



WACO, TEXAS

**COURSE SYLLABUS
AND
INSTRUCTOR PLAN**

THERAPEUTIC EXERCISE

PTHAL 2409 - 01

Dr. Robert Patterson PT, C/NDT

NOTE: This is a 16-week course.

THERAPEUTIC EXERCISE

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Course Description:

Examines concepts, principles and application of techniques in the practice of physical therapy related to therapeutic exercise and functional training.

Semester Hours 4 (3 lec/4 lab)

Prerequisites and/or Corequisites:

Successful completion of all prior PTHA Program coursework.

Course Notes and Instructor Recommendations:

Lab times are subject to change, students will be notified during class and/or via announcements on Brightspace.

Instructor Information:

Instructor Name: Dr. Robert Patterson PT, DPT, C/NDT

MCC Email: rpatterson@mclennan.edu

Office Phone Number: 254-299-8313

Office Location: CSC C116

Office/Teacher Conference Hours: MW 1:30-400

Other Instruction Information: Other times are available by appointment. **Please check for weeks when instructor will be unavailable due to clinical site visits as regular office hours will not apply and specific appointments must be made**

Required Text & Materials:

Title: Therapeutic Exercise Foundations and Techniques

Author: Kisner & Colby

Edition: latest edition

Publisher: F.A. Davis Co.

ISBN: 13:978-0-8036-2574-7

Required:

Title: Clinical Orthopedic Rehabilitation

Author: S. Brent Brotzman

Edition: latest edition

Publisher: Mosby

ISBN: 10: 0323055907

MCC Bookstore Website: <http://www.mclennan.edu/bookstore/>

Methods of Teaching and Learning:

This course is heavily reliant on both cognitive and psychomotor skill development. The material will be presented through lecture & demonstration, student-oriented learning assignments, reciprocal & peer teaching, case-based learning, evidence informed practice assignments, and with performance of specific therapeutic techniques during specified laboratory time both during and following the lecture. Active learning is required throughout the course. Examples of active learning include student-oriented learning assignments, evidence informed inquiry presentations, instructor facilitated & supervised peer-teaching experiences relative to targeted interventions, intervention planning & implementation, clinical decision making, and both post-surgical and conservative physical therapy intervention strategies. Evidence informed inquiry integrates multiple components: a professional power-point utilizing correctly referenced information/research, presentation of information utilizing audio-visual materials, and a case-based intervention walk-through for classmates. The EIP component in this course is integrated within a case-based skills scenario and is intended to enhance professional communication skills, the ability to produce clinically relevant in-services, and the application of the latest evidence in clinical intervention decision making. Guest lecturers and field trips may be incorporated to enhance the classroom material. Audio-visual materials will be utilized whenever possible.

Course Objectives and/or Competencies:

LEARNING OUTCOMES & COURSE COMPETENCIES:

The student will:

1. **Construct/Create** effective intervention sequences within the plan of care relative to specific impairments with respect to:
 - a. overall causative factors considering regional interdependence,
 - b. local tissue involvement
 - c. specific target tissues involved,
 - d. stage of healing,
 - e. stage of rehab,
 - f. and with consideration to any confounding patient variables or conditions. (cognitive & psychomotor);
2. **Predict** the desired patient response and outcome of specific intervention strategies (cognitive);
3. **Design & implement** an overall intervention strategy based upon the various patient specific impairments.

4. **Justify** the rationale for & explain predicted outcomes for specific intervention strategies chosen based upon the patient impairments, target tissues involved, underlying causative factors, stage of healing and phase of rehab.
5. **Construct** appropriate prescriptions for therapeutic exercises & intervention strategies based upon the goals of the intervention, the target tissues being addressed, and the stage of healing.
6. Effectively **instruct & execute** therapeutic techniques, therapeutic exercises and functional training for various patient populations in a safe manner to address specific impairments. (cognitive & psychomotor)
7. **Determine** a patient's response to an exercise or intervention strategy (by subjective reports, facial expression, NPRS, changes in ROM or movement pattern, form, recruitment or function etc) and **determine** if the chosen exercise/intervention & prescription was appropriate for the tissue involved at the specific phase of healing.
8. **Identify** the correct indicators of patient progression towards or achievement of the patient specific outcome or goal.
9. **Perform** appropriate data collection to determine patient progress towards specific goals. (psychomotor)
10. **Reflect** on & **deconstruct** a patient's response to specific implemented intervention & make sound clinical judgements regarding any need for revision or change in intervention strategy of specific intervention choices.
11. **Formulate** appropriate modifications or progressions of therapeutic exercise or intervention strategy based upon the patient's response or change in patient status.
12. **Identify** various sources of information (textbooks, professional journals, films, slides, etc.) for the purpose of gaining additional knowledge/insights in the various areas/topics presented in this course.
13. **Demonstrate** ability to apply evidence informed practice methods to the planning, implementation and modification of therapeutic interventions and exercises for specific pathologies, diagnosis, conservative and surgical protocols with respect to stage of healing, phase of rehab and patient response (cognitive & affective);
14. **Demonstrate** effective communication techniques to:
 - ensure patient understanding of the specific intentions and goals regarding specific intervention techniques & strategies,
 - processes & procedures of intervention techniques,
 - correct performance of exercises and intervention strategies.
 - and attain informed consent with all components necessary. (cognitive & affective)
 - with supervising PT regarding patient status/change in status, progression/regression, red flags or safety concerns, clarification of

intervention, patient status or diagnosis, and in regards to any potential changes or modifications to the plan of care that might be beneficial based upon patient status

- medical providers regarding patient status, change in status, red flags, safety concerns or clarifications regarding patient status or procedures.

