



PHYSICAL THERAPY DEPARTMENT

**CLINICAL INSTRUCTOR
MANUAL**

January 2024 to December 2024

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INTRODUCTION

The Tennessee State University (TSU) Physical Therapy Department offers a Doctor of Physical Therapy (DPT) program. Students admitted to the professional component begin in June and attend classes year-round, for three years before graduation.

There are a total of four clinical education experiences during the DPT program.

- * The first experience is seven weeks in length and occurs in the second year during the summer semester.
- * The second experience is ten weeks in length and occurs in the third year during the fall semester.
- * The final two experiences are seven weeks in length and occurs in the third year during the spring semester following completion of all course work. The two affiliations may be combined into one 14-week clinical to allow for more clinical time in a specialized area i.e., pediatrics, manual therapy, women's health, etc.
- * Currently, TSU's Course Titles are "Clinical Internship". We recognize that this is not in alignment with the ACAPT terms as sanctioned in their published glossary <https://acapt.org/glossary> . At this time, TSU is going through the process of officially changing the course titles to be succinct with the approved glossary of terms. ***Please note that our title of Clinical Internship is the same as Clinical Education Experience as defined by the glossary.***

Other sections of this manual describe the curriculum and the clinical education program in detail. If any questions arise concerning clinical education, please contact Deborah Edmondson, Director of Clinical Education (DCE) at 615-963-5945 or dedmondson@tnstate.edu

**TENNESSEE STATE UNIVERSITY
PHYSICAL THERAPY DEPARTMENT**

PHILOSOPHY

The DPT program at Tennessee State University recognizes the reciprocal and responsive nature of professional education, where both the learner and the educator collaborate as partners in the learning process. Inherent in the relationship is the primacy of the learner and the facilitative role of the educator as together they embark on a process of professional education.

Statement of Principles

Integral to the educational partnership is the recognition and acknowledgement of the roles, rights, and responsibilities unique to and common between the learner and the educator. The learner is expected to develop and exhibit characteristics of adult learners including, but not limited to, being problem-centered, willing to learn, and being self-directed. The learner is also expected to be a change agent willing to challenge habituated thoughts and practices as physical therapy moves toward the doctoring profession. The educator is expected to uphold high academic standards, respect learner diversity, be role models of professional behavior, and create an environment conducive for effective learning to occur.

CURRICULUM GOALS

Goal 1: Graduates will possess entry-level competence to practice as physical therapists.

- Graduates will pass the National Physical Therapy Examination.
- Graduates will communicate and collaborate effectively and confidently in the health care community.
- Graduates will practice in a safe, legal, and ethical manner.
- Graduates will practice autonomously within the scope of practice.
- Graduates will demonstrate competence as a generalist entry-level physical therapist.

Goal 2: Graduates will demonstrate cultural competence.

- Graduates will communicate and collaborate effectively and confidently in the health care community.
- Graduates will provide therapy to a diverse population with respect for patient differences.
- Graduates will practice in a safe, legal, and ethical manner.

Goal 3: Graduates will apply research evidence to practice.

- Graduates will use the principles of evidence-based practice.
- Graduates will make decisions related to patient care using reflective critical thinking.
- Graduates will engage in lifelong learning.

Goal 4: Graduates will uphold the Code of Ethics.

- Graduates will practice in a safe, legal, and ethical manner.
- Graduates will practice autonomously within the scope of practice.
- Graduates will serve as compassionate practitioners and patient advocates.

Goal 5: Graduates will value lifelong learning.

- Graduates will make decisions related to patient care using reflective critical thinking.
- Graduates will engage in lifelong learning.

Goal 6: Graduates will engage in socially responsible community leadership.

- Graduates will communicate and collaborate effectively and confidently in the health care community.
- Graduates will provide therapy to a diverse population with respect for patient differences.
- Graduates will serve as compassionate practitioners and patient advocates.
- Graduates will display leadership and professionalism.
- Graduates will provide community service.

MISSION

The mission of the Department of Physical Therapy is to graduate competent, entry-level physical therapists who demonstrate cultural competence, apply research evidence to practice, uphold the Code of Ethics, value lifelong learning, and engage in socially responsible community leadership.

Curriculum Model

The curriculum is built around the Traditional Model, which begins with the basic sciences, followed by clinical courses, and culminating with clinical education experiences. The curriculum is outlined in Appendix A.

PHYSICAL THERAPY FACULTY AND STAFF INTERESTS

Ronald Barredo, PT, DPT, EdD, GCS, CCRP

- Professor, College of Health Sciences, Dean
- Teaches: Cardiopulmonary
- Interests: Credentialed Clinical Instructor, Administration, Cardiopulmonary, Geriatrics, Educational Theory

Marsha Bowman, PT, DPT, WCS

- Assistant Professor, Physical Therapy
- Teaches: Tests and Measures, Biophysical Agents, Psychosocial Behavioral, Administration, Pathology
- Interests: Women's Health, Pelvic Health, Orthopedics, Practice Management, Wellness and Nutrition, Motor Control and Learning

Ashlee Butler, MS, PT, COMT, CDNT

- Lab Competency Coordinator, Physical Therapy Department
- Duties: Assist DCE, Tiger Clinic CI, Lab Assistance, Community Involvement Coordination Assistance
- Interests: Orthopedics, Manual Therapy, PT Education, Fitness/Wellness

Derek Charles, PT, DPT, OCS, FAAOMPT

- Assistant Professor, Physical Therapy
- Teaches: Orthopedics, Therapeutic Exercise, Anatomy, Biomechanics
- Interests: Orthopedics, Manual Therapy

Richard Clark, PT, DSC, SCS, C/IDN

- Associate Professor, Physical Therapy, Director of the Tiger Community Rehab Clinic
- Teaches Orthopedics I/II, Imaging for PT's Gross Anatomy, Cardiopulmonary II, Professional Issues, Health and Wellness
- Sports, Orthopedics, and Advances in Internship

Deborah Edmondson, PT, EdD

- Professor, Physical Therapy
- Director of Clinical Education
- Teaches: Clinical Integration, Introduction to Clinical Internship
- Interests: Ergonomics, Massage, Modalities

Dorothy Fisher

- Administrative Assistant

Patricia (Trish) King, PT, PhD, FAAOMPT

- Professor, Department Chair Physical Therapy
- Teaches: Principles of Education, Professional Issues, Advanced Topics II, Special Topics, Psychosocial, Introduction to Physical Therapy
- Interests: Orthopedic Manual Physical Therapy, Pelvic Health, Women's Health & Sex/Gender Based Health Care, Culture & Health-Ethnomedicine, Health Beliefs, Student Success, Patient Education

David Lehman, PT, PhD

- Professor, Physical Therapy, Chair – Admissions

- Teaches Research I, II, III, IV, & V, Neuroscience, Neurological Physical Therapy I & II, Introduction to Physical Therapy
- Interests: Parkinson's Disease, Neurological Conditions, Pain Science, DEI in PT (Under Represented Minorities in Physical Therapy Education)

Karen Smith, PT, DPT, NCS, CWS, WCS, FACCWS, C/NDT, CSRS

- Assistant Professor, Physical Therapy
- Teaches: Human Development, Patient Care Principles, Ethical Behavior and Moral Reasoning, Prosthetics and Orthotics, Pediatrics, Advanced Clinical Topics I, Seminar in Geriatrics, Integumentary Therapeutics
- Interests: Neurological Interventions, Interprofessional Acute Care, Wound Management, Developmental Delay, Medical Ethics.

CLINICAL EDUCATION SCHEDULE

To assist you in yearly planning for students, the following approximate dates for each Clinical Education experience are provided.

Clinical Internship I - Full time for 7 weeks.

Last week of June to second week of August

Focus: Neurological/Orthopedics/Cardiopulmonary in Adult, Pediatric or Geriatric Settings

Abilities: Can perform basic evaluations and treatments for patients with neurological, orthopedic, and cardiorespiratory conditions under the supervision of a licensed physical therapist

Clinical Internship II - Full time for 10 weeks.

First week of October to the first week of December

Focus: Neurological/Orthopedics/Cardiopulmonary in Adult, Pediatric or Geriatric Settings

Abilities: Can perform basic evaluations and treatments for patients with neurological, orthopedic, and cardiorespiratory conditions under the supervision of a licensed physical therapist

Clinical Internship III & I V - Full time for 7 weeks each.

Third week of January to second week of March and second week of March to end of April

Focus: Neurological/Orthopedics/Cardiopulmonary in Adult, Pediatric or Geriatric Settings

Abilities: Can perform evaluations and treatments for patients with neurological, orthopedic, and cardiorespiratory conditions and function as an independent physical therapy practitioner.

ASSIGNMENT OF STUDENTS

The DCE is responsible for assigning students to a site for each clinical education experience. Students are not ordinarily assigned to facilities in which they have worked or volunteered or with which they have contractual arrangements for financing or employment.

There are four clinical education experiences. Of the four, the student must attend at least one in-patient setting and one out-patient orthopedic setting. The student will be encouraged to attend a variety of physical therapy settings.

CANCELLATION OR CHANGES IN CLINICAL EDUCATION ASSIGNMENTS

Occasionally changes and/or cancellations in clinical education assignments must be made. When this happens, it is the responsibility of the SCCE/CI to notify the DCE as soon as possible when unable to accommodate a student assignment. The DCE will then notify the student and assist the student in finding another appropriate clinical education assignment/placement. Also, whenever, the DCE must cancel or change a student's clinical education assignment/placement, this is done as soon as possible.

EVALUATION OF CLINICAL PERFORMANCE

1. The grade is determined using the following as criteria:
 - A. competency in clinical skills and completion of clinical assignments as evidenced by the clinical instructor's written evaluation in the *Physical Therapist Clinical Performance Instrument Web*. (PT CPI Web).
 - B. completion of all clinical education assignments as determined by the DCE and SCCE/CI.
2. The academic faculty holds the responsibility for determining the final grade for a clinical education experience. If a student fails to show competency in clinical skills, the DCE will consult with other academic faculty and develop a plan to correct deficiencies. Additional clinical education experiences may be required under these circumstances.
3. Specific objectives and grading criteria for each affiliation will be sent prior to that affiliation.

GENERAL OBJECTIVES FOR CLINICAL EDUCATION EXPERIENCES

CLINICAL INTERNSHIP 1 - OBJECTIVES

OBJECTIVES: At the conclusion of this course, the student will be able to:

Cognitive Domain

1. Outline evaluation results as the basis for clinical decision making and establishing patient care goals. (analysis)
2. Select outcome measures to assess patient outcomes using valid and reliable measures considering the patient's needs, resources, and other factors. (evaluation)
3. Organize patient care delivery in all aspects of the clinical setting in a safe and efficient manner. (synthesis)
4. Incorporate modifications into the treatment program as indicated by the patient's changing status. (synthesis)
5. Document all aspects of evaluation, differential diagnosis, and treatment and patient responses in a manner congruent with the policies of the practice setting. (analysis)
6. Present rational arguments for clinical decisions. (analysis)

7. Promote the active involvement of the patient in his/her care. (synthesis)
8. Interact appropriately with other health care practitioners, patients, and families. (synthesis)
9. Complete a self-evaluation of the clinical experience using the *Physical Therapist Clinical Performance Instrument Web*. (application)
10. Complete an evaluation of the clinical experience using the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction* at the mid-point and end of the clinical experience. (application)
11. Perform accurate, timely, and appropriate patient evaluations by utilizing culturally and age appropriate tests and measures learned in the academic setting. (synthesis)

Psychomotor Domain

12. Perform a systems review and obtain a history for the client and other sources. (guided response)
13. Choose and conduct the appropriate intervention for the client based on interpretation of evaluation results and desired outcomes. (adaptation)
14. Select a comprehensive physical therapy program based on the treatment goals. (perception)
15. Administer safe and efficient patient care according to the established treatment plan. (complex overt response)
16. Use principles of evidence-based research in clinical practice. (complex overt response)
17. Provide culturally competent education to patients, families, caregivers, and others on aspects of patient care taking into consideration their needs, capabilities, and learning styles. (adaptation)
18. Imparts knowledge and skills to assist the community and others in the resolution of problems. (complex overt response)
19. Deliver patient care while using human and material resources responsibly. (complex overt response)
20. Modify behavior based on feedback and reflection. (mechanism)
21. Supervise support personnel legally and ethically while providing quality patient care. (mechanism)
22. Conduct screening of clients to determine appropriateness for physical therapy intervention. (complex overt response)
23. Participate in health and wellness promotion, prevention of disease and injury activities within the scope of physical therapy practice. (guided response)
24. Refer clients to other healthcare providers based on screening results or needs as appropriate. (complex overt response)
25. Demonstrate risk management principles and respond approximately to environmental and emergency situations in the practice setting. (mechanism)
26. Participate in financial management of the practice setting. (guided response)
27. Participate in marketing and public relations activities in the practice setting. (guided response)
28. Display professional, legal, and ethical behavior while in the clinical setting in accordance with all institutional, federal and state regulations related to patient care. (complex overt response)

