# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Philosophy</td>
<td>4</td>
</tr>
<tr>
<td>Curriculum goals</td>
<td>4</td>
</tr>
<tr>
<td>Mission</td>
<td>5</td>
</tr>
<tr>
<td>Outcomes, Model, Physical Therapy Faculty</td>
<td>6</td>
</tr>
<tr>
<td>Clinical Education Schedule</td>
<td>7</td>
</tr>
<tr>
<td>Assignment of Students</td>
<td>8</td>
</tr>
<tr>
<td>Cancellations or Changes in Clinical Education Assignments</td>
<td>8</td>
</tr>
<tr>
<td>Evaluation of Clinical Performance</td>
<td>9</td>
</tr>
<tr>
<td>Clinical Education Objectives</td>
<td>9</td>
</tr>
<tr>
<td>Clinical Education Policies</td>
<td></td>
</tr>
<tr>
<td>Definitions</td>
<td>13</td>
</tr>
<tr>
<td>Student Responsibilities</td>
<td>14</td>
</tr>
<tr>
<td>ACCE Responsibilities</td>
<td>16</td>
</tr>
<tr>
<td>CCCE and CI Responsibilities</td>
<td>16</td>
</tr>
<tr>
<td>Attendance</td>
<td>17</td>
</tr>
<tr>
<td>Conduct</td>
<td>17</td>
</tr>
<tr>
<td>Grading of Clinical Education</td>
<td>18</td>
</tr>
<tr>
<td>Liability Insurance</td>
<td>18</td>
</tr>
<tr>
<td>Dress Code</td>
<td>18</td>
</tr>
<tr>
<td>Assignment of Students</td>
<td>20</td>
</tr>
<tr>
<td>Policy on Safety Issues in Clinical Education</td>
<td>20</td>
</tr>
<tr>
<td>Policy on Patient and Student Injury During Clinical Education</td>
<td>21</td>
</tr>
<tr>
<td>Clinical Education Skills List</td>
<td>23</td>
</tr>
<tr>
<td>Criteria by Which Clinical Education Sites and Experiences are Chosen to Meet Program Needs</td>
<td>26</td>
</tr>
<tr>
<td>Clinical Site Criteria</td>
<td>26</td>
</tr>
<tr>
<td>Clinical Instructor Criteria</td>
<td>28</td>
</tr>
<tr>
<td>Center Coordinator of Clinical Education Criteria</td>
<td>30</td>
</tr>
<tr>
<td>Rights and Privileges of the Clinical Education Faculty</td>
<td>32</td>
</tr>
<tr>
<td>Professional Curriculum Plan</td>
<td>33</td>
</tr>
<tr>
<td>Course Descriptions</td>
<td>35</td>
</tr>
<tr>
<td>Clinical Affiliation Agreements</td>
<td>45</td>
</tr>
</tbody>
</table>
INTRODUCTION

The Tennessee State University Physical Therapy Department is a doctoral degree program. Students admitted to the professional component begin in June and attend classes year round, except the summer of the third year, for three years before graduation.

There are a total of five clinical education experiences during the course of the program.

* The first experience is five weeks in length and occurs in the second year during the summer semester.

* The second experience is seven weeks in length and occurs in the second year during the summer semester.

* The third experience is 10 weeks in length and occurs in the third year during the fall semester.

* The final two affiliations 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.

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, Academic Coordinator of Clinical Education.
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.
Expected Outcomes

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
  - 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 INTERESTS

Ronald Barredo, PT, Ed.D. DPT, GCS
- X Professor, Physical Therapy Department Chair
- X Teaches: Administration, Cardiopulmonary
- X Interests: Credentialed Clinical Instructor, Administration, Cardiopulmonary, Geriatrics, Educational Theory

Derek Charles, DPT
- X Assistant Professor, Physical Therapy
- X Teaches: Orthopedics, Test and Measurements, Therapeutic Exercise, Anatomy, Biomechanics
- X Interests: Orthopedics, Manual Therapy

Richard Clark, PT, DSC, SCS, C/IDN
- Assistant Professor, Physical Therapy
- Teaches Radiology/Differential Diagnosis, Biomechanics, Orthopedics, Therapeutic Exercise, Health and Wellness, Patient Care Principles
- Interests: Sports, Orthopedics, and Advances in Education
Karen Coker, PT, DPT, C/NDT, CWS, FACCWS
X Assistant Professor, Physical Therapy
X Teaches: Human Development, Prosthetics and Orthotics, Pediatrics, Advanced Clinical Topics I and II
X Interests: Acute Care, Wound Care, Pediatrics, Bariatrics

Deborah Edmondson, PT, Ed.D.
X Professor, Physical Therapy
X Academic Coordinator of Clinical Education
X Teaches: Electrotherapeutics, Physical Agents, Clinical Integration
X Interests: Ergonomics, Massage, Modalities

Kevin Lawrence, PT, Ph.D.
- Associate Professor, Physical Therapy
- Teaches Orthopedics, Anatomy, Biomechanics
- Interests: Biomechanics, and effects of Diabetes on the musculoskeletal system, Manual Therapy, emphasis spine and hand

David Lehman, PT, Ph.D.
X Professor, Physical Therapy
X Teaches Research I, II, III, IV, & V, Neuroscience, Neurological Physical Therapy I & II
X Interests: Parkinson’s Disease, Neurological Conditions

Edilberto A. Raynes, MD, Ph.D.
X Associate Professor, Physical Therapy
X Teaches: Applied Physiology, Pathology, Pharmacology, Neuroanatomy, Neuroscience
X Interests: Neurology, Pediatrics, Nematology, Infectious Diseases

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

**Clinical Education I** - Full time for 5 weeks
Second week of May to second week of June
Focus: Initial Exposure
Abilities: Can perform basic evaluations (Manual Muscle Testing, Goniometry); modalities; wound care; general patient care with supervision
Clinical Education II - 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 Education III - Full time for 10 weeks.
Second week of October to the second 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 Education IV & 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 ACCE/AACCE is responsible for assigning students to a facility 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 five clinical education experiences. During the last four clinical education experiences the following are required:

• an acute care facility (pediatric or adult). A SNF may be substituted for the acute care facility requirement
• a skilled nursing facility or rehabilitation center (in or out patient)
• an outpatient orthopedic center (can be located in a hospital)
• a specialty clinical affiliation (pediatrics, home health, sports, women’s health, industrial, etc.) are encouraged and can be arranged with the ACCE/AACCE.

