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Accreditation, Degree, Licensure

Ivy Tech Community College, Sellersburg, Indiana, is accredited by the North Central Association of Colleges and Schools. The Associate of Science (AS) degree in Physical Therapist Assistant is awarded upon successful completion of the required 25 general education credits and 44.5 technical course credits.

For graduates to sit for any state certification or licensure examinations, the PTA Program must be accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

The Physical Therapist Assistant Program at Ivy Tech Community College, Sellersburg, is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email accreditation@apta.org; website: http://www.capteonline.org.

To contact the program or institution directly, contact Kim Krue, PT, MPT, PTA Program Chair at 812-246-3301 ext. 4290 or kkruer4@ivytech.edu.

Diversity Statement

Ivy Tech Community College is committed to a diverse and inclusive educational environment that extends beyond tolerance to respect and affirms human difference. Therefore, diversity, as defined by Ivy Tech, includes, but is not limited to, differences in race, ethnicity, religious beliefs, regional and national origin, color, gender, sexual orientation, socioeconomic status, age, disability, and political affiliation. By encouraging free and open discourse, providing educational opportunities within and outside its classrooms, and intentionally recruiting and retaining a diverse assembly of students, faculty and staff, the college endeavors to graduate culturally literate individuals who will make positive contributions to a local, national, and global society.

Non-Discrimination and Equal Opportunity Policy

Ivy Tech Community College of Indiana provides open admission, degree credit programs, courses and community service offerings, and student support services for all persons regardless of race, color, creed, national origin, religion, gender, sexual orientation, physical or mental disability, age or veteran status. The College also provides opportunities to students on the same non-discriminatory opportunity basis. Persons who believe they may have been discriminated against should contact the campus affirmative action officer, Human Resources Administrator, or Dean of Student Affairs. Ivy Tech Community College of Indiana is an accredited, equal opportunity/affirmative action institution.

Title IX

Ivy Tech Community College is committed to providing all members of the College community with a learning and work environment free from sexual harassment and assault. Ivy Tech students have options for getting help if they have experienced sexual assault, relationship violence, sexual harassment or stalking. This information can be found at https://www.ivytech.edu/prevent-sexual-violence/index.html.
If students write or speak about having survived sexual violence, including rape, sexual assault, dating violence, domestic violence, or stalking, federal law and Ivy Tech policies require that instructors share this information with the Campus Title IX Coordinator. The Campus Title IX Coordinator will contact students to let them know about accommodations and support services at the College and in the community as well as options for holding accountable the person who harmed them. When contacted, students are not required to speak with the Campus Title IX Coordinator.

If students do not want the Title IX Coordinator notified, instead of disclosing this information to their instructor, students can speak confidentially with certain individuals at the College or in the community. A list of these individuals can be found at https://www.ivytech.edu/prevent-sexual-violence/index.html under Confidential Employees and/or Community Resources.
Physical Therapist Assistant Program

Program Description

The Associate of Science in Physical Therapist Assistant may be used as an entry point into a career in rehabilitation, or to provide supplemental skills and additional authority to treat patients and to make treatment decisions for individuals who already have a background in medical treatment and/or rehabilitation.

The curriculum is designed with the classroom, laboratory, and clinical experience for graduates to gain the knowledge and skills necessary to provide physical therapy services in the role of a Licensed Physical Therapist Assistant. The technical core of the curriculum is designed to allow graduates to become clinical problem solvers, rather than exclusively treatment providers.

Program Outcomes

Upon completion of the Physical Therapist Assistant program, the student will:

- Demonstrate critical and creative thinking.
- Recognize and understand cultural and individual differences, in terms of both contemporary and historical perspectives.
- Recognize and understand social, political, civic, and environmental responsibilities relative to our society.
- Apply basic scientific concepts in a variety of settings.
- Communicate effectively in written, oral and symbolic forms.
- Exhibit quantitative literacy.
- Apply ethical reasoning.
- Practice confidentiality, perform within ethical and legal boundaries, practice within the scope of education, and exercise efficient time management in patient care.
- Integrate knowledge of clinical theory by utilizing infection control, assisting the physical therapist, and performing delegated procedures.
- Apply a comprehensive treatment plan developed by a physical therapist.
- Integrate and participate in timely communication, systematic healthcare delivery, and application of knowledge and skills through patient care and education.
- Practice appropriate assessment and measurement techniques to assist the supervising physical therapist in monitoring and modifying the plan of care within the knowledge and limits of practice.
- Demonstrate interaction with patients and families in a manner that provides the desired psychosocial support including the recognition of cultural and socioeconomic differences.
- Demonstrate application of physical therapy skills for other health care providers, patients, and families.
- Design appropriate documentation for relevant aspects of patient treatment.
- Apply the principles of the physical therapy profession to personal and professional growth.
Program Mission

The Physical Therapist Assistant Program at Ivy Tech Community College, Sellersburg, is an affordable program to prepare students (regardless of race, gender, religion, national origin, sexual orientation, marital status, age, physical or mental disability, or veteran status), who have the necessary talent and inclination, in an Associate degree curriculum leading to a successful career as a Physical Therapist Assistant. The program seeks to develop dedicated, honest individuals who value excellence, diversity, compassion, human interaction, love of learning and stewardship, and who will serve the larger community of South Central Indiana through provision of rehab services.

Program Vision

Graduates of the Ivy Tech Physical Therapist Assistant Program will provide the highest level of therapy services to the community and be the employees of choice of healthcare providers.

Program Philosophy

The program philosophy of curriculum development includes a commitment to coordinated, sequential learning; delineation of the roles and responsibilities of the physical therapist, physical therapist assistant, and the physical therapy aide; an understanding of the changing nature of the profession and health care in general; and an opportunity for exploration of areas of student interest. Additionally, the program philosophy incorporates a commitment to academic and clinical faculty development, with the purpose of enhancing effectiveness of instruction, refining leadership, teaching effectiveness, and interpersonal skills so that the students are prepared to take their place as para-professionals in the field of physical therapy.

Program Goals

The program goal, an extension of the College mission, is to provide students with a quality education, which enables them to be competent physical therapist assistants throughout their careers. The goals are as follows:

1. Graduate competent students into the community who have adopted professional behaviors representative of a physical therapist assistant.
2. Assist students in employment placement before and following graduation.
3. Maintain licensure exam results of graduates equal to or exceeding the national standards.
4. Provide academic and clinical settings, which stimulate student learning.
5. Update, review, or modify curriculum as identified by students, faculty, College administrators, community, and PT/PTA professionals.
6. Maintain state of the art equipment and laboratory facilities.
7. Exemplify and demonstrate the importance of professional membership in the APTA.
8. Ensure that equal educational opportunities are available for all students regardless of race, color, creed, national origin, sexual orientation, age, disability, or marital status.
9. Organize and maintain an advisory committee, which consists of persons who are actively engaged in, or support the practice of physical therapy.
10. Maintain equal or greater than the APTA required two-year average 85% ultimate passage rate on the National PTA Examination.

Program Faculty

The faculty of the Ivy Tech Physical Therapist Assistant Program believe that the role of the teacher is to be a guide and facilitator of learning and, as such, encourage students to assume responsibility for their own learning. The faculty members are dedicated to assisting each student to attain his/her maximum potential by offering the student several options for learning in a structured program. The instructor assists the students to perceive the interconnections between facts, concepts, and principles presented in theory and their clinical application. Meaningful relationships, which are discovered, assist the learner to maximize skills and knowledge in clinical problem solving in the rehabilitation setting. The faculty strive to enhance the student’s participation in a cooperative relationship, development of critical thinking, which incorporates use of judgment, and communication techniques.

We believe that learning experiences that consider the student’s learning needs and capabilities should be selected and directed by the faculty in cooperation with the student. The student should be assisted to pursue established clinical and theory objectives by utilizing a variety of learning methods suited to their individual learning needs. The faculty, with student participation, evaluate learning based upon prescribed standards of expected behaviors.

PTA Program Chair:
   Kim Krueger, PT, MPT
   kkrueger4@ivytech.edu
   (812) 246-3301 ext. 4290

Academic Coordinator of Clinical Education:
   Shelley Siebert, PT, MPT
   msiebert7@ivytech.edu
   (812) 246-3301 ext. 4537

Full Time Faculty:
   Kim Krueger, PT, MPT
   Shelley Siebert, PT, MPT
   Nancy Cox, PTA, MS
   ncox41@ivytech.edu
Curriculum: Physical Therapist Assistant Associate of Science+

PREREQUISITES (Must be completed by the end of Spring Term for Application)

*PTAS 101  Introduction to the Physical Therapist Assistant
**APHY 101  Anatomy and Physiology I
**APHY 102  Anatomy and Physiology II
**ENGL 111  English Composition
**SCIN 111  Physical Science

**Introduction to the Physical Therapist Assistant (PTAS 101), Anatomy and Physiology I and II (APHY 101 and 102), English Composition (ENGL 111), and Science 111 (SCIN 111) are prerequisites that are necessary to apply for the PTA Program. The remaining general education core classes are required for graduation, but not for application to the program. However, they must be successfully completed prior to the final programmatic spring semester when the student will be in clinical education.

**GENERAL EDUCATION CORE = 25 CREDITS (Includes APHY 101, 102; ENGL 111; SCIN 111)

APHY 101  Anatomy and Physiology I    3
APHY 102  Anatomy and Physiology II    3
COMM 102  Intro to Interpersonal Communications
        OR
COMM 101  Fundamentals of Public Speaking     3
ENGL 111  English Composition      3
MATH 136  College Algebra         3
PSYC 101  Introduction to Psychology    3
SCIN 111  Physical Science          3
SOCI 111  Introduction to Sociology     3
IVYT 101  First Year Seminar      1

*TECHNICAL CORE = 44.5 CREDITS (Includes PTAS 101)

PTAS 101  Introduction to the Physical Therapist Assistant  3
PTAS 102  Diseases, Trauma and Terminology     3
PTAS 103  Administrative Aspects of the PTA    3
PTAs 106  Treatment Modalities I          5
PTAS 107  Kinesiology                     5
PTAS 115  Clinical I                2.5
PTAS 205  Clinical II          6
PTAS 201  Treatment Modalities II       3
PTAS 202  Treatment Interventions for Special Populations 2
PTAS 215  Clinical III     6
PTAS 217  Treatment Modalities III      5
PTAS 224  Current Issues and Review    1

+TOTAL DEGREE = 69.5 CREDITS (General Education Core + Technical Core)
+The College and PTA Program reserve the right to revise these requirements at any time.
Purpose of Physical Therapy Clinical Education

Although each academic physical therapist assistant program possesses some unique features of sequence, format, and focus within the curriculum, all professional entry-level physical therapist assistant programs are designed to prepare a physical therapist assistant for entry-level practice. The function of all clinical education experiences is to teach the student the process of thinking, feeling, and acting as a physical therapist assistant. To this end, the clinical education component of all programs holds common goals and functions.

The process of achieving entry-level competence is best accomplished through a progression of clinical education experiences. These experiences should be designed to reflect the student’s individual needs and to allow the student time to practice, to apply, and to investigate academic knowledge, skills, and attitudes in five basic areas:

1. Professional demeanor
2. Logic and comprehension skills
3. Clinical skills
4. Communication
5. Administration/Management

These five areas are essential for entry-level competence. Thus, the use of a standardized tool in assessing and documenting a student’s performance in the clinical setting is both possible and beneficial.

PROBLEM SOLVING PROCESS
Problem solving requires the ability to:

1. Understand the physical therapy problem
2. Implement the solution outlined by the plan of care
3. Recognize the need for patient re-evaluation by a physical therapist

The Clinical Instructor’s role is to help the student through the problem-solving process. Educational programs place a great deal of importance on the student’s ability to problem solve, as students cannot be exposed to every clinical situation in the classroom. In the classroom, students learn normal function and pathological conditions to understand the rationale for the therapeutic process of treatment procedures. The practice of these therapeutic processes builds skill. However, a creative approach is essential as every patient’s problem is somewhat unique. Much of the establishment of skill in therapeutic processes and the opportunity for creativity occurs in the clinical setting.

To be able to solve problems, individuals must see relationships between the different elements and process a variety of concepts and data. As the student becomes better at problem solving and increases his/her knowledge of normal function, pathology, and therapeutic process; a “total patient” picture emerges.

While the competent practitioner should be prepared to solve any patient problem, he/she should also recognize the assistance of the patient and other members of the health care team as resources. In this way, the “total patient” picture is complete.
Clinical Education Sequence

PTA students will complete three clinical rotations. Clinical I: PTAS 115 (integrated clinical) consists of 40 hours per week for three weeks. Clinical II: PTAS 205 and Clinical III: PTAS 215 (terminal clinicals) each consist of 40 hours per week for seven weeks.

The clinical education experience includes one rotation in each of the following settings: inpatient physical therapy, outpatient physical therapy, and a setting in an area of interest for the student. A variety of clinical settings is available for the PTA student’s clinical education assignments. Examples of these settings include: hospital based, rehabilitation, extended care/skilled nursing, outpatient, sports physical therapy, pediatrics, geriatrics, and aquatics.

Clinical I: PTAS 115 – First Year PTA Students

This affiliation is the students’ first official clinical setting experience. The students have completed: anatomy, kinesiology, disease and trauma, medical terminology, modalities, basic patient care including treatment of the orthopedic patient, and aspects of administration. The students are best served with a rotation that provides a majority of either inpatient and/or outpatient opportunities that focus on areas of treatment listed below. This affiliation is full time for three weeks and is situated in the curricular sequence at the end of technical semester two. Students are expected to demonstrate beginning proficiency in the areas listed below and to manage a small caseload by the end of the rotation.

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<td>Understanding PTA/PT relationship</td>
<td>Gait training with assistive devices</td>
<td>Beginning exercise development with the orthopedic population</td>
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Clinicals II and III: PTAS 205 and 215 – Second Year PTA Students

These consecutive terminal affiliations consist of supervised clinical work in preparation for entry-level practice in any therapy setting. Each affiliation is a full-time clinical experience, seven weeks in duration. The students have completed all classroom coursework and have increased knowledge in special populations, neurological, cardiovascular, pediatric, orthotics/prosthetics, and wound care. This includes increased understanding of treatments, precautions/contraindications, and outcomes for the above areas of care. Students are expected to begin each of these clinicals with direct supervision from a clinical instructor (CI) to allow the students to acclimate to the responsibilities of the facility. At the completion of these clinicals, the student is expected to be at Advanced Intermediate or Entry Level on the PTA Clinical Performance Instrument for most of the required skills.
COURSE TITLE: Clinical I
COURSE NUMBER: PTAS 115
PREREQUISITES: PTAS 102 Diseases, Trauma and Terminology, PTAS 103 Administrative Aspects of the Physical Therapist Assistant, PTAS 106 Treatment Modalities I, PTAS 201 Treatment Modalities II, and Program Advisor Approval
SCHOOL: Health Sciences
PROGRAM: Physical Therapist Assistant
CREDIT HOURS: 2.5
CONTACT HOURS: Clinical: 7.5
DATE OF LAST REVISION: Fall, 2016
EFFECTIVE DATE OF THIS REVISION: Fall, 2017

CATALOG DESCRIPTION: Requires the student to perform in a clinical environment with patients, using applications of theory and techniques of PTAS 106, under the guidance of a registered physical therapist.