29. Adhere to legal practice standards including all federal state, jurisdiction, and institutional regulations related to patient care. (complex overt response)
30. Monitor and adjust the plan of care in response to the patient's status. (complex overt response)
31. Communicate orally, nonverbally and in writing in an effective, timely, and appropriate manner. (complex overt response)
32. Exhibit respectful and compassionate behavior in all communications and interactions with others. (complex overt response)

Affective Domain

33. Seek opportunities to learn and grow professionally. (characterization)
34. Demonstrate altruism in all patient interactions. (responding)
35. Uphold APTA's standards of practice and the APTA Code of Ethics. (valuing)
36. Preserve patient modesty, privacy and confidentiality at all times. (responding)

TEACHING METHODS AND LEARNING EXPERIENCES:

- Observation and performance of patient evaluations and treatment procedures
- Student presentations/in-services on assigned topics (if requested by clinical instructor)
- Evaluation and treatment of patients in the clinical setting under the supervision of a licensed physical therapist
- Evaluation of student clinical performance by the Clinical Instructor using the *Physical Therapist Clinical Performance Instrument Web* (PT CPI Web)
- Self-evaluation of clinical performance using the PT CPI Web
- Evaluation of the clinical experience using the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction*

CLINICAL INTERNSHIP I OBJECTIVES

OBJECTIVES: At the conclusion of this course, the student will be able to:

Cognitive Domain

1. Outline evaluation results as the basis for clinical decision making and establishing patient care goals. (analysis)
2. Select outcome measures to assess patient outcomes using valid and reliable measures considering the patient's needs, resources, and other factors. (evaluation)
3. Organize patient care delivery in all aspects of the clinical setting in a safe and efficient manner. (synthesis)
4. Incorporate modifications into the treatment program as indicated by the patient's changing status. (synthesis)
5. Document all aspects of evaluation, differential diagnosis, and treatment and patient responses in a manner congruent with the policies of the practice setting. (analysis)
6. Present rational arguments for clinical decisions. (analysis)
7. Promote the active involvement of the patient in his/her care. (synthesis)
8. Interact appropriately with other health care practitioners, patients, and families. (synthesis)

9. Complete a self-evaluation of the clinical experience using the *Physical Therapist Clinical Performance Instrument Web*. (application)
10. Complete an evaluation of the clinical experience using the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction* at the mid-point and end of the clinical experience. (application)
11. Perform accurate, timely, and appropriate patient evaluations by utilizing culturally and age appropriate tests and measures learned in the academic setting. (synthesis)

Psychomotor Domain

12. Perform a systems review and obtain a history for the client and other sources. (guided response)
13. Choose and conduct the appropriate intervention for the client based on interpretation of evaluation results and desired outcomes. (adaptation)
14. Select a comprehensive physical therapy program based on the treatment goals. (perception)
15. Administer safe and efficient patient care according to the established treatment plan. (complex overt response)
16. Use principles of evidence-based research in clinical practice. (complex overt response)
17. Provide culturally competent education to patients, families, caregivers, and others on aspects of patient care taking into consideration their needs, capabilities, and learning styles. (adaptation)
18. Imparts knowledge and skills to assist the community and others in the resolution of problems. (complex overt response)
19. Deliver patient care while using human and material resources responsibly. (complex overt response)
20. Modify behavior based on feedback and reflection. (mechanism)
21. Supervise support personnel legally and ethically while providing quality patient care. (mechanism)
22. Conduct screening of clients to determine appropriateness for physical therapy intervention. (complex overt response)
23. Participate in health and wellness promotion, prevention of disease and injury activities within the scope of physical therapy practice. (guided response)
24. Refer clients to other healthcare providers based on screening results or needs as appropriate. (complex overt response)
25. Demonstrate risk management principles and respond approximately to environmental and emergency situations in the practice setting. (mechanism)
26. Participate in financial management of the practice setting. (guided response)
27. Participate in marketing and public relations activities in the practice setting. (guided response)
28. Display professional, legal, and ethical behavior while in the clinical setting in accordance with all institutional, federal and state regulations related to patient care. (complex overt response)
29. Adhere to legal practice standards including all federal state, jurisdiction, and institutional regulations related to patient care. (complex overt response)
30. Monitor and adjust the plan of care in response to the patient's status. (complex overt response)

31. Communicate orally, nonverbally and in writing in an effective, timely, and appropriate manner. (complex overt response)
32. Exhibit respectful and compassionate behavior in all communications and interactions with others. (complex overt response)

Affective Domain

33. Seek opportunities to learn and grow professionally. (characterization)
34. Demonstrate altruism in all patient interactions. (responding)
35. Uphold APTA's standards of practice and the APTA Code of Ethics. (valuing)
36. Preserve patient modesty, privacy and confidentiality at all times. (responding)

CLINICAL INTERNSHIP II OBJECTIVES

OBJECTIVES: At the conclusion of this course, the student will be able to:

Cognitive Domain

1. Document all aspects of differential diagnosis, evaluation, treatment and patient responses. (knowledge)
2. Incorporate modifications into the treatment program as indicated by the patient's changing status. (synthesis)
3. Document all aspects of evaluation, treatment and patient responses according to the policies and procedures of the practice setting. (knowledge)
4. Integrate evaluation results for the purpose of establishing treatment goals. (synthesis)
5. Integrate knowledge gained in the academic setting into clinical practice. (synthesis)
6. Give rational and concise grounds for clinical decisions based on clinical evidence. (comprehension)
7. Perform patient evaluations and interventions utilizing procedures learned in the academic setting in accordance with the policy and procedures of the practice setting. (application)
8. Establish treatment goals based on an assessment of the evaluation results. (synthesis)
9. Appropriately refers patients to other health care providers based on appropriate screening or evaluation. (evaluation)
10. Identifies need for patient, family, or care giver education. (analysis)
11. Complete a self-evaluation of the student's clinical performance using *The Clinical Performance Instrument – Web*. (evaluation)
12. Complete an evaluation of the clinical education experience using the *Physical Therapist Students Evaluation: Clinical Experience and Clinical Instruction*. (evaluation)
13. Choose an appropriate treatment plan based on treatment goals and treatment techniques previously learned in the classroom. (C4, P1, A3)
14. Select the appropriate evaluation method and demonstrate ability to perform differential diagnosis. (analysis)

Psychomotor Domain

15. Administer safe and efficient patient care according to the established treatment plan, minimizing risk to the patient, client, physical therapist, and others. (complex overt response)
16. Manage resources, time, space, equipment, etc. in the clinical setting. (origination)
17. Perform as an independent practitioner with minimal to moderate supervision from the Clinical Instructor. (origination)
18. Determine a prognosis based on the evaluation results current literature, and medical and psychosocial information. (adaptation)
19. Appropriately and efficiently perform patient, family, or care giver education. (origination)
20. Communicate with other health care professionals about diagnoses, prognoses, and clinical impressions to provide culturally competent care to clients. (mechanism)
21. Perform critical inquiry in relation to the patient's condition and other diagnoses found at the clinical site. (complex overt response)
22. Provide care to clients that have been screened via direct access and determined to need physical therapy care. (origination)
23. Participate in case management. (mechanism)

Affective Domain

24. Display professional, legal, and ethical behavior while in the clinical setting in accordance with all institutional, federal and state regulations related to patient care. (characterization)
25. Interact appropriately with other health care practitioners, patients, and families. (characterization)
26. Preserve patient modesty, privacy and confidentiality at all times. (responding)
27. Exhibit respectful and compassionate behavior in all communications and interactions with others. (characterization)
28. Uphold APTA's standards of practice and the APTA Code of Ethics. (responding)

CLINICAL INTERNSHIP III AND IV OBJECTIVES

OBJECTIVES: At the conclusion of this course, the student will be able to:

Cognitive Domain

37. Document the results of physical therapy evaluations, differential diagnosis, and response to physical therapy services according to the policies and procedures of the practice setting. (comprehension)
38. Outline evaluation results as the basis for establishing patient/client care goals, length of stay and outcomes. (analysis)
39. Modify treatment, plans, and goals based on re-evaluation of the patient/client to achieve expected outcomes. (synthesis)
40. Give rational and concise grounds for clinical decisions. (synthesis)

41. Design and implement a comprehensive physical therapy program based on the treatment goals in collaboration with the patient/client. (synthesis)
42. Incorporate modifications into the treatment program as indicated by the patient/client's changing status. (analysis)
43. Re-evaluate the patient/client as appropriate to determine changes in the patient/client's status. (synthesis)
44. Appropriately refer patient/clients to other health care providers based on appropriate screening or evaluation. (evaluation)
45. Review and analyze data from outcome measurements to modify the plan of care for patients/clients. (synthesis)
46. Address and promote culturally competent wellness and prevention with patients/clients. (synthesis)
47. Identify need for patient/client, family, or care giver education. (analysis)
48. Negotiate with third party payers and physicians, etc. to address needs of the patient/client. (analysis)
49. Seek opportunities to learn and develop as a professional. (application)
50. Complete a written self-evaluation of the clinical experience as outlined in *The Clinical Performance Instrument*. (evaluation)
51. Use clinical decision-making skills to choose treatment goals based on interpretation of evaluation results. (analysis)
52. Select the appropriate evaluation method and demonstrate ability to perform differential diagnosis. (analysis)
53. Appropriately supervise, delegate, collaborate, and follow up with support staff including physical therapist assistants, technicians, etc. considering their clinical abilities and the laws, policies, and guidelines of the clinical site. (synthesis)

Psychomotor Domain

54. Perform accurate, timely, thorough, and appropriate evaluations of patients/clients. (adaptation)
55. Consistently apply current knowledge and integrate evidence into practice to give the best care to patients/clients. (complex overt response)
56. Perform examinations by obtaining a history from sources other than the patient/client. (guided response)
57. Organize patient/client care delivery in all aspects of the clinical setting in a safe, competent, and efficient manner that minimizes risk to patients/clients, self and others. (complex overt response)
58. Use clinical decision-making skills to determine a prognosis based on the evaluation results and medical and psychosocial information. (adaptation)
59. Manage human resources, time, space, equipment, etc. in the clinical setting. (origination)
60. Use clinical judgement and reasoning to minimize errors and enhance positive outcomes. (mechanism)
61. Change behavior as a result of reflection upon the results of actions and their outcomes. (adaptation)
62. Participate in activities that promote the health and wellness of the public. (mechanism)
63. Participate in consultation to businesses, and other organizations and individuals. (mechanism)

- 64. Respond effectively and appropriately to emergency situations in the clinical site. (adaptation)
- 65. Perform as an independent practitioner taking fiduciary responsibility for assigned patients/clients. (origination)
- 66. Adhere to legal and ethical practice patterns including all federal, state, jurisdiction, and institutional regulations related to patient/client care and fiscal management. (guided response)
- 67. Communicate orally, nonverbally, and in writing in an effective and appropriate manner according to the policies and procedures of the practice setting. (complex overt response)
- 68. Appropriately and efficiently perform culturally competent patient/client, family, or care giver education. (origination)
- 69. Participate in activities that promote quality of care to patients/clients i.e.: quality assurance, peer review, utilization review, etc. (mechanism)
- 70. Participate in consultation to individuals, agencies, etc. as necessary. (mechanism)
- 71. Communicate with other health care professionals about diagnoses, prognoses, and clinical impressions to provide culturally competent care to patients/clients. (mechanism)
- 72. Participate in management, marketing, consultation activities in the clinical setting. (mechanism)
- 73. Provide care to clients that have been screened via direct access and determined to need physical therapy care. (origination)
- 74. Participate in case management. (mechanism)
- 75. Establish a business plan as needed to address the needs of the clinical environment for the benefit of the clients served. (origination)
- 76. Perform critical inquiry in relation to the patient/client's condition and other diagnoses. (complex overt response)

Affective Domain

- 37. Exhibit respectful and compassionate behavior in all communications and interactions with others. (characterization)
- 77. Display altruism integrity and professional and ethical behavior while in the clinical setting. (characterization)
- 78. Uphold APTA's standards of practice and the APTA Code of Ethics. (responding)
- 79. Preserve patient/client modesty, privacy and confidentiality at all times. (A3, P2)
- 80. Comply with the policies, procedures, and health and safety regulations of the site. (responding)
- 81. Display compassion and empathy when providing care to patients/clients. (characterization)
- 82. Interact appropriately with other health care practitioners, patient/clients and families. (characterization)

CLINICAL EDUCATION POLICIES

DEFINITIONS

Clinical Education Experience – Experiences that allow students to apply and attain professional knowledge, skills, and behaviors within a variety of environments. Experiences include those of short and long duration (e.g., part-time, full-time), provide a variety of learning opportunities, and include physical therapy services for patients/clients across the lifespan and practice settings. While the emphasis is on the development of patient/client physical therapy skills, experiences may also include inter-professional experiences and non-patient/client service delivery such as research, teaching, supervision, and administration. Clinical education experiences are a part of the professional curriculum and include formal student assessment.