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 CCCE/CI to notify the ACCE/AACCE as soon as possible when unable to accommodate a student assignment. The ACCE/AACCE will then notify the student and assist the student in finding another appropriate clinical education assignment/placement. Also, whenever, the ACCE/AACCE 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 ACCE and CCCE/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 ACCE 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 EDUCATION 1 - OBJECTIVES
At the conclusion of this course, the student should be able to:

1. Display professional and ethical behavior while in the assigned treatment environment.
2. Demonstrate effective and appropriate oral, nonverbal and written communication skills.
3. Adapt behavior and communication both verbal and nonverbal to comply with various interactions encountered in the treatment environment, including communications with patients, families, and health care providers.
4. Display correct procedures and sequencing of steps, etc. while performing evaluation and treatment procedures learned in the academic setting.
5. Perform safely and competently within areas of specified classroom instruction while in the clinical setting.
6. Comply with the policies, procedures, and health and safety regulations of the facility.
7. Preserve patient modesty, privacy and confidentiality at all times.
8. Exhibit respectful and compassionate behavior in all communications and interactions with others.

CLINICAL EDUCATION 2 - OBJECTIVES
1. Perform accurate, timely, and appropriate patient evaluations utilizing procedures learned in the academic setting.
2. Outline evaluation results as the basis for clinical decision making and establishing patient care goals.
3. Choose treatment goals based on interpretation of evaluation results.
4. Select a comprehensive physical therapy program based on the treatment goals.
5. Administer safe and efficient patient care according to the established treatment plan.
6. Organize patient care delivery in all aspects of the clinical setting in a safe and efficient manner.
7. Incorporate modifications into the treatment program as indicated by the patient's changing status.
10. Communicate orally, nonverbally and in writing in an effective and appropriate manner.
11. Display professional, legal, and ethical behavior while in the clinical setting in accordance with all institutional, federal and state regulations related to patient care.
12. Adhere to legal practice standards including all federal state, jurisdiction, and institutional regulations related to patient care.
13. Preserve patient modesty, privacy and confidentiality at all times.
14. Exhibit respectful and compassionate behavior in all communications and interactions with others.
15. Interact appropriately with other health care practitioners, patients, and families.
18. Complete an evaluation of the clinical experience using the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction*.

**CLINICAL EDUCATION 3 OBJECTIVES**

Upon successful completion of this course, the student should be able to:

1. Display professional, legal, and ethical behavior while in the clinical setting in accordance with all institutional, federal and state regulations related to patient care.
3. Interact appropriately with other health care practitioners, patients, and families.
4. Administer safe and efficient patient care according to the established treatment plan, minimizing risk to the patient, client, physical therapist, and others.
5. Incorporate modifications into the treatment program as indicated by the patient's changing status.
6. Preserve patient modesty, privacy and confidentiality at all times.
7. Exhibit respectful and compassionate behavior in all communications and interactions with others.
8. Choose an appropriate treatment plan based on treatment goals and treatment techniques previously learned in the classroom.
9. Document all aspects of evaluation, treatment and patient responses according to the policies and procedures of the practice setting.
10. Integrate evaluation results for the purpose of establishing treatment goals.
11. Integrate knowledge gained in the academic setting into clinical practice.
13. Select the appropriate evaluation method and demonstrate ability to perform differential diagnosis.
14. Appropriately refers patients to other health care providers based on appropriate screening or evaluation.
15. Identifies need for patient, family, or care giver education.
16. Appropriately and efficiently perform patient, family, or care giver education.
17. Manage resources, time, space, equipment, etc. in the clinical setting.
18. Perform as an independent practitioner with minimal to moderate supervision from the Clinical Instructor.
20. Determine a prognosis based on the evaluation results current literature, and medical and psychosocial information.
25. Communicate with other health care professionals about diagnoses, prognoses, and clinical impressions to provide culturally competent care to clients.
26. Perform critical inquiry in relation to the patient’s condition and other diagnoses found at the clinical site.
27. Provide care to clients that have been screened via direct access and determined to need physical therapy care.
28. Participate in case management.
30. Complete an evaluation of the clinical education experience using the *Physical Therapist Students Evaluation: Clinical Experience and Clinical Instruction.*

**CLINICAL EDUCATION 4 and 5 OBJECTIVES**

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

1. Perform accurate, timely, thorough, and appropriate evaluations of patients.
2. 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.
3. Display professional and ethical behavior while in the clinical setting.
5. Adhere to legal and ethical practice patterns including all federal, state, and institutional regulations as related to patient care and fiscal management (A2, P2).
6. Comply with the policies, procedures, and health and safety regulations of the facility.
7. Communicate orally, nonverbally, and in writing in an effective and appropriate manner according to the policies and procedures of the practice setting.
8. Interact appropriately with other health care practitioners, patients and families.
9. Use clinical decision making skills to choose treatment goals based on interpretation of evaluation results.
10. Design and implement a comprehensive physical therapy program based on the treatment goals.
11. Incorporate modifications into the treatment program as indicated by the patient's changing status.
12. Outline evaluation results as the basis for establishing patient care goals.
13. Organize patient care delivery in all aspects of the clinical setting in a safe, competent, and efficient manner that minimizes risk to client, self and others.
14. Re-evaluate the patient as appropriate to determine changes in the patient’s status.
15. Modify treatment, plans, and goals based on re-evaluation of the patient.
17. Select the appropriate evaluation method and demonstrate ability to perform differential diagnosis.
18. Use clinical decision making skills to determine a prognosis based on the evaluation results and medical and psychosocial information.
19. Communicate with other health care professionals about diagnoses, prognoses,
and clinical impressions
20. Appropriately refer patients to other health care provides based on appropriate screening or evaluation.
21. Identify need for patient, family, or care giver education.
22. Appropriately and efficiently perform patient, family, or care giver education.
23. Manage resources, time, space, equipment, etc. in the clinical setting.
24. Preserve patient modesty, privacy and confidentiality at all times.
25. Exhibit respectful and compassionate behavior in all communications and interactions with others.
26. Participate in activities that promote quality of care to patients i.e.: quality assurance, peer review, utilization review, etc.
27. Participate in consultation to individuals, agencies, etc. as necessary.
28. Negotiate with third party payers and physicians, etc. to address needs of the patient.
29. Appropriately supervise, delegate, collaborate, and follow up with support staff.
30. Seek opportunity to learn and develop self as a professional.
31. Address and promote wellness and prevention with patients.
32. Participate in management, marketing, consultation activities in the clinical setting.
33. Perform critical inquiry in relation to the patient’s condition and other diagnoses found at the clinical site.
35. Perform as an independent practitioner with minimal supervision from the Clinical Instructor.