15. For application of all intervention techniques and therapeutic exercise, **prepare** the patient (i.e. draping, patient education, directions etc.), the treatment area, and equipment as needed.

16. **Demonstrate** effective documentation skills regarding patient interventions in a manner that meets professional standards and effectively communicates patient status, intervention provided, and response to intervention (cognitive & affective).

17. **Differentiate** principles to follow when performing exercises with a healthy versus a high-risk patient given specific circumstances.

18. **Recognize & identify** conditions that can result in a patient being considered high risk and respond appropriately to changes in patient status or presentation during intervention.

19. Given a pathophysiological condition, discuss the condition in terms of etiology, clinical picture and the impact upon physical therapy management (therapeutic exercise program).

20. **Recognize** and correctly identify specific exercise equipment.

21. **Differentiate** which equipment will be most appropriate to meet the specific goal of the patient in regards to the individual patient presentation & impairments.

22. **Justify** the use of various pieces of exercise equipment and the specific role and function of selected equipment related to its ability to meet specific goals of the POC.

23. **Demonstrate** correct and safe use of selected exercise equipment in accordance with the POC. (psychomotor)

24. **Value** and **appreciate** the need for a clean and orderly clinic/classroom environment and the relationship to patient safety and effective care. (affective)

25. **Perform** cleaning and basic organizational operations to maintain an orderly lab/clinic working area following cleaning schedules utilizing techniques to ensure cleanliness of equipment and tables according to professional standards. (psychomotor)

26. **Organize & prepare** for lecture and lab sessions by having all pertinent equipment ready, prepped and available, and wearing the appropriate clothes for the planned activities. (psychomotor)

27. **Receive** constructive feedback from faculty and classmates in a positive manner. (affective)

28. **Value** teamwork and the important contribution of each colleague to the learning process. (affective)

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29. ***Appreciate*** working with assigned lab or presentation partners in a positive and constructive manner in order to accomplish tasks. (affective)

Course Attendance/Participation Guidelines:

If a student is not in attendance in accordance with the policies/guidelines of the class as outlined in the course syllabus as of the course census date, faculty are required to drop students from their class roster prior to certifying the respective class roster. A student's financial aid will be re-evaluated accordingly and the student will only receive funding for those courses attended as of the course census date.

Course Outline or Schedule:

Lecture & Lab Schedules are included but are subject to change. Students will be notified regarding course schedule changes through announcements in class as well as through announcements on Brightspace

Date	Topic	Other	Lab Activities
M Jan 8	Introduction and Review	Quizzes posted on Thursday evening and due Monday at start of class	Target Tissue, Inflammation, Motor control
W Jan 10	ROM and Stretching		Review PROM, complete stretching
M Jan 15	HOLIDAY- MLK	Campus closed	
W Jan 17	Resistance Exercises part 1		Resistance Exercises
M Jan 22	Resistance Exercises part 2		Resistance Exercises
W Jan 24	Balance and Coordination		Balance and coordination Lab
M Jan 29	PNF	Tentative lecture Heather Davis	

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W Jan 31	WRITTEN EXAM I		
M Feb 5	Peripheral Joint Mobs	Guest Lecture Miranda Kelinske	UE joint mobilization
W Feb 7	Spine Posture/Stability		Postural analysis, blood pressure cuff lumbar and cervical spine, and stability progressions
M Feb 12	Peripheral Joint Mobs	Guest Lecturer Miranda Kelinske	LE joint mobilization
W Feb 14 th	Spine and Gait		Spine and Gait exercises
M Feb 19	Spine Pathologies		Integration: Balance, gait and stability
W Feb 19	Clinical EIP presentations of 2 nd year students	Mandatory attendance on regular scheduled class time	
W Feb 21	WRITTEN EXAM II		Skills Practical I- ROM, Posture, Stability
M Feb 26	Hip		Basic hip exercise
W Feb 28	Hip/knee		Functional progressions
M Mar 4	SPRING BREAK		SPRING BREAK
W Mar 6	SPRING BREAK		SPRING BREAK
M Mar 11	Knee		Basic Knee Exercise Programs
W Mar 13	Knee/ankle		Functional progressions
M Mar 18	Foot and ankle		Basic foot and ankle programs
W Mar 20	Foot and ankle		
M Mar 25	Skills Practical II		LE & Gait Skills Practical II

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W Mar 27	WRITTEN EXAM III		
M Apr 1	Shoulder		Shoulder
W Apr 3	Shoulder		Basic Shoulder Program
M Apr 8	Elbow		Functional progression and gait integration
W Apr 10	Elbow and wrist		Basic Elbow Programs
M Apr 15	Wrist and Hand		Basic Hand Programs
W April 17	Joint, connective tissue and bone disorders and management		Post surgical hip and knee
M April 22	TBD		
W April 24	SKILLS PRACTICAL III		UE SKILLS PRACTICAL
M April 29	COMP FINAL EXAM		

Course Grading Information:

Grade Compilation

Written Exams (3)	32%
Skills Practicals (3)	30%
Comp. Written Final	12.5%
Quizzes	8%
EIP Presentations (2)	15%

TOTAL	100%
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Course Grade:

A= 90% and above

B= 80-89.99%

C= 75-79.99%

D= 60-74.99%

F= Below 60%

Grade Requirements: A student must have a combined average of 75% on all written exams **and** a minimum of 75% on **each** individual skills practical in order to receive a passing grade for this course and progress in the program.