American Council of Academic Physical Therapy, Common Terminology in Physical Therapy Clinical Education, Physical Therapist Clinical Education Glossary – approved 2020

Director of Clinical Education (DCE) – Academic faculty member who is responsible for planning, directing and evaluating the clinical education program for the academic institution, including facilitating clinical site and clinical faculty development.

American Council of Academic Physical Therapy, Common Terminology in Physical Therapy Clinical Education, Physical Therapist Clinical Education Glossary – approved 2020

Site Coordinator of Clinical Education (SCCE) – A professional who administers, manages, and coordinates clinical assignments and learning activities for students during their clinical education experience. In addition, this person determines the readiness of persons to serve as preceptors and clinical instructors for students, supervises preceptors and clinical instructors in the delivery of clinical education experiences, communicates with the academic program regarding student performance, and provides essential information to academic programs.

American Council of Academic Physical Therapy, Common Terminology in Physical Therapy Clinical Education, Physical Therapist Clinical Education Glossary – approved 2020

Clinical Instructor (CI) – The physical therapist responsible for the physical therapist student and for directly instructing, guiding, supervising and formally assessing the student during the clinical education experience. When engaged in full-time clinical education designated to meet the minimum number of weeks required by CAPTE, the clinical instructor must be a licensed physical therapist with a minimum of one year of full time (or equivalent) post-licensure clinical experience.

American Council of Academic Physical Therapy, Common Terminology in Physical Therapy Clinical Education, Physical Therapist Clinical Education Glossary – approved 2020

Clinical Education Site – A health service delivery agency or other setting in which clinical education experiences are provided for physical therapist students. The clinical education site may be, but is not limited to, a hospital, agency, clinic, office, school or home and is affiliated with the educational program(s) through a contractual agreement.

American Council of Academic Physical Therapy, Common Terminology in Physical Therapy Clinical Education, Physical Therapist Clinical Education Glossary – approved 2020

Physical Therapist Clinical Performance Instrument - Web (CPI) - American Physical Therapy Association developed student evaluation instrument that is used to assess the clinical education performance of physical therapist students. The Physical Therapist CPI consists of 18

performance criteria.

STUDENT RESPONSIBILITIES

Before Clinical Education Experiences – Students are required to:

1. Obtain professional liability insurance prior to the first Clinical Education experience and to carry it through the remainder of the program. The policy that students are required to have is on an occurrence basis and is for a minimum of \$1,000,000 per incident and \$3,000,000 per year. Details are available through the DCE office. Certain clinical sites require additional liability insurance specific to the student.
2. Comply with drug screening in year one and as required by clinical sites.
3. Provide written results of Measles, Mumps, and Rubella (MMR) immunity titer or vaccine, Hepatitis-B vaccine, varicella immunizations or titer, Polio vaccination, Tdap current, yearly TB test, and annual flu shot for Clinical Internship III, IV, V, and if Clinical Internship I and II require it. Some clinical sites require a two-step TB test.
4. Provide proof of annual physical exam.
5. Complete a Student Information Form for each clinical education experience.
6. Obtain and maintain health insurance coverage throughout each clinical education experience.
7. Provide proof of current Basic Life Support certification from the American Heart Association at the Health Care Provider level prior to the first clinical and maintain throughout the program.
8. Make arrangements for room, board, and transportation for out-of-town clinical education experiences. Some facilities provide/assist with housing at a cost to the student.
9. Complete a criminal background check.
10. Provide results of the criminal background check to the clinical site, if requested.
11. Consent to a drug screen and provide results of the drug screen to the clinical site, if requested.
12. Maintain all immunization records and certifications in the EXXAT system.

During Clinical Education Experiences

1. Follow the policies and procedures of the clinical education site. This includes working hours, clinic procedures, dress code, confidentiality policies, and observance of holidays.
2. Present an in-service to the site staff during Clinical Internship II, III, or IV.
3. Actively cooperate with the clinical instructor in planning the clinical education

experience.

4. Complete a self-evaluation of the experience using the PT CPI Web.
5. At mid-term and near the end of the clinical education experience, complete the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction* form and share it with the CI(s).

After the Clinical Education Experience

Complete the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction* form, and any other written assignments within specified time period.

RESPONSIBILITIES OF THE DCE

1. Establish and maintain contractual agreements between T.S.U. and clinical education facilities.
2. Notify the SCCE in writing of clinical education dates during the calendar year prior to their occurrence.
3. Send student and clinical experience information to SCCE/CI at least two months, or as soon as possible, before the student's clinical education experience begins.
4. The DCE will monitor student progress through the PT CPI Web or by phone or in person while the student is participating in clinical education. If problems arise during the student's clinical education experience, the DCE will make reasonable effort to visit the student and the SCCE/CI. However, if a visit is not possible the problem will be resolved by telephone or other electronic means.
5. Consult with SCCE/CI regarding any student problems.
6. Assist clinical education facilities in developing quality education/programs/experiences for students.

RESPONSIBILITIES OF THE SCCE AND CI

1. Notify the DCE of probable availability or commitment to clinical education dates and of changes in terms of affiliation (such as immunizations required, etc.)
2. Establish and/or update affiliation agreements, amendments to the agreement, and other forms as needed.
3. Contact DCE immediately if problems occur with a student during a clinical education experience.
4. Complete and update the Clinical Site Information Form (CSIF) via the CSIF Web. Instructions for doing this can be provided by the DCE.
5. Provide for the affiliating student:
 - a. orientation to site
 - b. appropriate level of clinical experiences

- c. instruction and supervision
 - d. frequent feedback regarding performance
 - e. timely evaluations using the PT CPI Web
 - f. written objectives for the clinical education experience
6. Evaluate the DCE's performance when requested (DCE will provide form).

ATTENDANCE

1. Students are expected to be present and prompt for **all** clinical days.
2. Prompt is defined as *present and prepared* for the first patient/meeting *at least 10 minutes prior to defined time*. CI should inform DCE if tardiness is habitual. Excessive tardiness could result in unsuccessful completion of the clinical experience.
3. Any absence during any clinical education experience **must be reported** by the student to the CI and DCE as soon as possible. Students are expected to communicate via phone vs. email/text with all those impacted by the absence. **Expectations are that missed days should be made up**. Exceptions can be made on a case-by-case basis with the DCE and CI.
 - Some students may have the opportunity to present at Professional Conferences. If this is the case, the DCE and the student will communicate this to the CI prior to the beginning of the experience. If make-up clinical days are required, they can be worked out.
 - If a student experiences another event causing them to be absent (examples include but are not limited to contagious illness, accident/injury, death of family member), make-up clinical days will be discussed on a case-by-case basis between CI, DCE, and student.
 - TSU allows 1 day to be used for residency/fellowship interview. Any other interviews/days have to be made up and should be coordinated with CI, student, and DCE.
 - Some students will receive approval to take the NPTE in April. If your student is one of these, you will be notified. TSU allows the student to be absent the actual day of the NPTE. If the student is not meeting clinical expectations, make-up day will be coordinated.
4. TSU is officially closed on Thanksgiving Day AND the Friday after. However, if the CI feels it necessary, one or both of these days may be used as clinical education days. Coordination of Thanksgiving week should be discussed as early as possible during the 2nd Clinical Experience.

CONDUCT

1. Students are expected to exhibit professional behavior at all times.
2. Students are expected to abide by the APTA Code of Ethics, Standards for Professional Conduct, and the Tennessee Practice Act for Physical Therapists.
3. Students are expected to treat patients, staff, and other health care practitioners with respect.
4. Students are expected to maintain patient confidentiality.

GRADING OF CLINICAL EDUCATION

1. In order to receive a passing grade for each Clinical Education Experience, the student must by the end of the clinical experience, have, at a minimum, all the performance indicators in the Clinical Internship Evaluation Tool (CIET) rated by the CI(s) at the levels described in the syllabus. A guide for using the CIET is located in Appendix C.

In areas where the student's final performance indicator ratings are not at the minimally required level, the DCE will determine the student's final grade by consulting with the CI(s) and/or referring to the CI(s)' written/verbal comments or recommendations. If the student has any Significant Concerns boxes checked at the end of the clinical education experience, the student may be given a grade of Incomplete (I) or Unsatisfactory (U) as determined by the DCE in consultation with the CI(s). A grade of Incomplete (I) will warrant an extension of the clinical education experience and the creation of a critical incident report by the CI(s). The critical incident report will contain specific goals, targeted dates for reaching the goals, and the length of time by which the clinical experience will be extended in order for the student to receive a passing grade of Pass (P). If the student does not attain a passing grade by the end of the extended clinical experience, the student will receive a failing grade of (F) for the course. Students receiving a failing grade for the course will not be allowed to progress in the program.

LIABILITY INSURANCE

Students are required to obtain professional liability insurance prior to the first Clinical Education experience and to carry it through the remainder of the program. The policy that students are required to have is on an occurrence basis and is for a minimum of \$1,000,000 per incident and \$3,000,000 per year. Details are available through the DCE office.

DRESS CODE

Students are expected to maintain a professional appearance at all times. Dress codes vary considerably from one clinical education site to another. The clinical site and the SCCE will determine appropriate student attire.

Students have received written information regarding dress codes as follows:

If the clinical site does not have a dress code, the basic requirements of appropriate dress include appearance, safety, and allowance for movement. The attire accepted by the Department of Physical Therapy for clinical education is:

1. Dress slacks or skirt conservative in color and style, and not tight-fitting.
2. White lab jacket of fingertip length (no below-knee lab coats.) Sleeves must be loose enough to adjust to elbow length.
3. Dress blouse or shirt that is conservative and non-revealing, and not tight-fitting
4. Name tag worn at all times.
5. Watch with capability to count seconds (sweep hand or digital.) No dangling watch guard permitted.

6. Jeans or denim pants in any color and sweatpants are not acceptable
7. Shoes must be polished and clean. Shoes must have low heels, non-skid soles, and closed toe and heel. Sandals, clogs, and open weave shoes are not acceptable. Athletic/tennis shoes are permitted only in the specific facilities which allow them. Socks or hose must be worn at all times
8. Underwear must not be visible through clothing.
9. Neckties for men are optional but may be required by the clinical site.
10. Hair must be clean and neat. Long hair must be tied back so that it does not interfere with patient care. Mustaches and beards must be neatly trimmed.
11. Jewelry must be conservative and must not interfere with patient care. Professional Association insignia, school pin, and ACLS/BCLS/Red Cross pins are acceptable. Religious emblems, political symbols, union emblems, or other insignia are not acceptable.
12. Fingernails must be clean and trimmed to conservative length.
13. Tattoos and body and/or facial piercing other than earrings should not be visible.

ASSIGNMENTS OF STUDENTS

The DCE is responsible for assigning students to a site for each clinical education experience. Clinical sites set their own requirements for the number of students they will accept and have the responsibility to inform the DCE of this prior to actual assignment of the student.

Students are not ordinarily assigned to facilities in which they have worked or volunteered or with which they have contractual arrangements for financing or employment.

The four clinical education experiences are required. At least one must be completed in an in-patient and at least one in an out-patient orthopedic setting. Students are encouraged to diversify their four clinical education settings.