**CLINICAL EDUCATION POLICIES**

**DEFINITIONS**

Clinical Education Experience - That aspect of the curriculum where students’ learning occurs directly as a function of being immersed within physical therapy practice. These dynamic and progressive experiences comprise all of the direct and indirect formal and practical “real life” learning experiences provided for students to apply classroom knowledge, skills, and behaviors in the clinical environment. These experiences can be of short or long duration (e.g., part-time and full-time experiences, internships that are most often full-time post graduation experiences for a period of 1 year) ) and can vary by the manner in which the learning experiences are provided (e.g., rotations on different units that vary within the same setting, rotations between
different practice settings within the same health care system). These experiences include comprehensive care of patients across the life span and related activities.

– adapted from APTA Guidelines and Self-Assessments for Clinical Education, 2004 revision.

Academic Coordinator of Clinical Education (ACCE) - An individual who is responsible for managing and coordinating the clinical education program at the academic institution, including facilitating development of the clinical education site and clinical educators. This person is also responsible for coordinating student placements, communicating with clinical educators about the academic program and student performance, and maintaining current information on clinical education sites.


Center Coordinator of Clinical Education (CCCE) - An individual(s) who is responsible for managing, and coordinating the clinical education program at the academic institution, including facilitating development of the clinical education site and clinical educators. This person is also responsible for coordinating student placements, communicating with clinical educators about the academic program and student performance, and maintaining current information on clinical education sites. – APTA Guidelines and Self-Assessments for Clinical Education, 2004 revision.

Clinical Instructor (CI) - An individual at the clinical education site, who directly instructs and supervises students during their clinical learning experiences. These individuals are responsible for carrying out clinical learning experiences and assessing students’ performance in cognitive, psychomotor, and affective domains as related to entry-level clinical practice and academic and clinical performance expectations.


Clinical Education Site - The physical therapy practice environment where clinical education occurs; that aspect of the clinical education experience that is managed and delivered exclusively within the physical therapy practice environment and encompasses the entire clinical faculty.


Physical Therapist Clinical Performance Instrument - Web (CPI) - American Physical Therapy Association developed student evaluation instruments that are 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 ACCE/AACCE office.

2. Comply with drug screening if required by the clinical site.

3. Provide written results of Measles, Mumps, and Rubella (MMR) immunity titer or vaccine, Hepatitis-B vaccine, varicella immunity and yearly TB test. Some clinical sites require a two-step or a bi-annual TB test and may recommend a tetanus shot.

4. Complete a Student Information Form for each clinical education experience.

5. Obtain and maintain health insurance coverage throughout each clinical education experience.

6. 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.

7. 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.

8. Complete a criminal background check.

9. Provide results of the criminal background check to the clinical site, if requested.

10. Consent to a drug screen and provide results of the drug screen to the clinical site, if requested.

11. Purchase a yearly subscription to Certified Background Immunization Tracker to store and maintain all immunization records and certifications electronically. Additional information can be found from the ACCE.

**During Clinical Education Experiences**

1. Follow the policies and procedures of the clinical education facility. This includes working hours, clinic procedures, dress code, confidentiality policies, and observance of holidays.

2. Present an in-service to the facility staff during Clinical Education III, IV, or V.

3. Actively cooperate with the clinical instructor in planning the clinical education experience.

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

Turn in the Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction form, and any other written assignments to the ACCE/AACCE within specified time period.

RESPONSIBILITIES OF THE ACCE/AACCE

1. Establish and maintain contractual agreements between T.S.U. and clinical education facilities.

2. Notify the CCCE in writing of clinical education dates during the calendar year prior to their occurrence.

3. Send student and clinical experience information to CCCE/CI at least two months, or as soon as possible, before the student’s clinical education experience begins.

4. The ACCE or AACCE 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 ACCE/AACCE will make reasonable effort to visit the student and the CCCE/CI. However, if a visit is not possible the problem will be resolved by telephone or other electronic means.

5. Consult with CCCE/CI regarding any student problems.

6. Assist clinical education facilities in developing quality educational programs/experiences for students.

RESPONSIBILITIES OF THE CCCE AND CI

1. Notify the ACCE/AACCE 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 ACCE/AACCE 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 ACCE.

5. Provide for the affiliating student:
   a. orientation to facility
   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 ACCE’s performance when requested (ACCE will provide form).

ATTENDANCE

1. Any absence during any clinical education experience must be reported to the student's CI, CCCE, and ACCE/AACCE as soon as possible.

2. Students are required to make up all unexcused absences that occur during Clinical Education. The ACCE/AACCE and the CCCE/CI must approve all arrangements prior to making up the absences. Students are allowed no more than one excused absence during each clinical education experience with approval of the ACCE/AACCE.

3. Students are not expected to be present for clinical education on Thanksgiving Day or the Friday after Thanksgiving Day. However, if the CI and the student agree, these days may be used as clinical education days.

4. Students are allowed to miss only one day per clinical experience. All other days must be made up. If the student is completing a 14 week clinical experience, two missed days are allowed.

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 and other health care practitioners with respect.