- Any student scoring below 75% on a skills practical will be required to re-take that skills practical.
- A maximum of one skills practical may be repeated one time (one re-take) during the semester for a maximum grade of 75%. (Failure of two skills practicals across all PTHA courses in a given semester will result in the student not being able to progress in the program. Refer to the Student Handbook for details.)
- If a student fails a skills practical, policy requires two faculty graders for the re-take of the skills practical. If a student fails a re-take on a skills practical, it will result in failure of the course with an "F". Failure of the course will prohibit the student from progressing in the program and result in dismissal from the program.
- Students who have failed a skills practical are **REQUIRED** to complete their re-take **PRIOR** to the next scheduled skills practical in the course. Failure to take the re-take prior to the next skills practical in the course will be considered a failure of the re-take and result in failure of the course with a grade of "F".
- It is the **STUDENT'S** responsibility to coordinate scheduling of the re-take by communicating with the primary instructor for the course as well as all other program instructors for options of a second grader. The **STUDENT** is responsible for ensuring that the two-grader re-take is scheduled in plenty of advance of the next skills practical in the course to prevent interference of future performance on upcoming practicals, exams, etc. Faculty have busy and conflicting schedules. If a student is not proactive and waits too long to attempt getting the two-grader re-take scheduled, he/she risks not being able to get the required two-grader re-take scheduled which will result in failure of the re-take which results in failure of the course with a grade of "F". Failing any course in the program prohibits progression/continuation in the program.
- It is the **STUDENT's** responsibility to select another student to be his/her patient for the re-take (due to FERPA laws) and ensure that the selected student is available at the scheduled time of the re-take.

There will be no make-up exams for written exams or skills practicals except with permission from the instructor for excused absences only that have supporting documentation (ie death in family, illness with note from MD, acts of God, etc).

Any student with a course average less than 75% at the end of the semester will not be allowed continue in the PTA program, but may be eligible to re- enter the following year. Please refer to the student handbook for specific eligibility details.

Students must complete ALL assigned work (ie written exams, presentations, quizzes, skills practicals, labs, etc) of each course in the program in order to receive a grade for that course. Should a student choose to not complete any one or more assignments, the student will not pass the course regardless of course average and will not be allowed to progress in the program.

PREPARATION FOR LAB:

All students must be prepared for lab sessions at all times, and appropriate lab clothing must be worn. Students who do not have appropriate lab clothing will be required to wear a hospital gown or other attire provided by the instructor, or that student will not be allowed to participate in lab. Jewelry that may be worn during lab (although it may need to be removed for certain skills/procedures) includes wedding bands/rings, watch, small chain necklace, or small stud earrings worn in the ear. All other jewelry must be removed prior to lab.

LAB SKILLS ASSESSMENTS:

Proof of completion of lab skills assessments, or check offs, of the skills to be tested will be required prior to taking the skills practical. A student must demonstrate proficiency and competency (**safe, effective, reasonable time**) on each skill. Students may not attempt to check off on a skill with the instructor until they have been "checked off" by a fellow student. All skills covered in lab prior to the skills practical must be approved prior to the lab test. Otherwise, it will count as a failure and the student will be required to

repeat that exam for a maximum grade of 75. Only one skills practical can be replaced with the maximum grade of 75 per semester.

CRITICAL SAFETY SKILLS:

Demonstrating mastery of specific **critical safety skills** is necessary in order to pass each skills practical. Competency with **critical safety skills** indicates that a student carries out intervention per the plan of care in a manner that minimizes risks to the patient, self, and others. Failure to demonstrate mastery of any one of these critical safety skills will require the student to re-take the skills practical for a maximum grade of 75. These skills will be specified on the grade sheet for each skills practical. **Critical safety skills** for this course include, but may not be limited to:

- Ability to follow and appropriately carry out the POC established by the PT
- Safe implementation of the POC based upon patient diagnosis, status and response to intervention without placing the patient in jeopardy of harm or injury.
- Safe handling of the patient during intervention (ie transfers, guarding during intervention, level of assistance provided, requesting assistance when necessary)
- Ensures a safe working environment by recognizing and eliminating environmental hazards, safe handling of lines and tubes, proper maintenance and adjustment of assistive devices and equipment
- Safe choice and implementation of transfer technique based upon provider and clinician body type and abilities of both patient and provider.
- Demonstration of knowledge and appropriate response regarding contraindications and precautions for specific patient diagnosis relative to physical therapy intervention within the POC (ie total hip precautions, specific post-surgical precautions, safe versus contraindicated positions for acute TBI and stroke patients; recognition of environmental safety hazards for ambulation)
- Ability to correctly identify physiological measures and responses (BP, HR, blood glucose levels, etc) outside of parameters that allow for safe therapeutic exercise/intervention and provide appropriate response such as adjustment of intervention within the plan of care, withholding intervention and consulting with supervising PT, or immediate notification of the appropriate medical personnel (ie MD, Nurse)
- Ability to recognize patient responses during therapeutic intervention that may indicate a life threatening/emergency condition (shortness of breath, chest pain,

sudden dizziness, s/s of blood glucose issues, dysarthria, etc.) and provide proper response and notification of the PT/MD/Nurse

EIP Presentation Instructions & Guidelines
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Assignments: Each student will select a topic from the list provided. There will be 3-4 people per group. X2 EIP assignments per student each during this course. You will present the information as a 15-20 minute presentation to your class as a group learning-peer teaching experience. You will be expected to put together a powerpoint referenced in AMA style to provide visual aids and pertinent information to assist the effectiveness of your presentation. The powerpoint will be saved from your USB to the desktop prior to the presentation utilizing the proper naming nomenclature (given below) so that the instructor can post the powerpoint for the entire class on Brightspace. Dependent upon the subject matter, as much class participation as possible is expected to engage fellow students in active learning.