MAJOR COURSE LEARNING OBJECTIVES: Upon successful completion of this course the student will be expected to:

1. Communication 7D7
   - Cooperate in communication with instructor(s) for learning in a clinical setting
   - Recognize constructive feedback in communication
   - Identify medical professionals in rehabilitation and appropriate types of communication
   - Recognize the need for medical and layman’s terminology with appropriate individuals
   - Recognize conflicts and observe protocols for resolution
   - Realize influences of nonverbal communication in patient care

2. Individual and Cultural Differences 7D8
   - Recognize nonverbal communication in various cultures for effective patient care
   - Discuss cultural influences on plan of care development by the Physical Therapist

3. Behavior and Conduct 7D4, 7D5
   - Comply with clinical setting professional appearance and demeanor standards
   - Devote oneself to punctual and consistent attendance

4. Plan of Care – Understanding [toward goals and intended goals] 7D9, 7D17
   - Discuss relevant anatomy and physiology of encountered pathophysiologies in a clinical setting
   - Explain characteristics of encountered pathophysiologies in a clinical setting
   - Restate intended goals and intervention strategies in the physical therapy plan of care

5. Plan of Care - Implementation under the direction and supervision of a Physical Therapist 7D23+
• Imitate psychomotor skills acquired in didactic and clinical training in the areas listed below as relevant to the assigned clinical setting under the assistance of the clinical instructor*
  ■ Functional training 7D23d
  ■ Infection control procedures 7D23i
  ■ Manual therapy techniques 7D23e
  ■ Physical agents and mechanical agents 7D23c
  ■ Therapeutic exercise 7D23h
  ■ Wound management 7D23i

6. Competency in Data Collection under the direction and supervision of a Physical Therapist 7D18, 7D24+
• Imitate psychomotor skills acquired in didactic and clinical training in areas listed below as relevant to the assigned clinical setting under the assistance of the clinical instructor*
  ■ Assistive, adaptive, orthotic, protective, supportive, and prosthetic
  ■ Gait, locomotion, balance 7D24e
  ■ Joint integrity and mobility 7D24g
  ■ Muscle performance 7D24h
  ■ Pain 7D24j
  ■ Posture 7D24k
  ■ Range of motion 7D24l

7. Scope of Practice – Plan of Care: adjusts, recognizes, reports, clarifies with supervising PT 7D19, 7D20, 7D21
• Report recommendations for patient progression within the physical therapy plan of care
• Review with supervising Physical Therapist patient progression and/or regression requiring update and/or revision of the physical therapy plan of care

8. Plan of Care - education of patient, caregiver and non-healthcare others with supervising PT 7D12
• Explain components of the physical therapy plan of care to patients and other relevant individuals for understanding and best outcomes
• Express effective teaching methods to patients and other relevant individuals according to the physical therapy plan of care

9. Emergency response 7D26, 7D27
• Recognize safety and emergency situations in physical therapy interventions in a clinical setting with the assistance of the clinical instructor
• Recognize immediate emergency situations in medical status in a clinical setting with the assistance of the clinical instructor

10. Documentation and discharge planning with supervising PT 7D22
• Review physical therapy documentation components in a patient care setting 7D18
• Locate necessary patient characteristics in medical and physical therapy documentation
• Report relevant information for documentation of physical therapy services

11. Administration 7D1-3
• Comply with ethical and legal standards of the Physical Therapist Assistant 7D28
• Recognize the Physical Therapist Assistant’s role in fiscal management activities 7D31
• Comply with positions, policies, and procedures of APTA and clinical setting 7D29, 7D30
12. Career Development – lifelong learning; PTA in clinical education
   • Recognize the relationships among individuals in physical therapy rehabilitation: physical therapist, physical therapist assistant, rehabilitation aide, and physical therapist assistant student 7D13
   • Recognize strengths and weakness in self-assessment of learning abilities in a clinical setting 7D14

*The range of exposure for these objectives is dependent upon placement in the specifically assigned clinical site. Students experience completion of requirements in the clinical setting according to the policies and procedures for clinical education in the physical therapist assistant program.

METHOD OF EVALUATION:

PTAS 115 – Clinical I: Assessment will be completed by the Clinical Instructor for each student and information from that form will be used to rate the performance. A final grade will be assigned by the ACCE based on this assessment along with other course requirements as outlined on the course syllabus. Please refer to the Completion of Clinical Experiences section of the Clinical Education Manual for criteria of satisfactory versus unsatisfactory completion.

POLICIES:

1. Students will read the Clinical Education Manual and be prepared to participate in a classroom discussion of its content before attending a clinical assignment
2. Students are given the opportunity to ask questions regarding the clinical education experience and are urged to do so.
3. Students must attend their clinical education assignments as arranged by the Academic Coordinator of Clinical Education
4. If a student is absent or late, he/she must call the Clinical Instructor and ACCE. Time lost due to absence or tardiness must be “made up” during the current clinical affiliation. Prolonged absence of two days or more will require an additional clinical assignment either at the same or a different affiliated clinical site.
Collegewide Course Outline of Record
PTAS 205 (Clinical II)

COURSE TITLE: Clinical II
COURSE NUMBER: PTAS 205
PREREQUISITES: PTAS 115 Clinical I, PTAS 202 Treatment Modalities II, PTAS 217 Treatment Modalities III, and Program Advisor Approval
SCHOOL: Health Sciences
PROGRAM: Physical Therapist Assistant
CREDIT HOURS: 6
CONTACT HOURS: Clinical: 18
DATE OF LAST REVISION: Fall, 2016
EFFECTIVE DATE OF THIS REVISION: Fall, 2017

CATALOG DESCRIPTION: Requires the student to perform in a clinical environment with patients using applications of theories and techniques of PTAS 201, PTAS 202, and PTAS 217 under the guidance of a registered physical therapist.

MAJOR COURSE LEARNING OBJECTIVES: Upon successful completion of this course the student will be expected to:

1. Communication 7D7, 7D15, 7D17, 7D20
   • Seek communication with instructor(s) for greater learning in a clinical setting
   • Seek constructive feedback in communication for improved clinical performance
   • Balance conflicts and accept responsibility in conflict resolution
   • Examine influences of nonverbal communication in patient care

2. Individual and Cultural Differences 7D8
   • Recognize cultural influences on the provision of physical therapy service under the plan of care within a clinical setting

3. Behavior and Conduct 7D1, 7D4, 7D5
   • Display clinical setting professional appearance and demeanor standards
   • Display punctual and consistent attendance
   • Display responsibility for professional behaviors specific to a clinical setting

4. Plan of Care – Understanding [toward goals and intended outcomes] 7D9, 7D17
   • Apply knowledge of relevant anatomy and physiology of encountered pathophysiologies in a clinical setting with regard to intervention options
   • Employ knowledge of characteristics of encountered pathophysiologies in a clinical setting
   • Employ intervention strategies for intended goals and outcomes in the physical therapy plan of care in a clinical setting

5. Plan of Care - Implementation [under the direction and supervision of a Physical Therapist]
   • Coordinate psychomotor skills acquired in didactic and clinical training in the areas listed below as relevant to the assigned clinical setting under the assistance of the clinical instructor*
     • Functional training 7D23d
6. Plan of Care - Competency in Data Collection [under the direction and supervision of a Physical Therapist]
   - Coordinate psychomotor skills acquired in didactic and clinical training in areas listed below as relevant to the assigned clinical setting under the assistance of the clinical instructor*
     - Aerobic capacity and endurance 7D24a
     - Anthropometric characteristics 7D24b
     - Arousal, mentation, and cognition 7D24c
     - Assistive, adaptive, orthotic, protective, supportive, and prosthetic 7D24d
     - Gait, locomotion, balance 7D24e
     - Integumentary integrity 7D24f
     - Joint integrity and mobility 7D24g
     - Muscle performance 7D24h
     - Neuromotor development 7D24i
     - Pain 7D24j
     - Posture 7D24k
     - Range of motion 7D24l
     - Self-care/home management; Community/work reintegration 7D24m
     - Ventilation, respiration, circulation examination 7D24n

7. Scope of Practice – Plan of Care: monitor, adjusts, determines, reports, clarifies with supervising PT 7D19, 7D20, 7D21
   - Establish patient progression therapeutic strategies within the physical therapy plan of care in a clinical setting
   - Report patient progression and/or regression requiring update and/or revision of the physical therapy plan of care and consult accordingly with clinical instructor and supervising Physical Therapist in a clinical setting

8. Plan of Care - education of patient, caregiver and non-healthcare others with supervising PT 7D12
   - Explain components of the physical therapy plan of care to patients and other relevant individuals for understanding and best outcomes
   - Express effective teaching methods to patients and other relevant individuals according to the physical therapy plan of care

9. Emergency Response 7D26, 7D27
   - Follow safety and emergency procedures in physical therapy interventions in a clinical setting with the assistance of the clinical instructor
   - Follow immediate emergency procedures regarding patient medical status in a clinical setting with the assistance of the clinical instructor

10. Documentation and Discharge Planning [with supervising PT] 7D18, 7D22, 7D25
    - Inform clinical instructor of necessary patient characteristics in medical and physical therapy documentation for effective and safe physical therapy provision
    - Provide effective physical therapy documentation in a patient care setting

11. Healthcare Literature 7D10, 7D11
- Integrate research in a clinical scenario for investigation of the physical therapy plan of care

12. Education – other healthcare members; role of PTA 7D12
- Support the role of the Physical Therapist Assistant in the provision of the physical therapy plan of care in the education of others

13. Administration 7D1, 7D2, 7D3, 7D6, 7D28, 7D29, 7D30, 7D31
- Demonstrate ethical and legal standards of the Physical Therapist Assistant
- Demonstrate fiscal responsibility as a Physical Therapist Assistant
- Demonstrate compliance with positions, policies, and procedures of APTA and clinical setting

14. Social Responsibility 7D5, 7D13, 7D28
- Value the responsibility of a Physical Therapist Assistant in educating patients in available alternative methods of care, other than physical therapy, with the support of the supervising Physical Therapist

15. Career Development – lifelong learning; PTA in clinical education 7D13, 7D14
- Examine the relationships among individuals in physical therapy rehabilitation: physical therapist, physical therapist assistant, rehabilitation aide, and physical therapist assistant student
- Examine strengths and weakness in self-assessment of learning abilities in a clinical setting

*The range of exposure for these objectives is dependent upon placement in the specifically assigned clinical site. Students experience completion of requirements in the clinical setting according to the policies and procedures for clinical education in the physical therapist assistant program.

METHOD OF EVALUATION:

The PTA Clinical Performance Instrument (PTA CPI) will be completed by the student’s Clinical Instructor. Information from this form will be used to rate the performance of the student. A final grade including the CPI performance, along with other course requirements as outlined in the course syllabus, will be assigned by the ACCE. Please refer to the Completion of Clinical Experiences section of the Clinical Education Manual for criteria of satisfactory versus unsatisfactory completion.

POLICIES:

1. Students will read the Clinical Education Manual and be prepared to participate in a classroom discussion of its content before attending a clinical assignment
2. Students are given the opportunity to ask questions regarding the clinical education experience and are urged to do so.
3. Students must attend their clinical education assignments as arranged by the Academic Coordinator of Clinical Education
4. If a student is absent or late, he/she must call the Clinical Instructor and ACCE. Time lost due to absence or tardiness must be “made up” during the current clinical affiliation. Prolonged absence of three days or more will require an additional clinical assignment either at the same or a different affiliated clinical site.
Collegewide Course Outline of Record
PTAS 215 (Clinical III)

COURSE TITLE: Clinical III
COURSE NUMBER: PTAS 215
PREREQUISITES: PTAS 205 Clinical II and Program Advisor Approval
SCHOOL: Health Sciences
PROGRAM: Physical Therapist Assistant
CREDIT HOURS: 6
CONTACT HOURS: Clinical: 18
DATE OF LAST REVISION: Fall, 2016
EFFECTIVE DATE OF THIS REVISION: Fall, 2017

CATALOG DESCRIPTION: Requires the student to perform in a clinical environment with patients using applications of theory and techniques of PTAS 202 and PTAS 217 under the guidance of a registered physical therapist.

MAJOR COURSE LEARNING OBJECTIVES: Upon successful completion of this course the student will be expected to:

1. Communication (7D7, 7D15, 7D17, 7D20)
   - Display effective communication with instructor(s) for greater learning in a clinical setting
   - Relate to constructive feedback and demonstrate progression in clinical skills
   - Display conflict resolution
   - Relate to nonverbal communication in patient care

2. Individual and Cultural Differences (7D8)
   - Discriminate between cultural and medical/physical in the provision of physical therapy services under the plan of care within a clinical setting

3. Behavior and Conduct (7D1, 7D5, 7D4)
   - Display clinical setting professional appearance and demeanor standards
   - Display punctual and consistent attendance
   - Display responsibility of professional behaviors specific to a clinical setting

4. Plan of Care – Understanding [toward goals and intended outcomes] (7D9, 7D17)
   - Apply relevant anatomy, physiology, and pathophysiology knowledge to the encountered pathophysiology in a clinical setting
   - Examine necessary patient characteristics in medical and physical therapy documentation
   - Differentiate available strategies to meet the intended goals and outcomes of the physical therapy plan of care

5. Plan of Care - Implementation [under the direction and supervision of a Physical Therapist] (7D23+)
Demonstrate psychomotor skills acquired in didactic and clinical training in the areas listed below as relevant to the assigned clinical setting under the assistance of the clinical instructor.