4. Students are expected to maintain patient confidentiality.

**GRADING OF CLINICAL EDUCATION**

In order to receive a passing grade for each Clinical Education Experience, the student must not have any Significant Concerns box checked at the end of the clinical experience and have, at a minimum, all the performance indicators rated by the CI(s) using the PT CPI Web at:

- Beginner to Advanced Beginner for Clinical Education I
- Advanced Beginner to Intermediate for Clinical Education II
- Intermediate to Advanced Intermediate for Clinical Education III
- Advanced Intermediate to Entry-Level for Clinical Education IV
- Entry-Level for Clinical Education V

In areas where the student's final performance indicator ratings are not at the minimally required level, the ACCE 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 will be given a grade of Incomplete (I) or Unsatisfactory (U) as determined by the ACCE 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 Satisfactory (S). If the student does not attain a passing grade of Satisfactory (S) by the end of the extended clinical experience, the student will receive a failing grade of Unsatisfactory (U) for the course.

**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 ACCE office.

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

Students have received written information regarding dress codes as follows:

If the clinical facility 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 long, 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 sweat pants 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 facility.

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 ACCE/AACCE is responsible for assigning students to a facility 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.

The last four clinical education experiences must be completed in one of each of the following clinical sites: an acute care facility (pediatric or adult), a skilled nursing facility or rehabilitation center (in or out-patient), an out-patient orthopedic clinic (can be hospital-based), and a specialty clinical site or one of the student’s choice. Students are encouraged to diversify their clinical education sites.

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 ACCE 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 ACCE and email/fax the document to the ACCE.

3. The ACCE will monitor the student’s progress on correcting the safety issues by phone, email, fax, 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 CCCE/CI or the student will be placed in another clinical facility. If the safety issues are not resolved by the end of the extended clinical education
experience, the ACCE 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 provide proof of liability insurance coverage prior to the start of their clinical education experience. Each student should obtain a copy of their Certificate of Insurance form to be placed in their immunization tracker and made available to the clinical site. A copy of the entire policy will be made available electronically on the Clinical Education webpage.

3. Students must be approved by the faculty before being allowed to participate in each clinical education experience.

4. The clinical facility 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 facility, including the student him- or herself, shall be dismissed from participation in the clinical experience. The Center Coordinator of Clinical Education (CCCE) and/or Clinical Instructor (CI) must notify the Academic Coordinator of Clinical Education (ACCE) whenever a determination is made that a student poses an immediate threat or danger to the patients, staff or others at the clinical facility, including the student himself or herself.

6. A student may be removed from a clinical facility, held legally liable, or removed from the program if he/she does not follow the policies and procedures of the facility, 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 facility, 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 ACCE in writing. Failure to notify the ACCE 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 facility, 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 facility 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 facility, 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 facility 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 insure the patient’s immediate safety, report the injury to the supervising clinical instructor, and insure that an incident report is filed according to the facility’s policies. Thereafter, the policies of the facility applicable to patient injury will apply.

11. If a patient injury is the result of a student mishap or error, the ACCE must be notified. The clinical site may remove the student from the clinical facility 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 facility, but only after appropriate administrative or disciplinary policies and procedures of the academic program have been followed.

12. The facility 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 facility 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 will 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 facility 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 facility’s employee health or clinic or facility 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 come into contact with 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 facility. This includes the right to request patient testing, individual counseling, and obtaining follow-up information for health care.

Adopted: August 12, 2010 Effective: Fall semester 2010

CLINICAL EDUCATION SKILLS LIST

CLINICAL EDUCATION I

Professional, Ethical, Legal Behavior
Communication (verbal, non-verbal, written)
Evaluation of:
    Posture
    Gait
    Sensory
    ROM
    MMT
    Neuromuscular Status
    Physiological Status
    Functional Activities
Treatment (geriatric 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

CLINICAL EDUCATION 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

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 EDUCATION III

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 facility’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 EDUCATION IV AND V

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 facility’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 facility 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 therapists 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: observational experiences, part-time experience (less than 35 hours/week), full-time experiences (greater than 35 hours/week), and extended experiences.

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, educational 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 CCCE 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 at least one year of full-time clinical experience.

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.

CENTER COORDINATORS OF CLINICAL EDUCATION CRITERIA

1. The CCCE 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 CCCE is a non-physical therapist, there is an experienced physical therapist clinician available for direct clinical supervision of physical therapy students.

3. The CCCE 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 ACCE/AACCE regarding clinical education planning, evaluation and CI development;

E. Remaining open to and encouraging feedback from students, CIs, ACCEs and other colleagues;

F. Demonstrating respect for and sensitivity to individual and cultural differences;

4. The CCCE supervises the CI/student team during the experience to ensure quality in educational planning, learning experiences, and performance evaluations;

5. The CCCE provides consistent monitoring of and feedback to the CI regarding clinical education activities;

6. The CCCE serves as a useful resource to the CI, student, and ACCE/AACCE;

7. The CCCE 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 CCCE participates in the development of a plan to specifically document student progress;

9. The CCCE manages the clinical education program and routinely reviews and revises the program as necessary;

10. The CCCE is an advocate for clinical education with the clinical education site administration and physical therapy staff;

11. The CCCE 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.*

### 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 ACCE/AACCE.

Monetary compensation shall neither be expected nor received by the CCCE, 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 facility. The in-service can be arranged at the same time as the site-visit for the student by contacting the ACCE/AACCE. The TSU student at the facility is also able to provide an in-service for the clinical site.

2. **Clinical Instructor Education and Credentialing Program:** TSU will offer APTA’s 2-day, CI Credentialing Course at least once a year.

3. **APTA Advanced Clinical Instructor Education and Credentialing Program:** TSU will offer APTA’s 2-Day Advanced CI Credentialing 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.

