Students are required to complete training on OSHA, Universal Precautions, Blood Borne Pathogens, body mechanics and HIPAA regulations. This will be scheduled for DPT students prior to clinical placements.

   a. Students failing to complete the scheduled training will be required to provide evidence of completion of alternative training.

   b. Students who do not complete or provide documentation of appropriate training will not be eligible to attend their next clinical experience.

NOTE: The DCE, ADCE or designated faculty member may cancel a student’s placement at a clinical facility if the student fails to submit all the required documentation in a timely manner.

Background, Health and Wellness Requirements for Students
Background Check | Completed prior to entrance to program, prior to 1st clinical, and any site-specific requirements
--- | ---
Drug Screen | Completed prior to 1st clinical and any site-specific requirements
CPR Certification | Must be current through end of clinical rotation
HIPAA Training | 1st year courses
Blood-Borne Pathogens Training | 1st year courses
OSHA Training | 1st year courses
Liability Insurance | Provided by UMHB, see page 12 for details
Proof of Medical Insurance | Only if required by the clinical facility, HIGHLY RECOMMENDED

NOTE: If a clinical facility has other specific requirements regarding background, health/wellness and immunizations, the student will be provided with that information by the Program and is responsible for being in full compliance with those requirements.

Student Responsibilities During Clinical Experiences

The following are requirements for the students during the clinical experience. This list is not inclusive and subject to change.

1) **STUDENT PHYSICAL THERAPIST**: The student must identify him/herself as a “student physical therapist” to any patient with whom he/she is involved in care. The SPT must ensure that the patient understands the patient’s right to decline participation in clinical education practices.

2) **HOUSING & TRAVEL DURING CLINICAL EXPERIENCES**: All arrangement and expenses pertaining to housing and travel during clinical experiences is the responsibility of the student. UMHB DPT program will provide the student(s) with any information available regarding site-specific housing. When possible, student preferences are taken into consideration for determining clinical rotation selections but specific selection cannot be guaranteed.

3) **UPDATE SITE AND CI INFORMATION**: The student is to update this information during the first week in the clinic for review by the DCE, ADCE or designated faculty. The update should include the contact information of the CI and student, working hours, department location and dates/times when the CI is not available. This information is used to schedule midterm visits or phone calls. Appropriate signatures may be required by the CI or SCCE at the site.

4) **PERIODIC UPDATES**: Each student will be required to submit scheduled updates or self-assessment of his/her own performance to the DCE, ADCE or designated faculty. The form does not have to be reviewed by the CI. The CI is encouraged to utilize a weekly written feedback tool to increase student accountability and tracking toward predetermined objectives, as well as aiding in early identification of concerns.
5) **CONFIDENTIALITY:** It is the policy of the UMHB DPT Program that all patient/ information is treated with the appropriate level of confidentiality and adheres to the clinical facility’s policies, which may include appropriate HIPAA regulations. This includes, but is not limited to, information shared during class presentations, labs and lectures. Patient releases should be obtained for images/videos and any information to be used in the academic and/or research setting.

   a) Students are required to abide by the clinical facility’s policy on confidentiality.

   b) Students who believe they have witnessed a violation of the patient confidentiality policy should contact their CI/SCCE or the course instructor, depending upon the setting of the incident.

   c) The CI/SCCE or course instructor should discuss the situation with the party(s) involved and inform them of the facility’s policy on confidentiality.

   d) This discussion should be documented and placed in the appropriate file at the clinical facility and in the clinical education file in the academic setting.

   e) If a student on a clinical experience is involved with repeated violations, the CI/SCCE should report the information to the DCE, ADCE or designated faculty member.

   f) The DCE, ADCE or designated faculty member and the CI/SCCE will discuss an appropriate plan of action for repeated violations in the clinical facility.

6) **PROFESSIONAL BEHAVIORS:** Students are expected to demonstrate professional behavior at all times during clinical experiences. Considerations related to professional behavior include, but are not limited to:

   a) **CELL PHONES:** Cell phones should be turned off while in the clinical environment and stored away from the patient care areas. If the cell phone is used during a break, it should be turned back off at the end of the break.

   b) **SOCIAL MEDIA/TECHNOLOGY:** Students should exercise extreme caution when using electronic and social media. Patient or clinical circumstances should not be discussed through these or other inappropriate means.

7) **MIDTERM CONFERENCE:** The DCE, ADCE or designated faculty member may utilize a variety of methods, including site visit, video teleconferencing, phone call, and/or email communication, to perform periodic and midterm conferencing. The student and the CI will be interviewed about the ongoing clinical experience.

8) **STUDENT SELF-ASSESSMENT:** All students are required to complete a self-assessment using the Clinical Performance Instrument (CPI) at the midterm and final points of the fulltime clinical experience (see Appendix H). Program faculty believe that the practice of self-assessment during clinical experiences will contribute to the development of entry-level physical therapists capable of ongoing and regular self-assessment.

9) **STUDENT EVALUATION OF THE CLINICAL FACILITY:** The student will complete the APTA’s Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction at the end of the rotation. Students are encouraged to share the information with the CI(s) following the final evaluation.
This form affords feedback to the site about the clinical experience and the form also provides information to future UMHB DPT students and the academic faculty about a specific site. The form will only be shared with other students after the approval of the DCE, ADCE or designated faculty member.

10) **ATTENDANCE REQUIREMENTS:**

   a) Attendance during clinical practicums and professional experiences is mandatory. Absence for *any reason* must be reported to DCE, ADCE or designated faculty and CI at the facility *prior to* time of absence. Throughout the entirety of the clinical education experiences a student will be allowed to miss no more than a total of 5 days for illnesses, emergencies, and unforeseen circumstances. Any additional days missed must be made up during that clinical experience or during a later rotation as determined by the CI/SCCE and DCE, ADCE or designated faculty.

   b) When the student cannot attend clinical on a day that it is scheduled, the student must immediately notify the clinical facility as well as the faculty member designated as the course instructor. The student should obtain a telephone number and discuss the procedure of notifying the clinical facility and faculty for unexpected absences. Failure to notify the clinical facility prior to the beginning of the scheduled clinical day is unacceptable and may place the student and clinical placement in jeopardy. The student should notify the course instructor as per the course guidelines. The student should then present the faculty with a plan to complete the lost clinical time within the DPT Program’s rules regarding absence limitations. The student must complete the hours within the prescribed time frame. Failure to complete clinical hours will result in an incomplete for the course. Students are not to share or switch clinical days/times with other students.

   c) In the event of inclement weather students are to follow the attendance policies of the facility to which they are assigned. It is expected that students will use their best judgment in regards to their own personal safety.

11) **INSURANCE SPECIFIC GUIDELINES:** It is the ultimate responsibility of the student to adhere to any student supervision guidelines that may be imposed on the clinical facility by various insurance companies or provider networks. This should be clarified during orientation to the facility or possibly prior to beginning the clinical experience.

   Medicare Guidelines: Students will likely have clinical experiences at clinical facilities that accept Medicare and are therefore subject to Medicare rules and regulations. Students have been instructed in Medicare regulations during academic coursework regarding the student role under Part A and B. For up-to-date Medicare guidelines, refer to the APTA document: Medicare Guidelines Regarding Student Supervision. It is expected that all Clinical facilities and CIs adhere to appropriate rules and regulations regarding student patient contact. Please contact the DCE, ADCE or designated faculty if you need assistance with clarification on Medicare guidelines.

12) **INCIDENTS AT CLINICAL FACILITY:** DPT Program students involved in any accident or other incident in the clinical facility which could adversely affect patient care should report the incident promptly to the clinical facility and the university faculty member for the course. The faculty member must be informed of any written report for which the student is responsible prior to the student leaving
the clinical facility. The student and faculty should also document the incident for the student’s clinical evaluation.