- Airway Clearance Techniques
- Application of Devices and Equipment
- Biophysical Agents
- Functional Training in Self-care and in Domestic, Education, Work, Community, Social, and Civic Life (7D24d, 7D24e, 7D24m, 7D24l, 7D27)
- Manual Therapy (7D24g, 7D24j, 7D24k, 7D24l, 7D27)
- Motor Function Training (7D243)
- Balance, Gait, etc.
- Patient/Client Education
- Therapeutic Exercise
- Wound Management (7D26, 7D27) – isolation techniques, sterile techniques, application and removal of dressing or agents, and identification of precautions for dressing removal

6. Plan of Care - Competency in Data Collection [under the direction and supervision of a Physical Therapist] (7D24+, 7D18)

- Demonstrate psychomotor skills acquired in didactic and clinical training in areas listed below as relevant to the assigned clinical setting under the assistance of the clinical instructor.
  - Aerobic capacity and endurance
  - Anthropometric characteristics
  - Mental Functions
  - Assistive Technology
  - Gait, Locomotion, Balance
  - Integumentary Integrity
  - Joint Integrity and mobility
  - Muscle Performance
  - Neuromotor Development
  - Pain
  - Posture
  - Range of motion
  - Self-care and Civic, Community, Domestic, Education, Social and Work Life
  - Ventilation, Respiration, and Circulation

7. Scope of Practice – Plan of Care: Monitors, adjusts, determines, reports, and clarifies with supervising PT (7D19, 7D20, 7D21))

- Differentiate potential for recommendations for patient progression within the physical therapy plan of care
- Appraise patient progression and/or regression requiring update and/or revision of the physical therapy plan of care and consult accordingly with clinical instructor and supervising Physical Therapist

8. Plan of Care - education of patient, caregiver and non-healthcare others with supervising PT (7D12)
• Choose appropriate components of the physical therapy plan of care for the education of patients and other relevant individuals for understanding and best outcomes
• Use effective teaching methods for patients and other relevant individuals according to the physical therapy plan of care

9. Emergency response (7D26, 7D27)
• Employ safety and emergency situations in physical therapy interventions in a clinical setting with the assistance of the clinical instructor
• Employ immediate emergency situations in medical status in a clinical setting with the assistance of the clinical instructor

10. Documentation and Discharge Planning [with supervising PT] (7D18, 7D22, 7D25)
• Demonstrate effective physical therapy documentation in a patient care setting

11. Healthcare Literature (7D10, 7D11)
• Employ research to a clinical scenario for investigation of the physical therapy plan of care

12. Education – other healthcare members; role of PTA (7D12)
• Defend the responsibilities of the PTA in the physical therapy plan of care in a clinical in-service presentation

13. Administration (7D1, 7D2, 7D3, 7D6, 7D28, 7D29, 7D30, 7D31):
• Demonstrate with ethical and legal standards of the Physical Therapist Assistant
• Demonstrate fiscal responsibility as a Physical Therapist Assistant
• Demonstrate compliance with positions, policies, and procedures of APTA and clinical setting

14. Social Responsibility (7D5, 7D13, 7D28)
• Value the responsibility of a Physical Therapist Assistant in educating patients in available alternative methods of care, other than physical therapy, with the support of the supervising Physical Therapist

15. Career Development (7D13, 7D14) – lifelong learning; PTA in clinical education
• Examine the relationships among individuals in physical therapy rehabilitation: physical therapist, physical therapist assistant, rehabilitation aide, and physical therapist assistant student
• Seek input and understanding of strengths and weakness in self-discovery and learning

*The range of exposure for these objectives is dependent upon placement in the specifically assigned clinical site. Students experience completion of requirements in the clinical setting according to the policies and procedures for clinical education in the physical therapist assistant program.

**If one or more of the above is not applicable to the current clinical site, the student must have demonstrated independent, competent, and safe performance of the skill or task in the previous clinical. If the student has not had the opportunity to demonstrate the task or it was not performed independently, safely, and competently, arrangements will be made for the student to demonstrate the task(s) in the clinical setting with a Clinical Instructor from another affiliated setting. This setting will be determined by the ACCE and Program Chair. This must be completed the week following this clinical affiliation, as arranged by the ACCE.
METHODS OF EVALUATION:

The PTA Clinical Performance Instrument (PTA CPI) will be completed by the student’s Clinical Instructor. Information from this form will be used to rate the performance of the student. A final grade including the CPI performance, along with other course requirements as outlined in the course syllabus, will be assigned by the ACCE. Please refer to the Completion of Clinical Experiences section of the Clinical Education Manual for criteria of satisfactory versus unsatisfactory completion.

POLICIES:

1. Students will read the Clinical Education Manual and be prepared to participate in a classroom discussion of its content before attending a clinical assignment
2. Students are given the opportunity to ask questions regarding the clinical education experience and are urged to do so.
3. Students must attend their clinical education assignments as arranged by the Academic Coordinator of Clinical Education
4. If a student is absent or late, he/she must call the Clinical Instructor and ACCE. Time lost due to absence or tardiness must be “made up” during the current clinical affiliation. Prolonged absence of three days or more will require an additional clinical assignment either at the same or a different affiliated clinical site.
General Responsibilities of Clinical Education Team

Academic Coordinator of Clinical Education (ACCE)
The ACCE is employed by the educational institution to relate the students’ clinical education to the curriculum. The ACCE administers the total clinical education program and, in association with the academic and clinical facility, plans and coordinates the individual student’s program of clinical experience with academic preparation, and evaluates the student’s progress.

The ACCE is dedicated to facilitating each student’s successful completion of all clinical education courses by fulfilling the following responsibilities:

1. Assure that written legal agreements are in place between the College and the clinical site, and that they are updated as needed. A current signed agreement must be on file before a student is allowed to complete an internship at the clinical site.
2. Assign all eligible students to clinical education internships per program policies and procedures.
3. Orient students to the purpose, process and policies and procedures related to clinical education.
4. Maintain open communication with each CCCE and/or CI by any method deemed appropriate. This communication should occur before, during and after assigned internships.
5. Maintain reference information describing each clinical education site and its policies, procedures and resources.
6. Develop new clinical education experiences that meet the guidelines, policies and procedures established by the program.
7. Provide pertinent and required course information to CCCEs, CIs and students.
8. Evaluate material submitted by students for fulfillment of the requirements of each clinical education course.
9. Evaluate the Clinical Instructor’s assessment of each student’s performance and determine the course grade in compliance with program policies and procedures.
10. If challenges, conflicts or problems arise during the student’s clinical internship, upon notification, the ACCE will maintain contact with the appropriate person(s), to ensure successful resolution of the issue.
11. When appropriate, the ACCE will terminate a student from a clinical internship.
12. Arrange remediation experiences for students who are eligible for remediation.
13. Provide feedback as appropriate (positive and negative) to clinical sites.
14. Assess clinical education needs of the CCCEs and CIs and provide training as appropriate.
15. Conduct clinical education opportunities to facilitate development of the CCCEs and CIs.
16. Assign student grades for all clinical education courses.

Center Coordinator of Clinical Education (CCCE)
The CCCE is an individual employed by the clinical facility who coordinates and arranges the clinical education of the physical therapy student and who communicates with the ACCE and faculty at the educational institution. This person may or may not have other responsibilities at the clinical education center.

The CCCE is dedicated to facilitating successful completion of student experiences at their clinical site by fulfilling the following responsibilities:

1. Provide the philosophy of the clinical site and provide consistent student expectations.
2. Assure that there is a contractual agreement in place between Ivy Tech Community College and the clinical site prior to allowing a student to complete an internship at the clinical site.
3. Keep student records and information secure and confidential.
4. Provide student orientation which includes at minimum, information about: safety, emergency and security procedures; department policies and procedures that may impact student performance and/or evaluation; and any other information pertinent to successful completion of a student internship.
5. Communicate with the ACCE regarding coordination of: student assignments, student schedules, clinical education planning and evaluation, and CI development.
6. Maintain appropriate communication with the ACCE about the clinical site and student internships.
7. Assign physical therapists to act as CIs who meet the Ivy Tech Community College Clinical Instructor requirements.
8. Assist in planning and problem solving with the CI/student team in an effective and efficient manner.
9. Encourage feedback from students, the ACCE, CI(s) and other interested individuals.
10. Evaluate the clinical education resources and needs of the site.
11. Manage and supervise the clinical education program at the site.

**Clinical Instructor (CI)**
The Clinical Instructor is an individual employed by the clinical facility who is responsible for the direct instruction and supervision of the physical therapy student in the clinical education setting.

The CI is dedicated to facilitating a successful learning experience for each student assigned to them to meet program and student learning objectives by fulfilling the following responsibilities:

1. Effectively structure the clinical internship to offer the best learning opportunity for the student.
2. Submit current and required information to the ACCE.
3. Provide effective and efficient formative and summative feedback to students during clinical internship.
4. Complete all required paperwork for each assigned student.
5. Understand and abide by the clinical education policies and procedures of the Ivy Tech Community College PTA Program.
6. Provide assigned students with an orientation to the clinical site and any written and unwritten policies that impact student evaluation.
7. Communicate with the ACCE when a student has been advised of unsatisfactory performance, unsatisfactory progress, or when a remediation plan has been initiated.
8. Provide student with appropriate supervision that will allow for evaluation of the student’s skills, knowledge and attitudes.
9. Obtain informed consent from patients prior to treatment by PTA student.
10. Model professionalism and maintain a professional relationship with the student.
11. Hold current licensure as a PT or PTA and have a minimum of one year clinical experience.
12. Students can be supervised by two clinical instructors, but one should be designated as the primary clinical instructor, responsible for completion of all necessary paperwork and correspondence with the ACCE.
Student
The student should fulfill the following responsibilities:

1. Abide by all policies, procedures and requirements outlined in all clinical course syllabi and in the Clinical Education Manual.
2. Assure and/or obtain informed consent from patients prior to treatment.
3. Take responsibility for own learning and demonstrate professionalism at all times.
4. Inform the ACCE as soon as a problem related to clinical education is identified.
5. Abide by the requirements of the written agreement between the program and each clinical site.
6. Abide by assigned clinical sites’ policies and procedures.
7. Fulfill all duties and assignments made by the CCCE, CI and ACCE.

Reference: Barr, Jean S., Gwyer, Jan, and Tolmor, Zippora. Standards for Clinical Education in Physical Therapy
Clinical Site Selection Process

Pre-Clinical Site Scheduling and Communication

1. The ACCE ensures current clinical site affiliation contracts remain up to date throughout the year.
2. The ACCE mails and/or emails clinical commitment forms to facilities in March. The commitment form specifies clinical rotation dates for Clinicals I, II, and III for the following year.
3. The CCCE returns the commitment form within three months indicating the availability of the facility to accommodate students for the following year.
4. The ACCE confirms clinical placements with responding facilities at the beginning of the Fall Semester before clinical rotations. A clinical information packet is sent to each site six to eight (6-8) weeks prior to the start of the clinical rotation.
5. Students contact the CCCE at the assigned clinical sites by phone (preferably) or email after being notified of the assignment.
6. Facilities are encouraged to contact the ACCE at any time should changes in its personnel, operations, or policies affect clinical education assignments and operations.

Student Input

Ivy Tech Community College maintains Clinical Affiliation Agreements with a variety of clinical facilities. Binders with information about these clinical sites is available in the ACCE office.

A student who is aware of a clinical site that is interested in establishing a clinical affiliation should give the following information to the ACCE at least six months in advance of the selection of the affiliation sites:

1. The name of the facility
2. The address and telephone number of the facility
3. The name of the contact person at the facility

Consideration will be given to the facility based on the following criteria:

- Location of facility
- Type of experience(s) offered
- Willingness to continue the affiliation on a year-to-year basis
- Desire to have students
- Affiliations already existing with other PT/PTA programs
- A student program, with objectives, in place
- Clinical staff that possesses the expertise necessary for quality patient care, maintains ethical standards, and allows open exchange of ideas with students
- Adequate treatment and work space for students
- CCCE with at least 2 years of clinical experience in good standing with the employer
- CI with at least 1 year of clinical experience, in good standing with the employer, and capable of providing appropriate and constructive feedback to students.
Choosing the Site for Clinical Experiences

For Clinical I (PTAS 115) the ACCE will provide students with a clinical site assignment based on available sites and the ability to focus on skills learned in PTAS 101, PTAS 106, PTAS 107, and PTAS 201.

For Clinicals II and III (PTAS 205 and PTAS 215) students will provide the ACCE with a list of desired clinical sites ranked in order of preference. A list of sites with current affiliation agreements with the program is available through the Clinical Education Manual or through the ACCE. Information regarding each clinical education center is maintained in clinical sites binders in the ACCE office. Students should familiarize themselves with the contents of binders prior to making selections.

When choosing clinical sites, students should use the following guidelines:

- Seek a variety of clinical experiences and should complete only one rotation at any one site.
- Complete clinical education experiences in the following settings: an inpatient setting, an outpatient setting, and a third rotation in an area of interest for the student (based on clinical site availability). Interest areas may include, but are not limited to, a rehabilitation center, skilled nursing, geriatrics, pediatrics, sports medicine, wound care, women’s health, and aquatics.
- Unless unusual circumstances exist, students will not be assigned to an affiliation site where they are actively employed or be assigned to a Clinical Instructor who has supervised them in a previous employment situation. A student should not have his/her final affiliation at a facility where he/she has a commitment of employment.
- Students will not be assigned to more than one rotation at a new affiliation site without permission from the ACCE. A new affiliation site is a site recently established that has not had any previous affiliating students.
- No student shall contact an affiliation site for any reason related to Ivy Tech Community College PTA Program without the consent of the ACCE.

The ACCE will distribute the sites according to the student’s preferences using the following guidelines:

- First choice assignments are made whenever possible. An attempt will be made to allow each student to affiliate at the facility which is his/her first choice.
- When a student has recommended a site as described above, that student may receive priority for assignment to that site.
- When more than one student lists a facility as first choice, other factors can be considered, i.e. the variety of the student’s clinical experience, type of site, size of site, specialty areas, etc.

The ACCE will ultimately make the final decision regarding clinical placement assignments to ensure each student receives a well-rounded clinical education experience.
Clinical Conferences

A group pre-clinical conference is held for first year students 6-8 weeks prior to the starting date of Clinical I (PTAS 115) and for second year students 6-8 weeks prior to the starting date of Clinical II (PTAS 205). Information for both Clinicals II and III (PTAS 205 and 215) is provided at that meeting. During the pre-clinical conferences, the ACCE will provide information regarding the Clinical Education Manual, clinical placement process, clinical expectations, clinical requirements, and explain the evaluation process. Clinical assignments will be provided at the meeting, as well.

Individual pre-clinical conferences are available at the student’s request and may be required per faculty or facility request.
Current Facility Affiliation Agreements

The following pages list facilities with current affiliation agreements with the Ivy Tech Sellersburg PTA Program. Binders including specific information regarding each clinical site are kept in the ACCE office for student review.