6. **Textbooks for the Facility:** One current textbook will be given to the clinical site that takes the most students in one calendar year.
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 5540 Clinical Medicine I (3)
PHTH 5550 Therapeutic Exercise (3)
PHTH 5570 Neuroscience/Neuropathology (3)
PHTH 5580 Physical Agents (3)

YEAR II
Summer Semester - 9 credits
PHTH 6340 Electrotherapeutics (2)
PHTH 6350 Clinical Medicine II (3)
PHTH 6360 Clinical Education I (3) – Maymester
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)

YEARM III
Summer Semester - 9 credits
PHTH 7320  Administration & Management (2)
PHTH 7350  Clinical Education II (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 7454  Clinical Education III (6)
PHTH 7460  Advanced Clinical Topics II (2)
PHTH 7480  Health and Wellness (1)
PHTH 7490  Research V (1)

Spring Semester - 13 credits
PHTH 7554  Clinical Education IV (5)
PHTH 7564  Clinical Education V (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 of 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 of 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 of 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 of 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 of the 1st semester courses and/or have prior consent of the instructor

**PHTH 5450 PATIENT CARE PRINCIPLES (2).** Students will be introduced to the basic skills involved in patient transfers, bed mobility, patient positioning, body mechanics, and taking and interpreting vital signs. The teaching of how to use assistive devices (tilt table, parallel bars, walkers, canes, crutches) will be covered. One-third of the course time will be laboratory/psychomotor experience. Students will show proficiency in the performance of these basic physical therapy skills. The course also covers documentation using the SOAP format and functional outcome reporting. The use of a medical chart, abbreviations, and medical terminology will be emphasized. Prerequisites: Students must have passed all of the 1st semester course and/or have prior consent of the instructor

**PHTH 5540 CLINICAL MEDICINE I (3).** This course introduces students to principles and methods of medical screening in physical therapy practice and to diagnostic imaging, laboratory testing and other medical diagnostic procedures. A basic format for orthopedic and neuromuscular medical screening and differential diagnosis in physical therapy is presented and the role of the physical therapist as it interfaces with the role of the physician is emphasized. Basic concepts of pharmacology are also covered including classes of drugs, indications, therapeutic effects, side effects and implications for physical therapy practice. Strategies to effectively and appropriately communicate with health care colleagues and patients regarding medical diagnostic information and medical status are introduced. Prerequisites: Must have completed 2nd semester of professional program and/or permission of 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, labs, 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 5580 PHYSICAL AGENTS (3). This course covers the use of physical modalities in the treatment of selected pathologies. The effects of physical principles and biophysical effects of physical therapy modalities will be covered. Indications, contraindications, and precautions for the use of physical therapy modalities will be stressed. Modalities covered include: ultrasound, phonophoresis, diathermy, moist heat, cryotherapy, hyperbaric oxygen, hydrotherapy, massage, ultraviolet, light therapy, paraffin wax, mechanical compression, and pressure garments. In addition, wound care management in relation to tissue repair, wound debridement and dressings, sterile techniques, pressure garments, and universal precautions will be addressed. Laboratory sessions are included with the course and cover the practical guidelines and clinical parameters in the administration of the physical therapy physical 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 6340 ELECTROTHERAPEUTICS (2).** This course includes the theory of electrophysiology of the neuromuscular system and testing, interpretation, and the application of electrotherapeutic procedures (including galvanic tetanus ratio test, reaction of generation test, strength-duration curve and chronaxie test, facial nerve excitability test, repetitive stimulation tests, nerve conduction velocity testing, electromyographic evaluation, and biofeedback). The use of electrotherapeutic modalities for the treatment of neuromuscular, orthopedic, and integumentary disorders will be discussed and practiced. Laboratory experience is a major component of this course. The course is divided into four areas. The first area highlights the basics concepts of electricity and how these concepts are applied therapeutically. The second area focuses on the physiological effects of electricity as it applies to motor response, pain modulation, and tissue repair. The third area addresses the specific modalities used in electrotherapy, including: galvanic stimulation [including low and high volt stimulation] and iontophoresis; transcutaneous electrical nerve stimulation, microcurrent electrical nerve stimulation, Russian stimulation and interferential current; and biofeedback. The fourth area highlights basic electrophysiological testing, including: chronaxie, strength duration, reaction of degeneration, nerve conduction velocity, and basic EMG interpretation. Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

**PHTH 6350 CLINICAL MEDICINE II (3).** This course continues where clinical Medicine I left off, covering the principles and methods of clinical screening in physical therapy practice and to diagnostic imaging, laboratory testing and other medical diagnostic procedures. A progressive format for orthopedic, neuromuscular, and cardiovascular medical screening and the utilization of algorithms for the differential diagnosis in physical therapy is presented and the role of the physical therapist as it interfaces with the role of the physician is emphasized. This course will include differential diagnosis for pediatrics, and multicultural implication of various diagnostic conditions. Continuation of important concepts of pharmacology will be stressed, including classes of drugs, indications, therapeutic effects, side effects, and implications for physical therapy practice. Decision making skills related to physical therapy evaluation and therapeutic intervention will be emphasized throughout the course. The class will continue to cover various strategies to effectively and appropriately communicate with health care colleagues, patients, the medical community, and third party payers regarding medical diagnostic information and medical status. Prerequisites: Successful completion of all prior, required coursework and/or permission of the instructor

**PHTH 6360 CLINICAL EDUCATION I (3).** This course allows for the first formal exposure to clinical practice settings for 5 weeks in a clinical facility. It gives the student the opportunity to observe physical therapy evaluation and treatment of patients, as well as providing an opportunity to practice clinical skills learned during the first year of the program. The student will be assigned to a clinical facility for a five week period. Successful completion of all prior, required coursework and/or permission of the instructor; completion of required health records; successful passing of the structured clinical examination; and attainment of malpractice insurance; completion of criminal background check; and evidence of health insurance to cover the student through the duration of the clinical education period

**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 permission from instructor

**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 EDUCATION II (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 ACCE 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 of the instructor; completion of required health records; successful passing of the structured clinical examination; and attainment of malpractice insurance; completion of criminal background check; and evidence of health insurance to cover the student through the duration of the clinical education period

**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 7454 CLINICAL EDUCATION III (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. Prerequisites: Completion of first two years of study in the School of Physical Therapy

**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 7554 CLINICAL EDUCATION 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 facility 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 7564 CLINICAL EDUCATION V (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 facility 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
CLINICAL AFFILIATION AGREEMENT
BETWEEN

TENNESSEE STATE UNIVERSITY

AND

This Agreement is made this ________ day of _________, 20 ______ by and between TENNESSEE STATE UNIVERSITY, a Tennessee Board of Regents System institution, hereinafter referred to as “Institution”, and __________________________ hereinafter referred to as “Affiliate”.