EIP Component:

You will perform a search on established health/medical search engines (PEDro, Pubmed, CINAHL, Medline, etc) to find at minimum 5 peer reviewed journal articles (RCT's or SR's if intervention related) related to your topic that are no more than 10 years old. You are also expected at minimum to utilize your textbooks as resources as well to equal a total of at minimum 7 references (combined articles, texts, websites etc). You are required to **integrate** and compile the information from the different articles (do not present the information as separate article reviews, but as a cohesive body of integrated information).

- **Research Article Collection:** For the EIP component, you will save all of your reference articles and sources in PDF format in the following way: *author/authors-year published-title of article*. Example: **Coppieters et al 2009 Nerve excursion**. Put all of the PDF articles into a folder that you will save onto the desktop under the name of your presentation on the day of your presentation. The articles will then be posted for the entire class to access. This action allows

students to have a solid collection of research articles pertaining to physical therapy topics & related research by the end of the semester. Students then will have access to these articles for future study and clinical decision making.

Powerpoint:

- **Information presented in the EIP presentation is testable material on written exams for the class.** You will need to present the information utilizing a well-organized powerpoint designed in a meaningful manner following proper guidelines for effective powerpoints.
- Your sources **must be referenced appropriately** during your presentation and at the end of your powerpoint in **AMA style**. If you are unfamiliar with AMA style, you can find guidelines on the internet.
- The powerpoint component must be saved onto the desktop computer just prior to the presentation so that the powerpoint may be posted to Brightspace for the entire class. Save the powerpoint utilizing the following naming nomenclature: **topic-presentersnames-courseandsemester**
Example: MovementDysfunction–Sarah&Jason–Intro2018

Goals of the Assignment:

While there are multiple goals for this assignment, the primary goal is to develop active learners who have the skills and knowledge to seek out and find information, integrate information cohesively, and be able to teach and instruct others. In a profession that is ever evolving due to increasing knowledge and research, the skill and desire to find and integrate new relevant information to improve both knowledge and clinical skills is pivotal to being a competent clinician. The objectives to achieve these goals are listed below.

The student will be able to:

- seek out reliable resources of information and critically appraise both the source and the information
- advance his/her skill and confidence in reading & consuming research literature
- understand the processes involved in learning how to appraise, understand and evaluate different research literature as well as other sources of information
- recognize when the need for lateral reading occurs and seek out appropriate resources

- identifying what is important in the information for the development of his/her knowledge
- relate his/her findings to the clinical setting and how the information impacts his/her clinical decision making
- **integrate the findings with his/her current knowledge and apply the new knowledge to critical thinking on intervention choices, intervention application, and patient safety & education**

Due Date: To be determined, due dates will be assigned during the first few weeks of course and may include a day/time outside of scheduled course time. Assignments are given at the very beginning of the semester which allows the student to plan and coordinate work in a manner that promotes success in accordance with all other courses and coursework. Due to the high volume of courses that you are taking this semester, it may be unavoidable that your presentation is scheduled on a day when other tests or assessments are occurring. You are expected to be able to time manage and take care of all responsibilities in a manner that does not disrupt the schedule. Do NOT ask to move your presentation date. Late work will not be accepted unless there is a documentable excused absence. You are expected to meet with instructor a minimum of 1 week prior to scheduled presentation to assist with guidance and recommendations for adaptations as needed.

Grade:

Refer to the Grading Rubric for details on grading criteria and grade breakdown, and to the course syllabus for details of the point value of the EIP presentation to the overall course grade.

Information presented in the EIP's is testable material on written exams for the class.

Peer Assessment Component:

During the semester you will also be asked to provide peer assessment and review of at least 1-2 colleague's presentations utilizing the grading rubric/gradesheet. You must provide at least three points of constructive feedback as well as three points of positive feedback to your colleagues. Remember that in the physical therapy profession you will both be assessing colleagues, as well as being assessed by colleagues. The ability to both give and receptively receive and utilize constructive feedback is critical to growth as a clinical professional. As a professional our focus should always be on truth finding and giving.

Goals of Peer Assessment

This activity is intended to:

1. strengthen the presentation/teaching skills of the person being assessed
2. strengthen the professional communication skills and assessment capabilities of the peer assessor

It is imperative that we generate both a receptive and positive professional environment for this feedback to be given. The instructor will guide and monitor the feedback sessions, and give feedback to both the presenters and peer assessors in a guided attempt to strengthen the critical thinking and appraising process, presentation process, and professional communication techniques utilized. If the assessor gives feedback in an unprofessional or disrespectful manner, points may be deducted from the **assessor's** presentation at the discretion of the instructor of up to but not exceeding 1 letter grade. If the presenter becomes defensive, non-receptive, or disrespectful during the feedback session points may be deducted from the presentation up to but not exceeding 1 letter grade regardless of the quality of the presentation. Egregious breaches of professionalism can also result in being written up on professional behaviors (refer to the student handbook and syllabus for details and consequences).

Instructor Assessment EIP Grading Rubric

Name: _____

Date: _____

Topic: _____

Turn-in Product:

Sources _____/3

Appropriate Journal Articles _____/3

Other Related Sources _____/3

Organization & Flow of Information _____/3

Summary & Integration of the Research _____/3

Conveyed Relevance of Information _____/3

Appropriate Referencing _____/3

Bibliography in AMA Format _____/3

Constructive Feedback:

1.

2.

3.

Positive Feedback:

1.

Presentation:

Professional Dress & Appearance _____/3

Appropriate Length _____/3

Projection of Voice _____/3

Quality of Powerpoint _____/3

Interaction with Audience _____/3

2.