Hospitals

Baptist Healthcare
  Baptist Health Floyd, New Albany, IN
  Baptist Health La Grange, La Grange, KY
  Baptist Health Louisville, Louisville, KY
  Additional Sites Available (See Information in PTA offices)

Clark Memorial Hospital

Columbus Regional Hospital

Frazier Rehab Institute

Harrison County Hospital

IU Health Paoli

Jewish Hospital
  Downtown, Louisville, KY
  Shelbyville, Shelbyville, KY

Kindred Hospital
  Kindred Hospital Indianapolis, Indianapolis, IN
  Kindred Hospital Indianapolis North, Indianapolis, IN
  Community Rehabilitation Hospital South, Greenwood, IN
  Kindred Hospital Louisville, Louisville, KY

King’s Daughters’ Hospital

Norton Healthcare
  Norton Audubon, Louisville, KY
  Norton Brownsboro, Louisville, KY
  Norton Downtown, Louisville, KY
  Norton Women’s and Children’s, Louisville, KY

Robley Rex VA Medical Center

Rush Memorial Hospital
Saints Mary and Elizabeth Hospital

Schneck Medical Center

St. Vincent
  St. Vincent Salem Hospital, Salem, IN
  St. Vincent Dunn Hospital, Bedford, IN

University of Louisville Hospital

Transitional Care/Skilled Nursing Facilities

American Senior Communities (ASC)
  Clark Rehab and SNF, Clarksville, IN
  Lake Pointe Village, Scottsburg, IN
  Meadowview, Salem, IN
  Riverview Village, Clarksville, IN
  Salem Crossing, Salem, IN
  Swiss Villa, Vevay, IN
  The Timbers of Jasper, Jasper, IN
  Additional Sites Throughout Indiana (See information in PTA offices)

Cardon
  Lincoln Hills Health Center, New Albany, IN

CommuniCare
  Harrison Health and Rehab, Corydon, IN
  Indian Creek Health and Rehab, Corydon, IN
  Rolling Hills Healthcare Center, New Albany, IN
  Sellersburg Health and Rehab, Sellersburg, IN
  Wedgewood Healthcare Center, Clarksville, IN

Diversicare
  Providence – A Transitional Care Community, New Albany, IN

Healthcare Therapy Services
  Four Seasons Retirement Center, Columbus, IN
  Good Samaritan Home, Evansville, IN
  Hickory Creek at Columbus, Columbus, IN
  Hickory Creek at Connersville, Connersville, IN
  Hickory Creek at Franklin, Franklin, IN
  Hickory Creek at Greensburg, Greensburg, IN
  Hickory Creek at Madison, Madison, IN
  Hickory Creek at New Castle, New Castle, IN
  Hickory Creek at Scottsburg, Scottsburg, IN
Maple Manor, Scottsburg, IN  
Ripley Crossing, Milan, IN  
Villas of Guerin Woods, Georgetown, IN  
Helmwood HCC, Elizabethtown, KY  
Nazareth Home, Louisville, KY  
Nazareth Home Clifton, Louisville, KY  
Springhurst Health and Rehab Center, Louisville KY  
Westminster Health and Rehab Center, Louisville, KY  
Additional Sites Available (See information in PTA offices)  

Life Care Centers of America  
Green Valley Care Center, New Albany, IN  
Additional Sites Throughout US (See information in PTA offices)  

Paragon  
Arlington Place Health Campus, Indianapolis, IN  
Ashford Place Health Campus, Shelbyville, IN  
Autumn Wood Health Campus, New Albany, IN  
Bridgepointe Health Campus, Vincennes, IN  
Covered Bridge Health Campus, Seymour, IN  
Forest Park Health Campus, Richmond, IN  
Hearthstone Health Campus, Bloomington, IN  
Oakwood Health Campus, Tell City, IN  
Owen Valley Health Campus, Spencer, IN  
Prairie Lakes Health Campus, Noblesville, IN  
Ridgewood Health Campus, Lawrenceburg, IN  
River Terrace Health Campus, Madison, IN  
St. Andrews Health Campus, Batesville, IN  
St. Charles Health Campus, Jasper, IN  
Scenic Hills Care Center, Ferdinand, IN  
Silver Oaks Health Campus, Columbus, IN  
Springhurst Campus, Greenfield, IN  
Stone Bridge Health Campus, Bedford, IN  
Thornton Terrace Health Campus, Hanover, IN  
Villages at Historic Silvercrest, New Albany, IN  
Wellbrook of Carmel, Carmel, IN  
Forest Springs Health Campus, Louisville, KY  
Franciscan Health Care Center, Louisville, KY  
Glen Ridge Health Campus, Louisville, KY  
Park Terrace Health Campus, Louisville, KY  
Westport Place Health Campus, Louisville, KY  
Additional Sites Throughout US (See Information in PTA Offices)  

Theracare  
Lutheran Home, Seymour, IN
Outpatient Facilities

**Baptist Health**
Charlestown Road, New Albany, IN
Concord Avenue, Corydon, IN
Highlander Point, Floyds Knobs, IN
Hwy 60, Sellersburg, IN
River Ridge, Charlestown, IN
State Road 403, Charlestown, IN
State Street, New Albany, IN
Veterans Parkway, Clarksville, IN
Baptist Health Occupational Medicine-Fern Valley, Louisville, KY
Baptist Health Occupational Medicine – Riverport, Louisville, KY
Baptist Physical Therapy, Jeffersontown, KY
Baptist Sports Medicine Eastpoint, Louisville, KY
Additional Sites Available (See information in PTA offices)

**Columbus Regional Physical Therapy**
Marr Road Center, Columbus, IN
Mill Race Center, Columbus, IN

**Frazier Rehab Institute**
Corydon, IN
Clarksville, IN
Jeffersonville YMCA, Jeffersonville, IN
Bullitt County, Shepherdsville, KY
Fern Valley, Louisville, KY
Medical Center East, Louisville, KY
Newburg, Louisville, KY
Northeast, Louisville, KY
Owsley Brown Frazier Sports Complex, Louisville, KY
Springhurst Sports Medicine, Louisville, KY
Southwest, Louisville, KY
UofL Sports Medicine, Louisville, KY
Additional Sites Available (See information in PTA offices)

**IU Health - Paoli**

**IU Health Bloomington Orthopedics and Sports Medicine (SIP)**
South Clarizz Blvd, Bloomington, IN
YMCA Northwest, Bloomington, IN

**King’s Daughters’ Physical Therapy**
King’s Daughters Rehabilitation Center, Madison, IN
KORT
Corydon, IN
Clarksville, IN
Georgetown, IN
Jeffersonville, IN
New Albany, IN
Bardstown, KY
Brandenburg, KY
Crestwood, KY
Downtown, Louisville, KY
Elizabethtown Physical Therapy, Elizabethtown, KY
English Station, Louisville, KY
Fern Creek, Louisville, KY
Goss Avenue, Louisville, KY
JTown, Louisville, KY
Partners in PT, Louisville KY
Preston, Louisville, KY
Old Brownsboro Crossing, Louisville, KY
Shepherdsville, Shepherdsville, KY
Shively, Louisville, KY
Springhurst, Louisville, KY

Louisville Physical Therapy

Results Physiotherapy

Robley Rex VA Medical Center
Leitchfield, KY
Louisville, KY

Rudy J. Ellis Sports Medicine Center

Schneck Medical Center

Select Physical Therapy
Columbus, IN
East, Indianapolis, IN
Franklin, Franklin, IN
Greenwood, Greenwood, IN
North, Indianapolis, IN
West, Indianapolis, IN
Additional Sites Available (See information in PTA Offices)

St. Vincent, Salem

St. Vincent, Dunn
Pediatric Specialty Clinics

All Kids Can Therapy Services

Home of the Innocents

Hopebridge
PTA Student Clinical Information

Health Services and Emergency Care Health Examinations

Ivy Tech Community College does not have a Student Health Service. Each student is responsible for the selection of a physician for his or her normal health status. If illness or injury occurs during the school day, the student should notify the instructor or the PTA Program Chair. If emergency room treatment is required on clinical days, the student must be referred by the Clinical Instructor. The student will obtain care either from his or her personal physician or in the hospital emergency department as needed. Ivy Tech Community College carries student accident insurance, but the insurance will not cover illness; therefore, students should have adequate healthcare insurance.

Emergency care information is to be written on registration forms. Students should give complete information and update it as necessary. Current, accurate information is vital in an emergency.

STUDENT ACCIDENT INSURANCE
For students registered in credit courses, the College provides accident insurance in a designated amount for injuries sustained while participating in College-sponsored activities. The activity must take place on College premises or on any premises designated by the College. Students are also covered while traveling to and from College-sponsored activities as a member of a group under College supervision. It is the student’s responsibility to report injuries promptly to the instructor or to the Office of Student Affairs. The insurance is for a specified minimum amount of coverage. It is not intended to replace insurance coverage students may already have. Students should review their own coverage. The master insurance policy issued to Ivy Tech is on file at the central administrative office. The description of the hazards insured, benefits, and exclusions is controlled by the master policy. Students with questions may contact the regional Office of Student Affairs.

STUDENT HEALTH INSURANCE
The College has made arrangements for Ivy Tech students to obtain health insurance. Insurance coverage is purchased directly from the insurance company by the student. Application forms and brochures explaining coverage and rates are available through the Office of Student Affairs during registration periods. Coverages and rates are subject to change.

ACCIDENTS AND ILLNESSES
If a student has an accident on College property, the student should report the accident to campus security or the Office of Safety and Security. If a student suffers an accident or illness while attending classes, the student should notify the instructor. The College will take the necessary steps to intervene in a medical emergency while the student is on campus. If paramedic services or hospitalization is required, the student is financially responsible. If a student is suffering from an illness that makes it impossible to attend classes, the student should contact his/her instructors.

The College does not provide a health services center. The College supports the Drug Free Schools and Communities Act of 1989. Many community agencies are available to assist students seeking counseling or treatment. Please contact the Office of Student Affairs for a listing of community resources. The College conducts a biennial review of the effectiveness of its drug and alcohol abuse prevention programs. This review is available in the Office of Student Affairs.
PREGNANCY
A post-partum student may return to classes and clinical experience after presenting the PTA Program Chair with a statement from her physician stating the date of return and that she may return with no restrictions. Attendance and performance requirements will not be altered for pregnant or post-partum students.

Health Status
Students with a fever or an acute contagious disease will not be allowed to attend clinicals or class. If an injury or a treatment prevents the student from performing clinical assignments, that student may not attend clinicals and will be counted absent. If hospitalized, the student must have a medical release from his or her physician before returning to the classroom or clinical area. **The medical release must be to return with NO RESTRICTIONS** unless waived by the PTA Program Chair.

Infection Control and Immunization Records
Each student is required to have the following in his or her student file at Ivy Tech Community College prior to clinical rotations. Failure to do so will result in failure to attend/complete clinical experiences:

1. A physical exam form completed at the student’s expense by a physician of the student’s choice, updated yearly.
2. Required laboratory testing
   - 2 Step TB Skin test or chest x-ray (annually)
   - Tests reflecting evidence for rubella and rubeola immunity.
3. Immunization history, titer, or past medical history with dates for:
   - Tetanus-diphtheria
   - Measles, mumps, rubella (MMR)
   - Polio
   - Hepatitis B vaccine series (completed, started or signed waiver)
   - Chicken pox.

Cardiopulmonary Resuscitation
All PTA students must have current American Heart Association Healthcare Provider CPR certification prior to starting clinical rotations.
Criminal Background Check and Drug Screen

The Ivy Tech Community College School of Health Sciences requires Criminal Background Checks and Drug Screens for all School of Health Science students who will participate in clinical education.

All students accepted into the PTA program are required to complete a Criminal Background Check and Drug Screen, provided by an outside vendor, at the student’s expense, prior to beginning technical classes in the PTA program. Completion of the screen is a condition of acceptance into the program. Screens must also be completed every year thereafter as a condition of continuing in the program. Failure to do so by the assigned deadline each year, will result in forfeiture of the student’s spot in the program.

A clinical facility may request a copy of background check records. The facility may also require a student to complete an additional background check. The Criminal Background Check and Drug Screen will be conducted once per calendar year, at a minimum. The college, PTA program, and clinical agencies reserve the right to request more frequent testing, in accordance with college policy.

Before seeking employment as a physical therapist assistant in Indiana, one must take and pass the certification exam administered under the direction of the Indiana Health Professions Bureau. The possibility exists that a person who has been convicted of a crime may not be certified as a health practitioner in the State of Indiana. The Indiana Health Professions Bureau may choose to deny a person convicted of a crime the opportunity to sit for the certification examination even if he/she has satisfactorily completed the Ivy Tech Community College Associate of Science degree.

Student Expenses

Students must understand that by accepting an offer of admission into the Ivy Tech Community College PTA Program, they are responsible for all costs associated with Clinical Education. Students are expected to secure funds for clinical attire, physical examinations, immunizations, CPR training, criminal background checks, and drug screenings. Additional costs that may be associated with clinical education include lodging, transportation to/from the clinical facilities, parking, and purchasing meals during working hours. Some clinical sites will provide meal stipends for students, but many do not. Meals can also be brought from home.

Due Process and Complaints Outside of Due Process

The PTA Program will follow the Ivy Tech Student Grievance Policy as outlined in the Student Code of Rights and Responsibilities for student concerns. Complaints or concerns may be communicated from outside parties who are not normally covered under the college grievance policy or normal channels of due process. Such outside parties may include, but are not limited to, clinical affiliates, employers, former graduates, and the general public. For complaints outside normal due process, the complainant must submit the concern to the PTA Program Chair in writing within 30 days of the event. The Program Chair will be responsible for investigating the concern, including gathering necessary information from involved parties. The PTA Program shall not intimidate or take retaliatory action against any complainant or a relative of such a person who makes a complaint report in good faith and without malice. Upon
completion of the investigation, the Program Chair will communicate the results to the complainant and implement appropriate actions, if any, which occur as a result of the investigation. Confidentiality of involved parties will be maintained at all times per Federal law, Ivy Tech, and PTA Program policy. The program chair will maintain records of the complaint, investigation, and resulting actions for a minimum of 3 years following the written submission of the original complaint.
Clinical Expectations for PTA Students

Communication with Facility Coordinator

Students contact the CCCE of the assigned clinical site via phone or email 4 to 6 weeks prior to the beginning of the clinical rotation to finalize details of the rotation. The student is expected to complete any paperwork, additional training, or provide documentation required by the clinical site prior to initiation of the clinical. If assistance with housing is offered, arrangements should be made with the CCCE soon after the clinical site is assigned. Students can use the following to guide the initial conversation with the facility’s CCCE:

1. Introduce yourself and your school affiliation
2. Confirm scheduled dates at the affiliation
3. Request the name of your Clinical Instructor
4. Confirm the time you are expected to be present on the first day
5. Inquire about the dress code of the facility
6. Request directions to the facility and the Physical Therapy Department
7. Inquire about housing options (if needed)
8. Ask about the parking arrangements
9. Ask about cafeteria and/or lunch room facilities
10. Ask about any background checks that might be required and be prepared to pay for these.
11. Ask about orientation and schedule any orientation requirements
12. Ask about documentation requirements for the facility, and be prepared to obtain and deliver completed documents to the CCCE or Clinical Instructor

Under no circumstances will the student change the clinical start date. The ACCE will arrange any necessary changes with the CCCE or Clinical Instructor.