Whereas, it is to the mutual benefit 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:

I. Purpose - The purpose of this agreement shall be to provide clinical experience to students enrolled in the Physical Therapy Program of the Institution.

   A. 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. The clinical experience shall be provided at the Affiliate’s Facility located at hereinafter referred to as “Facility”.

   C. The specific services to be provided students are described as follows.

      (1) Designate a staff member who is acceptable to the Institution as the Affiliate’s Clinical Education Coordinator to:

         (a) Direct and coordinate the student’s clinical education experience.

         (b) Provide a planned and supervised clinical education program utilizing observational opportunities and practical experiences for each student.

         (c) Provide for student orientation to the Affiliate facility.

         (d) Provide necessary feedback to the student to insure proper patient care.

         (e) Notify the Institution of any situation or problem which may
threaten a Student’s successful completion of the assignment.

(f) Evaluate each student's clinical performance and submit to the Institution a performance appraisal of the student, including the recommendation of a grade, at the end of the clinical assignment.

(g) Keep a current list of all personnel who, in any way, supervise students.

(2) Provide for the student a patient caseload that is appropriate to his/her needs and level of experience and proficiency and that is of sufficient size and variety to insure the best educational experience possible.

(3) 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 and at the discretion of the Clinical Education Coordinator.

(4) Notify the Institution in writing of any changes within the Affiliate Facility which would alter significantly the specified clinical education experiences for the student.

II. Terms and Conditions: Pursuant to the above-stated purpose, the parties agree as follows:

A. Terms:

(1) The terms and effective date of this Agreement shall be commencing and ending ____________________.

(2) Either party may terminate this Agreement upon giving sixty 60 days written notice to the other party. Such termination shall have no effect on students currently receiving clinical experience.

(3) This Agreement may be renewed with written approval of all parties for a total term of up to five years.

B. Placement of Students: As mutually agreed between the parties, the Institution will place an appropriate number of students at the Affiliate each academic term. The Institution shall notify the Affiliate at least sixty (60) days prior to the beginning of each clinical experience of the number of students it desires to place at the affiliate.
C. Discipline: 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.

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

1. Selection of students to be placed at the Affiliate facility.

2. Provide orientation to the Affiliate facility for students beginning clinical experience.

3. Scheduling training activities for students.

4. Maintain liaison with Affiliate facility for supervision of students at 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. Require written evidence of professional liability insurance coverage from individual students (and faculty, if applicable) participating in the experience. The minimum amount of coverage per individual shall be $1,000,000/$3,000,000. The coverage shall extend through the term of the student's participation.

9. Provide assurance to the Affiliate Facility that health insurance is in effect for students during their term of assignment.

10. Inform students that they will not submit for publication any material relating to the clinical education experience without prior written approval from the Institution and the Affiliate.
E. Affiliate Specific Responsibilities: The following duties shall be the specific responsibilities of the Affiliate:

(1) Retain complete responsibility for patient care, providing adequate supervision of students (and faculty, if applicable) at all times.

(2) 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.

(3) 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.

(4) 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.

(5) Confirm that physical therapy students be supervised by a licensed physical therapist with a minimum of one (1) year of full-time experience in a practice setting.

(6) The State of Tennessee is self-insured and does not carry or maintain commercial general liability insurance or medical, professional or hospital liability insurance. Any and all claims against the State of Tennessee, 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 institution shall be limited expressly to claims paid by the Claims Commission pursuant to T.C.A. Section 9-8-301 et. seq.

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

(1) Each party shall comply with all federal, state and municipal laws, advice, rules and regulations which are applicable to the performance of this Agreement, which shall include but not be limited to:

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 without 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 and Protected Health Information or Identifiable Health Information, other than as permitted by HIPAA Requirements and the terms of this Agreement.

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.

(2) Background Checks: 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.

If criminal background checks are required for Institutional faculty or staff, it shall be the Institution’s responsibility to arrange for the background check, to pay all costs associated with such checks and to provide the results to the Affiliate.

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. Institution shall take steps to ensure that this individual does not participate in the clinical program at the Affiliate.

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 ____Physical Therapy__ 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.

(3) Each party shall comply with all Federal, State, and Municipal laws, advice, rules and regulations which are applicable to the performance of this agreement.

(4) 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.

(5) 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.

(6) 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, and Section 504 of the Rehabilitation Act of 1973, Executive Order 11,246 and the related regulations to 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, handicap, Veteran status, or national origin.

(7) The parties also agree to take affirmative action to ensure that applicants are employed and that employees are treated during the employment without regard to their race, religion, creed, color, sex, age, handicap, Veteran status, or national origin. Such action shall include, but not be limited by the following: acceptance, upgrading, demotion or transfer, recruitment or recruitment advertising, termination, rates of pay or other forms of compensation, and selection available to employees and applicants for
employment.

(8) The confidentiality of patient records and student records shall be maintained at all times.

(9) The student(s), Institution physical therapy faculty, and the Affiliate physical therapy staff are expected to conduct themselves in accordance with the Code of Ethics as set forth by the American Physical Therapy Association. In addition, all persons are to abide by the Physical Therapy Practice Act of the State(s) in which the Affiliate and the Institution are located.

G. Miscellaneous Terms: The following terms shall apply in the interpretation and performance of this agreement:

(1) Neither party shall be responsible for personal injury or property damage or loss except that resulting from its own negligence or the negligence of those within its control.

(2) 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.

(3) This agreement shall in no way be interpreted as creating an agency or employment relationship between the parties.

(4) Deborah Edmondson, PT, Ed.D. is the Coordinator of Clinical Education for the Institution and can be reached at tel: 615-963-5945, fax: 615-963-5935, or email: dedmondson@tnstate.edu

(5) The Coordinator of Clinical Education for the Affiliate and can be reached at tel: ____________, fax: ________________, or email: ________________.