**Basic Problem & Conflict Management between Student and Clinical Facility**

If the student feels that an experience is not meeting expectations and needs, it is the student’s responsibility to take positive action. Each student has the responsibility to seek help in resolving a problem, either from the CI/SCCE at the facility or from the DCE, ADCE or designated faculty member. Students on clinical experiences may contact the DCE, ADCE or designated faculty during the evenings or weekends (cell phone number will be provided).

Identification of the problem is the first step in the process, a step that definitely requires considerable thought and objectivity and which may require assistance. Communication is vital.

In the event that the persons involved agree that the conflict cannot be resolved, the student may be removed from the site. The student will be reassigned to another clinical experience site as soon as an appropriate clinical facility can be secured. In this occurrence, a grade of IP (in progress) may be assigned until the student completes the clinical experience at the new clinical facility.

**To avoid unnecessary conflicts of interest, students should not participate in clinical experiences at clinical facilities where they have volunteered or worked in the past five years. Students will not be assigned to a clinical facility where a relative is employed within the physical therapy department of that facility.**

**Steps to Conflict Resolution between Student and Clinical Facility**

Students that perceive a conflict has happened or is developing with a staff person, clinician or CI should proceed in the following suggested manner:

1. Approach the person involved and ask to have a meeting in private or during office hours.
2. Come to the meeting prepared with a list of facts (avoid vague perceptions or opinions).
3. Be respectful and listen, allow the person to complete their point before commenting.
4. The meeting should involve forming a plan of action for both parties. Conflicts may not resolve in one meeting and a certain amount of compromise might be required to come to a successful resolution.
5. Contact the DCE, ADCE or designated faculty to make them aware of the situation. They may become involved if requested or if they feel it is appropriate.

If a student believes that he/she is experiencing unlawful discrimination or harassment at a clinical facility, he/she should immediately report such concerns to UMHB through the university’s published reporting system, as outlined in the UMHB Student Handbook.

**Dismissal from a Clinical Facility**

A student can be dismissed from a clinical facility by their own request, the request of the CI/SCCE, or determination of the DCE, ADCE or other designated faculty. The appropriate action will be determined by the university based on the cause of the dismissal from the clinical facility as well as the totality of the student’s conduct and performance.
Evaluative Criteria

Clinical Education Grading Criteria
Clinical courses in the DPT curriculum will utilize a grade of CR (credit) or NC (no credit). In certain circumstances, a grade of IP (in progress) may be assigned if the clinical rotation is not completed by the end of a semester.

The grade in each course is determined by the course instructor. Specific course requirements for grading will be included in each course syllabus. The DCE or ADCE will assign grades for clinical education courses based on feedback provided by the clinical instructor(s). Clinical performance will be evaluated using the Physical Therapist Clinical Performance Instrument (PT CPI) for all fulltime clinical experiences. The syllabus for each clinical course will outline performance expectations on the PT CPI or other specified assessment tool.

Professional conduct is a component of academic and clinical performance and will be evaluated accordingly. Program faculty will regularly assess student professional conduct using the Professional Behaviors form and professional standards outlined in the APTA Code of Ethics, Guidelines for Professional Conduct and the Texas Practice Act. Clinical Faculty may also be required to assess a student’s professional behaviors.

Student Evaluation
During each fulltime clinical rotation, the CI will use the Physical Therapy Clinical Performance Instrument (CPI) for the Midterm and Final summative evaluation of the student. Each particular clinical experience will have specific requirements outlined on the syllabus. For the initial part-time clinical rotation, an abbreviated Student Evaluation Form will be utilized.

Physical Therapy Clinical Performance Instrument (PT CPI or CPI)
The CPI has been developed by the APTA for evaluation of the student clinical performance during clinical affiliations. It is available in online format for the CI and student to complete. The CPI utilizes a categorical, ordered rating system with narrative to rate the 18 performance criteria. The student and CI will separately rate the student’s performance. Assessments should be shared in a formal evaluation conference between the student and CI at both the midterm and final week of the clinical placement. It is the student’s responsibility to assure the evaluations are completed and submitted to the DCE, ADCE or designated faculty.

Clinical Experience and Clinical Instruction Evaluation
Each student is required to complete the APTA’s Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction. The form should be initiated at the time of the midterm and completed during the final week of the placement and shared with the CI during the final evaluation conference. The completed form provides demographic information on the CI(s) (General Information), an assessment of the clinical instructor’s performance (Section 2), the overall quality of the clinical experience (Section 1) and the adequacy of the student’s academic preparation (overall summary appraisal). Completed forms are to be submitted to the DCE or ADCE within 1 week of completing the clinical rotation.

The DCE, ADCE or designated faculty will perform a review of available documents and communication
to rate the performance of the CI and SCCE. The CI and SCCE are encouraged to perform self-assessment.

**Evaluation of the DCE/ADCE**

The student, CI/SCCE, and academic faculty will have the opportunity to evaluate the performance of the DCE/ADCE. This feedback is vital for growth and improvement to better the clinical education experience.
DPT STUDENT HANDBOOK ACKNOWLEDGEMENT
AND AGREEMENT

By signing below, I acknowledge that:

1. I have received information regarding the University of Mary Hardin-Baylor’s DPT Program policies, rules and procedures.

2. I am required to read this DPT Student Handbook and the University’s Student Handbook (https://www.umhb.edu/students/student-handbook) in their entirety.

3. The University’s Graduate Catalog contains policies, rules and procedures that I must follow (https://umhb.smartcatalogiq.com/2022-2023/Graduate-Catalog).

My signature further reflects my commitment to continuously comply with all policies and procedures of the DPT program and the University.

__________________________________________  ____________________________
Print Name                                                                 UMHB Student ID #

__________________________________________  ____________________________
Student Signature                                                                  Date

Original: Student’s education record in the DPT Program
Copy: Student
DRUG AND ALCOHOL POLICY FOR 
MAYBORN COLLEGE OF HEALTH SCIENCES STUDENTS

Purpose and Scope
This policy applies to all MCHS students who participate in clinical learning experiences as a required component of their coursework/degree plan.

The purpose of this Drug and Alcohol Policy is:

1. To deter drug and alcohol use among MCHS students by providing information, testing, and resources, and to provide discipline if necessary;
2. To protect MCHS students, patients, fellow students, faculty, staff, and others with whom they have contact from potential injury as a result of the misuse of drugs and alcohol;
3. To provide a testing program to identify any MCHS students who are improperly using drugs and to assist them, through the provision of resources, before they injure themselves or others or become physiologically or psychologically dependent;
4. To provide a mechanism to support MCHS students if confronted with the pressure to use drugs and alcohol; and
5. To foster safety and integrity in UMHB’s MCHS programs.

Information for all UMHB students on the physiological and psychological dangers inherent in the misuse of drugs and alcohol and the health related risks inherent in the misuse of drugs and alcohol, as well as available resources, can be found at: CLICK HERE

MCHS students are expected to use good judgment at all times to ensure a positive educational and clinical experience. MCHS students must understand the importance of their personal choices and responsible behavior with regard to drugs. Good judgment dictates that MCHS students remove themselves from situations involving alcohol and drugs to avoid possible sanctions.

Any student enrolled in a MCHS program is choosing to abide by all terms of this policy and consents to all aspects of this policy.

This policy is not to be construed as a contract between UMHB and MCHS students. However, signed consent and notification forms shall be considered confirmation of the MCHS student's agreement to the terms and conditions contained in this policy and shall be a condition of participation in the MCHS programs requiring clinical education experiences.

UMHB reserves the right to update or change this policy at any time, and will notify MCHS students of any changes or revisions.