Communication with Clinical Instructors

Communication is a crucial element of a successful relationship between the student and Clinical Instructor. Frequent informal meetings between the student and Clinical Instructor should be used to maintain open communication and address any problems or deficiencies before they escalate. If a student experiences a problem, or has a concern during the clinical affiliation, the student should first discuss the issue with the CI. If an agreement or a resolution to the problem cannot be reached, the matter should be discussed with the CCCE and the ACCE immediately.
Clinical Appearance

Professional appearance and cleanliness are vital requirements for all health care personnel. Students will wear well-pressed slacks and a shirt or blouse and/or conform to clinic dress code (i.e. scrubs, lab coat). Should the clinical site require a lab coat, this must be purchased at the student’s expense. A skirt is permissible if it is functional for patient treatment. Athletic shoes are permissible in settings only if they are unscuffed, clean and within the dress code of the clinical setting. Socks must always be worn. Jeans, tee-shirts, and open-toe shoes are not appropriate and will not be permitted as clothing in the clinical setting. The dress code of the setting is the final authority. Attention to personal hygiene and grooming is expected.

NAME BADGE
Ivy Tech Community College name badges must be worn during all clinical education experiences. Each student is responsible for obtaining a personal name badge. The personal name badge will include the student’s first name, last initial, Ivy Tech logo and Student PTA.

JEWELRY
Jewelry is permitted but must be in accordance with the policy of the clinical facility.

HAIR
Hair must be clean and well kept. Hair length and style requirements differ from clinic to clinic. Students will be expected to follow clinical policies.

PERFUME
It is recommended that perfume not be worn during the clinicals.

GUM
Chewing gum is NOT permitted while in the clinical area.

PIERCINGS
No piercings other than ear lobes of female students are permitted at any time during any clinical experience. Depending on specific clinical facility requirements, having gauged ears may result in failure to be approved for clinical placement and may result in the inability to progress through or graduate from the program. If clinical facility policy permits students to have ear gauges they must be closed with plugs matching skin tone.

TATTOOS
All tattoos must be fully concealed under clothing or an appropriate cover.

The following policy has been adopted to address non-compliance with clinical appearance guidelines:
- First Offense: The Instructor and/or Program Chair will meet with any student not meeting standards described in the dress code to discuss what corrections need to be made. This is the first warning.
- Second Offense: Any student not meeting standards described in the dress code will be removed that day from clinical experience and counted absent.
**Clinical Conduct**

The student is expected to abide by the following at all times:

1. Be aware of, and follow the rules and regulations of the physical therapy department and/or clinical setting regarding work hours, billing procedures, dress code, preparation of treatment area, etc.
2. Abide by APTA Code of Ethics (included in this handbook) and respect patient confidentiality.
3. Conduct himself/herself in a professional manner with patients and staff.
4. Respect the integrity and rights of all persons.
5. Give full attention to clinical assignments during the scheduled time frame.
6. Complete all assignments as requested by the ACCE and/or the Clinical Instructor including, but not limited to, reading, in-service presentations, notes, home programs, special projects, etc.
7. Be present at the facility during evening hours, weekends, and holidays if scheduled to do so by the facility. Schedule hours around facility and Clinical Instructor working hours, not vice-versa.
8. Arrive to the clinic on time. Tardiness is not acceptable.
9. Allow patients to give informed consent to receive treatment by a student. This consent does not have to be written. Respect a patient’s right to refuse treatment provided by a student.
10. Avoid making non-emergency personal calls during clinical hours. Phone use (calls and/or text messaging) is only allowed during breaks and non-instructional time.
11. Apply academic knowledge to the best of one’s ability.
12. Ask thoughtful questions.
13. Take advantage of free time by observing and assisting other therapists and students.
14. Provide a thank you note to the Clinical Instructor and clinical facility following each clinical experience.

Students and clinical faculty are expected to adhere to regulatory statutes pertaining to supervision and documentation:

1. The supervising PT or PTA must be physically on the premises at all times when a student is working with patients. The student must contact the ACCE or Program Chair immediately if left unsupervised at any time.
2. The student’s signature on documentation must be followed by “Physical Therapist Assistant Student” or “PTA Student”. SPTA is NOT acceptable as this designation may mislead and infer certification.
3. The physical therapist must countersign all progress notes written by the PTA student.
Clinical Attendance

The student will fulfill the 40-hour work week requirement by being present at the facility during day or evening hours, weekends, and holidays if scheduled to do so by the facility. Students will schedule their time around the clinic hours, and their clinical instructor’s hours, not vice-versa.

Tardiness is not an acceptable practice. If a tardy greater than 15 minutes is repeated 3 times during the clinical rotation, it will be considered an unexcused absence. Each additional tardy will be considered an unexcused absence.

It is expected that students will not miss clinic days. Excused absences are considered for personal illness and/or bereavement of an immediate family member. A student is allowed one (1) excused absence from Clinical I (PTAS 115), and two (2) excused absences each for Clinical II (PTAS 205) and Clinical III (PTAS 215), unless otherwise stated. If a student misses more than two (2) days due to illness, a doctor’s excuse is required. All absences during Clinical I (PTAS 115) will need to be made up at the convenience of the CI. Absences greater than two (2) days during Clinical II (PTAS 205) and Clinical III (PTAS 215) will require additional clinical make-up time which will need to be arranged with the Clinical Instructor. If absences greater than two (2) days and/or 16 hours during a clinical rotation are not made up, an additional clinical rotation would be required.

Any two days of No Call – No Show will be considered abandonment and will result in automatic failure from the program. Please refer to the course syllabus for penalties to the final course grade for excused absences that are not made-up.
Standards of Ethical Conduct for the Physical Therapist Assistant

PREAMBLE
The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

STANDARD 1
Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.

STANDARD 2
Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

STANDARD 3
Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.

STANDARD 4
Physical therapist assistants shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, other health care providers, employers, payers and the public.

STANDARD 5
Physical therapist assistants shall fulfill their legal and ethical obligations.

STANDARD 6
Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skill, and abilities.

STANDARD 7
Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.

STANDARD 8
Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.

For an expanded and most recent version of the Standards of Ethical Conduct, please refer to the following link: http://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/Ethics/StandardsEthicalConductPTA.pdf
Professional Expectations

Commitment to Learning
- Identify problems, formulate appropriate questions, identify and locate appropriate resources, demonstrate positive attitudes (motivation) toward learning, offer your own thoughts and ideas, and identify need for further information.

Interpersonal Skills
- Demonstrate interest in people as individuals, respect cultural and personal differences of others; non-judgmental, communicate with others in a respectful, confident manner
- Respect the personal space of others, maintain confidentiality, and demonstrate acceptance of limited knowledge/experience.

Communication Skills
- Demonstrate understanding of basic English (verbal and written); use correct grammar, accurate spelling and expression, write legibly, recognize impact of non-verbal communication; maintain eye contact, and listen actively

Effective Use of Time and Resources
- Focus on the task at hand without dwelling in past mistakes, recognize resource limitations, use existing resources effectively, use unscheduled time efficiently, and complete assignments in a timely fashion.

Effective Use of Constructive Feedback
- Demonstrate active listening skills, actively seek feedback and help, demonstrate a positive attitude toward feedback, critique your own performance, and maintain two-way communication.

Problem-Solving Skills
- Recognize problems, state problems clearly, describe known solutions to problems, identify resources needed to develop solutions, and begin to examine multiple solutions to problems.

Professionalism
- Demonstrate awareness of state laws regarding job tasks, abide by the facility policies and procedures, project a professional image, and demonstrate honesty, compassion, courage and a continual regard for all.

Responsibility
- Demonstrate dependability and punctuality, follow through on commitments, and recognize your own limits.

Critical Thinking
- Raise relevant questions, consider all available information, recognize “holes” in knowledge base, and articulate ideas.

Stress Management
- Recognize your own stressors or problems, recognize distress or problems in others, seek assistance as needed, and maintain “cool” in all situations.
Clinical Education Evaluations

Clinical Instructor’s Evaluation of Student

The Clinical Instructor will assess the student’s clinical performance at both midterm and final during Clinicals I, II, and III. The Clinical I Assessment is required for Clinical I (PTAS 115), and the PTA Clinical Performance Instrument (CPI) is required for Clinicals II and III. The student and clinical instructor will each complete these documents and discuss the results during an informal conference.

The clinical facility may track a student’s productivity level during a clinical rotation for learning purposes. A student's productivity performance should be addressed under the 14th criteria (Resource Management) of the PTA Clinical Performance Instrument (CPI), in addition to other criteria based essential skills. Students should carry a full caseload by the end of the final clinical rotation to achieve Entry Level Performance on the PTA CPI.

Student’s Evaluation of Clinical Experience

The student will formally evaluate the clinical site and the Clinical Instructor prior to the completion of the affiliation. The results of the student’s evaluation are to be shared with the Clinical Instructor prior to or on the last day of the affiliation. The CI’s signature is required on the Student Evaluation of Clinical Site Experience form to receive full points for the assignment. The Student Evaluation of Clinical Site Experience must be returned to the ACCE along with the other evaluation forms at the completion of the clinical rotation. The evaluation will be filed in the clinical site binders and be available for future student reference. Honest and objective assessment of the clinical site and clinical instructor is important to enhance other students’ experiences.

Site Visits

During Clinical I (PTAS 115) the ACCE will contact the student and Clinical Instructor at least once by telephone. During Clinical II (PTAS 205) and Clinical III (PTAS 215), the ACCE will contact the student and the Clinical Instructor at least once by telephone and/or meet with them in person. The ACCE will attempt to make an on-site visit with each student at least once during Clinical II (PTAS 205) and Clinical III (PTAS 215). If this is not possible, telephone contact will be made. The ACCE will also attempt to make an on-site visit to sites with new Clinical Instructors and to newly affiliated sites. Students are encouraged to contact the ACCE at any time during the clinical experiences and can request additional site visits if necessary.
Completion of Clinical Experiences

The ACCE will assign a clinical course grade for each student based on results of the Clinical I Assessment for Clinical I (PTAS 115), and the PTA CPI for Clinical II (PTAS 205) and Clinical III (PTAS 215), along with other course requirements as outlined in the course syllabi for each clinical education course.

Criteria for Satisfactory Completion of Clinical Experience

1. Follow rules and regulations of the PT department and/or clinical setting regarding work hours, billing procedures, dress code, and preparation of treatment area.
2. Abide by the APTA Code of Ethics (included in the Clinical Education Manual).
3. Respect patient confidentiality. Read and sign the Confidentiality Statement.
4. Conduct oneself in a professional manner. Read and sign Expected Professional Behaviors form.
5. Read and sign the Healthcare Student Authorization for Use and Disclosure of Protected Health Information Form.
6. Respect the integrity and rights of all persons
7. Complete all clinical assignments, additional readings, or activities assigned by the Clinical Instructor and/or ACCE.
8. Adhere to Attendance Policy (included in the Clinical Education Manual)
9. Provide a formal inservice presentation of the case study assignment for Clinicals II and III (PTAS 205 and 215). The same inservice cannot be used for both clinical rotations. The student is not required to complete an inservice for Clinical I (PTAS 115) unless it is required by the clinical facility.
10. Complete and submit all required program forms and assignments in a timely manner.
11. Receive evaluation scores from the Clinical Instructor that reflect an acceptable level of clinical performance on the Clinical I Assessment for Clinical I (PTAS 115), and the PTA Clinical Performance Instrument for Clinicals II and III (PTAS 205 and 215) as outlined in the course syllabi and in the Clinical Education Manual.

Acceptable Levels of Clinical Performance

PTAS 115

• Midterm – Students are expected to achieve a total score greater than or equal to 49 on the Clinical I Assessment. If at midterm the student receives a score of one (1) on any criteria, a Clinical Action Plan must be completed by the student and Clinical Instructor for each deficient criterion to establish a plan of action for improvement.

• Final – Students are expected to achieve a total score greater than or equal to 62 on the Clinical I Assessment. Scores of individual criteria that decreased by 2 or more points compared to the midterm scores must be explained with comments from the Clinical Instructor.
PTAS 205
- **Midterm** - Students are expected to achieve a rating at or above the Advanced Beginner Performance for all 14 criteria. If at midterm the student receives a rating below Advanced Beginner Performance on any criteria, a Clinical Action Plan must be completed by the student and Clinical Instructor for each deficient criterion to establish a plan of action for improvement.

- **Final** - Students are expected to achieve a rating at or above the Advanced Intermediate Performance for 11 of the 14 criteria, with no criteria scoring lower than Intermediate Performance. Students must achieve a rating at or above the Advanced Intermediate Performance for all five of the red flag criteria (criteria items 1, 2, 3, 5, and 7).

- No “significant concerns” boxes can be marked by the Clinical Instructor on the final PTA CPI.

PTAS 215
- **Midterm** – Students are expected to achieve a rating at or above the Intermediate Performance for all 14 criteria. If at midterm the student receives a rating below Intermediate Performance on any criteria, a Clinical Action Plan must be completed by the student and Clinical Instructor for each deficient criterion to establish a plan of action for improvement.

- **Final** – Students are expected to achieve a rating of Entry Level Performance for 11 of the 14 criteria, with no criteria scoring lower than Advanced Intermediate Performance. Students must achieve a rating of Entry Level Performance for all five of the red flag criteria (criteria items 1, 2, 3, 5, and 7).

- No “significant concerns” boxes can be marked by the Clinical Instructor on the final PTA CPI.