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

TENNESSEE STATE UNIVERSITY

BY: ____________________________
TITLE: President or Designee
DATE: __________________________

AFFILIATE

BY: ____________________________
TITLE: __________________________
DATE: __________________________
HCA Agreement
CLINICAL AFFILIATION AGREEMENT

BETWEEN

TENNESSEE STATE UNIVERSITY

AND

This Agreement is made this _____ day of _____________, 20___ by and between TENNESSEE STATE UNIVERSITY, a Tennessee Board of Regents System institution, hereinafter referred to as “Institution” and __________________, a Hospital Corporation of America (HCA) affiliate, hereinafter referred to as “Affiliate”.

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I. Purpose - The purpose of this agreement shall be to provide clinical experience to students enrolled in the Physical Therapy Program of the Institution.

A. 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. The clinical experience shall be provided at the Affiliate’s Facility located at hereinafter referred to as “Facility”.

C. The specific services to be provided students are described as follows.

(1) Designate a staff member who is acceptable to the Institution as the Affiliate's Clinical Education Coordinator to:

(a) Direct and coordinate the student's clinical education experience.

(b) Provide a planned and supervised clinical education program utilizing observational opportunities and practical experiences for each student.

(c) Provide for student orientation to the Affiliate facility.

(d) Provide necessary feedback to the student to insure proper patient care.

(e) Notify the Institution of any situation or problem which may threaten a Student’s successful completion of the assignment.
(f) Evaluate each student's clinical performance and submit to the Institution a performance appraisal of the student, including the recommendation of a grade, at the end of the clinical assignment.

(g) Keep a current list of all personnel who, in any way, supervise students.

(2) Provide for the student a patient caseload that is appropriate to his/her needs and level of experience and proficiency and that is of sufficient size and variety to insure the best educational experience possible.

(3) 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 and at the discretion of the Clinical Education Coordinator.

(4) Notify the Institution in writing of any changes within the Affiliate Facility which would alter significantly the specified clinical education experiences for the student.

II. Terms and Conditions: Pursuant to the above-stated purpose, the parties agree as follows:

A. Terms:

(1) The terms and effective date of this Agreement shall be commencing and ending _______________________.

(2) Either party may terminate this Agreement upon giving sixty _60_ days written notice to the other party. Such termination shall have no effect on students currently receiving clinical experience.

(3) This Agreement may be renewed with written approval of all parties for a total term of up to five years.

B. Placement of Students: As mutually agreed between the parties, the Institution will place an appropriate number of students at the Affiliate each academic term.

C. Discipline: 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.

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.

D. Institution Specific Responsibilities: The following duties shall be the specific responsibilities of the Institution:
(1) Selection of students to be placed at the Affiliate facility.

(2) Provide orientation to the Affiliate facility for students beginning clinical experience.

(3) Scheduling training activities for students.

(4) Maintain liaison with Affiliate facility for supervision of students at 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) Require written evidence of professional liability insurance coverage from individual students (and faculty, if applicable) participating in the experience. The minimum amount of coverage per individual shall not be less than $1,000,000 per occurrence and $3,000,000 in the annual aggregate, per program participant, with insurance carriers or self insurance programs approved by Facility and covering the acts and omissions of program participants.

(9) The coverage shall extend through the term of the students and faculty or staff’s (if applicable) participation. If such coverage is provided on a claims-made basis, then such insurance shall continue throughout the term of this Agreement and upon the termination of this Agreement, or the expiration or cancellation of the insurance, Institution shall require each individual participant to purchase tail coverage for a period of three years after the termination of this Agreement or the expiration or cancellation of the claim-made coverage (said tail coverage shall be in amounts and type equivalent to the claims-made coverage.)

(9) Provide assurance to the Affiliate Facility that health insurance is in effect for students during their term of assignment.

(10) Inform students that they will not submit for publication any material relating to the clinical education experience without prior written approval from the Institution and the Affiliate.

(11) The Institution shall provide health records of students (and faculty, if applicable) upon request by the Affiliate. Students and Faculty (if applicable) will present the following health records on the first day of their educational experience at Facility (individuals will not be allowed to commence experiences until all records have been presented):
(i) Tuberculin skin test within the past 12 months or documentation as a previous positive reactor; and,

(ii) Proof of Rubella and Rubeola immunity by positive antibody titers or 2 doses of MMR; and,

(iii) Varicella immunity, by positive history of chickenpox or proof of Varicella immunization; and,

(iv) Proof of Hepatitis B immunization or declination of vaccine, if patient contact is anticipated.

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

(1) Retain complete responsibility for patient care, providing adequate supervision of students (and faculty, if applicable) at all times.

(2) 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.

(3) 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.

(4) 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.

(5) Confirm that the student(s) shall be supervised by a licensed physical therapist with a minimum of one (1) year of full-time experience in a practice setting.

(6) The State of Tennessee is self-insured and does not carry or maintain commercial general liability insurance or medical, professional or hospital liability insurance. Any and all claims against the State of Tennessee, 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 institution shall be limited expressly to claims paid by the Claims Commission pursuant to T.C.A. Section 9-8-301 et. seq.

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

(1) Each party shall comply with all federal, state and municipal laws, advice, rules and regulations which are applicable to the performance of this Agreement, which shall include but not be limited to:
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 without 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 and Protected Health Information or Individually Identifiable Health Information, other than as permitted by HIPAA Requirements and the terms of this Agreement.

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.

(2) Background Checks: 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.

If criminal background checks are required for Institutional faculty or staff, it shall be the Institution’s responsibility to arrange for the background check, to pay all costs associated with such checks and to provide the results to the Affiliate. 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. Institution shall take steps to ensure that this individual does not participate in the clinical program at the Affiliate.

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 Physical Therapy 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.

[If desired, a list of the checks to be run, along with the disqualifying criteria of the Affiliate can be referenced and affixed as an Addendum.]

(3) Each party shall comply with all Federal, State, and Municipal laws, advice, rules and regulations which are applicable to the performance of this agreement.