General
The university is committed to the spiritual, mental, social, and emotional development of students and believes that growth in these areas is greatly impaired by mind-altering substances. Education and learning are especially impaired by alcohol abuse and other drug use. It is the goal of the university to provide an alcohol and drug-free environment in which to live, work, and learn, to discourage the use of alcohol and drugs and to promote sobriety. The UMHB community cares deeply about the health and safety of our students. Furthermore, UMHB recognizes the heightened dangers associated with alcohol and drug use. The consequences of life choices and decisions that
students make extend far beyond the college experience. Therefore, the possession, use, sale, purchase, manufacturing, or distribution of alcohol, illegal or controlled substances, mind or perception altering drugs, or the misuse of chemicals such as glues or solvents, is strictly prohibited on campus and at all university sponsored events, trips, and off-campus clinical educational assignments. Intoxication or impairment, on or off campus is a violation of the Student Standards of Conduct. Any student who engages in conduct that violates the UMHB Student Standards of Conduct or federal, state, or local laws is subject to discipline, whether or not civil or criminal penalties are also imposed for such conduct.

The only exception is the lawful use of prescription medications by the person for whom the medication was intended or the reasonable use of over-the-counter medications for their intended purpose. If MCHS students are taking prescription medications that may impair their ability to safely provide patient care, operate equipment or other safety-sensitive educational activities, he/she is required to recuse him/herself from that activity and discuss implications with their program director/dean (no underlying medical information need be provided during this discussion). The student may be referred to UMHB’s Disability Services Office to determine what, if any, reasonable accommodation may be provided. See section on Medical Exceptions for more information regarding prescription medications.

Refusal to Participate

MCHS students are free to decline to consent to drug testing under this policy. However, it will be understood that any MCHS student (a) who declines to participate in testing or (b) who does not sign the required forms in conjunction with this policy is voluntarily and immediately withdrawing from participation in the MCHS program, in which case the university’s applicable grading, housing withdrawal (if applicable), and refund policies shall apply.

Mandatory Disclosure of Arrest or Legal Citations

Except for traffic violations (i.e. speeding ticket, parking tickets), all UMHB students are required to self-report to the dean of students (or to submit the report by another legitimate source such as spouse or legal counsel) the existence of any charge or indictment or information filed in connection with an alleged violation by the student of any federal, state, or local statute, rule, or regulation punishable as a crime (including but not limited to those associated with alcohol or drug use/possession/distribution) within three (3) calendar days of charges being filed.

Additionally, MCHS students must report the matter directly to their program director or dean within three (3) calendar days of the charges being filed.

UMHB Alcohol Policy

The university is committed to the spiritual, mental, social and emotional development of students and believes that growth in these areas is greatly impaired by mind-altering substances. Education and learning are especially impaired by alcohol abuse and other drug use. It is the goal of the university to provide an alcohol and drug-free environment in which to live, work, and learn, to discourage the use of alcohol and drugs and to promote sobriety. The UMHB community cares deeply about the health and safety of our students. Furthermore, UMHB recognizes the heightened dangers associated with alcohol and drug use. The consequences of life choices and decisions that students make extend far beyond the college experience.

Alcohol consumption is highly discouraged at all times. However, these are clear policy violations:

- Texas state law sets the minimum age for the purchase and drinking of alcoholic beverages at 21 years of age. **Underage drinking is a violation of state law and university policy.**
- The university’s policy on alcohol can be located at: [https://go.umhb.edu/students/student-handbook](https://go.umhb.edu/students/student-handbook)

Drug Testing Program for MCHS Students
UMHB reserves the right to test any MCHS student for drugs at any time. Test results become a part of the MCHS student's record and are subject to FERPA. Test results will not be disclosed except in accordance with this policy or as otherwise permitted by law. UMHB will outsource specimen collection, drug testing and secondary drug testing/medical officer review to a certified drug-testing vendor of its choice.

**Drug Testing Procedure:**

1. MCHS students selected for any type of drug testing, which may include pre-program admission, periodic, reasonable suspicion, reinstatement and/or follow-up drug testing will be personally notified by the program director or dean or his/her designee of the exact time and location of the test 1-2 hours prior to the test.
2. The MCHS student must then report to the collection site, within 15 minutes of their scheduled test.
3. Upon entering the collection station, the MCHS student will provide a photograph identification.
4. The MCHS student will be given directions on specimen collection by a collector who is an employee or agent of the certified drug testing vendor.
5. The MCHS student will be required to empty all pockets and remove any excessive clothing (i.e. hoodies, jackets, stocking caps, gloves, caps).
6. The MCHS student will be required to wash his/her hands.
7. The MCHS student will then enter the collection room and will void (under observation by a collection site employee of the same gender as the MCHS student, if required by UMHB). Urine samples of at least 100 ml, preferably 200 ml, must be given by the MCHS students under the observation of the collector. The only specimens accepted will be the ones given at this time and place.
8. The MCHS student will give their sample to the collector, where the sample will be split into two (2) identical containers in the presence of the MCHS student [A & B samples]. In the full presence of the MCHS student, labels will be placed over the two containers, sealing them with a tamper-proof seal and identification number. The MCHS student will confirm that their identification number matches the same identification number on the samples and the laboratory’s Chain of Custody Control Form. The MCHS student will initial and date the labels. The MCHS student will complete and sign the laboratory’s Chain of Custody Control Form.
9. If the specimen is incomplete or inadequate, the MCHS student must remain in the collection area under observation of the collector or his/her designee until the sample is collected.
10. All positive tests will be re-tested using the second (split) sample originally collected, unless there is clear indication that the positive test was caused by a medical prescription previously disclosed in writing by the MCHS student. The certified vendor will provide expertise in making such a determination. If the second test is negative, the first test will be considered negative.

**Alcohol Testing Procedure:** The procedure for alcohol testing will be determined by the laboratory.

**Reasons for Testing**

Periodic drug testing will be required for all MCHS students. Some programs may require post-acceptance, pre-enrollment testing. Additionally, certain hospitals and other clinical facilities where MCHS students participate in clinical experiences may require testing at certain times during a student’s participation in clinical experiences and/or written verification from the university of students’ periodic drug test results.

Voluntary Testing: A MCHS student may voluntarily request drug or alcohol testing from the university’s approved testing site if he/she wishes to present test results to the MCHS program (for example, during a review of a student conduct matter). The MCHS student should submit a request for voluntary testing directly to the program director or dean (do not contact the testing site directly). The university will schedule the test at the certified laboratory of the
Reasonable Suspicion Testing: MCHS students may be drug and/or alcohol tested if there is reasonable suspicion of drug or alcohol use. Any UMHB student, faculty or staff member may report certain signs, symptoms, or changes in behavior that may cause him or her to suspect drug or alcohol use. Faculty and staff have a duty to quickly report any suspicions to the program director or dean, or other university administrator, who shall then determine appropriate action. However: If the suspicious behavior involves imminent danger to self or others while the student is on campus, the UMHB Campus Police should be notified immediately. If the suspicious behavior involves imminent danger to self or others while the student is participating in clinical experiences at an off-campus site, the facility’s security or the local police department should be notified immediately.

Definition of Reasonable Suspicion

Reasonable suspicion will be based on the observation of behavior or conduct, or the presence of certain physical and emotional characteristics or patterns, which are symptomatic of the use of certain drugs or alcohol. Reasonable suspicion includes, but is not limited, to:

1. Violation of state laws or university regulations. Examples include but are not limited to arrest or legal citation for D.U.I., violent conduct, assault and sexual assault, vandalism, theft.
2. Behavior changes or unexplained fluctuations in moods (i.e. inappropriate irritability, hostility, anxiety, anger or withdrawal).
3. Outward signs such as staggering, uneven gait, balance problems, slurred speech, excessive laughing or crying, odor of marijuana or alcohol, presence of drug paraphernalia, or the presence of a drug or alcohol itself.
4. Chronic fatigue or loss of vitality, decreased interest or effort in classes and clinical experiences, prolonged illness or injuries, unexpected weight and/or strength gains or losses.