**Submitting Assignments**

All required forms and assignments must be completed and returned to the ACCE within 5 working days of the completion of Clinical I (PTAS 115), Clinical II (PTAS 205), and Clinical III (PTAS 215), unless otherwise specified by the ACCE. Failure to complete required forms will adversely affect the student’s grade in the course and may be grounds for failure of the clinical rotation. Forms and assignments must be handed directly to a PTA faculty member, placed in the secured drop box located outside Pfau Hall R33, or mailed directly to the ACCE. Required clinical forms to return include:

- Clinical I Assessment for Clinical I (PTAS 115) or PTA CPI for Clinicals II and III (PTAS 205 and 215) if the paper version was used. Student and Clinical Instructor forms must both be submitted.
- Week One Checklists (Student and Clinical Instructor Forms)
- Clinical Site Information Form (CSIF)
- Student Evaluation of Clinical Site Experience
- Student Evaluation of Clinical Instructor
- Attendance Summary
- Clinical Action Plan (if used during clinical rotation)
Criteria for Unsatisfactory Completion of Clinical Experiences

1. Greater than 2 written infractions of rules and regulations of the PT Department and/or clinical setting regarding work hours, billing procedures, dress code, or preparation of treatment area.
2. A documented infraction of the APTA Code of Ethics.
3. Greater than 1 written infraction of failure to maintain patient confidentiality.
4. Greater than 2 written infractions of professional behavior.
5. Two days of No Call – No Show will be considered abandonment and will result in **automatic failure from the program**.
6. Failure to complete minimum number of hours required at the clinical facility.
7. Failure to complete clinical assignments given by the Clinical Instructor or the ACCE.
8. Failure to submit required program records and assignments by deadline.
9. Failure to achieve satisfactory scores from the Clinical Instructor on the Clinical I Assessment for Clinical I (PTAS 115) or the PTA Clinical Performance Instrument for Clinical II (PTAS 205) or Clinical III (PTAS 215) as outlined in the Criteria for Satisfactory Completion of the Clinical Rotation in the Clinical Education Manual.
10. One or more “significant concerns” boxes marked on the PTA CPI on the final evaluation for Clinical II (PTAS 215) or Clinical III (215)

Results of Unsatisfactory Completion of Clinical Experience

Unsatisfactory completion of a clinical assignment will result in one of the following:

1. Extension of time at the same or at a different facility. If the student fails to successfully complete the time extension, the clinical, in its entirety, must be repeated.
2. Repeat of the entire clinical at a different facility for an equal length of time. If the student fails to successfully complete the repeated clinical, the student will be withdrawn from the Physical Therapist Assistant Program
3. Withdrawal from the Physical Therapist Assistant Program.
Addendum A: Student Profile

Addendum B: PTAS 115 – General Weekly Summary of Progression

Addendum C: PTAS 205 – General Weekly Summary of Progression

Addendum D: PTAS 215 – General Weekly Summary of Progression

Addendum E: Week One Checklist – Student and Clinical Instructor Forms

Addendum F: Clinical I Assessment – Student Form

Addendum G: Clinical I Assessment – Student Form

Addendum H: Clinical Action Form

Addendum I: Clinical Attendance Summary – PTAS 115 (Clinical I)

Addendum J: Clinical Attendance Summary – PTAS 205 (Clinical II)

Addendum K: Clinical Attendance Summary – PTAS 215 (Clinical III)

Addendum L: Student Evaluation of Clinical Experience

Addendum M: Student Evaluation of Clinical Instructor

Addendum N: Clinical Site Visit Form

Addendum O: Clinical Phone Contact Form

Addendum P: Ivy Tech Student Paperwork – Expected Professional Behaviors

Addendum Q: Ivy Tech Student Paperwork – Confidentiality of Information

Addendum R: Ivy Tech Student Paperwork – Disclosure of Protected Information
Student Profile

Date of Affiliation: ___________________________  Clinical Rotation: I  II  III
Facility: ___________________________
Past Clinical Rotations/Work Experience: _______________________________________

Student Information
PTA Student Name: _______________________________________
Mailing Address: _______________________________________
Phone: ___________________________
Email: ___________________________
Preferred Learning Style(s): _______________________________________
Areas of Strength: _______________________________________
Opportunities for Growth: _______________________________________
Goals for Clinical Rotation: _______________________________________

Emergency Information
Person to Notify in Case of Emergency: _______________________________________
Relationship: ___________________________  Phone: ___________________________
Medical Insurance Company: _______________________________________
Policy Number: _______________________________________
Allergies: _______________________________________
Health Information: _______________________________________
Blood Type: ___________________________
Family Physician: ___________________________  Phone: ___________________________
PTAS 115 - General Weekly Summary of Progression

The following is provided for the Clinical Instructor to have a basis of progression of participation and skill acquisition for the PTAS 115 Clinical I affiliation. This is intended to be a guideline for reference. It is not intended to restrict the decision making process and judgment of the Clinical Instructor within his/her facility with his/her patient population. If any questions arise regarding this document, please contact Shelley Siebert, PT, MPT, Academic Coordinator of Clinical Education at msiebert7@ivytech.edu.

Week One:
1. Orientation to facility with discussion of general expectations of the student
2. Review of required academic course paperwork (all documentation brought by student to clinical)
3. Review of safety procedures necessary at the clinical facility
4. Review of confidentiality procedures (e.g. HIPAA compliance) at the clinical facility
5. Familiarization of student with clinical facility procedures
6. Review of medical records (locations and components) and diagnoses served at the clinical facility
7. Student responsibility of introduction of self as “Student Physical Therapist Assistant” established
8. Initiation of treatment protocols and techniques as appropriate to the clinical facility, patient population, medical status, student level of ability, and overall Clinical Instructor judgment.

Week Two:
1. Continuation and/or progression of above activities and skills to higher ability with decreased guidance
2. Student completing daily routine activities such as scheduling, receiving patients, communicating with patients, staff, and medical professional at the level of knowledge provided thus far in the PTA Program and instruction provided at the clinical facility
3. Student reviewing medical and therapy charts to obtain information necessary to begin and monitor treatment with beginning discussion of progression of treatment within the PT developed plan of care
4. Treatment techniques performed as expected under the required guidance for that technique, patient diagnoses and status, and student knowledge according to the overall judgment of the Clinical Instructor
5. Student developing skills in completing documentation as required by the clinical facility. If access to documentation procedures is not allowed or appropriate at the facility, an alternative documentation assignment has been established for student practice (e.g. SOAP notes).
6. Student has achieved the minimal required passing score on the skills/activities listed on the Clinical I – Assessment (Clinical Instructor) for midterm

Week Three:
1. Continuation and/or progression of above activities and skills to higher ability with decreased guidance
2. Student is now completing tasks relevant to the clinical facility with increase ability and decreased guidance (continued supervision as required for student clinical affiliations)
3. Student is now making appropriate recommendations for progression of activities related to treatment and the PT developed plan of care
4. Student has achieved the minimal required passing score on the skills/activities listed on the Clinical I – Assessment (Clinical Instructor) for final
The following is provided for the Clinical Instructor to have a basis of progression of participation and skill acquisition for the PTAS 205 (Clinical II) affiliation. This is intended to be a guideline for reference and should not restrict the decision making process and judgment of the Clinical Instructor within his/her facility with his/her patient population. A student may progress at a different pace than these guidelines recommend, and it is at the discretion of the Clinical Instructor to modify the pace of learning as appropriate.

Week One:
1. Orientation to facility and staff members.
2. Discussion between Clinical Instructor and student to determine performance expectations, learning strategies, and communication strategies to utilize throughout the clinical experience.
3. Review of academic course paperwork (all documentation brought by student to clinical).
4. Review of safety procedures necessary at the clinical facility.
5. Review of confidentiality procedures (e.g. HIPAA compliance) at the clinical facility.
6. Familiarization of student with clinical facility procedures (documentation, billing, etc.).
7. Review of medical records (locations and components) and diagnoses served at the clinical facility.
8. Student responsibility of introduction of self as “Physical Therapist Assistant Student” established.
9. Initiation of treatment protocols and techniques as appropriate based on the Clinical Instructor’s judgment.

Week Two:
1. Continuation and/or progression of above activities and skills to higher ability with decreased guidance.
2. Student may begin establishing a consistent caseload (10%-20% of full caseload), comprised of patients with simple conditions.
3. Student is completing daily routine activities such as scheduling, receiving patients, communicating with patients, staff, and medical professional at the level of knowledge provided thus far in the PTA Program and in accordance with instruction provided at the clinical facility.
4. Student is reviewing medical and therapy charts to obtain information necessary to begin and monitor treatment and initiating discussion of progression of treatment within the PT developed plan of care.
5. Student is performing treatment techniques as expected under the required guidance for that technique, patient diagnoses and status, and student knowledge according to best practice procedures and judgment of the Clinical Instructor and/or supervising PT.
6. Student is developing skills in completing documentation as required by the clinical facility. (If access to documentation procedures is not allowed or appropriate at the facility, an alternative documentation assignment should be established for student practice).

Week Three:
1. Student is completing daily tasks relevant to the clinical facility with increased ability and decreased guidance (continued supervision as required for student clinical affiliations).
2. Student caseload should gradually increase in volume (20%-30%), comprised of patients with simple conditions, and introducing patients with complex conditions.
3. Student is making appropriate recommendations for progression of activities related to treatment and the PT developed plan of care with increasing independence.
4. Student improving skills in completing documentation and billing as required by the clinical facility.
5. Clinical Instructor and student should begin review of CPI requirements, initiate completion of CPI, and schedule midterm evaluation (Must be completed by the end of week 4).
Week Four:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student caseload should gradually increase in volume (30%-45%), comprised of patients with simple conditions, and introducing patients with complex conditions.
3. Student is proficient with simple tasks, clinical problem solving, interventions, and data collection. Student may require considerable assistance with more complex tasks, including more complex interventions, data collection, and clinical problem solving.
4. Student improving skills in completing documentation and billing in a timely manner as required by the clinical facility.
5. Clinical Instructor and student will both complete CPI. Student must obtain Advanced Beginner Performance on all criteria. If student is deficient in any criteria, contact the ACCE and establish a Clinical Action Plan to address the deficient skill(s).

Week Five:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student caseload should gradually increase in volume (45%-60%), comprised of patients with both simple and complex conditions.
3. Student is proficient and consistent performing simple tasks, clinical problem solving, interventions, and data collection. Requires moderate cueing to consistently perform more complex tasks, clinical problem solving, and more complex interventions and data collection.
4. Student is proficient in documentation and billing as required by the clinical facility.

Week Six:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student caseload should gradually increase in volume (60%-75%), comprised of patients with both simple and complex conditions.
3. Student is proficient and consistent performing simple tasks, clinical problem solving, interventions, and data collection. Requires minimal cueing to consistently perform more complex tasks, clinical problem solving, and more complex interventions and data collection.
4. Student is proficient in documentation and billing as required by the clinical facility.
5. Clinical Instructor and student should begin review of CPI requirements, initiate completion of CPI, and schedule final evaluation (Must be completed by the end of week 7).

Week Seven:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student should be capable of maintaining 75% of a full-time Physical Therapist Assistant’s patient care workload with the direction and supervision of the Physical Therapist.
3. Student is capable of consistent and proficient performance of simple tasks, clinical problem solving, interventions, and data collection. Requires occasional cueing for more complex tasks, complex problem solving, and complex interventions and data collection.
4. Student consults with others to resolve unfamiliar or ambiguous situations.
5. Clinical Instructor and student will both complete CPI. Student must obtain no less than Advanced Intermediate performance on 11/14 criteria (no scores below Intermediate Performance). Student should not score less Advanced Intermediate Performance on any Red Flag criteria. If student is deficient in any criteria, contact the ACCE immediately.
PTAS 215 – General Weekly Summary of Progression

The following is provided for the Clinical Instructor to have a basis of progression of participation and skill acquisition for the PTAS 215 (Clinical III) affiliation. This is intended to be a guideline for reference and should not restrict the decision making process and judgment of the Clinical Instructor within his/her facility with his/her patient population. A student may progress at a different pace than these guidelines recommend, and it is at the discretion of the Clinical Instructor to modify the pace of learning as appropriate.

Week One:
1. Orientation to facility and staff members.
2. Discussion between Clinical Instructor and student to determine performance expectations, learning strategies, and communication strategies to utilize throughout the clinical experience.
3. Review of academic course paperwork (all documentation brought by student to clinical).
4. Review of safety procedures necessary at the clinical facility.
5. Review of confidentiality procedures (e.g. HIPAA compliance) at the clinical facility.
6. Familiarization of student with clinical facility procedures (documentation, billing, etc.).
7. Review of medical records (locations and components) and diagnoses served at the clinical facility.
8. Student responsibility of introduction of self as “Physical Therapist Assistant Student” established.
9. Initiation of treatment protocols and techniques as appropriate based on the Clinical Instructor’s judgment.

Week Two:
1. Continuation and/or progression of above activities and skills to higher ability with decreased guidance.
2. Student may begin establishing a consistent caseload (10-25% of full caseload), comprised of patients with simple conditions.
3. Student is completing daily routine activities such as scheduling, receiving patients, communicating with patients, staff, and medical professional at the level of knowledge provided thus far in the PTA Program and in accordance with instruction provided at the clinical facility.
4. Student is reviewing medical and therapy charts to obtain information necessary to begin and monitor treatment and initiating discussion of progression of treatment within the PT developed plan of care.
5. Student is performing treatment techniques as expected under the required guidance for that technique, patient diagnoses and status, and student knowledge according to best practice procedures and judgment of the Clinical Instructor and/or supervising PT.
6. Student is developing skills in completing documentation as required by the clinical facility. (If access to documentation procedures is not allowed or appropriate at the facility, an alternative documentation assignment should be established for student practice).

Week Three:
1. Student is completing daily tasks relevant to the clinical facility with increased ability and decreased guidance (continued supervision as required for student clinical affiliations).
2. Student caseload should gradually increase in volume (25%-50%), comprised of patients with simple conditions, and introducing patients with complex conditions.
3. Student is making appropriate recommendations for progression of activities related to treatment and the PT developed plan of care with increasing independence.
4. Student is improving skills in completing documentation and billing as required by the clinical facility.
5. Clinical Instructor and student should begin review of CPI requirements, initiate completion of CPI, and schedule midterm evaluation (Must be completed by the end of week 4).
Week Four:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student caseload should gradually increase in volume (25%-50%), comprised of patients with simple conditions, and introducing patients with complex conditions.
3. Student is proficient performing simple tasks, clinical problem solving, interventions, and data collection. Requires CI cueing and feedback to consistently perform more complex tasks, clinical problem solving, and interventions and data collection.
4. Student is improving skills in completing documentation and billing in a timely manner as required by the clinical facility.
5. CI and student will both complete CPI. Student must achieve a rating at or above Intermediate Performance on all criteria. If student is deficient in any criteria, contact the ACCE and establish a Clinical Action Plan to address the deficient skill(s).

Week Five:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student caseload should gradually increase in volume (50%-75%), comprised of patients with both simple and complex conditions.
3. Student is proficient and consistent performing simple tasks, clinical problem solving, interventions, and data collection. Requires only minimal to moderate cueing to consistently perform more complex tasks, clinical problem solving, interventions, and data collection.
4. Student is proficient in documentation and billing as required by the clinical facility.

Week Six:
1. Continuation and/or progression of activities and skills to higher ability with decreased guidance.
2. Student caseload should gradually increase in volume (75%-100%), comprised of patients with both simple and complex conditions.
3. Student is proficient and consistent performing simple tasks, clinical problem solving, interventions, and data collection. Requires only minimal to occasional cueing to consistently perform more complex tasks, clinical problem solving, interventions, and data collection.
4. Student is proficient in documentation and billing as required by the clinical facility.
5. Clinical Instructor and student should begin review of CPI requirements, initiate completion of CPI, and schedule final evaluation (Must be completed by the end of week 7).