3.

Audience Participation in Learning _____/3

Appropriate Pace of Presentation _____/3

Familiarity with Information _____/3

Overall Quality _____/3

Additional Comments:

Grade Summary: _____/51= _____%

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Rating Anchors

3 = excellent, thorough demonstration of accomplishment

2 = average demonstration of accomplishment

1 = below average accomplishment

0 = no accomplishment demonstrated

Peer Assessor/Grader's

Name: _____

Peer Assessment EIP Grading Rubric

Name: _____

Date: _____

Topic: _____

Constructive Feedback

- 1.
- 2.
- 3.

Positive Feedback

- 1.
- 2.
- 3.

Presentation:

Professional Dress & Appearance _____/3

Appropriate Length _____/3

Projection of Voice _____/3

Quality of Powerpoint _____/3

Interaction with Audience _____/3

Audience Participation in Learning _____/3

Appropriate Pace of Presentation

Familiarity with Information _____/3

Overall Quality _____/3

Grade Summary: _____/51= _____ %

Rating Anchors

3 = excellent, thorough demonstration of accomplishment

2 = average demonstration of accomplishment

1 = below average accomplishment

0 = no accomplishment demonstrated

Peer Assessor/Grader's

Name: _____

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Rating:	3	2	1	0
Powerpnt:				
Sources – Number, Quality & Age	Correct number & quality of research sources with good rigor, relevant, and current.	Correct number of research sources but inconsistent relevance or quality of sources.	Insufficient number of research sources or poor quality of research, lacking depth or outdated.	No research support of presentation.
Appropriate Journal Articles	Research articles and sources deepened the understanding and clarified the subject matter.	Research articles can clearly be associated with the subject matter.	Some research was difficult to associate with subject matter or was not incorporated in a logical manner.	Research was unrelated to the subject matter and/or incoherently incorporated.
Other Related Sources	Incorporated information from numerous sources including lecture, other courses, credible websites as well as research literature related to the subject matter that promoted integration of previous & current knowledge with a deeper understanding.	Incorporated information from some but not all potential sources such as lecture, other courses, credible websites, and research literature related to the subject matter that increased integration of knowledge & understanding.	Incorporated minimal information from any other sources such as lecture, other courses, credible websites, and research literature related to the subject matter that led to minimal increase in integration of knowledge & understanding.	Information gathered from only research articles.
Organization & Flow of Information	Presentation well organized with logical flow of information that promoted deeper understanding of subject matter.	Presentation organized with a logical flow of information.	Presentation with minimal organization and lacks logical flow of information.	Information disorganized and led to confusion.

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Summary & Integration of the Research	Excellent cohesion and integration of research article information with excellent resolution of conflicting information through logical analysis.	Good cohesive integration of research article information but only fair resolution of conflicting information with logical analysis.	Addressed research as individual articles without good cohesive integration of information and/or provided poor resolution of conflicting information with logical analysis.	No cohesive integration of information between research articles and did not attempt to resolve conflicting information with logical analysis.
Conveyed Relevance Information	Conveyed completely the relevance to clinical practice and inspired & motivated to integrate information for future clinical use.	Conveyed the need for the information in the clinical setting.	Struggle with conveying a strong clinical need for the information but could determine some need.	Unable to clearly convey how the information impacts clinical practice.
Appropriate Referencing	Easily able to discern where specific information is sourced.	Able to discern where specific information is sourced.	Inconsistently able to discern where specific information is sourced.	Difficult or unable to discern the source of specific information.
Bibliography in AMA Format	Utilized AMA format throughout the powerpoint & easily can identify where information came from.	Utilized referencing throughout but minimal confusion or ability to locate where information came from.	Minimal referencing or referencing was confusing and did not enable am awareness of where the information came from.	Did not utilize AMA format and no referencing of where information came from.
<i>Presentation:</i>				
Professional Dress & Appearance	Professional dress appropriate for any setting, allows for demonstration of clinical skills, clean.	Professional dress for most settings but limited ability to demonstrate clinical skills, clean.	Professional for few settings or limits demonstration of clinical skills or unclean.	Unprofessional, revealing, not appropriate for demonstration of clinical skills unclean.

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Appropriate Length	Met the assigned time-frame with adequate coverage of all topic areas.	Met the assigned time-frame with only a few areas not fully covered or left out.	Either too short causing deficits in topic coverage or too long causing confusion in learning.	Excessively short and failed to adequately cover material.
Projection of Voice	Consistently clear projection and understandable articulation.	Good with one but inconsistent with the other regarding projection or articulation.	Inconsistent in both projection and articulation.	Unable to hear or understand presenter.
Interaction with Audience	Active engagement of entire audience with good eye contact, movement, active engagement through question/answer or involvement of individual learners.	Good in some components but lacking others with eye contact, movement, question/answer or engagement of individual learners.	Inconsistent eye contact, minimal movement, minimal questioning or engagement of individual learners.	Avoided eye contact and no engagement of audience or individual learners.
Audience Participation in Learning	Audience engaged in a manner that promoted meaningful gain in clinical knowledge, psychomotor skills and clinical critical thinking.	Audience engaged in some basic psychomotor skills and basic clinical critical thinking.	Audience minimally engaged in clinical activities related to psychomotor skills or clinical critical thinking.	No Audience engagement in clinical activities related to psychomotor skills or clinical critical thinking skills.
Appropriate Pace of Presentation	Presentation pace allows for time to process new information and integration of knowledge in response to audience.	Presentation pace allowed for audience to keep up with the information presented.	Presentation pace was inconsistent.	Presentation pace was either too rapid to follow or too slow to maintain attention.