In addition, should a MCHS student attempt to avoid notification of drug testing, either by avoiding calls/messages from the MCHS personnel, turning off cell phone, skipping class, or leaving town, the university may deem such behavior as reasonable suspicion.

Procedures for Determining Reasonable Suspicion

Assessment: If there is no apparent imminent danger to self or others, the MCHS student may be required to immediately vacate the areas of the facility populated by patients, students or others while an assessment is made. A faculty member may call upon another qualified faculty member or a trained clinical site employee (if applicable), if one is readily accessible, to assist in assessing reasonable suspicion.

If reasonable suspicion exists or if further consultation is prudent, the faculty member will immediately notify the program director or dean, or his/her designee. The program director or dean or his/her designee will decide whether the MCHS student should be (a) removed from the educational site as a safety measure and/or (b) referred for immediate testing based on the reasonable suspicion standard, after evaluating the available information. This may or may not include direct observation of the MCHS student.

If the program director or dean, or his/her designee approves the testing, they will immediately schedule the test (to occur ideally within 1-2 hours) directly with the certified lab, notify the MCHS student, and arrange or coordinate transportation for the student to the testing site. If the MCHS student misses the scheduled test, he/she will be subject to university and MCHS sanctions, including suspension or dismissal from the MCHS program. The MCHS student will be given the opportunity to respond, either by phone, in person, or in writing if time allows, by presenting information he/she wants the program director or dean to consider. This is an opportunity to present information only, not to challenge the scheduling of a required drug or alcohol test.

Transportation: If there are no conditions or behaviors that would jeopardize the safety of the driver, when
circumstances warrant, transportation will be provided to and after testing by university faculty or staff so that the MCHS student does not potentially endanger him/herself or others by operating a vehicle. Under no circumstances will another UMHB student provide transportation. The MCHS student is expected to fully cooperate in the transportation process.

If the university cannot provide transportation, assistance will be provided to the MCHS student in contacting a relative or friend to provide transportation to and after testing. If the MCHS student refuses transportation assistance and leaves the site against instructions, university may contact the local police to report a concern of a potentially impaired driver. If the student resides on campus, the dean of students will be notified that a potentially impaired student will be returning to campus housing (awaiting the test results if the MCHS student has been tested). The university may inspect the MCHS student’s campus housing for the presence of drugs or alcohol.

Cessation of participation during a period of Reasonable Suspicion: In the event of reasonable suspicion that improper drug or alcohol use may endanger the safety or health of the MCHS student or of patients, other students, faculty or staff of the university or of a clinical facility, The program director or dean, or his/her designee may place the MCHS student on an interim suspension status (classroom participation, clinical participation or both), awaiting the outcome of any testing.

Regardless of whether the MCHS student resides in campus housing, the dean of students will be notified so that he/she can assess if the MCHS student should be provided with additional instructions or interim safety measures (such as a temporary suspension from participation in athletics, student organizations or other university events or programs), awaiting the test results. The program director or dean will notify the dean of students of the test results.

If the test is negative, the MCHS student will be afforded the opportunity to make up any academic assignments missed during the interim suspension period.

Sanctions and Interventions

Sanctions: For any violation of this policy, the MCHS student will be required to attend and fully cooperate in a meeting with the program director or dean to explain the policy and answer questions. Sanctions will normally be communicated to the MCHS student at this meeting, unless further deliberation is required.

For any violation of this policy, at a minimum: The MCHS students will be required to attend initial counseling with a licensed UMHB counselor. The purpose of the counseling is to provide assistance, direction, and resources for MCHS students.

Ongoing treatment sessions and counseling may be required at the UMHB student Counseling Center or through referral to a community treatment resource. The nature and extent of counseling and/or other medical intervention that may be required will depend on the nature of the individual’s drug or alcohol involvement and the opinion of the professional counselor providing the counseling.

The MCHS students shall be responsible for any counseling service fees that may apply. The MCHS student will submit written proof of attendance (redacted of any protected health information) to the program director or dean within 24 hours of completion of each session.

The dean of students will be notified, in order to review the impact of the policy violation (as applicable) to the student’s work-study assignment, possible inspection of his/her campus residence and other possible student misconduct.

For Policy Violations Involving Alcohol: In addition to the actions listed above, violations of the university’s policy on alcohol, including violations of the law while intoxicated, will result in sanctions. Legal citation from a law enforcement officer includes (but is not limited to):

1. Driving under the influence of drugs or alcohol
2. Public intoxication by drugs or alcohol
3. Underage possession of alcohol
Sanctions may include a period of or permanent suspension from the MCHS program and/or suspension or expulsion from the university.

For Policy Violations Involving Test Protocol: A MCHS student who does not report for their scheduled test, is more than 15 minutes late for their scheduled test, or does not follow collection protocol as determined by the laboratory will be subject to disciplinary action, up to and including permanent suspension from the MCHS program and/or suspension or expulsion from the university.

A MCHS student who attempts to substitute, manipulate, mask, or intentionally dilute a urine specimen will be subject to disciplinary action including permanent suspension from the MCHS program and/or suspension or expulsion from the university.

A MCHS student who falsely identifies him/herself as another MCHS student during the testing process will be subject to disciplinary action including permanent suspension from the MCHS program and/or suspension or expulsion from the university.

For Positive Drug Test – 1st Offense: For Positive Drug Test of Cocaine, Opiates, Heroine, PCP, and similar drugs will result in permanent suspension from the program.

A positive test of other drugs (including but not limited to marijuana) will result in suspension from the MCHS program for a minimum of 1 academic semester, up to and including permanent suspension.

The student will be referred to the dean of students for review of further sanctions, which may include suspension or expulsion from the university.

Reinstatement Process: Any MCHS student who is suspended for a first offense of this policy must reapply for program (and possibly university) admission, if eligible, as outlined in the program’s student handbook or other university publication. In addition to those requirements, the following will apply:

Reinstatement Testing: For safety, individuals who are reapplying for program admission due to violations of this policy must, at his/her own expense, undergo a reinstatement drug test at a certified lab of the university’s choosing, prior to being considered for reinstatement in the MCHS program. A positive reinstatement test will be considered a second positive test for purpose of sanctions outlined in this policy.

Reinstatement clearance by a qualified Physician: For safety purposes, individuals who are reapplying for program admission due to violations of this policy must, at his/her own expense, undergo and submit the results of a physical exam by a qualified Physician to determine fitness for participation in the MCHS program prior to being considered for reinstatement for participation in the MCHS program.

Reinstatement clearance by UMHB Counselor: For safety, the UMHB Counselor must concur that the individual’s behavioral condition warrants reinstatement, whether or not the prescribed course of counseling has been completed.

Follow-Up Testing: MCHS students who test positive or who self-refer (see Self-referral section of this policy for more details) may be required to re-test at any time during his or her participation in the MCHS program with or without notice as determined by the program director or dean, or as recommended by counselors involved with the MCHS student’s counseling, in order to monitor if the MCHS student has refrained from further violations of this policy. If subsequent testing is positive (allowing for systemic dissipation of the drugs which resulted in the first positive, if applicable), it will be considered a second positive test for purpose of sanctions outlined in this policy.

For Positive Drug Test – 2nd Offense: Immediately upon notification of the second positive test result, the MCHS student will be dismissed from the MCHS program. The MCHS student will be referred to the dean of students for review of further sanctions, which may include suspension or expulsion from the university.

Exceptions

Medical Exception: UMHB recognizes that prescription drugs are used for legitimate medical purposes. Accordingly, UMHB allows exceptions to be made for those MCHS students with a documented medical history demonstrating a need for regular use of a lawfully prescribed substance that results in a positive drug test. It is recommended that the
When confirmatory test is also positive, then the test is reported to the University as a positive drug test.