POLICY ON SAFETY ISSUES IN CLINICAL EDUCATION

Patient safety is a critical to a successful clinical education experience. Whenever, safety has is an issue during the clinical visit or phone call, the DCE or faculty member has an opportunity to give input to the student and/or CI on ways to address the issue. The CI is instructed to follow the following procedure:

1. Bring the issue to the student's attention and document the incident including the date, approximate time of day and nature of the incident.
2. If there is a reoccurrence of the incident, the CI will bring the issue to the student's attention and document the incident including the date, approximate time of day and nature of the incident. The CI will create a plan of action to correct the problem, documenting objective/desired behaviors including targeted deadline dates/times for correcting the

problem. The CI and the student will sign and date the document. The CI will report the problem to the DCE and email/fax the document to the DCE.

3. The DCE will monitor the student's progress on correcting the safety issues by phone, email, or in person.

4. If the safety issues are not resolved within a reasonable period of time or by the end of the student's clinical education experience, the student's time in the clinical setting may be extended with the permission of the SCCE/CI or the student will be placed in another clinical site. If the safety issues are not resolved by the end of the extended clinical education experience, the DCE and academic faculty will discuss the issue and decide if additional remediation is necessary or the student should be dismissed from the program.

POLICY ON PATIENT AND STUDENT INJURY DURING CLINICAL EDUCATION

Liability Coverage and Clinical Activity

1. All students are required to be covered by professional student liability insurance. The University facilitates PT students' purchase of insurance but is not legally responsible for conduct occurring during student clinical activities.
2. All students must pay for liability insurance coverage prior to the start of their clinical education experience. A copy of the entire policy will be made available electronically within Exxat.
3. Students must be approved by the faculty before being allowed to participate in each clinical education experience.
4. The clinical site must confirm that students shall be supervised by a licensed physical therapist with a minimum of one (1) year of full-time experience in a practice setting.

Removal from Clinical Activity

5. Any student who poses an immediate threat or danger to the patients, staff, or others at the site, including the student him- or herself, shall be dismissed from participation in the clinical experience. The Site Coordinator of Clinical Education (SCCE) and/or Clinical Instructor (CI) must notify the Director of Clinical Education (DCE) whenever a determination is made that a student poses an immediate threat or danger to the patients, staff, or others at the clinical site, including the student himself or herself.
6. A student may be removed from a clinical site, held legally liable, or removed from the program if he/she does not follow the policies and procedures of the site, fails to follow a CI's instruction, causes harm or injury to a patient, fellow student, university employee or an employee or invitee of the site, or negligently, maliciously, or deliberately harms a patient. If a claim is made against the student, the student must notify the student's malpractice insurance carrier and the DCE in writing. Failure to notify the DCE of a claim shall constitute grounds for dismissal from the program.
7. Under state law, Tennessee State University cannot be held legally liable for any form of student conduct or any act or omission on the part of a student during a clinical rotation or any clinical activity.

Patient Injury and Reporting Requirements

8. Any student who intentionally or deliberately causes harm to anyone associated with a clinical site, including a patient, staff member, visitor, patient family member, may be immediately dismissed from participation in the clinical experience. In such incidences, written information will be requested from the site to enable the Physical Therapy academic faculty to determine whether the student should be also dismissed from the academic program. In the event of a dismissal from the program, the student will be entitled to the due process procedures applicable to dismissal from an academic program.
9. Any student who negligently causes harm to anyone associated with a clinical site, including a patient, staff member, visitor, patient family member, may be immediately dismissed from participation in the clinical experience. In such incidences, written information will be requested from the site to enable the Physical Therapy academic faculty to determine whether the student should be also dismissed from the academic program. In the event of a dismissal from the program, the student will be entitled to the due process procedures applicable to dismissal from an academic program.
10. If a patient is injured by a student, the student must take appropriate, reasonable, and available steps to ensure the patient's immediate safety, report the injury to the supervising clinical instructor, and ensure that an incident report is filed according to the site's policies. Thereafter, the policies of the site applicable to patient injury will apply.
11. If a patient injury is the result of a student mishap or error, the DCE must be notified. The clinical site may remove the student from the clinical site, if necessary, until an investigation of the matter can be completed. In such an event, the student may be allowed to complete the clinical education experience another site, but only after appropriate administrative or disciplinary policies and procedures of the academic program have been followed.
12. The site retains complete responsibility for patient care, providing adequate supervision of students at all times.
13. Tennessee State University shall not be responsible for personal injury or property damage or loss resulting from the conduct of any student or site employee. No claim may be sustained, or damages paid related to the conduct of a student or any other non- state-employee.
14. Students are expected to report to the clinical setting on time (as defined by course faculty). Students must provide appropriate notification of lateness or absence to the clinical instructor, preceptor, and/or clinical site. If a student is late, the clinical instructor or preceptor has the right to tell the student that he or she cannot participate in clinical activities for that day. Lateness may be converted to absences.
15. Clinical site assignments for students are made at the discretion of the course faculty member.

Student Injury or Accidents during Clinical Experience

16. Students are responsible for their own transportation to and from clinical sites. Neither the site nor TSU is responsible for student injuries while traveling to or from a site.
17. If a student is injured during a clinical experience, he/she should report immediately to the faculty and charge nurse on the unit. Students may be required to go to the facility's employee health or clinic or site or the Emergency Department depending on the severity of the injury and the policies of the agency.
18. Fees for these visits may not be covered by the agency and students are therefore required to maintain their own health insurance.
19. Standard Precautions – Students are required to implement Standard Precautions in all clinical settings where they may encounter blood and other body fluids. Standard Precautions should be used when in contact with human tissues, cerebrospinal, synovial,

pleural, peritoneal, pericardial, and amniotic fluids. Students who are exposed to body fluids while in the clinical/practicum setting should notify the preceptor, responsible faculty, and the appropriate supervisory person in the agency. The student should follow-up with procedures available for employees of the clinical site. This includes the right to request patient testing, individual counseling, and obtaining follow-up information for health care.

Adopted: August 12, 2010 Effective: Spring semester 2023

CLINICAL EDUCATION SKILLS LIST

CLINICAL INTERNSHIP I

Professional, Ethical, Legal Behavior
Communication (verbal, non-verbal, written)

Evaluation of:

- Posture
- Gait
- Sensory
- ROM
- MMT
- Neuromuscular Status
- Physiological Status
- Functional Activities
- Equipment needs

Treatment (geriatric, pediatric, and adult patients)

- Therapeutic Exercise
- Exercise with Equipment
- Exercise without Equipment
- Documentation
- Plan and modify treatment programs
- Wound care
- Physical Agents
- Soft Tissue Mobilization
- Aquatic Therapy
- Manage patients in critical care
- Spinal and joint mobilization
- Facilitation and inhibition
- Discharge Planning
- Manage patients with respiratory dysfunction
- Manage patients with cardiovascular dysfunction

CLINICAL INTERNSHIP II

Professional, Ethical, Legal Behavior
Communication (verbal, non-verbal, written)

Evaluation of:

- Posture
- Gait

Sensory
 ROM
 MMT
 Neuromuscular Status
 Physiological Status
 Functional Activities
 Equipment needs
 Orthotic devices
 Home environment
 Work environment
 Treatment (geriatric, pediatric, and adult patients)
 Therapeutic Exercise
 Exercise with Equipment
 Exercise without Equipment
 Documentation using site's forms
 Plan and modify treatment programs
 Care for wounds
 Physical Agents
 Soft Tissue Mobilization
 Aquatic Therapy
 Manage patients in critical care
 Spinal and joint mobilization
 Facilitation and inhibition
 Discharge Planning
 Manage patients with respiratory dysfunction
 Manage patients with cardiovascular dysfunction
 Manage patients with prosthesis
 Participate in the management of a physical therapy service
 Appropriately utilize a PTA
 Participate in clinical research
 Consult in the promotion of health and wellness

CLINICAL INTERNSHIP III AND IV

Professional, Ethical, Legal Behavior
 Communication (verbal, non-verbal, written)
 Evaluation of:
 Posture
 Gait
 Sensory
 ROM
 MMT
 Neuromuscular Status
 Physiological Status
 Functional Activities
 Equipment needs
 Orthotic devices
 Home environment
 Work environment
 Treatment (geriatric, pediatric, and adult patients)
 Therapeutic Exercise
 Exercise with Equipment

Exercise without Equipment
 Documentation using site's forms
 Plan and modify treatment programs
 Care for wounds
 Physical Agents
 Soft Tissue Mobilization
 Aquatic Therapy
 Manage patients in critical care
 Spinal and joint mobilization
 Facilitation and inhibition
 Discharge Planning
 Manage patients with respiratory dysfunction
 Manage patients with cardiovascular dysfunction
 Manage patients with prosthesis
 Participate in the management of a physical therapy service
 Appropriately utilize a PTA
 Participate in clinical research
 Consult in the promotion of health and wellness

CRITERIA BY WHICH CLINICAL EDUCATION SITES AND EXPERIENCES ARE CHOSEN TO MEET PROGRAM NEEDS

CLINICAL SITE CRITERIA

1. The provider of physical therapy includes students in planning learning experiences according to mutually agreed-on objectives
2. The provider of physical therapy has continuous communication with the academic program about clinical education objectives
3. The members of the physical therapy staff who are involved with clinical education are familiar with the academic program and provider of physical therapy objectives for clinical education.
4. There are organized procedures for the orientation of students. The student orientation includes a site tour and information related to housing, transportation, parking, dress code, documentation and scheduling procedures, and other important policies and procedures.
5. The clinical instructor(s) participate in providing student feedback on a regular basis e.g., daily, weekly, periodically, orally, written) as necessary.
6. The clinical instructor(s) participate in both constructive (interim) and cumulative (final) evaluations as appropriate.
7. The clinical education site has evidence of valid licensure, registration, or certification for all physical therapy assistants, where appropriate.
8. The clinical education site will ensure that each student is provided equal opportunity by:
 - A. Accepting students irrespective of race, creed, color, gender, age, religion, national or ethnic origin, sexual orientation, disability, or

- health status
- B. Providing equal opportunity, learning experiences, and benefits
 1. Evaluating students' performance without regard to race, creed, color, gender, age, religion, national or ethnic origin, sexual orientation, or disability or health status
 2. Demonstrating sensitivity to issues of cultural diversity in clinical education
9. The clinical site will make reasonable accommodations for personnel and students according to ADA guidelines.
 10. The clinical education site shows a willingness to enter into a written agreement with the academic program and has a mechanism for completion of the clinical education agreement.
 11. The clinical education site can provide quality learning experiences for students needing a full-time (a minimal of 40 hours a week) and extended experiences as needed.
 12. The clinical education site provides a variety of increasingly complex learning experiences patient/client care learning experiences for students including observations, screenings, examinations, evaluations, diagnosis, prognosis, interventions, outcomes, and discharge planning.
 13. The physical environment of the clinical education site includes appropriate space for patient/client care services, administration activities, education activities, consultative functions, documentation services, and personal belongings.
 14. The clinical education site has a job description for all personnel in the physical therapy department including the clinical education responsibilities of the SCCE and the CI.
 15. The clinical education site has made arrangements to provide student supervision in the absence of the clinical instructor.
 16. Supervision of PT students is provided by a licensed physical therapist.
 17. The clinical instructors have at least one year of clinical experience and meet the recommended criteria as outlined by the *Guidelines for Clinical Instructors*.
 18. If the clinical education site is multidisciplinary, learning experiences from other disciplines are available to the student.
 19. Physical therapy personnel performance evaluations are completed on a regular basis; provide appropriate feedback to the individual being evaluated; and cover all aspects of the job, including teaching and scholarly activities.
 20. Changes in the clinical education program are communicated to the academic program.

CLINICAL INSTRUCTOR CRITERIA

1. The clinical instructor has a minimum of one year of clinical experience, a minimum of 3 months of experience in the area of practice in which they are providing clinical instruction, and a current license in the state in where clinical instruction is occurring. The program has also identified the following as highly desirable of CIs: (a) APTA Credentialed or Advance Credentialed Clinical Instructor; and (b) ABPTS clinical specialization.
2. The clinical instructor demonstrates a desire to work with students by pursuing learning experiences to develop knowledge and skills in clinical teaching.
3. The clinical instructor adheres to legal practice standards by:
 - A. Holding current license/registration/certification as required by the physical therapy practice act in the state in which he/she practices
 - B. Providing physical therapy services that are consistent with the state practice act and interpretive rules and regulations in the state in which he/she practices
 - C. Providing physical therapy services that are consistent with state and federal legislation
 - D. Ensuring the patients'/clients' informed consent to have a student involved in providing physical therapy services.
4. The clinical instructor uses verbal, nonverbal, and written communication skills, and informational technology as appropriate to clearly express him/herself to the student to:
 - A. Define performance expectations for students
 - B. Collaborate to develop mutually agreed-on goals and objectives for the clinical education experience
 - C. Provide feedback
 - D. Demonstrate skill in active listening.
5. The clinical instructor facilitates communication by:
 - A. Encouraging dialogue with students
 - B. Providing time and a place for ongoing dialogue to occur
 - C. Initiating communication that may be difficult or confrontational around an issue of concern
 - D. Remaining open to and encouraging feedback from students, clinical educators, and other colleagues.
6. The clinical instructor implements, facilitates, and evaluates learning experiences for students based on a plan created in collaboration with students.
7. The clinical instructor reviews the students' academic curriculum, level of

didactic preparation, current level of performance, and the goals of the clinical education experience.