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Familiarity with Information	Presenter exhibits deep understanding of the topic matter, regional interdependence and able to answer questions logically based upon information presented.	Presenter with good basic knowledge but struggled with integration of regional interdependence concepts.	Presenter with inconsistent basic understanding of the subject matter and integration of regional interdependence concepts.	Presenter clearly not knowledgeable about subject matter.
Overall Quality	Presentation deepened understanding, promoted integration of information, and sharpened ability to critically think about the subject matter.	Presentation increased basic knowledge of the subject matter and increased interest.	Presentation somewhat increased knowledge but with gaps in understanding or knowledge.	Presentation created confusion regarding the subject matter.

Late Work and Make Up Work Policies:

ATTENDANCE:

Attendance is essential for attainment of course objectives and skills competencies. A student who is more than five (5) minutes late is considered tardy, a student who is more than 30 minutes late is considered absent, a student who leaves more than 10 minutes early without instructor permission is considered absent for the day, and three (3) tardies will constitute one absence. This policy is enforced BOTH for lecture and for lab times. Excused absences will not count against the student. Excused absences include Acts of God (ie weather events), death in the family, documented medical illnesses, court obligations. Determination of excused versus unexcused is at the discretion of the instructor of the course. Student's should not schedule routine appointments during class time – those will not be excused.

Two (2) absences or absence from 2 lecture hours: verbal warning

Three (3) absences or absence from 3 lecture hours: written warning

Four (4) absences or absence from 4 lecture hours: program probation

Five (5) absences or absence from 5 lecture hours: ***withdrawal from program***

Absences from lab will be handled following the above policy, but hours missed from lecture and lab will not be combined to penalize the student. Make-up work may be required for absences in order to ensure that students acquire information and skills

presented during their absence. Students must notify the PTA office in advance whenever tardiness or absence is unavoidable.

Students should not schedule travel events during any class day from the first day of the semester to the last day of finals per the college calendar. Students who plan travel and miss course content or exams will receive a grade of 0 unless **prior** written approval is given by the faculty for an excused reason (ie death in the family, etc.).

It is the **student's** responsibility to attain the information that is missed due to his/her absence.

STUDENT RESPONSIBILITIES:

It is the responsibility of the student to come to class having read the assigned material and ready to participate in discussion, quizzes, and activities. This will provide a more positive learning experience for the student. It is also the responsibility of the student to turn in assignments on time. Assignments are due at the beginning of the class period. **Late assignments will not be accepted unless it is due to a documented excused absence.**

Student Behavioral Expectations or Conduct Policy:

Generic Abilities & Professional Behaviors:

Students are expected to maintain a professional classroom decorum that includes respect for other students and the instructor, prompt and regular attendance, and an attitude that seeks to take full advantage of the educational opportunity.

Students in the Physical Therapist Assistant program have willingly applied for and entered into a professional degree program. Implicit in professional degree programs is the need to develop the student's professional behaviors as well as minimum basic entry level competencies. The tool utilized in the PTA Program is the Generic Abilities form. Students will be evaluated on a continual basis throughout the program in classroom, lab activities, clinical activities, and interaction between fellow students, faculty, and instructors. If a student is found to be lacking in any area of the generic abilities, the student will be called in by the faculty member who will fill out the form and review any deficiencies. The faculty member, and if deemed necessary the program director, will then discuss with the student a plan of action to assist the student in development in the areas that have been deemed deficient.

Any student who persists with deficiencies with no improvement in professional behavior over 3 different episodes will be dismissed from the program based upon lack of progress in professional behavior. This policy is effective throughout the entire program across all courses, program related activities and clinical work as professional behavior extends across all aspects of the program.

It will also be at the faculty member's discretion to take 2 points from the student's final grade for each documented episode related to unprofessional behavior.

A short description of the Generic Abilities follows and specific forms for assessment will be made available on Brightspace.

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Attachment #10 Generic Abilities

Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the knowledge and technical skills but are nevertheless required for success in the profession. Ten generic abilities were identified through a study conducted at the University of Wisconsin at Madison in 1991-1992. The ten abilities and definitions developed are:

	<i>Generic Ability</i>	<i>Definition</i>
1	Commitment to learning	The ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.
2	Interpersonal skills	The ability to interact effectively with patient, families, colleagues, other health care professionals, and the community and to deal effectively with cultural and ethnic diversity issues.
3	Communication skills	The ability to communicate effectively (speaking, body language, reading, writing, listening) for varied audiences and purposes.
4	Effective use of time and resources	The ability to obtain the maximum benefit from a minimum investment of time and resources.
5	Use of constructive feedback	The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.
6	Problem-solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
7	Professionalism	The ability to exhibit appropriate professional conduct and to represent the profession effectively.
8	Responsibility	The ability to fulfill commitments and to be accountable for actions and outcomes.
9	Critical thinking	The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
10	Stress management	The ability to identify sources of stress and to develop effective coping behaviors.

May W, Morgan BJ, Lemke J, Karst G, Stone H. Model for ability based assessment in physical therapy education. *Journal of Physical Therapy Education*. 1995; 91: 3-6.