Testing Appeals: reconsider sanctions do not delay this implementation. For safety purposes, the sanctions imposed shall be immediately implemented. Testing appeals and/or requests to reconsider sanctions shall be immediately implemented.

Self-Referral Exception (for disclosure PRIOR to receiving notification of selection for drug testing - Safe Harbor Program): Any MCHS student may refer himself/herself for evaluation or counseling by contacting the program director or dean. This arrangement is called Safe Harbor because no MCHS program or university sanctions are imposed upon the MCHS student who has made a personal decision to seek professional assistance. The university reserves the right to limit academic participation and/or impose other interim safety measures in the event the MCHS student is participating in program elements requiring patient contact or other safety-sensitive elements. While it is not considered a sanction under these circumstances, the MCHS student may experience delayed academic progress as a result of these interim measures, and university policies regarding grading and refunds will apply. A MCHS student may not initiate Safe Harbor after they have been informed of their participation in an impending drug test.

Upon entry of the Safe Harbor program, the MCHS student will undergo drug testing in order to establish base line levels for any substances. The MCHS student will be required to have an initial consultation with the UMHB Counseling Center to determine an appropriate treatment plan. A MCHS student will be permitted to remain in the Safe Harbor Program for a reasonable period of time, not to exceed sixty (60) days, as determined by the treatment plan.

A MCHS student whose participation in the program has been limited as described above will not be permitted to return to participation in the MCHS program until the counselor has interviewed the MCHS student following the conclusion of the recommended treatment (or stage of treatment, as applicable) and has determined that reentry is appropriate. The MCHS student will be required to undergo reinstatement drug testing as part of the reentry evaluation. Failing to complete the treatment recommended by the counselor, having a positive drug test result after entering the Safe Harbor Program that is determined to be a result of new drug use, or having a positive result on a reinstatement drug test will be deemed a first offense under this policy, Safe Harbor will end and appropriate sanctions will be imposed. A MCHS student may enter Safe Harbor only one time in his/her enrollment in the MCHS program. If the MCHS student regains his or her eligibility to participate in the MCHS program, he or she may be required to undergo unannounced follow-up tests at the discretion of the program director or dean and/or the UMHB counselor. A positive drug test result at any time after satisfactorily completing the Safe Harbor Program will count as the first positive drug test result.

Self-Referral (for disclosure at any point AFTER receiving notification of selection for drug testing but prior to receiving drug test results):

Any MCHS student who, upon being notified for selection of drug testing, admits to a violation of this policy, will still be required to take the drug test. If the test result is positive, the sanctions outlined in this policy will apply. Mandatory participation in counseling, reinstatement drug testing and follow-up testing will be required regardless of the test result.

Testing Appeal and Request to Reconsider Sanctions

For safety purposes, the sanctions imposed shall be immediately implemented. Testing appeals and/or requests to reconsider sanctions do not delay this implementation.

Testing Appeals: When a student’s sample tests positive for a prohibited substance, the University has established a standard review procedure with its testing laboratory. The positive sample is sent to a second, outside certified laboratory for a confirmatory test which examines for the substance identified in the first drug screening. If the confirmatory test is also positive, then the test is reported to the University as a positive drug test.

When Appeal Is Available: There is no appeal or MRO review for a positive test indicating use of marijuana. If a
student has a test which is positive for any other prohibited substance and he/she has disclosed, as required by University policy, that he/she is using a prescription medication, the student may, within 24 hours following receipt of the notice of the positive test, appeal the result in writing to the Program Director or Dean (as applicable to the student’s program) by requesting the testing laboratory’s Medical Review Officer (MRO) to review the test results. The cost of this review by the MRO is borne by the student unless a medical exception applies (see policy section regarding Medical Exceptions).

Upon the student’s request for MRO review, the Program Director or Dean will:

- formally request the laboratory to arrange MRO review
- notify the Dean of Students that an MRO review has been requested, and of the results.

MRO review findings will be final regarding the results of the drug test and no further appeal regarding the test results is allowed.

**Request to reconsider sanction:**

Students may not request reconsideration for sanctions imposed by MCHS for a positive drug test. Only sanctions imposed for alcohol violations or for violations of drug testing protocol (i.e. masking, failure to report/to report to test within 15 minutes of scheduled test time, etc.), may be reconsidered at the student’s request.

**Step One:** MCHS students who wish to request an eligible reconsideration of a sanction must submit a written request to the program director or dean within five (5) business days of receiving notice of the sanction imposed. A committee comprised of the program director or dean, and at least two MCHS program faculty members who were not involved in the incident review or sanction process will review the sanction. The decision made by this committee will normally be communicated to the MCHS student within five (5) business days of the meeting.

**Step Two:** MCHS students who wish to request a reconsideration of the committee’s decision must do so in writing to the MCHS Executive Dean within five (5) business days of receiving notice of the committee’s decision. The MCHS Executive Dean may interview anyone who may have pertinent information and request information or counsel from other persons as deemed appropriate. The MCHS Executive Dean will provide a written decision to the MCHS student and the program director or dean within a reasonable time, normally within ten (10) days after receiving the written request, although the university’s schedule may require a longer period of time. The MCHS Executive Dean may affirm the decision of the committee, make a different determination of the facts, or change any sanctions imposed on the student. The decision of the MCHS Executive Dean is final.

Any MCHS student who is interviewed as a part of a disciplinary proceeding shall treat any information disclosed to the MCHS student in the course of the interview as confidential. A violation of this rule of confidentiality is misconduct which is subject to discipline.

A MCHS student who is unable or unwilling to participate in the disciplinary process remains subject to discipline and sanctions. Students are always entitled to consult legal counsel or any other advisor, but no advisor is entitled to attend or participate in any university meeting or interview.

Appeals for sanctions imposed by the dean of students under the Student Conduct policy should follow the appeal process outlined in the Student Handbook.

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Dr. Colin Wilborn Executive Dean

Date of Origin: July 22nd 2021
Revised: August 2, 2021
Revised: November 3, 2021
APPENDIX B: ESSENTIAL FUNCTIONS STATEMENT

UNIVERSITY OF MARY HARDIN-BAYLOR
DOCTOR OF PHYSICAL THERAPY PROGRAM
ESSENTIAL FUNCTIONS STATEMENT

Physical therapy is a demanding profession that requires a wide range of cognitive, sensory, and motor skills. A physical therapist is expected to independently perform all aspects of the physical therapy role. Core segments of the program include clinical experiences in which the student will be required to participate in and demonstrate proficiency in providing therapeutic services. Graduates of the UMHB DPT program who pass the licensure examination will be prepared to enter practice in a variety of settings and perform all responsibilities of the professional role. Based upon the expectations and requirements of the profession, this Essential Functions Statement includes a list of essential functions/skills that must be met for entry into the program and progression through the program. The following list of skills is illustrative and does not represent an all-inclusive listing of the functions of a physical therapist. Reasonable accommodations may be requested to enable an individual with disabilities to achieve these essential functions. See page 14 of this handbook for more information.

The Doctor of Physical Therapy Student must possess:

Observational skills (including vision, hearing, and somatic sensation) sufficient to perceive all information necessary for effective patient/client management inclusive of functional use of vision, hearing, olfaction and tactile sensations.

- Observe lecture and laboratory demonstrations
- Read and interpret equipment dials, assessment graphs, patient charts, professional literature, and notes from patients, physicians, and other health professionals
- Effectively evaluate auditory information during assessment of lungs, heart, pulses, blood pressure, and joints.
- Observe another individual at a distance greater than 20 feet as well as near proximity and be able to notice movement patterns, facial expressions, etc.
- Monitor and assess physical, emotional, and psychological responses of another individual
- Determine and comprehend dimensional and spatial relationships of structures
- View video, graphics and written word on the computer screen or DVD monitor
- Perform a physical assessment through hands-on application that may include palpation of anatomical structures, assessment of muscle tone, temperature, depth, etc.
- Monitor and interact with patients, other professionals and families through a variety of media...