8. The clinical instructor monitors and modifies the learning experiences in a timely manner, based on the quality of the students' performance.
9. The clinical instructor performs constructive (interim) and cumulative (final) evaluations of the students' performance by:
 - A. Providing appropriate feedback to the students based on direct observation and discussions with students; review of student's documentation; observations made by others; and student's self-assessments.
 - B. Participating with the student in ongoing constructive evaluations
 - C. Providing cumulative evaluations at least at midterm and at completion of the clinical education experience.
10. The clinical instructor demonstrates awareness of the relationship between the academic program and clinical education site as it relates to student performance evaluations, grading, remedial activities, and due process in the case of student failure.
11. The clinical instructor demonstrates a constructive approach to student performance evaluations that is educational, objective, reflective, and directed at engaging students in self-assessment.

SITE COORDINATORS OF CLINICAL EDUCATION CRITERIA

1. The SCCE is experienced in clinical education, interested in students; skilled in interpersonal relationships, communication, and organization; knowledgeable about the clinical education site and its resources; and able to serve as a consultant in the evaluation process.
2. If the SCCE is a non-physical therapist, there is an experienced physical therapist clinician available for direct clinical supervision of physical therapy students.
3. The SCCE interacts effectively and fosters collegial relationships, both internal and external to the clinical education site by:
 - A. Performing administrative functions between academic programs and the clinical education site including completing:
 1. CSIF Web
 2. clinical education agreements
 3. student placement forms
 4. policy and procedure manual;
 - B. Serving as a representative of the clinical education site to the academic program;
 - C. Demonstrating knowledge of the academic program's curricula and disseminating the information to the clinical education site personnel;

- D. Communicating with the DCE regarding clinical education planning, evaluation, and CI development;
 - E. Remaining open to and encouraging feedback from students, CIs, DCEs and other colleagues;
 - F. Demonstrating respect for and sensitivity to individual and cultural differences.
4. The SCCE supervises the CI/student team during the experience to ensure quality in educational planning, learning experiences, and performance evaluations.
 5. The SCCE provides consistent monitoring of and feedback to the CI regarding clinical education activities.
 6. The SCCE serves as a useful resource to the CI, student, and DCE.
 7. The SCCE enhances the clinical learning experience by assisting in planning and problem solving with the CI/student team.
 8. When a student requires remedial activities the SCCE participates in the development of a plan to specifically document student progress.
 9. The SCCE manages the clinical education program and routinely reviews and revises the program as necessary.
 10. The SCCE is an advocate for clinical education with the clinical education site administration and physical therapy staff.
 11. The SCCE serves as the clinical education site's formal representative and liaison with the academic program and is responsible for:
 - A. Scheduling of students;
 - B. Orienting incoming students;
 - C. Maintaining records of student performance;
 - D. Maintaining records of CI qualifications;
 - E. Maintaining records of clinical education site resources.

taken from APTA's *Guidelines and Self-Assessments for Clinical Education, 2004 Revision*.

The SCCE has the right to set their own requirements from students pertaining to GPA; interviews; vaccination status; clinical education level; status in the program; coursework completion, etc.

RIGHTS AND PRIVILEGES OF THE CLINICAL EDUCATION FACULTY

The Clinical Instructor is an extension of the Physical Therapy faculty. As such, the Physical Therapy faculty has given the Clinical Instructor the authority and responsibility to educate and supervise the student. The Clinical Instructor will recommend a final grade at the end of the clinical education experience. However, the final determination of the grade resides with the DCE.

The Clinical Instructor has the right to set their own requirements from students pertaining to GPA; interviews; vaccination status; clinical education level; status in the program; coursework completion, etc.

Monetary compensation shall neither be expected nor received by the SCCE, CI, or the clinical site. However, the following privileges are available to the clinical instructor:

1. **Onsite-In-services:** The TSU Physical Therapy academic faculty are available to offer an on-site in-service (on a mutually agreed upon topic) to you during the time that a TSU student is at the site. The in-service can be arranged at the same time as the site-visit for the student by contacting the DCE. The TSU student at the site is also able to provide an in-service for the clinical site.
2. **Credentialed Clinical Instructor Program (CCIP):** TSU will offer APTA's 2-day, CCIP at least once a year.
3. **APTA Advanced Credentialed Clinical Instructor Program:** TSU will offer APTA's 2-Day Advanced CCIP Course at least once a year.
4. **Continuing Education Units:** Clinical faculty are welcome to attend department sponsored continuing education courses. The courses will be offered free or at a discounted rate whenever possible. Clinical faculty who supervise a student will also receive a certificate documenting the number of hours that can be applied toward continuing competency necessary for licensure renewal in the state of Tennessee.
5. **Faculty Clinical/Research Consultation:** The academic faculty are available to consult on clinical questions based on their expertise. The academic faculty can also assist in designing a study for the clinical site. The clinical faculty can collect data and the academic faculty will arrange for data analysis, methodology, and writing/publishing of the results.

APPENDX A
PROFESSIONAL CURRICULUM

YEAR I

Summer Session - 9 credits

- PHTH 5360 Gross Anatomy (6)
- PHTH 5380 Introduction to Physical Therapy (1)
- PHTH 5330 Psychosocial Behavioral Issues (2)

Fall Semester - 15 credits

- PHTH 5421 Tests and Measurements (2)
- PHTH 5470 Applied Physiology (3)
- PHTH 5480 Biomechanics and Movement Science (5)
- PHTH 5440 Human Development Across the Life Span (2)
- PHTH 5450 Patient Care Principles (2)
- PHTH 5590 Research I (1)

Spring Semester - 15 credits

- PHTH 5490 Pathology (3)
- PHTH 5545 Clinical Pharmacology for Physical Therapists I (2)
- PHTH 5550 Therapeutic Exercise (3)
- PHTH 5570 Neuroscience/Neuropathology (3)
- PHTH 5580 Biophysical Agents for Patient Management (4)

YEAR II

Summer Semester - 9 credits

- PHTH 6345 Integumentary Therapeutics (2)
- PHTH 6330 Clinical Medicine for Physical Therapists (3)
- PHTH 6335 Diagnostic Imaging in PT Practice (2)
- PHTH 6365 Introduction to Clinical Internships (1)
- PHTH 6390 Research II (1)

Fall Semester - 15 credits

- PHTH 6420 Principles of Education (2)
- PHTH 6440 Cardiopulmonary (3)
- PHTH 6460 Orthopedics I (4)
- PHTH 6470 Neurological PT I (4)
- PHTH 6490 Research III (2)

Spring Semester - 15 credits

- PHTH 6550 Cardiopulmonary II (1)
- PHTH 6540 Prosthetics and Orthotics (3)
- PHTH 6560 Orthopedics II (4)
- PHTH 6510 Neurological PT II (2)
- PHTH 6580 Pediatrics (3)
- PHTH 6590 Research IV (2)

YEAR III

Summer Semester - 9 credits

PHTH 7320 Administration & Management (2)

PHTH 7355 Clinical Internship I (4)

PHTH 7360 Advanced Clinical Topics I (2)

PHTH 7370 Ethical Behavior and Moral Reasoning (1)

Fall Semester - 14 credits

PHTH 7410 Clinical Integration Seminar (2)

PHTH 7420 Seminar in Geriatrics (1)

PHTH 7430 Special Topics in Physical Therapy (1)

PHTH 7455 Clinical Internship II (6)

PHTH 7460 Advanced Clinical Topics II (2)

PHTH 7480 Health and Wellness (1)

PHTH 7490 Research V (1)

Spring Semester - 13 credits

PHTH 7555 Clinical Internship III (5)

PHTH 7565 Clinical Internship IV (5)

PHTH 7570 DPT Clinical Case Conference (2)

PHTH 7580 DPT Professional Issues (1)

COURSE DESCRIPTIONS

PHTH 5360 GROSS ANATOMY (6). The purpose of this course is to provide the students with an understanding of gross structures of the human body with emphasis on musculoskeletal and neurovascular structures. Each topic of the course will be discussed from three aspects of conceptual overview, regional anatomy and surface anatomy. Content sequence of the course is anatomy of the back, thorax, upper limb, pelvis, lower limb, head and neck. Prerequisites: Student must be officially admitted into the Physical Therapy program and/or have prior consent of the instructor

PHTH 5380 INTRO TO PHYSICAL THERAPY (1). This course is designed to introduce the student to the profession of Physical Therapy including the Tennessee State Practice Act, characteristics of professions, history of the physical therapy profession, standards for professional conduct, the APTA's Code of Ethics, and the Guide for Professional Conduct. Students will also be introduced to HIPAA, the Generic Abilities, and the concept of active learning and problem solving. Prerequisites: Student must be officially admitted into the Physical Therapy program and/or have prior consent of the instructor

PHTH 5330 PSYCHOSOCIAL BEHAVIORAL ISSUES (2). An introductory and basic course in a series of two psychosocial classes addresses a variety of psychological and social issues. The introduction of and continuing development of cultural awareness/sensitivity as a part of developing cultural competence will be threaded throughout the course. There will be a review of psychological disorders that impact the practice of physical therapy. Students will learn the art of problem solving and critical thinking. Students are required to participate in service-learning activities to enhance their ability to become culturally sensitive as they prepare to work in a multicultural and ever-changing world. Prerequisites: Student must be officially admitted into the Physical Therapy program and/or have prior consent of the instructor

PHTH 5470 APPLIED PHYSIOLOGY (3). This course will provide the students with an in-depth understanding of the human physiological systems at the system, cellular, and molecular levels. A large emphasis is placed on the acute and chronic responses of the physiological systems to change the environment, stress, disease, and aging as well as on the biochemistry of various control systems.

Prerequisites: Students must have passed all the 1st semester courses and/or have prior consent of the instructor

PHTH 5480 BIOMECHANICS AND MOVEMENT SCIENCE (5). This course starts with the basic concepts of biomechanics of the human body. Students will be exposed to lecture and hands on practical experience in the class. Focus of this course will then be on individual regions of the body including the spine (cervical, thoracic, lumbar and sacroiliac joints), the temporomandibular joint, and the extremity joints (shoulder, elbow, wrist, hand, hip knee, ankle and foot). Students will learn the components of gait as well as learn to analyze complex combined movements incorporating the whole body including trunk, upper extremities and lower extremities activities such as running, and throwing. Prerequisites: Students must have passed all the first semester courses and/or have prior consent of the instructor

PHTH 5490 PATHOLOGY (3). The fundamental issues in health and disease, including some of the basic terminology and concepts used in pathology will be introduced. The focus will be on relating normal physiology of specific organ systems to signs and symptoms “clinical red flags” that indicate disease. The implications pathological conditions pose for the Physical Therapist and conditions frequently found during therapy sessions that need to be referred for further medical evaluation will be discussed. Prerequisites: Students must have passed all the 1st semester courses and/or have prior consent of the instructor

PHTH 5440 HUMAN DEVELOPMENT ACROSS THE LIFESPAN (2). The study of human growth and development throughout the life span focuses on normal development especially as it relates to functional movement. The course starts with a review of genetics and developmental theories. The life span, starting with prenatal development and ending with aging is addressed in relationship to the psychological-sociocultural domains. The relationship between motor development, motor learning, and motor control is addressed. The development of the body systems are reviewed so that the relationship can be established in relationship to function. The importance of wellness and prevention is discussed as students are left to recognize the importance of maintaining good health and preventing disease.