PHYSICAL THERAPIST ASSISTANT PROGRAM

GENERIC ABILITIES FORM**Commitment to learning**

1	2	3 5	4	6	7
Requires direction often, has difficulty identifying needs and sources of learning and rarely seeks out knowledge and understanding		Self directed, frequently identifies needs and sources of learning, and invites new knowledge and understanding		Highly self directed, consistently identifies needs and sources of learning and deliberately seeks out new knowledge and understanding	

Interpersonal skills

1	2	3 5	4	6	7
Engages in non effective or judgmental interactions with persons on the clinical setting and loses focus in unexpected or new situations		Usually engages in effective and on judgmental interactions with most persons in the clinical setting and maintains focus in unexpected/new situations		Consistently engages in highly effective and non judgmental interactions with all persons in the clinical setting and responds exceptionally well to unexpected/new situations	

Communication skills

1	2	3 5	4	6	7
Exhibits poor written, verbal and non-verbal communication skills and lacks ability to modify information to meet the needs of various audiences/purposes		Exhibits acceptable written, verbal and non verbal communications skills and is usually capable of modifying information to meet the needs of various audiences/purposes		Exhibits superior written, verbal and non verbal communication skills and readily modifies information to meet the needs of various audiences/purposes	

Effective use of time and resources

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1	2	3 5	4	6	7
Exhibits poor use of time and resources, shows lack of flexibility/adaptability, and seems incapable of setting goals		Obtains good results through proper use of time and resources, shows adequate flexibility/adaptability, and is capable of setting goals		Consistently obtains maximum results through superior use of time and resources, shows unusual flexibility/adaptability and sets realistic goals	

Use of constructive feedback

1	2	3 5	4	6	7
Accepts feedback defensively, does not identify or integrate feedback, provides non constructive , negative or untimely feedback to others		Usually accepts, identifies, and integrates feedback from others, and frequently provides appropriate feedback to others		Seeks out, identifies, and eagerly integrates feedback from others, and constructive, timely, and positive feedback to others	

Problem solving

1	2	3 5	4	6	7
Does not regularly recognize and define problems, analyze data, develop and implement solutions and evaluate outcomes		Frequently recognizes and defines most problems. Analyzes data, develops and implements solutions and evaluates outcomes		Consistently and insightfully recognizes and defines problems, analyzes data, develops and implements solutions, and evaluates outcomes	

Professionalism

1	2	3 5	4	6	7
Exhibits questionable or poor conduct concerning ethics, regulations and procedures, and represents the profession in an incompetent and negative manner		Usually exhibits professional conduct concerning ethics, regulations, policies and procedures, and represents the profession		Exhibits superior professional conduct concerning ethics, regulations, policies and procedures, and actively promotes/represents the profession in a highly	

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	in a competent and positive manner	competent/commendable manner
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Responsibility

1	2	3 5	4	6	7
Demonstrates a poor level of commitment, is not dependable, not punctual, not aware of personal and professional limitations, and does not accept responsibility for actions and outcomes		Demonstrates an appropriate level of commitment, is usually dependable, punctual, aware of personal and professional limitations, and accepts responsibility for actions and outcomes		Demonstrates a high level of commitment over and above normal responsibilities, very dependable, always punctual, acutely aware of personal and professional limitations, and accepts full responsibility for actions and outcomes	

Critical thinking

1	2	3 5	4	6	7
Does not identify, articulate, or analyze problems, does not distinguish relevant from irrelevant, does not recognize/differentiate among facts, illusions and assumptions and does not resent ideas		Frequently identifies, articulates and analyzes problems, distinguishes relevant from irrelevant, recognizes/differentiates among facts, illusions and assumptions, and presents ideas		Readily identifies, articulates, and analyzes problems, consistently and accurately distinguishes relevant from irrelevant, recognizes/differentiates among facts, illusions, and assumptions, and generates original ideas	

Stress management

1	2	3 5	4	6	7
Fails to identify sources of stress/problems in self and others, does not seek assistance or utilize coping skills, and is unsuccessful at balancing professional/personal life		Is usually aware of sources of stress/problems in self and others, frequently seeks assistance as needed, utilizes coping strategies and maintains balance of professional/personal life		Accurately identifies sources of stress/problems in self and others, actively seeks assistance when appropriate, demonstrates effective use of coping mechanisms and	

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		successfully maintains a balance of professional/personal life
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Technology Devices:

Students may only tape record or video class activities and instructors with permission of the instructor and in no circumstance are allowed to post recordings on any internet site or social network site. The recording may only be utilized by the individual. Students who do not remain in compliance with this policy will be written up and potentially put on probation based upon the extent to which the policy has been disregarded.

Cellular telephones and personal telephone calls. Students are NOT to receive or place telephone calls or texts during class. Cellular telephones are to be turned off or set to vibrate before entering the classroom. Utilizing digital devices for activities that are not sanctioned as directly related to course activities can result on the student being dismissed from the class for the day and will be deemed as an unexcused absence.

Messages for a student during an emergency will be delivered immediately.

[Click Here for the MCC Attendance/Absences Policy](https://www.mclennan.edu/highlander-guide/policies.html)

(<https://www.mclennan.edu/highlander-guide/policies.html>)

Click on the link above for the college policies on attendance and absences. Your instructor may have additional guidelines specific to this course.