APPENDIX B: ESSENTIAL FUNCTIONS STATEMENT
• Hear and react appropriately to alarms, emergency signals, timers and cries for help
• Hear verbal instructions, audio, video, DVD or computer media in the classroom, lab or clinic

**Communication ability sufficient to appropriately communicate in verbal, nonverbal, and written formats with all individuals when engaged in physical therapy practice, research, and education, including patients, clients, families, care givers, practitioners, consumers, payers, and policy makers.**

• Receive, write and interpret written and verbal communication in a timely manner
• Effectively communicate with other individuals
• Use appropriate verbal, nonverbal, and written communication
• Demonstrate interpersonal skills as needed for productive classroom discussion, respectful interaction with classmates and faculty, and development of appropriate therapist-patient relationships.

**Motor ability sufficient to safely perform the job of a physical therapist in a wide variety of settings.**

• Move within rooms and from room to room, including maneuvering in small spaces around equipment and other individuals
• Move up and down stairs/ramps/curbs with other individuals
• Perform a thorough examination of another individual, including but not limited to palpation, auscultation, percussion, movement of limbs and spinal segments, and manipulation of tools commonly used for screening/testing
• Perform interventions on another individual, including but not limited to moving another individual’s body parts; moving another individual’s body for transfers, gait, positioning, mobilization; moving, maneuvering, applying and adjusting clinical equipment; and effectively guiding, facilitating, inhibiting, and resisting movement and motor patterns
• Perform assessment and intervention techniques with proper positioning, hand placement, direction and amount of force
• Transfer, move, and assist another individual in walking and other daily activities without injury to other or self
• Participate in lecture, lab, and other learning activities for 30+ hours per week, including but not limited to maintaining an upright posture for prolonged periods
• Legibly record information for academic and clinical learning and patient care activities, including but not limited to written assignments, exams, evaluations, progress notes, and other required materials in a medical record
• Perform specific physical tasks, including but not limited to lifting up to 50 pounds, twisting, bending, stooping, squatting, crawling, reaching above shoulder level, kneeling/half-kneeling, pushing/pulling, using hands repetitively, grasping, demonstrating manual and finger dexterity, and coordinating verbal/manual instruction
Intellectual-conceptual, integrative and quantitative abilities sufficient to use integrative and quantitative abilities and make decisions. These cognitive skills are critical for the physical therapist to make clinical decisions during the examination, evaluation, diagnosis, prognosis, and intervention activities for patient/client management. Students must be able to:

- Apply critical thinking processes to his/her work in the classroom and clinical settings
- Retain and use information in order to solve problems, evaluate patients, and generate new ways of processing or categorizing symptoms
- Organize, prioritize, analyze, and evaluate detailed and complex information within a limited time frame

Behavioral and social skills sufficient to

- Fully use his/her intellectual ability, exercise good judgment, and complete all responsibilities related to the academic and clinical requirements of the program
- Comply with the ethical standards of the profession
- Cope with the mental and emotional rigors of a demanding educational program within the set time constraints
- Acknowledge and respect individual values and opinions in order to foster harmonious working relationships with others
- Accurately self-assess abilities, accept criticism, and assume responsibility for maintaining professional behavior
- Cope with the stress of heavy workloads, demanding patients, and critical clinical situations while continuing to function effectively
- Interact appropriately with individuals from all areas of society, cultures, norms, ethnic backgrounds, and belief systems

Lab and Classroom Exercises: Students will practice various therapeutic techniques in the course of required lab and, occasionally, lecture or classroom courses. In order to provide students both a complete perspective on various therapies and the opportunity to practice, students are expected to practice physical therapy techniques on one another. Any required participation in such exercises will be under the supervision of university faculty, instructors, or clinicians. Any student who is uncomfortable with any classroom or lab exercise should discuss his or her concern with the DPT Program Director.
ESSENTIAL FUNCTIONS ACKNOWLEDGEMENT AND AGREEMENT

I acknowledge that I am able to perform the Essential Functions identified above with or without reasonable accommodations. If I require any accommodation, I understand that it is my responsibility to promptly contact the university's Student Disability Services Office and comply with the University's policy on requesting accommodations. I further understand that such accommodations, if granted, are not applied retroactively.

__________________________________________    __________________________________________
Print Name                                      UMHB Student ID #

__________________________________________    _____________________________
Student Signature                               Date

Original: Student’s education record in the DPT Program
Copy: Student
APPENDIX C: STUDENT PARTICIPATION AGREEMENT

Doctor of Physical Therapy Program
STUDENT ACKNOWLEDGMENT AND
AGREEMENT

<table>
<thead>
<tr>
<th>PRINT STUDENT NAME:</th>
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</tr>
</thead>
<tbody>
<tr>
<td>STUDENT UMHB ID #:</td>
<td></td>
</tr>
<tr>
<td>AREA CODE &amp; CELL PHONE #:</td>
<td></td>
</tr>
</tbody>
</table>

I understand that any grade or credit I receive relating to my participation in the DPT program is dependent upon my compliance with this agreement.

Confidentiality of Information  ________________Initials
1. During the course of my participation in the DPT program, I understand that I will have access to, and be provided with, certain confidential information for educational purposes including but not limited to: patient information, information obtained prior to the simulation or actual clinical experience, information obtained during the simulation or actual clinical experience, and information obtained during the debriefing portion of the simulation or actual clinical experience.

2. I agree to maintain strict confidentiality about the details of simulated clinical experiences, including patient identification, the simulation scenarios, and the performance of any participant(s). I will not discuss my assignments, findings, or experiences in the simulation center or debriefing room until all students have completed the assignment. Doing so may compromise the learning experience for my peers.

3. During the course of my participation in this program, I may have access to medical information which UMHB may have a duty to treat as confidential. I agree that I will maintain strict confidentiality of records, documents and all other information to which I have access during and after my student participation in the DPT program. I understand that the intentional disclosure by me of the information to any unauthorized person could result in disciplinary action including expulsion from the university, and/or criminal or civil penalties.

4. I will not permit myself or any other person to copy or reproduce DPT program or clinical facility documents other than what is required/allowed in the regular course of my academic studies. I will immediately report to the faculty or other university administrator any unauthorized use, alteration, duplication, or disclosure of information.

Use of Equipment and Supplies  ________________Initials
1. I acknowledge that DPT student clinical supplies are intended for educational purposes only and are not intended for general consumer, personal, clinical or diagnostic use. I will follow all instructions provided regarding the utilization and return of clinical lab
2. I acknowledge that the use of student clinical supplies involves potentially hazardous activities. Universal precautions are required to prevent contact with blood or other potentially infectious body fluids. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious. Any syringes or needles must be kept in a contained location and must be disposed of in a biohazard container after use.

3. I acknowledge that I am solely responsible for the appropriate utilization and security of student clinical supplies issued by the University of Mary Hardin-Baylor. The university strongly recommends that students keep their supplies in a secure place.

**Participation in Class, Simulation Lab, Clinical and Other Educational Activities**

1. I agree to conduct myself in a professional manner at all times.

2. I agree to comply with all university policies, including but not limited to standards of conduct, the use of alcohol and drugs, safety rules, the use of personal protective equipment, dress code, and emergency procedures.

3. I acknowledge that my participation in class or clinical assignments while impaired by alcohol or drugs, horseplay and other unsafe behaviors are strictly prohibited.

4. I agree that I will immediately report to my supervisor or other university administrator any injury, accident, exposure to blood or bodily fluids, or other serious incident that I incur or witness.