Prerequisites: Students must have passed all the 1st semester courses and/or have prior consent of the instructor

PHTH 5421 TESTS AND MEASUREMENT (2). This course will introduce the students to the concepts of palpation, limb length and girth measurement, manual muscle testing, and goniometry. The basic concepts of joint mobilization and observational posture and gait analysis will be covered. Prerequisites: Students must have passed all the 1st semester courses and/or have prior consent of the instructor

PHTH 5545 CLINICAL PHARMACOLOGY FOR PHYSICAL THERAPIST (2). This course introduces students the basic principles of pharmacology that includes discussion on pharmacokinetics such as absorption, distribution, metabolism, and excretion. Also included is the mechanism on what the drug does to the body such as receptor interactions. Drug classification, mechanism of action, indications, therapeutic effects, adverse effects, drug-drug interactions, and implications for physical therapy are

emphasized. Prerequisites: Students must have passed all the 1st semester courses and/or have prior consent of the instructor

PHTH 6355 CLINICAL MEDICINE FOR PHYSICAL THERAPISTS (3). This course introduces students to the principles and methods of clinical screening in physical therapy practice through differential diagnosis. The course provides the students the ability to screen various diseases and syndromes that are not of musculoskeletal origin. Also, the course addresses effective mechanisms of referring the clients who are outside the scope of physical therapy practice to the appropriate health care providers. Prerequisites: Students must have passed all the 1st semester courses and/or have prior consent of the instructor

PHTH 5550 THERAPEUTIC EXERCISES (3). This course is designed to introduce students to therapeutic techniques as a tool for restoring and improving the musculoskeletal status of a patient. It will provide a foundation of appropriate exercise principles, and techniques used for joints, muscles, and soft tissue conditions. There will be an emphasis on the identification of patient problems through skillful evaluation, and the establishment of a plan to meet these goals. The laboratory component is designed to go along with the didactic coursework. It will introduce students to the hands on experience of using therapeutic exercise as a tool for restoring and improving the musculoskeletal status of a patient. It will provide a foundation of appropriate exercise techniques used for joints, muscles, and soft tissue conditions. Prerequisites: Completion of the 2nd semester of the professional program and/or permission of the instructor

PHTH 5570 NEUROSCIENCE/NEUROPATHOLOGY (3). This course is designed to provide the students with a working knowledge of the development, structure, function, and pathology of the nervous system via lectures, lab, and group discussions. The structure of the central nervous system (CNS), peripheral nervous system (PNS), and autonomic nervous system (ANS) will be studied as each relates to clinical neurology. This course will involve an analysis of the function of different components of the nervous system and how such function is altered or modified by injury, pathology, and aging. The content of the course is reinforced in the neuroscience laboratory component. A section on neuropathology will also be presented. Prerequisites: Completion of 2nd semester of professional program and/or permission of the instructor

PHTH 5585 BIOPHYSICAL AGENTS FOR PATIENT MANAGEMENT (4). This course covers the use of biophysical and electrical modalities in the physical therapy management of patients with selected conditions. The course will cover the effects, theory, application, indications, contraindications, and precautions of biophysical physical therapy modalities. Laboratory sessions are included in the course to ensure competency in the administration of the physical therapy biophysical agents. Prerequisites: Completion of 2nd semester of professional program and/or permission of the instructor

PHTH 5590 RESEARCH I (1). This course is the first in a series of five that leads to a final research project that fulfills the required writing and presentation of that project to the faculty. This course provides a basic exploration of the fundamentals necessary for scientific inquiry. Topics include: literature review, formation of a research hypothesis, rules of measurement, research methodology, use of human subjects, reliability, validity, sampling methods, threats to internal validity, introduction to general statistical designs. The course also presents the students with the views that physical therapy is in need of scientific evidence-based research. First, the students will be introduced to research fundamentals including not only general research theory but also research in physical therapy, theory in physical therapy research and research ethics. Second, students will learn how to critically read and evaluate the literature. Third, this course will provide students with skills needed to conduct a literature search off- and online databases. Fourth, the students will learn how to develop an answerable research question and how to

evaluate research problems. Finally, the students will learn about plagiarism, how to properly cite references, and understand the importance of protecting one's intellectual property.

Prerequisites: Completion of 2nd semester of professional program and/or permission of the instructor

PHTH 6345 INTEGUMENTARY THERAPEUTICS (2). This course presents the theory and practice of treating injury and pathology of the various tissues of the human body with emphasis on the integumentary system. The anatomy, physiology, and mutability of human biological tissues that physical therapists influence in the rehabilitation and wound healing process will be reviewed. Students will gain a comprehensive understanding of the integumentary system and related tissues and how they can be influenced by pathology and therapeutic interventions. The tissues that make up the integument of the body will be explored in both a didactic and clinical laboratory setting and will include: skin, muscle, bone, cartilage, tendon, ligament, nerve, joint capsule, blood vessels, and the lymphatic system. Systemic effects as related to pathology of the integument will be covered. The biologic process of tissue and wound healing will be emphasized as clinical skills are introduced and practiced. The examination and evaluation of common wound pathologies will be studied in case studies and mock patient cases in the laboratory. The effects of physical principles and biophysical effects of related physical therapy modalities and electrotherapy agents will be covered. Indications, contraindications, and precautions for the use of physical therapy modalities will be stressed. In addition, wound care management in relation to wound assessment and plan of care as it relates to tissue repair, wound debridement and dressings, clean and sterile techniques, pressure garments, and infection control precautions will be addressed. Prerequisites: Completion of 2nd semester of professional program and/or permission of the instructor

PHTH 6335 DIAGNOSTIC IMAGING IN PT PRACTICE (2). The purpose of this course is to provide the doctoral level physical therapy student with an intensive study of radiology. By the end of the course, the student will understand the basic interpretative techniques in the many different areas of radiology. This course will emphasize the systematic approach for radiographic interpretation as well as the interpretation of various radiology reports. Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH INTRODUCTION TO CLINICAL INTERNSHIPS (1). This course prepares the student for their first exposure to clinical practice in a clinical facility. The course will include discussions on professional clinical behavior; what to expect in a clinical environment; and the use of an electronic medical record. The student will receive certification in Bloodborne Pathogens and BLS CPR for healthcare professionals. The student will be required to complete all necessary immunizations; criminal background checks; and any other requirements necessary for placement in a clinical facility. The student will be required to complete training to use APTA's Clinical Performance Instrument – Web. Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 6390 RESEARCH II (1). This course is the second in a series of five courses designed to help the student to understand how research applies to the profession of physical therapy. The objective of the

course is to help the student develop the skills needed to design and implement an Evidence-Based Practice research project. Students will ultimately develop a publishable research manuscript and present it to peers at a university, local, state/regional, or national meeting.

Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 6420 PRINCIPLES OF EDUCATION (2). This course is designed to present

educational principles as they apply to the practice of physical therapy in an academic as well as in a clinical setting. Theories of learning and learning styles are discussed. The role of the physical therapist as a teacher will be presented. Strategies to enhance patient and family education are presented. Students develop and evaluate educational presentations that are appropriate for patient care givers, health care professionals, industry or other community group. The necessity of becoming lifelong learners is emphasized.

Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6440 CARDIOPULMONARY (3). This is a combined lecture and laboratory course addressing physical therapy clinical practices applied to the management of individuals with cardiopulmonary system dysfunction. The course reviews the relevant anatomy and physiology of the cardiopulmonary system and presents the clinical pathophysiology of the cardiac and pulmonary systems to comprehensively address the physical therapy management of individuals with compromised cardiopulmonary health status.

Specific diagnostic tests and procedures used in cardiopulmonary care are covered as well as the medical, surgical, and rehabilitative management of patients with primary and secondary cardiopulmonary dysfunction. During the conduct of the laboratory course, students develop a systematic approach not only to the classification of pathology, impairments, functional limitations, and disability of individuals with cardiopulmonary problems, but also to the examination, evaluation, diagnosis, prognosis, and intervention of these individuals.

Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6460 ORTHOPEDICS I (4). This course will emphasize physical therapy examination and intervention strategies for the musculoskeletal system and peripheral nervous system of the upper quarter. Included under the examination techniques will be the upper quarter screening exam, peripheral nerve assessment, accessory motion testing, soft tissue assessment and musculoskeletal special tests. Included under treatment techniques will be joint mobilization and manipulation, soft tissue mobilization, application of therapeutic exercise to the different pathologies, and patient education procedures. The anatomical regions covered are the TMJ, the cervical spine, the thoracic spine and ribs, the shoulder, the elbow, and the wrist and the hand. The different musculoskeletal and peripheral nervous system pathologies found within the upper quarter will be studied. Laboratory procedures will be taught throughout the course.

Prerequisites: Successful completion of all prior required coursework and/or with instructor's permission

PHTH 6470 NEUROLOGICAL PT I (4). This course is the first of two courses that provides in-depth exploration of the assessment and intervention procedures used with people who have various neurological pathologies across the lifespan, primarily focusing on pathologies during adulthood. The course will examine the theoretical basis for evaluation and treatment of neurologic disorders. The students will apply knowledge of basic anatomy, neuroscience, physiology, and pathology of the human nervous system to the evaluation and treatment planning of the person with neurologic dysfunction. Case

based teaching and learning methods will be used to introduce various pathologies and will be used as a basis for discussion and problem solving relative to the evaluation, goal planning, and planning of treatment for the various neurologic pathologies. Textbook reading will be supplemented with research articles to discuss recent advances in diagnosis and treatment. Historical perspectives will be explored with emphasis on current theories of motor

learning/control and skill acquisition. Neurologic evaluation and treatment techniques will be taught and practiced, as well as specific assessment techniques for mobility, balance, and gait.

Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6490 RESEARCH III (2). This course is the third in a series of five courses designed to help the student to understand how research applies to the profession of physical therapy. The objective of these courses is to help the student develop the skills needed to design and implement an Evidence Based Practice research project. Students will ultimately develop a publishable research manuscript and present it to peers at a university, local, state/regional, or national meeting. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6510 NEUROLOGICAL PT II (2). The second of two courses that provides in-depth exploration of the examination and intervention procedures used with clients with various neurological pathologies. The course has a laboratory component that allows for the practice of skills required to perform an examination and intervention of the various neurological disorders covered. This course focuses on the neurological problems acquired primarily from adolescence to late in life.

Course Focus: This course is the second of two courses that provides in-depth exploration of the assessment and intervention procedures used with people who have various neurological pathologies across the lifespan. The course will examine the theoretical basis for examination and treatment of people with neurological disorders. The students will apply knowledge of basic anatomy, neuroscience, physiology, and pathology of the human nervous system to the examination and treatment planning of the person with neurological dysfunction. Lecture, Lab, Guests, Case Studies, Best Available Evidence and the International Classification of Function (ICF) Model will be used as teaching methods to introduce various pathologies and will be used as a basis for discussion and problem solving relative to the examination, diagnosis, goal planning, prognosis, intervention planning and implementation of interventions, and discharge planning for persons with the various neurological pathologies. Textbook reading will be supplemented with research articles to discuss recent advances in assessment and intervention with an emphasis on current theories of motor learning/control and skill acquisition. Neurologic examination and intervention techniques will be taught and practiced in a lab environment and on actual guests, as well as specific assessment techniques for impairments (body structure and functions), functional mobility, balance, and gait relating all findings to the participation in life. Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 6540 PROSTHETICS & ORTHOTICS (3). An introductory course that introduces students to various prosthetic and orthotic devices used by patients with various conditions, which necessitate their use. The course is divided into two broad areas, namely: Prosthetic Assessment and Management, and

Orthotics Management and Assessment. Both portions address the physical therapist's role in prosthetic and orthotic management, including prescription, maintenance, and training.

Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6550 CARDIOPULMONARY II (1). The second of two courses addressing physical therapy clinical practices applied to the management of individuals with cardiopulmonary system dysfunction. This laboratory course focuses on patient care interactions involving the examination, evaluation, diagnosis, prognosis, and intervention of individuals in the acute, sub-acute, and chronic phases of rehabilitation. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6560 ORTHOPEDICS II (4). This course will emphasize physical therapy examination and intervention strategies for the musculoskeletal system and peripheral nervous system of the

lower quarter. Included under the examination techniques will be the lower quarter screening exam, peripheral nerve assessment, accessory motion testing, soft tissue assessment and musculoskeletal special tests. Included under treatment techniques will be joint mobilization and manipulation, soft tissue mobilization, application of therapeutic exercise to the different pathologies, and patient education procedures. The anatomical regions covered are the lumbar spine, the hips and pelvis, the knee, the ankle and the foot. The different musculoskeletal and peripheral nervous system pathologies found within the lower quarter will be studied. Laboratory procedures will be taught throughout the course. Prerequisites: Successful completion of all prior required coursework and/or with instructor's permission

PHTH 6580 PEDIATRICS (3). This course provides in-depth exploration of the examination and intervention procedures used with clients from birth to age 18. The course focuses on the pediatric population and the neurological, orthopedic, cardiopulmonary, and integumentary problems that may be congenital or acquired and within the scope of physical therapy practice. The students will apply knowledge of basic anatomy, neuroscience, orthopedics, physiology, and pathology utilizing tests and measures created specifically for infants and children, as well as treatment interventions specific to this patient population. A systems approach will also be utilized to address differential diagnostics in this patient population. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 6590 RESEARCH IV (2). This course is the fourth in a series of five courses designed to help the student to understand how research applies to the profession of physical therapy. The objective of these courses is to help the student develop the skills needed to design and implement an Evidence Based Practice research project. Students will ultimately develop a publishable research manuscript and present it to peers at a university, local, state/regional, or national meeting. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7320 ADMINISTRATION/MANAGEMENT (2). This course covers management principles as they apply to the practice of physical therapy. Students will analyze the impact of organizational design, leadership styles, as well as legal, social, economic, and ethical issues. Emphasis will be placed on fiscal operation, personnel and risk management, strategic planning, quality assessment, and role of the physical therapists as a consultant. The structure and function of the health care system in the United States is

presented, emphasizing the impact of the different systems on physical therapy. Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 7350 CLINICAL INTERNSHIP I (4). This course provides a hands-on experience for the student in selected clinical environments. This course will allow the student an opportunity to practice the clinical skills learned during the professional component of the program. The student will be assigned by the DCE to a clinical facility for seven weeks. The student will be supervised by a licensed physical therapist. The student will be evaluated on their clinical performance using the APTA's Clinical Performance Instrument. The student will be expected to cooperate and collaborate with their Clinical Instructor(s) in fulfilling the requirements of the clinical education experience. The student will evaluate their performance in the clinical setting and compare this evaluation with that of the Clinical Instructor. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7360 ADVANCED CLINICAL TOPICS I (2). This course will introduce students to the Acute Care and Home Health settings. The course will introduce students to the procedures required for discharge planning in all clinical settings. Students will learn how to perform

accurate home assessments. Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 7370 ETHICAL BEHAVIOR AND MORAL REASONING (1). Preparation of physical therapy students to approach ethical dilemmas objectively with a thorough understanding of professional moral responsibility is the focus of this course. This course assists students to: identify the ethically relevant features of a case or clinical situation; identify options open to a therapist faced with an ethical problem; provide justification for the best options; and consider counter arguments for one's positions. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7410 CLINICAL INTEGRATION SEMINAR (2). Students analyze complex cases using a variety of decision-making frameworks and perspectives. Cases selected emphasize co-morbidities, psychosocial factors, and ethical and financial issues that influence physical therapy practice. Cases are chosen that represent a variety of clinical practice settings. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7420 SEMINAR IN GERIATRICS (1). The course covers the physiologic changes that occur with aging, and the functional implications of these changes to the individual. Psychosocial and environmental issues affecting the older adult are also covered. Clinical problems and appropriate professional interventions and interprofessional management are discussed in order to promote optimal care for older adult. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7430 SPECIAL TOPICS IN PHYSICAL THERAPY (1). This course addresses special topics and/or areas of emerging or advanced clinical practice not addressed in the physical therapy curriculum. The identified topics are subjected to critical inquiry as it relates to best practice, research evidence, clinical management, and patient outcomes. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7455 CLINICAL INTERNSHIP II (6). This course provides a hands-on experience for the student in selected clinical environments. Students will have an opportunity to practice the clinical skills learned during the professional component. The student will be assigned to a clinical facility for ten weeks. The student will be supervised by a licensed physical therapist. The student's clinical performance will be evaluated by the Clinical Instructor using the American Physical Therapy Association's Clinical Performance Instrument. The student will be expected to cooperate and collaborate with their Clinical Instructor(s) in fulfilling the requirements of the clinical education experience. The student will evaluate their performance in the clinical setting and compare this evaluation with that of the Clinical Instructor. Successful completion of all prior required coursework and/or permission from instructor

PHTH 7460 ADVANCED CLINICAL TOPICS II (2). Students will discuss various specialty content areas relative to the advanced practice of Physical Therapy. Information regarding physical therapy management of a number of disorders and disabilities will be the focus of the course of study. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7480 HEALTH AND WELLNESS (1). Theories of wellness and formats for prevention and screening programs across systems and lifespan are the focus of this course. Lifestyle and

cultural variables that impact health status and wellness program designs are emphasized, including the dynamics of change and change behavior. The role and impact of nutrition are covered. Roles for physical therapists as consultants in primary, secondary, and tertiary prevention are covered. Prerequisites: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7490 RESEARCH V (1). This course is the fifth and final in a series of five courses designed to help the student to understand how research applies to the profession of physical therapy. The objective of these courses is to help the student develop the skills needed to design and implement an Evidence Based Practice research project. Students will ultimately develop a publishable research manuscript and present it to peers at a university, local, state/regional, or national meeting. Prerequisite: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 7555 CLINICAL INTERNSHIP III (5). This course provides a hands-on experience for the student in selected clinical environments. Students will have an opportunity to practice the clinical skills learned during the professional component. The student will be assigned to a clinical site for seven weeks. The student will be supervised by a licensed physical therapist. The student's clinical performance will be evaluated by the Clinical Instructor using the American Physical Therapy Association's Clinical Performance Instrument. The student will be expected to cooperate and collaborate with their Clinical Instructor(s) in fulfilling the requirements of the clinical education experience. The student will evaluate their performance in the clinical setting and compare this evaluation with that of the Clinical Instructor. Prerequisite: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 7565 CLINICAL INTERNSHIP IV (5). This course provides a hands-on experience for the student in selected clinical environments. Students will have an opportunity to practice the clinical skills learned during the professional component. The student will be assigned to a clinical site for seven weeks. The student will be supervised by a licensed physical therapist. The student's clinical performance will be evaluated by the Clinical Instructor using the American Physical Therapy Association's Clinical Performance Instrument. The student will be expected to cooperate and collaborate with their Clinical Instructor(s) in fulfilling the requirements of the clinical education experience. The student will evaluate their performance in the clinical setting and compare this evaluation with that of the Clinical Instructor. Prerequisite: Successful completion of all prior, required coursework and/or permission of the instructor

PHTH 7570 DPT CLINICAL CASE CONFERENCE (2). This is a seminar course that uses a case-based format in exploring decision-making skills in the management of patients referred to physical therapy. The first half of the course utilizes case discussions that center on the patient/client management model in the context of pathologies, impairments, functional limitations and disabilities throughout the lifespan. The second half of the course requires students to integrate didactic knowledge with clinical experience to interpret, evaluate, or solve problems when given questions dealing with realistic clinical situations. Prerequisite: Successful completion of all prior required coursework and/or permission from instructor

PHTH 7580 DPT PROFESSIONAL ISSUES (1). This final course in the series of interactive learning experiences, assists the learner with acquiring the advanced skills required to enter the practice arena. These skills will include but are not limited to resume' development, state laws and regulations, related to physical therapy, development of a professional plan and preparation for the licensure examination. Prerequisite: Successful completion of all prior required coursework and/or permission from instructor.

Appendix B
CLINICAL AFFILIATION AGREEMENT
BETWEEN
TENNESSEE STATE UNIVERSITY
AND
[AFFILIATE]

This Agreement is made this ____ day of _____, 2024, by and between **TENNESSEE STATE UNIVERSITY**, acting for the benefit of the Tennessee State University Board of Trustees, hereinafter referred to as the "INSTITUTION", and **[AFFILIATE]**, hereinafter referred to as "AFFILIATE".

W I T N E S S E T H:

In consideration of the mutual benefits of the parties to provide clinical experience for students enrolled in certain programs of the Institution, the parties have agreed to the terms and provisions set forth below:

- A. Purpose. The purpose of this Agreement shall be to provide clinical experience to students enrolled in the _____ program of the Institution.
1. Consideration for this Agreement shall consist of the mutual promises contained herein, the parties agreeing that monetary compensation shall neither be expected nor received by either party.
- B. Location. The clinical experience shall be provided at the Affiliate's facility located at (Add complete address and zip code) hereinafter referred to as "FACILITY".
- C. Placement of Students. The Institution will place an appropriate number of students at the Facility each academic term. The Institution shall notify the Affiliate at least 30 days prior to the beginning of each academic term of the number of students it desires to place at the Facility for such term.
- D. Responsibilities of Affiliate. The following duties shall be the specific responsibilities of the Affiliate:
1. Designate a staff member who is acceptable to the Institution as the Affiliate's Clinical Education Coordinator to:
 - i. Direct and coordinate the student's clinical education experience.
 - ii. Provide a planned and supervised clinical education program utilizing observational opportunities and practical experiences for each student.
 - iii. Provide for student orientation to the Facility.
 - iv. Provide necessary feedback to the student to insure proper patient care.
 - v. Notify the Institution of any situation or problem which may threaten a student's successful completion of the program or assignment.
 2. Retain complete responsibility for patient care while providing adequate supervision of students (and faculty, if applicable) at all times.
 3. Maintain a current list of all personnel who, in any way, supervise students.
 4. Maintain a sufficient level of staff employees to carry out regular duties. Students will not be expected nor allowed to perform services in lieu of staff employees.
 5. Provide emergency medical treatment to students (and faculty, if applicable) if needed for illness or injuries suffered during clinical experience. Such treatment shall be at the expense of the individual treated.
 6. Allow students to participate in non-treatment learning experiences such as ward rounds, clinics, staff conferences, in-service education programs, special lectures, observations of surgery, and similar activities as they become available.

7. Maintain all applicable accreditation requirements and certify such compliance to the Institution or other entity as requested by the Institution. The Affiliate shall also permit authorities responsible for accreditation of the Institution's curriculum to inspect the Affiliate's clinical facilities and services as necessary.
8. Confirm that students shall be supervised by the appropriate licensed professional(s) who shall have a minimum of one (1) year of full-time experience in a practice setting.
9. Provide necessary feedback to students to ensure proper patient care and facilitate student learning.
10. Evaluate each student's clinical performance and submit to the Institution a performance appraisal for the student, including the scoring of the evaluation instrument, at both the middle and end of the clinical assignment.
11. Provide an opportunity for the student to conduct a performance self-appraisal with the same evaluation instrument, at both the middle and end of the clinical assignment.
12. Work with Institution faculty to ensure the clinical program is meeting the academic needs of students.
13. Notify Institution in writing of any changes within the Facility which would significantly alter the specified clinical education experiences for students.
14. Provide Graduate Speech and Language Therapy students, where applicable, with a minimum of 25% supervision while conducting speech and language therapy and 50% supervision while administering speech and language diagnostic evaluation.

E. Responsibilities of Institution. The following duties shall be the specific responsibilities of the Institution:

1. Select the students to be placed at the Facility.
2. Provide orientation for students beginning clinical experience.
3. Work with Affiliate to schedule training activities for students.
4. Provide supervision to students while present at the Facility for clinical experience.
5. Evaluate the performance of individual students as appropriate.
6. Provide health records of students (and faculty, if applicable) upon request by the Affiliate.
7. Establish a procedure for notifying the Affiliate if a student (or faculty, if applicable) is/are unable for any reason to report for clinical training.
8. Notify students (or faculty, if applicable) of individual health insurance coverage that may be required by Affiliate for individuals in the participation of the clinical experience. If the Affiliate requires evidence of professional liability insurance coverage for students and faculty participating in the program, Institution shall notify students and faculty of such requirement and require written evidence of insurance coverage from individual students and faculty participating in the clinical experience. The coverage shall extend throughout the clinical experience.
9. Inform students that they shall not submit for publication any material relating to the clinical education experience without prior written approval from the Institution and the Affiliate.

F. Mutual Responsibilities. The parties shall cooperate to fulfill the following mutual responsibilities:

1. Students shall be treated as trainees who have no expectation of receiving compensation or future employment from the Affiliate or the Institution. If the geographical location of the Affiliate necessitates living at or near the Affiliate facility, the student may receive a stipend in lieu of room and/or board.
2. Any courtesy appointments to faculty or staff by either the Institution or the Affiliate shall be without entitlement of the individual to compensation or benefits from the appointing party. The Affiliate staff will receive no monetary compensation from the Institution for participation in the clinical education program.
3. The confidentiality of patient records and student records shall be maintained at all times.
4. The student(s), faculty, and Affiliate staff are expected to conduct themselves in accordance with the Code of Ethics as set forth by national guidelines for the particular field of work/study.