10/09/2023



ACADEMIC RESOURCES/POLICIES

Accommodations/ADA Statement:

Any student who is a qualified individual with a disability may request reasonable accommodations to assist with providing equal access to educational opportunities. Students should contact the Accommodations Coordinator as soon as possible to provide documentation and make necessary arrangements. Once that process is completed, appropriate verification will be provided to the student and instructor. Please note that instructors are not required to provide classroom accommodations to students until appropriate verification has been provided by the Accommodations Coordinator. For additional information, please visit www.mclennan.edu/disability

Students with questions or who require assistance with disabilities involving physical, classroom, or testing accommodations should contact:

disabilities@mclennan.edu (254)299-8122
Room 319, Student Services Center

Title IX:

We care about your safety, and value an environment where students and instructors can successfully teach and learn together. If you or someone you know experiences unwelcomed behavior, we are here to help. Individuals who would like to report an incident of sexual misconduct are encouraged to immediately contact the Title IX Coordinator at titleix@mclennan.edu or by calling, Dr. Claudette Jackson, (Accommodations/Title IX) at (254) 299-8465. MCC employees are mandatory reporters and must report incidents immediately to the Title IX Coordinator. Individuals may also contact the MCC Police Department at (254) 299-8911 or the MCC Student Counseling Center at (254) 299-8210. The MCC Student Counseling Center is a confidential resource for students. Any student may report sexual harassment anonymously by visiting <http://www.lighthouse-services.com/mclennan/>

Additionally, Title IX provides rights and protections for pregnant and newly parenting students. Go to McLennan's Title IX webpage at www.mclennan.edu/titleix/. It contains more information about definitions, reporting, confidentiality, resources, and what to do if you or someone you know is a victim of sexual misconduct, gender-based violence or the crimes of rape, acquaintance rape, sexual assault, sexual harassment, stalking, dating violence, or domestic violence.

Student Support/Resources:

MCC provides a variety of services to support student success in the classroom and in your academic pursuits to include counseling, tutors, technology help desk, advising, financial aid, etc. A listing of these and the many other services available to our students is available at <http://www.mclennan.edu/campus-resource-guide/>

Academic Support and Tutoring is here to help students with all their course-related needs. Specializing in one-on-one tutoring, developing study skills, and effectively writing essays. Academic Support and Tutoring can be found in the Library and main floor of the Learning Commons. This service is available to students in person or through Zoom. You can contact the Academic Support and Tutoring team via Zoom or email (ast@mclennan.edu) by going to our website (<https://www.mclennan.edu/academic-support-and-tutoring/>)

College personnel recognize that food, housing, and transportation are essential for student success. If you are having trouble securing these resources or want to explore strategies for balancing life and school, we encourage you to contact either MCC CREW – Campus Resources Education Web by calling (254) 299-8561 or by emailing crew@mclennan.edu or a Success Coach by calling (254) 299-8226 or emailing success@mclennan.edu.

Paulanne's Pantry (MCC's food pantry) provides free food by appointment to students, faculty and staff. To schedule an appointment, go to <https://calendly.com/paulannespantry-mcc/15min>.

The CREW, Success Coaches, and Paulanne's Pantry are all located on the second floor of the Student Services building in Success Coaching Services.

MCC Foundation Emergency Grant Fund:

Unanticipated expenses, such as car repairs, medical bills, housing, or job loss can affect us all. Should an unexpected expense arise, the MCC Foundation has an

emergency grant fund that may be able to assist you. Please go to <https://www.mclennan.edu/foundation/scholarships-and-resources/emergencygrant.html> to find out more about the emergency grant. The application can be found at https://www.mclennan.edu/foundation/docs/Emergency_Grant_Application.pdf

MCC Academic Integrity Statement:

Please view our [Academic integrity statement](#) for more information about academic integrity, dishonesty, and cheating. The unauthorized use of artificial intelligence (AI) for classwork can be a violation of the College's General Conduct Policy. Whether AI is authorized in a course and the parameters in which AI can be used in a course will be outlined by each instructor.

Minimum System Requirements to Utilize MCC's D2L|Brightspace:

Go to <https://www.mclennan.edu/center-for-teaching-and-learning/Faculty-and-Staff-Commons/requirements.html> for information on the minimum system requirements needed to reliably access your courses in MCC's D2L|Brightspace learning management system.

Minimum Technical Skills:

Students should have basic computer skills, knowledge of word processing software, and a basic understanding of how to use search engines and common web browsers.

Backup Plan for Technology:

In the event MCC's technology systems are down, you will be notified via your MCC student email address. Please note that all assignments and activities will be due on the date specified in the Instructor Plan, unless otherwise noted by the instructor.

Email Policy:

McLennan Community College would like to remind you of the policy (<http://www.mclennan.edu/employees/policy-manual/docs/E-XXXI-B.pdf>) regarding college email. All students, faculty, and staff are encouraged to use their McLennan email addresses when conducting college business.

A student's McLennan email address is the preferred email address that college employees should use for official college information or business. Students are expected to read and, if needed, respond in a timely manner to college emails. For more information about your student email account, go to www.mclennan.edu/studentemail.

Instructional Uses of Email:

Faculty members can determine classroom use of email or electronic communications. Faculty should expect and encourage students to check the college email on a regular basis. Faculty should inform students in the course syllabus if another communication method is to be used and of any special or unusual expectations for electronic communications.

If a faculty member prefers not to communicate by email with their students, it should be reflected in the course syllabus and information should be provided for the preferred form of communication.

Email on Mobile Devices:

The College recommends that you set up your mobile device to receive McLennan emails. If you need assistance with set-up, you may email Helpdesk@mclennan.edu for help.

You can find help on the McLennan website about connecting your McLennan email account to your mobile device:

- [Email Setup for iPhones and iPads](#)
- [Email Setup for Androids](#)

Forwarding Emails:

You may forward emails that come to your McLennan address to alternate email addresses; however, the College will not be held responsible for emails forwarded to an alternate address that may be lost or placed in junk or spam filters.

For more helpful information about technology at MCC, go to [MCC's Tech Support](#) or email helpdesk@mclennan.edu.

Disclaimer:

The resources and policies listed above are merely for informational purposes and are subject to change without notice or obligation. The College reserves the right to change policies and other requirements in compliance with State and Federal laws. The provisions of this document do not constitute a contract.