5. I agree to follow program procedures and the verbal or written instructions of UMHB faculty/administrators and clinical facility supervisors.

6. I acknowledge that I will be participating in dissection of human cadavers, which is potentially hazardous. Some of the risks include, but are not limited to, injury from scalpels or other tools, exposure to chemicals such as formaldehyde, and exposure to contagious illnesses. I agree that I will abide by all safety procedures in the cadaver lab as outlined during lab orientation.

7. I will remain current on all procedures and rules related to the DPT program and to attend all mandatory training or orientation sessions. I understand that I am required to successfully complete training provided by the university or clinical facilities to which I am assigned, and abide by all rules regarding emergency response procedures, bloodborne pathogens and general safety procedures.

8. I agree to complete my assignment in a timely manner as scheduled.

9. I agree to apply the physical therapy differential diagnosis process and my critical thinking abilities to the best of my ability.

10. I understand that I am required to stay within my assigned student scope of responsibility. I understand that I am not allowed to make a diagnosis or recommendation for treatment of any patient, and I am not allowed to assess/critique an existing diagnosis or recommendation for treatment of any patient.

11. If I need a short break, I will leave the environment quietly without disturbing my peers. I will speak at the volume and tone appropriate to the setting.

12. I understand that participating in simulation-based training is part of my clinical learning experience. I will engage in and participate in the simulation fully as a professional and treat it as a realistic patient care experience. I will remain current on all procedures and
rules related to the DPT program, and I will attend all mandatory training or orientation sessions.

13. I agree to follow DPT procedures and the verbal or written instructions of faculty and facility supervisors.

Authorization to Audiovisual Record and Display of My Coursework  _____________ Initials

1. I understand that all classrooms, labs and simulated clinical experiences may be audio and video recorded to be used for debriefing and educational purposes.

2. Photographs may be taken of any activity in the DPT program. These photographs may be used for the UMHB website and/or promotional purposes. I understand that I will not be compensated in any way for the use of my image or coursework.

3. The university may also photograph, video, and/or audio record me during examinations and these recordings may be used as evidence for any cases of expected violation of any university, college or program policies.

4. I agree to allow the University of Mary Hardin-Baylor to use any of my work produced for any UMHB course to be displayed, available to accrediting agencies, or be used in recruitment. I understand and agree that I shall not have any rights or claims of any kind against UMHB, or its students or employees, arising out of this use.

Consent for Drug Testing  _____________ Initials

1. As a participating student attending UMHB, I hereby acknowledge that I have received information about and have been allowed an opportunity to discuss the Drug and Alcohol Testing policy with representatives of UMHB. I understand the meaning, goals, and provisions of this policy as well as sanctions and interventions that will be administered if I am found to have tested positive for prohibited substances.

2. I understand that my participation in drug testing is a condition for my participation in this program. I agree to participate, and I accept the conditions of the policy as interpreted by designated representatives of UMHB. I understand that I may revoke this consent form at any time. However, if I revoke this consent form or refuse to participate in drug testing, I understand that I surrender the privilege to participate in the program at UMHB.

3. I agree that employees, agents, or drug testing vendors designated by UMHB will: oversee my participation in drug testing and related activities; obtain urine or other specimens from me; test and analyze such specimens; maintain records and results of such tests and use those records for the purposes of the policy; and take other actions as provided in the policy. I agree to provide any specimens as requested. I understand that my selection to participate in testing may or may not be as a result of random selection.

4. I agree to disclose all medications that I may take during my participation in the program to the drug testing facility as required per the UMHB’s Drug and Alcohol Policy. I understand that taking nutrition supplements may result in a positive drug test and that I take supplements at my own risk.

5. I understand that a violation of UMHB’s Drug and Alcohol Policy or my failure to report for testing at the date, time and place designated or any attempt I make to alter, mask or substitute my specimen will result in sanctions, including temporary or permanent suspension from participation in the program, and that professional counseling and/or follow-up testing may be required as terms for reinstatement. If I am selected to participate in a drug test, the contact information above will be used as the primary
means to contact me. I attest that it is current and if it changes, I agree to notify the DPT program director and the Registrar’s Office immediately.

Consent to Release Information

（Initials）

1. I authorize the DPT program director, or designee, to release information regarding my compliance with the drug and alcohol policy, including my drug testing results, counseling reports or other information relevant to my continuation in the Program. This release of information shall include the UMHB administration, referring physicians, UMHB counselors, my parent/legal guardian or spouse, another institution for which I have applied for admission, and any designee of the foregoing.

2. I authorize the DPT program director, or designee, to release information to clinical facilities (preceptor and administrative personnel) the results of my background check, and my required vaccination/immunization status as stated within the rules, regulations, and contractual affiliation agreement of the facility and UMHB.

3. I understand that this consent and the results of my testing shall only be disclosed in accordance with the provisions of the Family Educational Rights and Privacy Act of 1974, as amended (Buckley Amendment), including my right to obtain copies of my records related to the Program.

Release

（Initials）

I understand that participating in the DPT program and activities, including clinical facilities/patient settings, is potentially hazardous. Some of the risks include but are not limited to, exposure to contagious illnesses in clinical facilities including but not limited to MRSA, influenza, and COVID-19; contact with patients, blood or bodily fluids, radiation, chemicals; and the use of equipment provided by UMHB or clinical facilities. While particular health and safety protocols, rules and personal discipline may reduce this risk, the risk of serious illness and death will still exist. By participating in the DPT program, I am accepting and assuming full responsibility for any risk of death or injury arising from my participation.

I forever discharge, waive, and release any claim to recover from UMHB or its employees or agents (the “Released Parties”) any damages, costs, attorneys’ fees, expenses, or obligations of any kind which I or any person acting on my behalf might otherwise have for injuries, illnesses, disabilities, death, or property loss which I may sustain arising out of my participation in DPT program. Neither I nor any personal representative, agent, or other representative acting on my behalf will make any claim or bring any suit or action against the Released Parties for any injuries to me or my property arising out of the DPT program even if it is caused by the negligence of the Released Parties, excepting only harm intentionally caused by the Released Parties.

If I bring a lawsuit or action against one or more of the Released Parties in connection with a claim I have undertaken to waive and release with this Agreement, I will indemnify and hold the Released Parties harmless from all damages, costs, and expenses, including but not limited to attorneys’ fees and court costs, which any of the Released Parties might incur in defending such an action.
I understand that UMHB assumes no responsibility for medical expenses incurred by students, and strongly recommends that I maintain individual medical insurance for the duration of my participation in the DPT program.

I affirm that I am at least 18 years of age. I have read this document carefully, and I understand that it is a binding commitment which waives and releases legal rights which I might otherwise have.

__________________________________________  __________________________
Print Name                                          UMHB Student ID #

__________________________________________  __________________________
Student Signature                                  Date

Original: Student’s education record in the DPT program
Copy: Student
APPENDIX D: ACADEMIC ALERT FORM

Mayborn College of HEALTH SCIENCES
University of Mary Hardin Baylor

Academic Alert Form

Student: ____________________________ Date: ____________________________
Student ID #: ____________________________ Program: ____________________________
Course: ____________________________

Your academic and/or clinical performance is not currently meeting the professional performance standards of this program. The faculty wish to assist you in making steady academic/clinical progress by helping you identify performance factors that may be hindering your success. Although the outcome of your success in this course/program has not yet been determined, focusing on the following issue(s) and making the necessary corrections will be beneficial to your academic/clinical performance.