Week Seven:
1. Student should be capable of maintaining 100% of a full-time Physical Therapist Assistant’s patient care workload with the direction and supervision of the Physical Therapist.
2. Student is capable of completing tasks, clinical problem solving, interventions, and data collection for patients with simple or complex conditions under general supervision of the Physical Therapist.
3. Student consults with others to resolve unfamiliar or ambiguous situations.
4. CI and student will both complete CPI. Student must obtain Entry Level Performance on 11/14 criteria (no scores less than Advanced Intermediate Performance). Student should not score less than Entry Level Performance on any Red Flag criteria. If student is deficient in any criteria, contact the ACCE immediately.
# Week One Checklist – Student Form

The purpose of the Week One Checklist is to provide immediate feedback to the CI and the student regarding expectations, communication, etc., and may identify potential problems early in the clinical rotation. The student should complete this form at the end of clinic day 2 for PTAS 115 (Clinical I), and at the end of the first week for PTAS 205 (Clinical II) and PTAS 215 (Clinical III). The CI will complete a similar form. The student and CI should meet to review and discuss the forms.

<table>
<thead>
<tr>
<th>Student Name: __________________________</th>
<th>Date: __________________________</th>
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</thead>
<tbody>
<tr>
<td>CI Name: ______________________________</td>
<td>Facility: _______________________</td>
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</tbody>
</table>

Clinical Rotation: I   II   III (Circle one)

Check the selections that apply to the facility at this time:

1. My orientation to the facility and department was sufficient.
2. Facility and Department Policies and Procedures have been made available.
3. My direct supervisor has been clearly identified.
4. Open communication between student and supervisor has been established.
5. Goals and objectives for this affiliation have been discussed.
6. I know what is expected of me for this affiliation.
7. I feel comfortable with the present level of supervision.
8. I have some patients of my own.
9. My supervisor provides feedback in a timely and constructive manner.
10. My supervisor is open to questions, and answers them effectively.

If there are any issues that have not been resolved after discussing the Week One Checklist with your Clinical Instructor, contact the ACCE.

**Please sign to verify receipt and understanding of clinical education material:**

I have received, reviewed, and understand the Ivy Tech Clinical Education Manual. I have also received, reviewed, and understand the documents necessary to complete my role as a PTA student. I understand that I may contact the ACCE at Ivy Tech Community College (Shelley Siebert, PT, MPT at msiebert7@ivytech.edu or 812-246-3301 ext. 4537) with any questions or concerns.

| Student Name (Printed) | Student Signature | Date |
Week One Checklist – Clinical Instructor Form

The purpose of the Week One Checklist is to provide immediate feedback to the CI and the student regarding expectations, communication, etc., and may identify potential problems early in the clinical rotation. The Clinical Instructor should complete this form at the end of clinic day 2 for PTAS 115 (Clinical I), and at the end of the first week for PTAS 205 (Clinical II) and PTAS 215 (Clinical III). The student will complete a similar form. The student and CI should meet to review and discuss the forms.

Student Name: ______________________________________    Date: ________________________________

CI Name: __________________________________________    Facility: ________________________________

Clinical Rotation: I    II    III (Circle one)

Check the selections that apply to the student at this time:

_____ 1. Arrives on time and prepared for the day’s activities.

_____ 2. Dresses appropriately and wears name tag at all times.

_____ 3. Seeks guidance or feedback as needed.

_____ 4. Responds to feedback appropriately.

_____ 5. Utilizes “free” time constructively.

_____ 6. Follows Clinical Education Manual and facility policies and procedures.

_____ 7. Performs in a safe manner, and demonstrates good judgment.

_____ 8. Demonstrates knowledge and skill appropriate to the level of education.


_____ 10. Demonstrates effective verbal and non-verbal communication.

If there are any issues that have not been resolved after discussing the Week One Checklist with the student, or if any major deficits are identified, please contact the ACCE.

Please sign to verify receipt and understanding of clinical education material:

I have received, reviewed, and understand the Ivy Tech Clinical Education Manual. I verify that I am a licensed PT or PTA with a minimum of 1 year clinical experience. I have also received, reviewed, and understand the documents necessary to complete my role as a clinical instructor. I understand that I may contact the ACCE at Ivy Tech Community College (Shelley Siebert, PT, MPT at msiebert7@ivytech.edu or 812-246-3301 ext. 4537) with any questions or concerns.

CI Name (Printed) ___________________________ CI Signature ___________________________ Date ___________________________
PTAS 115 - Clinical I Assessment – Student Form

Date of Midterm: (Week 1/2): ________________  Date of Final: (End of Week 3): ________________

Facility: ________________  Rehab: _____  Outpatient: ____  Inpatient: _____

Student Name: ________________  Clinical Instructor Name(s): ________________

Student Signature (Midterm)  CI Signature (Midterm)

Student Signature (Final)  CI Signature (Final)

Quick scale of performance level: (must provide input for each item to allow grading of student, please avoid using “not observed” or blanks for skill/activity).

Key:

1 – **SIGNIFICANT DEFICIENCY**: Student’s performance creates or continues to be a level of concern that requires additional practice or study (either provided by the clinical facility or academic program) and completion of the Clinical Action Plan signed and approved by visiting faculty member * (midterm) or is unacceptable to pass this skill/activity at this time (final)

2 – **BEGINNING SKILL DEVELOPMENT**: Student demonstrates limited ability at this time, but is expected to show growth toward mastery with regular clinical facility interaction/practice and supervision (midterm) or demonstrates limitations in this area that required greater supervision/guidance than expected by the completion of this clinical (final)

3 – **INTERMEDIATE SKILL DEVELOPMENT**: Student demonstrates the expected level of performance with the degree of academic instruction/practice provided thus far, with the expectation of passing this clinical affiliation (midterm) or demonstrates adequate (average) performance to pass this clinical (final)

4 – **ADVANCING SKILL DEVELOPMENT**: Student demonstrates above average clinical performance with the degree of academic instruction/practice provided thus far (midterm or final) (This does not indicate entry level clinician status, rather it means the student demonstrates above average performance of clinical skills given their current experience and academic preparedness)

**Grading Rubric**: (Student may also consider scores of 2.5 or 3.5 to show progression of clinical skill)

Midterm: A= 63-59, B= 58-55, C= 54-51, D= 50-49, F= 48 and below
Final: A= 80-74, B= 73-70, C= 69-64, D= 63-62, F= 61 and below
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<tr>
<th>Skill/ Activity</th>
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Minimum passing score based upon completion of all skill/activity:

Midterm – 49
Final - 62

*If minimum passing score of 49 is NOT achieved at Midterm – Clinical Instructor must contact Academic Coordinator of Clinical Education immediately.

*If a student has received a passing score for the Final Evaluation, but has received a ranking that has decreased by two or more, (i.e., 4 to 2, 3 to 1), a comment must be provided for that skill/activity in the “final comments” box.

** A ranking of ONE in this area may constitute failure of this clinical affiliation (final assessment). If a ONE was received on the midterm assessment, a Clinical Action Plan should be completed to address remediation of deficient clinical skills, and this will be reviewed with visiting faculty member.

^Please review APTA Standards of Ethical Conduct of the Physical Therapist Assistant provided in Clinical Education Manual.
PTAS 115 - Clinical I Assessment – Clinical Instructor Form

Date of Midterm: (Week 1/2): _______________  Date of Final: (End of Week 3): _______________
Facility: _______________________________  Rehab: _____  Outpatient: ____  Inpatient: _____
Student Name: ___________________________  Clinical Instructor Name(s): ________________

Student Signature (Midterm)  CI Signature (Midterm)

Student Signature (Final)  CI Signature (Final)

Quick scale of performance level: (must provide input for each item to allow grading of student, please avoid using “not observed” or blanks for skill/activity).

Key:  1 – **SIGNIFICANT DEFICIENCY**: Student’s performance creates or continues to be a level of concern that requires additional practice or study (either provided by the clinical facility or academic program) and completion of the Clinical Action Plan signed and approved by visiting faculty member * (midterm) or is unacceptable to pass this skill/activity at this time (final)

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Minimum passing score based upon completion of all skill/activity:

Midterm – 49  
Final - 62

*If minimum passing score of 49 is NOT achieved at Midterm – Clinical Instructor must contact Academic Coordinator of Clinical Education immediately.

*If a student has received a passing score for the Final Evaluation, but has received a ranking that has decreased by two or more, (i.e., 4 to 2, 3 to 1), a comment must be provided for that skill/activity in the “final comments” box.

** A ranking of ONE in this area may constitute failure of this clinical affiliation (final assessment). If a ONE was received on the midterm assessment, a Clinical Action Plan should be completed to address remediation of deficient clinical skills, and this will be reviewed with visiting faculty member.

^Please review APTA Standards of Ethical Conduct of the Physical Therapist Assistant provided in Clinical Education Manual
Clinical Action Plan

Complete this form only if the student’s performance creates, or continues to be, a level of concern that requires additional practice or study (provided by either the clinical facility or academic program), or if one of the following scores is received on the midterm assessment:

- Below 2 for any criteria on Clinical I Assessment (PTAS 115 – Clinical I)
- Below Advanced Beginner Performance for any criteria on CPI (PTAS 205 – Clinical II)
- Below Intermediate Performance for any criteria on CPI (PTAS 215 – Clinical III)

Inform the student and ACCE immediately of the deficient clinical skill(s). The student and CI must develop a plan for remediation of the deficient skill(s). A visiting faculty member must sign and approve this form.

Clinical skill(s) of deficiency (be specific): ________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Plan for remediation to ensure competency by final (be specific): ________________

____________________________________________________________________

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Student Signature ___________________________ Clinical Instructor Signature ___________________________

Faculty Signature ___________________________ Date ___________________________
## Clinical Attendance Summary

<table>
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<tr>
<th>Name:</th>
<th>Clinical Rotation:</th>
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<tr>
<th></th>
<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Total Hours</th>
<th>CI Signature</th>
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<td><strong>Week One</strong></td>
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| **Week Two** |      |         |          |             |              |
| Monday | ----- | -----   | -----    | -----       | -----        |
| Tuesday | ----- | -----   | -----    | -----       | -----        |
| Wednesday | ----- | -----   | -----    | -----       | -----        |
| Thursday | ----- | -----   | -----    | -----       | -----        |
| Friday | ----- | -----   | -----    | -----       | -----        |
| Saturday | ----- | -----   | -----    | -----       | -----        |
| Sunday | ----- | -----   | -----    | -----       | -----        |

| **Week Three** |      |         |          |             |              |
| Monday | ----- | -----   | -----    | -----       | -----        |
| Tuesday | ----- | -----   | -----    | -----       | -----        |
| Wednesday | ----- | -----   | -----    | -----       | -----        |
| Thursday | ----- | -----   | -----    | -----       | -----        |
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| Sunday | ----- | -----   | -----    | -----       | -----        |

A signature is required from **each** clinician who provided student supervision on that day.

Any changes to Time In/Time Out or Daily Hour Total should be made by making a line through the error, making the correction, and adding initials from both the student and the Clinical Instructor. Ex: 5:00 error SS/KK 5:15

**Total Hours of Attendance:**

**Student Signature:**

* Minimum of 112 hours to pass PTAS 115 – Clinical I, and 264 hours to pass PTAS 205/215 – Clinical II/III
<table>
<thead>
<tr>
<th>Week Four</th>
<th>Date</th>
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<th>Time Out</th>
<th>Total Hours</th>
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<thead>
<tr>
<th>Week Five</th>
<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Total Hours</th>
<th>CI Signature</th>
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<tbody>
<tr>
<td>Monday</td>
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<tr>
<th>Week Six</th>
<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Total Hours</th>
<th>CI Signature</th>
</tr>
</thead>
<tbody>
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<td>Monday</td>
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<thead>
<tr>
<th>Week Seven</th>
<th>Date</th>
<th>Time In</th>
<th>Time Out</th>
<th>Total Hours</th>
<th>CI Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
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</table>

A signature is required from each clinician who provided student supervision on that day.

Any changes to Time In/Time Out or Daily Hour Total should be made by making a line through the error, making the correction, and adding initials from both the student and the Clinical Instructor. Ex: 5:00 error SS/KK 5:15

**Total Hours of Attendance:** __________  **Student Signature:** __________

* Minimum of 112 hours to pass PTAS 115 – Clinical I, and 264 hours to pass PTAS 205/215 – Clinical II/III
**CEU Verification and CI Information:**

The ACCE will provide CEU Certificates for Clinical Instructor(s) in accordance with the State Practice Act governing the facility. Please complete the information requested below to ensure that all clinical instructors and/or supervisors receive appropriate CEUs. Ex: A clinical instructor who provided most of the clinical supervision should expect 100% of CEU credit (Jane Doe, PTA 100%). If two Clinical Instructors equally shared clinical supervision, each Clinical Instructor should expect 50% of CEU credit (Jane Doe, PTA 50% and Jim Smith, PT, DPT 50%). Clinicians may designate CEU credit as deemed appropriate for the level of instruction provided.

<table>
<thead>
<tr>
<th>Clinical Instructor Name</th>
<th>Credentials as you want them to appear on CEU Certificate</th>
<th>CEU Credit designate what % of CEU credit should be awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

The following section is only applicable for clinicians working in Kentucky in which the primary clinical instructor is a PTA:

According to the Kentucky State Practice Act, when a PTA acts as the full-time supervising Clinical Instructor, the supervising PT is also awarded 20% CEU credit for the supervision of the PTA and the PTA student. Please list the supervisory PT below to receive a 20% CEU credit as appropriate.

<table>
<thead>
<tr>
<th>PT Supervisor Name</th>
<th>Credentials as you want them to appear on CEU certificate</th>
</tr>
</thead>
<tbody>
<tr>
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</table>
Student Evaluation of Clinical Experience

Adapted from the Texas Consortium for Physical Therapy
Student Evaluation of Clinical Education Experiences (SECEE)

Name: ___________________________ Facility: ___________________________

Affiliation: _______________________ Date: ___________________________
(ex: general, acute, rehab, neuro, peds, op clinic)

Circle the letter to indicate your response to each question.

1. Selecting the Affiliation

   1. Did you select this facility for an affiliation? A. Yes  B. No
   2. Was this affiliation assigned to you because of cancellation of one you had selected? A. Yes  B. No

To gain knowledge about selecting this clinical affiliation, what sources did you use?