5. While enrolled in clinical experience at the Facility, students (and faculty, if applicable) will be subject to applicable policies of the Institution and the Affiliate. Each party will be responsible for enforcing all applicable policies including that of the other party. Students shall be dismissed from participation in the clinical experience only after the appropriate disciplinary policies and procedures of the Institution have been followed; however, the Affiliate may immediately remove from the premises any student who poses an immediate threat or danger.
6. If criminal background checks of students are required by the Affiliate, the Institution shall notify students of this requirement prior to enrollment in the program or as soon as the requirement is known. Students will be informed by the Institution that the check must be completed within the 90-day period immediately prior to the student's initial clinical placement. It shall be the student's responsibility to make timely arrangements for the background check and to pay all costs associated with such checks.

It shall be the responsibility of Affiliate to set the eligibility standards for participation and to evaluate the results of the background checks. If Affiliate determines that a student or faculty/staff member shall not participate at its facility, Affiliate shall so notify that individual and the Institution.

If an Institutional faculty/staff member is also an employee of Affiliate or is an employee at another hospital, health care facility or health care organization, Affiliate will allow the faculty/staff member to provide on-site supervision and instruction for its clinical program without the necessity of undergoing an additional background check.

Recognizing that students enrolled in the program at Institution will potentially participate in multiple clinical placements at multiple facilities, Affiliate agrees to accept the results of the background check done prior to the student's initial clinical placement if the student maintains continuous enrollment in the health care program and if the results of the background check are archived by the background check agency.

Institution shall inform students or faculty/staff members excluded from clinical placement on the basis of a criminal background check of any review or appeal process available pursuant to the Fair Credit Reporting Act or any other law or policy, if any.

7. "Personal Information" means information provided to Affiliate by or at the direction of Institution in the course of Affiliate's performance under this Agreement that:
 - i. Identifies or can be used to identify an individual (including, without limitation, names, signatures, addresses, telephone numbers, e-mail addresses and other unique identifiers); or
 - ii. Can be used to authenticate an individual (including, without limitation, employee identification numbers, government-issued identification numbers, passwords or PINs, financial account numbers, credit report information, biometric or health data, answers to security questions and other personal identifiers).

Affiliate represents and warrants that its collection, access, use, storage, disposal and disclosure of Personal Information complies with all applicable federal and state privacy and data protection laws, including without limitation, the Gramm-Leach-Bliley Act ("GLBA"); the Health Information Portability and Accountability Act ("HIPAA"); the Family Educational Rights and Privacy Act ("FERPA") of 1974 (20 U.S.C.1232g), the FTC's Red Flag Rules and any applicable federal or state laws, as amended, together with regulations promulgated thereunder. Some Personal Information provided by Institution to Affiliate is subject to FERPA.

Affiliate represents and warrants that Affiliate will maintain compliance with the SSAE18 standard and shall undertake any audits and risk assessments Affiliate deems necessary to maintain compliance with SSAE18.

G. Additional Terms. Pursuant to the above-stated purpose, the parties agree as follows:

1. Term. The term and effective date of this Agreement shall be from _____ to _____. Under no circumstances shall the term of this Agreement extend beyond five (5) years from the effective date.

The parties shall have an option to renew this Agreement at the end of the term. Renewals of this Agreement may become effective with agreement of both parties provided no substantial changes are made to the original agreement.

2. Termination. Either party may terminate this Agreement upon giving thirty (30) day's written notice to the other party. Such termination shall have no effect on students currently receiving clinical experience. These students shall be allowed to finish their clinical experience upon termination of this Agreement.
3. Force Majeure. The parties' obligations under this Contract shall be voided in the event of an occurrence beyond the parties' control that could not be avoided by the exercise of due care, including, but not limited to, acts of God, riots, wars, epidemics or pandemics, declaration of a federal, state or local state of emergency, or any other similar occurrence or cause.
4. Remedies. The Institution, as a State entity, shall not, under any circumstances, indemnify, defend, or hold harmless the Affiliate or any party or be liable for attorney's fees, punitive damages, or the costs of litigation. Each party shall be responsible for personal injury or property damage or loss except that resulting from its own negligence or the negligence of its employees or others for whom the party is legally responsible.

The delay or failure of performance by either party shall not constitute default under the terms of this Agreement, nor shall it give rise to any claims against either party for damages. The sole remedy for breach of this Agreement shall be immediate termination.

5. Relationship of Parties. This Agreement shall in no way be interpreted as creating an agency or employment relationship between the parties.
6. Insurance. Affiliate agrees to carry adequate public liability and other appropriate forms of insurance, to pay all taxes incidental hereunto, and otherwise protect and hold Institution harmless from any and all liability not specifically provided for in this Agreement. The State of Tennessee is self-insured and does not carry or maintain commercial general liability insurance or medical, professional or hospital insurance. Any and all claims against the State, including the Institution or its employees, shall be heard and determined by the Tennessee Claims Commission in the manner prescribed by law. Damages recoverable against the State shall be limited to claims paid by the Claims Commission pursuant to TCA §9-8-301 et seq.
7. Modification. This Agreement may be modified only by written amendment executed by all parties hereto.
8. Non-Assignment. Affiliate shall not assign this Agreement or enter into sub-contracts for any of the work described herein without obtaining the prior written approval of Institution or Tennessee Board of Regents, as appropriate.
9. Nondisclosure and Nonuse. The Institution does not have the authority to consent to provisions which require confidentiality, or Nondisclosure in violation of Tennessee Open Records Act. Therefore, each party will treat the other party's Confidential Information as Confidential to the extent permitted by law.
10. Non-Discrimination. The parties agree to comply with Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Executive Order 11,246, the Americans with Disabilities of 1990 and the related regulations of each. Each party assures that it will not discriminate against any individual including, but not limited to, employees or applicants for employment and/or students, because of race, religion, creed, color, sex, age, disability, veteran status or national origin.
11. HIPAA Requirements. To the extent required by federal law, the parties agree to comply with the Health Insurance Portability and Accountability Act of 1996, as codified at 42 U.S.C. Section 1320d ("HIPAA") and any current and future regulations promulgated thereunder, including with limitation, the federal privacy regulations, the federal security standards, and the federal standards for electronic transactions, all collectively referred to herein as "HIPAA Requirements". The parties agree not to use or further disclose any Protected Health Information or Identifiable Health Information, other than as permitted by HIPAA Requirements and the terms of this Agreement.

- 12. FERPA. Affiliate acknowledges that students’ education records are protected by the Family Educational Rights and Privacy Act (FERPA) and will comply with FERPA provisions if accessing such records. Student education records will only be used for the purposes of carrying out this Agreement.
- 13. Receipts. Each party will make its internal practices, books, and records relating to the use and disclosure of Protected Health Information available to the Secretary of Health and Human Services to the extent required for determining compliance with the Federal Privacy Regulations.
- 14. _____ is the Coordinator for the Institution and can be reached at tel: _____, or email: _____.
- 15. _____ is the Coordinator for the Affiliate and can be reached at tel: _____, or email: _____.
- 16. Assent. This Agreement is not effective until approved by the Institution’s President and the Affiliate’s appropriate authority.
- 17. Compliance with Laws. Affiliate shall comply with all applicable federal, state and local laws and regulations in the performance of this Agreement.

IN WITNESS WHEREOF, the parties have by their duly authorized representatives set forth their signature:

[INSERT AFFILIATE NAME HERE]

TENNESSEE STATE UNIVERSITY

Signature: _____

Signature: _____

Name: _____

Name: Dr. Glenda Glover

Title: _____

Title: President/President’s Designee

Date: _____

Date: _____

Appendix C

CIET “Cheat Sheet” for TSU DPT Clinical Education Experience Placements

Professional Behaviors

***All TSU DPT students are EXPECTED to be at the “Always”** level 100% of the time for professional behaviors by the end of each Clinical Education Experience (since all experiences come in the 3rd professional year after clinical courses have been successfully completed and after a part-time affiliation in our ProBono clinic)**

***Always does NOT mean without fault or without direction/correction EVER, especially early in the experience. It means that by the time you are assessing the student, that is the typical behavior observed (meaning, just because you had to make corrections initially, you can still mark the student as “Always” if they have modified accordingly by the time of the assessment.)*




*Comment Sections at the end of each item are for you to elaborate on the rating and is weighed **heavily** by TSU in determining the pass/fail grade for the clinical experience (*only TSU can pass or fail a student. The CI can recommend pass or fail and a clinical site can certainly dismiss a student if they display illegal, unethical, unsafe practices...here’s hoping that NEVER happens, though!*).

*Ratings of “Never”, “Rarely”, “Sometimes” are considered **Red Flags** and will require comments to support the ratings. In addition, they will trigger follow-up from us.

*DO NOT wait until Midterm/Final for ANY Red Flag behaviors or performance issues. It is best practice to address any issues as soon as they are observed and contact TSU ASAP with all concerns prior to the formal grading periods.

Professional Behavior Skills

Rating Scale → Frequency of behavior



Rating	Frequency
Never 	0%
Rarely 	25% (Frequent cues needed)
Sometimes 	50% (Intermittent cues needed)
Most of the Time	75%
Always	100%
Not Observed	Can only be used in communication section and if there were no available opportunities to demonstrate

Patient Management

*The CIET uses a numeric scale with the right side/higher numbers indicating Entry Level/Competent Clinician and Beyond. The goal is for the DPT student to progress through the Clinical Education Experiences increasing in ratings to Competent Clinician.

Patient Management

Rating Scale → Clinical Competence

Rating	Comments
Well Below 	Unacceptable clinical performance
Below 	
At That Level for Familiar Patients	Benchmark Rating for TSU DPT Clinical Experience I
At That Level of All Patients	Benchmark Rating for TSU DPT Clinical Experience II, III, IV *Slightly lower rating allowed in Clinical Exp II AND in specialty environments with good supporting comments
Above	Beyond entry-level

***TSU Clinical Education Experience I – Expectation is “At that level for Familiar Patients” for >80% of all items**

***TSU Clinical Education Experience II – Expectation is “At that level for All Patients” for >80% of all items**

***TSU Clinical Education Experience III, IV – Expectation is “At that level for All Patients” for all items**

*TSU does allow a lower than “At that level for All patients” for students in specialty practices or students that have special considerations for Clinical Education III and IV.

*Comment Sections are highly recommended **but required** for any item not lining up with TSU Benchmark Goals

Patient Management

3 Factors to Consider in Rating Competence	
Patient Presentation	Familiar = diagnosis covered in school or frequently seen, known patient
	Complex = unfamiliar or rare condition, complex medical history
CI Support Required	Guidance = depends on CI to direct care and decision-making
	Supervision = CI corrects minor errors or facilitates decision-making
	Independence = CI utilized to clarify decision-making or to consult with only
Efficiency	How efficiently can the student complete the skill in the context of patient presentation and CI Support

*Rate students at the level that they consistently perform

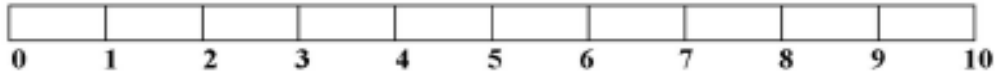
GLOBAL RATING

***TSU has determined that a Global Rating of 8 is considered a Competent Clinician and is our Benchmark Goal for successful completion of Clinical Education Experiences III and IV.**

*Entry Level Competence is defined as *the student’s ability to demonstrate clinical competence and the capability of managing a caseload representative of a site’s expectations for a newly hired, new graduate.*

Global Rating

Place an X in the box which best describes the student.



*Well below
a competent
clinician*

*Well above
a competent
clinician*

Rating	Caseload	TSU DPT Expectations
0 <input type="checkbox"/>	<25%	Unsatisfactory for all rotations at any point
1-2 <input type="checkbox"/>	25-40%	Unsatisfactory for all rotations at any point
3-4 <input type="checkbox"/>	40-60%	Unsatisfactory for rotations <i>Competent</i> or midterm <i>Clinician</i>
5-6	60-70%	Satisfactory for Mid
7-8	71-80%	Expectation for Clinical Experience I, II
8	80-90%**	Expectation for Clinical Experience III, IV
9-10	>90%	Above Expectations

*TSU does allow a lower than 8 rating for students in specialty practices or students that have special considerations for Clinical Education III and IV **but** lower ratings **have** to be accompanied by comments.

***At the end of the CIET, there is a Yes/No – Is the student performing at the level expected? This is very important for TSU’s determination of pass/fail for a clinical experience. If you feel like the answer is EVER going to be “No”, please contact us ASAP.**

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