Performance Factors (check all that apply)

- Excessive absences from class/clinical
- Substandard test/assignment performance
- Failure to make-up for tests and/or assignments
- Failure to submit assignment on time
- Lack of preparation and response in class activities or clinical assignments
- Unacceptable conduct/behavior in class/clinical
- Inappropriate use of equipment or other resources
- Substandard communication techniques with faculty, staff, patients, patient families, or other students
- Unprofessional Behavior
- Substandard clinical performance:
  - Unsafe performance of a technical skill
  - Substandard medication administration
  - Other: ____________________________

Other: ____________________________

Grade: ____________________________

Correction Plan is self-evident for some factors. Additional suggestions for improvement include:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Student Comments:
________________________________________________________________________

Received by: ____________________________ Provided by: ____________________________

Dean / Director / Associate Dean

Student date Faculty

2022-23 Student Handbook
Doctor of Physical Therapy Program | University of Mary Hardin-Baylor
# APPENDIX E: ACADEMIC WARNING FORM

## Academic Warning Form

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Student ID #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category of Academic Warning:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Academic Probation (attach Notice of Probation letter)</td>
</tr>
<tr>
<td>[ ] Elevation of Academic Alert during semester (attach Academic Alert) (automatic for 3 or more PPE items or for academic dishonesty alert)</td>
</tr>
<tr>
<td>[ ] Failure to comply with a Remediation Plan (attach)</td>
</tr>
<tr>
<td>[ ] Violations of Program Policies or Procedures (attach pertinent policy, excerpts from handbook, clinical manual, etc.)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Conditions of Warning / Outcomes: (Check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Successfully complete Remediation Plan (attach)</td>
</tr>
<tr>
<td>[ ] Meet with Advisor on or before (date) ________</td>
</tr>
<tr>
<td>[ ] Submit required documents on or before (date) ________</td>
</tr>
<tr>
<td>[ ] Successfully complete additional Academic Assignments (attach details)</td>
</tr>
<tr>
<td>[ ] Other: ____________________</td>
</tr>
<tr>
<td>[ ] Refer to Dean of Students for additional review</td>
</tr>
</tbody>
</table>

This Academic Warning is provided to support and assist the student in academic success. Failure to attain and sustain required academic performance and/or failure to comply with the terms of this Academic Warning will jeopardize the student’s standing in the Program and will result in additional action, including dismissal from the Program.

<table>
<thead>
<tr>
<th>Student Signature:</th>
<th>Date:</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Director / Associate Dean / Dean Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Original:  
Copy:  

## APPENDIX F: PROPOSED CLINICAL FACILITY INFORMATION FORM

### UMHB DPT Proposed Clinical Facility Information

<table>
<thead>
<tr>
<th><em>Date:</em></th>
<th><em>Person completing form:</em></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Facility Name:</em></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interest in UMHB Clin Affiliation</th>
<th>Yes or No</th>
</tr>
</thead>
<tbody>
<tr>
<td>If Yes: use UMHB affiliation agreement</td>
<td>OR their OWN</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Contact person or SCCE:</em></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Director:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Phone number:</em></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Fax number:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><em>Email:</em></th>
<th></th>
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</table>

<table>
<thead>
<tr>
<th><em>Address:</em></th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th># of Therapists:</th>
<th>PTs:</th>
<th>PTAs:</th>
<th>OTs:</th>
<th>ST:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th><em>Primary Pt Pop:</em></th>
<th>Ave. # pts/day:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th><em>Website info:</em></th>
<th></th>
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</table>

<table>
<thead>
<tr>
<th>Other locations:</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Have they had other students?</th>
<th>Yes or No;</th>
</tr>
</thead>
<tbody>
<tr>
<td>If Yes list types of students:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Rotation preferences</th>
<th>Part-time and/or Intermediate/Advanced/Final</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Contact info for Contract:</th>
<th></th>
</tr>
</thead>
</table>

| Date Contract Signed and Signed by | |

* **BOLD information** to completed by individual submitting form to DCE or ADCE (see pg. 23 for more information) |
APPENDIX G: SAMPLE ASSIGNMENTS FOR THE SPT DURING CLINICAL EXPERIENCE

Ideas for assignments for Students during a clinical placement:

1. Get to know the student
   a. Learning style or personality inventory (there are free tests/tools available online)

2. Orientation
   a. Lay-out any non-negotiable expectations (i.e. dress code, no texting, no unrelated social reading “People Magazine”, etc)
   b. Site specific policies and procedures/manuals
   c. Safety Considerations/guidelines

3. Review the programs objectives for that clinical placement
   a. Write specific short term objectives to help achieve the long-term objectives. (please contact the program Director of Clinical Education if you have having difficulty with this).

4. Daily/Weekly planning and debriefing
   a. Utilize Weekly planning tool (don’t be afraid to have the student fill this out)
   b. Have student write a weekly or daily SOAP note on their experience (Not about a specific patient). This can give insight into what a student may feel he or she is struggling with as well as other areas that need to be addressed from his or her self-assessment.
   c. Journaling

5. Paper Patients
   a. Scenarios that you have written up designed to improve the student’s ability to perform critical thinking, communication, problem solving, and interpersonal skills.
   b. If you do not have any case studies a student could be assigned to come up with some scenarios for future students.
      i. Include aspects related to:
         1. examination,
         2. developing plan or care,
         3. interventions,
         4. ethical considerations,
         5. patient and family education needs,
         6. inter-professional communication, and
         7. discharge needs/recommendations

6. Interdisciplinary Opportunities
   a. Shadowing another therapist (OT, PTA, SLP etc)
   b. Spending part of a day with admin staff to see more of the behind the scenes aspect
   c. Observe a pertinent surgery or even find online videos that relate to patient scenarios or professional behaviors.

7. Provide a list of specific resources to review/discuss (have future students expand the list)
   a. Journal Reviews- What new knowledge can the student help provide
   b. Search for new testing/examination, apps, interventions, etc.

8. Special projects
   a. In-services
   b. Developing a booklet or pamphlet that may be provided to other clinicians or patients

9. For full-time students have them be the primary therapists for a selected patient form ‘start to finish’ based on the complexity of the patient and his or her needs.
APPENDIX H: APTA CPI WEB 2.0 INSTRUCTIONS FOR STUDENTS

Quick Start Guide for the CPI Web Training Modules and Assessment

FOR NEW USERS

Access to PT and PTA CPI Web will only be provided if you complete the training session and complete the PT and PTA CPI/WEB Assessment (CPI Assessment). You will only have to complete the CPI Assessment once. However, you are encouraged to review the freely-available training modules prior to each supervised student.

This document contains instructions on how to access the required:
I. CPI New User Training Modules (Training Modules) on the Clinical Assessment Suite Help Center (hosted by Liaison International)
II. CPI Assessment on the APTA Learning Center

PT and PTA CPI New User Training Modules

- The self-guided training includes PowerPoint modules to help you successfully use the CPI Web.
- You can complete the training module-by-module or all at once.
- They are accessible anytime and the training is FREE.

The Training Modules can be accessed in 2 ways:
1. From the Home Page of the Clinical Assessment Suite Help Center
   a. Navigate to the Clinical Assessment Suite Help Center at:
      https://help.liasonedu.com/Clinical_Assessment_Suite_Help_Center
   b. Click on the “Click here”
      (for quick access to the CPI New User Training Modules)

2. From the CPI New User Training Modules webpage:
   a. Navigate to the CPI New User Training Modules at:
      https://help.liasonedu.com/Clinical_Assessment_Suite_Help_Center/Customer_Support_and_Resources/Webinars_and_Downloads/CPI_Training_Files
Quick Start Guide for the CPI Web Training Modules and Assessment

b. To access the PT Web CPI Training Module, click on the “APTA Physical Therapist (PT) CPI” link.

c. To access the PTA Web CPI Training Module, click on the “APTA Physical Therapist Assistant (PTA) CPI” link.

After clicking any of the access links described above, you will be taken to the first slide of the pdf file of the Training Modules where you can scroll to advance the slides.