   3. Pamphlets, notebooks, etc.? A. Yes  B. No
   4. Information from faculty (including ACCE)? A. Yes  B. No
   5. Information from students? A. Yes  B. No

KEY FOR QUESTIONS 6 - 16

A - Definitely helpful  D - Not helpful
B - Somewhat helpful  E - Not available
C - Not accurate

Describe the value of the following information that was made available to you prior to your clinical education experience:

6. Location of site  A  B  C  D  E
7. Travel information  A  B  C  D  E
8. Support services (room, board, parking)  A  B  C  D  E
9. Cost of support services  A  B  C  D  E
10. Schedule of working hours  A  B  C  D  E
11. Dress requirements  A  B  C  D  E
12. Types of patients served  A  B  C  D  E
13. Specialty programs available  A  B  C  D  E
14. Learning experiences provided  A  B  C  D  E
15. Library facilities  A  B  C  D  E
16. Did you find the information supplied to you about this clinical education  A  B  C  D  E
experience was:

Comments: Please describe the type of facility (general, acute, Op, rehab, school, etc.), the size of the facility, the number of beds, number of patients treated per day in Physical Therapy, number of PT’s and the number of PTA’s.

KEY FOR QUESTIONS 17 - 23

<table>
<thead>
<tr>
<th>A - Good</th>
<th>B - Adequate</th>
<th>C - Inadequate</th>
<th>D - Not Provided</th>
</tr>
</thead>
</table>

II. Orientation to the Facility

17. Administrative procedures/departmental policies
18. Departmental organization/Chain of command
19. Personnel policies
20. Standards of the department
21. Scheduled daily/weekly activities
22. Staff personnel introductions
23. Physical layout

III. During the Affiliation

During your affiliation at this site, were there students who were affiliating:

24. From other physical therapist assistant programs? A. Yes B. No
25. With other disciplines or service departments? A. Yes B. No
26. How many other students did your clinical instructor directly supervise?
   A. 0 students
   B. 1 student
   C. 2 students
   D. 3 students
   E. 4 students

27. Were you required to present an inservice program? A. Yes B. No
What special learning experiences did you participate in during this affiliation?

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>28. Clinics (amputee, hand, etc.)</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>29. Family conferences</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>30. Home visits</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>31. Patient conferences</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>32. Surgery observation</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>33. Review of X-rays/imaging</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>34. Diagnostic testing</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>35. Specialized classes</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>36. Research activities</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>37. Administrative activities</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>38. Other</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>39. Within the first week of your affiliation, did you and your clinical instructor select goals and objectives on which to work?</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>40. Did you participate in selecting your patient load?</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>41. Did your CI seem to understand the use of the CPI (Clinical Performance Instrument)?</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
<tr>
<td>42. Did you supervise PT Aides?</td>
<td>A. Yes</td>
<td>B. No</td>
</tr>
</tbody>
</table>

**KEY FOR QUESTIONS 43 - 65**

<table>
<thead>
<tr>
<th>Category</th>
<th>A - 0 patients</th>
<th>B - 1-3 patients</th>
<th>C - 4-6 patients</th>
<th>D - 7-9 patients</th>
<th>E - 10 or more patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amputation</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Arthritis and related collagen diseases</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Burns and wounds</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Cancer and benign tumors</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Cardiac rehab</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Cerebral palsy</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>C.V.A.</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Spinal Dysfunction</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Developmental disability</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Fractures</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Head injury</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Joint/muscle injury (extremity)</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Joint replacements</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>M.D. and related neuromuscular diseases</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Neuropathy and myopathy</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Parkinson’s disease</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Psychiatric disorders</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Pulmonary disorders</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Scoliosis</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>Spinal cord injury</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
</tbody>
</table>

How many patients did you treat with the following primary diagnoses?
63. Debilitation (numerous medical problems)  A  B  C  D  E
64. Other ________________________ A  B  C  D  E
65. Other ________________________ A  B  C  D  E

KEY FOR QUESTIONS 66 - 72

A – Frequently  C- Seldom
B – Sometimes  D - Never

66. How often did your clinical instructor observe you performing patient treatments?  A  B  C  D
67. How often did you have an opportunity for communication/discussions with your CI?  A  B  C  D
68. How often did you and your CI speak with the supervising PT about your patients?  A  B  C  D
69. How often did you and your CI discuss the specific skills or key indicators you were attempting to master?  A  B  C  D
70. How frequently did you receive feedback through regularly scheduled conferences with your clinical instructor about your performance? A  B  C  D
71. How frequently did you receive informal feedback from your CI? A  B  C  D
72. In your opinion, were the evaluations of your performance based on objective information? A  B  C  D

73. Describe the degree of supervision you received, and how it was adapted to your level of clinical experience.

74. Describe the feedback you received from your clinical instructor about your clinical performance.
75. Describe the environment at this clinical facility in terms of stimulation (e.g. role modeling, professional development, etc.).

76. Based on your past experiences in clinical education and your concept of the “ideal” clinical education experience, your experience at this site was:

A. Time well spent, would definitely recommend to other students
B. Some good learning experiences; student program needs to be more fully developed
C. Student program is not adequately developed at this time

77. What did you feel were the strengths of your academic preparation for this clinical experience?

78. What did you feel were the weaknesses of your academic preparation for this clinical experience?

79. Please describe if you were exposed to new subject matter areas during this rotation that were not included in your previous academic curriculum.
80. Describe how you would change the curriculum in view of the strengths and weaknesses you have noted above.

81. Please comment on this experience in each of the categories listed below. Comments are used to give feedback to the facility based on its strengths and weaknesses.

A. Orientation

B. Quality and Variety of Learning Experiences

C. Supervision and Teaching

D. Atmosphere of the Facility

E. Services Provided (e.g. housing, meals, etc.)

F. Overall Assessment

G. Would you recommend other students do their clinical rotation at this facility? Why or why not?

H. If you were to grade this facility in terms of ethics and quality service to patients, what grade would you give them?
   A  B  C  D  F

________________________________________________________________________

Student Signature  Clinical Instructor Signature

________________________________________________________________________

Facility Name  Date
### Student Evaluation of Clinical Instructor

Student Name: ___________________________  CI Name: ___________________________

Facility Name: ___________________________  Date: ___________________________

Clinical Rotation:  

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<thead>
<tr>
<th></th>
<th>I</th>
<th>II</th>
<th>III</th>
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</table>

**Key For Questions 1-15**

<table>
<thead>
<tr>
<th></th>
<th>A-Good</th>
<th>B-Adequate</th>
<th>C-Inadequate</th>
<th>D-Not Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Orientation to the facility was adequate.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>2.</td>
<td>Orientation to the PT department was adequate.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>3.</td>
<td>I knew what was expected of me.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>4.</td>
<td>I received appropriate and timely feedback from my CI.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>5.</td>
<td>Feedback was constructive and not demeaning.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>6.</td>
<td>My CI was readily accessible to me.</td>
<td>A</td>
<td>B</td>
<td>C</td>
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<tr>
<td>7.</td>
<td>I felt comfortable discussing concerns or questions with my CI.</td>
<td>A</td>
<td>B</td>
<td>C</td>
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<tr>
<td>8.</td>
<td>My CI was aware of my educational background and adjusted learning experiences appropriately.</td>
<td>A</td>
<td>B</td>
<td>C</td>
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<tr>
<td>9.</td>
<td>I felt that I was a contributing member of the department.</td>
<td>A</td>
<td>B</td>
<td>C</td>
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<tr>
<td>10.</td>
<td>I did not feel overwhelmed with my patient load.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>11.</td>
<td>My CI was open to communication and receptive to my comments or suggestions.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>12.</td>
<td>I felt comfortable with the level of supervision.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>13.</td>
<td>The supervision was adjusted appropriately throughout the affiliation</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>14.</td>
<td>I was adequately prepared to perform at the level expected of me</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
<tr>
<td>15.</td>
<td>The staff was helpful and supportive and were able to assist with completion of the CSIF.</td>
<td>A</td>
<td>B</td>
<td>C</td>
</tr>
</tbody>
</table>

**Comments:**

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________
Clinical Site Visit

Student Name: ___________________________ Date of Visit: ___________________________
Facility: _______________________________ CI Name: _______________________________

Clinical Rotation (circle one): I  II  III

Check the selections that apply to the student at this time:

_____ Faculty member met student and facility staff.
_____ Faculty member performed brief on-site inspection of facility
_____ Faculty member discussed student clinical performance with student and CI
_____ Faculty member discussed clinical instructor performance with student and CI
_____ No concerns or issues regarding this clinical experience at this time
_____ Mentor role established with student. Concerns (if any) noted below.

Concerns/issues regarding this clinical experience: ________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Note strategies to address above areas of concern: ________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Student Signature ___________________________ CI Signature ___________________________
Faculty Signature ___________________________ Date ___________________________
**Clinical Instructor Profile (New CI)**

Academic Institution attended and year of certification/licensure: ____________________________

Is the Clinical Instructor an APTA certified clinical instructor: Yes No

Areas of clinical specialty: ____________________________

Specialty certifications/credentials: ____________________________

Other pertinent information: ______________________________________

**Clinical Instructor Profile (Existing CI)**

Change in CI profile on file with Ivy Tech PTA program: Yes No

Updated information: ______________________________________

**Clinical Faculty Development**

______ Provided instruction/clarification on use of online PTA CPI or Clinical I Assessment Tool:

________________________________________________________________________

________________________________________________________________________

______ Provided instruction/clarification on clinical course objectives and expectations of student performance:

________________________________________________________________________

________________________________________________________________________

______ Other instruction provided:

________________________________________________________________________

________________________________________________________________________
Clinical Site Phone Contact

Student Name: ___________________________  Date of Visit: ___________________________
Facility: _______________________________  CI Name: _______________________________

Clinical Rotation (circle one):  I    II    III

Check the selections that apply to the student at this time:

_____ Faculty member spoke with student and facility staff.
_____ Faculty member discussed student clinical performance with student and CI
_____ Faculty member discussed clinical instructor performance with student and CI
_____ No concerns or issues regarding this clinical experience at this time
_____ Mentor role established with student. Concerns (if any) noted below.

Concerns/issues regarding this clinical experience: ______________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Note strategies to address above areas of concern: ______________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Faculty Signature ___________________________  Date ___________________________
Clinical Instructor Profile (New CI)

Academic Institution attended and year of certification/licensure: ____________________________

Clinical Instructor an APTA certified clinical instructor: Yes    No

Areas of clinical specialty: ____________________________

Specialty certifications/credentials: ____________________________

Other pertinent information: ____________________________

Clinical Instructor Profile (Existing CI)

Change in CI profile on file with Ivy Tech PTA program: Yes    No

Updated information: ____________________________

Clinical Faculty Development

_____ Provided instruction/clarification on use of online PTA CPI or Clinical I Assessment Tool:

________________________________________________________________________________________

________________________________________________________________________________________

_____ Provided instruction/clarification on clinical course objectives and expectations of student performance:

________________________________________________________________________________________

________________________________________________________________________________________

_____ Other instruction provided:

________________________________________________________________________________________

________________________________________________________________________________________
Expected Professional Behaviors

- Be courteous and friendly.
- Treat each person with dignity.
- Be sensitive and respectful of each person’s beliefs and cultural customs through appreciation of diversity.
- Listen in conversation when others speak, show respect for opinions and concern.
- Be generous in assisting and supporting others.
- Maintain confidentiality.
- Present a professional appearance and professional conduct.
- Use resources wisely and effectively.
- Respond to the needs of others in a caring, professional manner.
- Be timely and accurate in fulfilling our obligations.
- Maintain a safe and clean environment.
- Be honest and truthful in our actions.
- Act and speak with respect, regardless of presence or absence of person.
- Accept responsibility and accountability for our actions.
- Maintain the integrity of our work ethic.
- Communicate with directness, honesty, compassion, and respect.
- Identify and approach problem solving in a professional manner.
- Document for permanent record the progress notes.
- Raise issues to appropriate level of authority to allow for best resolution in proactive professional manner.
- Consistently demonstrate appropriate clinical judgment and good clinical skills.
- Build relationships and collaborate toward the common good.
- Participate in efforts to better the community.
- Be an advocate for those in need.
- Bring a spirit of compassion in serving.
- Put the needs of others before our own.
- Reach out without hesitation or judgment.
- Solicit diverse opinions and provide an opportunity for open discussion; entertain other perspectives.
- Respect ideas and encourage freedom of expression.
- Contribute beyond assigned limits.
- Be flexible and willing to assist.
- Be change agents in the spirit of cooperation; be open to change without pre-judging negatively.
- Resolve conflict in a respectful manner.
- Collaborate with staff in a friendly and cooperative manner.
- Maintain awareness and adhere to rules, policies, procedures, including professional and accreditation standards of the school and clinic site.
- Seek opportunities to grow professionally.
• Anticipate the needs of others.
• Serve with optimism, inspiration, humor, and hope.
• Strive for personal growth and formation by challenging ourselves to set and meet goals.
• Educate the patient, family and other appropriate personnel regarding the treatment plan and related procedures in a multidisciplinary manner as appropriate.
• Participate in and provide staff in-service programs, case conferences, and staff meetings as required at specific clinic site.
• Adhere to departmental dress code
• Provide patient care treatment in accordance with the state practice act for Physical Therapy.

I ________________________________, hereby acknowledge that I have received, read, and understand the Ivy Tech PTA Program Expected Professional Behaviors, and will adhere to the stated expectations at all times.

________________________________________
Student Signature

________________________________________
Student’s Printed Name

________________________________________
Date
Confidentiality of Information

Students are required to comply with Federal HIPAA regulations, state regulations, and facility policies with regard to privacy of patient information.

All information that you learn about a patient is considered to be confidential information. Confidential information may NOT be discussed in any public place – such as the student lounge, the halls of the hospital or school, hospital cafeteria or any similar public place.

Any written information pertaining to a patient must be guarded as confidential. Any written information should stay within the clinic.

DO NOT DISCUSS CLINICAL EXPERIENCES in any public place, whether or not you refer to the patient by name.

Photocopying of any client records or removal of client records from the clinical facility is expressly forbidden.

I hereby acknowledge that I have received instruction related to Federal HIPPA regulations and patient confidentiality. I agree to comply with all Federal HIPPA regulations, state regulations, and facility policies with regard to privacy of patient information. **I understand that violations of privacy regulations/policies may result in immediate dismissal from the program, as well as civil and criminal penalties.**

______________________________
Student Signature

______________________________
Student’s Printed Name

______________________________
Date
I, ___________________________________, as a participant in certain health care related instructional programs at Ivy Tech Community College, understand and agree that such courses of studies require my participation in clinical educational activities at certain health care provider locations, including but not limited to hospitals, nursing homes, physical rehabilitation centers and other health clinics. I further understand that such clinical locations require proof that I have had specific inoculations and that I am not being treated for, suffering from, or carrying certain illnesses and/or diseases. Consequently, I hereby authorize Ivy Tech Community College to disclose such personal protected health information that it may possess, whether provided directly by myself or my personal health care provider, to such clinical locations as may be necessary for my participation in said health care related instructional program. Finally, I understand that this authorization may be revoked at any time by providing written and signed notice to Ivy Tech Community College.

________________________________________
Student Signature

________________________________________
Student’s Printed Name

________________________
Date

________________________________________
Street Address

________________________________________
City, State, Zip