(4) 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.

(5) 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.

(6) 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, and Section 504 of the Rehabilitation Act of 1973, Executive Order 11,246 and the related regulations to 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, handicap, Veteran status, or national origin.

(7) The parties also agree to take affirmative action to ensure that applicants are employed and that employees are treated during the employment without regard to their race, religion, creed, color, sex, age, handicap, Veteran status, or national origin. Such action shall include, but not be limited by the following: acceptance, upgrading, demotion or transfer, recruitment or recruitment advertising, termination, rates of pay or other forms of compensation, and selection available to employees and applicants for employment.

(8) The confidentiality of patient records and student records shall be maintained at all times.

(9) The student(s), Institution physical therapy faculty, and the Affiliate physical therapy staff are expected to conduct themselves in accordance with the Code of Ethics as set forth by the American Physical Therapy Association. In addition, all persons are to abide by the Physical Therapy Practice Act of the State(s) in which the Affiliate and the Institution are located.

G. Miscellaneous Terms: The following terms shall apply in the interpretation and performance of this agreement:

(1) Neither party shall be responsible for personal injury or property damage or loss except that resulting from its own negligence or the negligence of those within its control.
2. 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.

3. This agreement shall in no way be interpreted as creating an agency or employment relationship between the parties.

4. Entire Agreement. This Agreement and its accompanying Exhibits, made a part hereof, set forth the entire Agreement with respect to the subject matter hereof and supersedes all prior agreements, oral or written, and all other communications between the parties relating to such subject matter. This Agreement may not be amended or modified except by mutual written agreement. All continuing covenants, duties and obligations herein shall survive the expiration or earlier termination of this Agreement.

5. Severability. If any provision of this Agreement is held to be invalid or unenforceable for any reason, this Agreement shall remain in full force and effect in accordance with its terms disregarding such unenforceable or invalid provision.

6. No Waiver. Any failure of a party to enforce that party’s right under any provision of this Agreement shall not be construed or act as a waiver of said party’s subsequent right to enforce any of the provisions contained herein.

7. Governing Law. This Agreement shall be governed and construed in accordance with the laws of the State of Tennessee.

8. Assignment; Binding Effect. Institution may not assign or transfer any part of its rights, duties or obligations under this Agreement, in whole or in part, without the prior written consent of Affiliate. This Agreement shall inure to the benefit of, and be binding upon, the parties hereto and their respective successors and permitted assigns.

9. School Status. Affiliate reserves the right to terminate this contract and/or exclude any program participant upon the finding that Institution or any program participant has been: (i) excluded, debarred or otherwise become ineligible to participate in the Federal health care programs as defined in 42 U.S.C. Section 1320a-7b(f) (the “Federal health care programs”); (ii) convicted of a criminal offense related to the provision of health care items or services but has not yet been excluded, debarred or otherwise declared ineligible to participate in the Federal health care programs; or, (iii) is under investigation or otherwise aware of any circumstances which may result in the Institution or a program participant being excluded from participation in the Federal health care programs.
Notices. All notices hereunder by either party to the other shall be in writing, delivered personally, by certified or registered mail, return receipt requested, or by overnight courier, and shall be deemed to have been duly given when delivered personally or when deposited in the United States mail, postage prepaid, addressed as follows:

If to Affiliate:_________________________________________________
_________________________________________________
Attention: Chief Executive Officer

Copy to: HCA Legal Department
One Park Plaza
Building 1, 2E
Nashville, TN 37203
Attn: Operations Counsel

If to Institution:  Tennessee State University, Physical Therapy Dept.
3500 John A. Merritt Blvd.
Nashville, Tenn. 37209-1561
Attention: Deborah Edmondson

or to such other persons or places as either party may from time to time designate by written notice to the other.

11. No Requirement to Refer. Nothing in this Agreement requires or obligates Institution to admit or cause the admittance of a patient to Facility or to use Facility’s services. None of the benefits granted pursuant to this Agreement is conditioned on any requirement or expectation that the parties make referrals to, be in a position to make or influence referrals to, or otherwise generate business for the other party.

Deborah Edmondson, PT, Ed.D. is the Coordinator of Clinical Education for the Institution and can be reached at tel: 615-963-5945, fax: 615-963-5935, or email: dedmondson@tnstate.edu

____________________________ the Coordinator of Clinical Education for the Affiliate and can be reached at tel: ____________________, fax: ____________________ or email:

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

TENNESSEE STATE UNIVERSITY     AFFILIATE

BY: ____________________________    BY: ____________________________
TITLE: President or Designee      TITLE: ____________________________
DATE: ___________________________   DATE: ___________________________
Exhibit A

Background Check Requirements

The background check for students shall include the following:

(i) Social Security Number Verification

(ii) Criminal Search (7 years or up to 5 criminal searches);

(iii) Employment Verification to include reason for separation and eligibility for re-employment for each employment;

(iv) Violent Sexual Offender and Predator Registry search;

(v) HHS/OIG List of Excluded Individuals/Entities;

(vi) GSA List of Parties Excluded from Federal Programs;

(vii) U.S. Treasury, Office of Foreign Assets Control (OFAC), List of Specially Designated Nationals (SDN);

(viii) Applicable State Exclusion List, if one.

The background check for staff/faculty, if licensed or certified caregivers, shall include all of the above and, in addition, shall include the following:

(i) Education verification (highest level);

(ii) Professional License Verification;

(iii) Certification & Designation Check;

(iv) Professional Disciplinary Action Search;

(v) Department of Motor Vehicle Driving History, based on responsibilities;

(vi) Consumer Credit Report, based on responsibilities.

Should the background check disclose adverse information as to any student and/or member of the staff/faculty, Institution shall immediately remove such individual from participation in the Program at the Affiliate.
Exhibit B

Statement of Responsibility

For and in consideration of the benefit provided the undersigned in the form of experience in a clinical setting at ________________ (“Affiliate”), the undersigned and his/her heirs, successors and/or assigns do hereby covenant and agree to assume all risks and be solely responsible for any injury or loss sustained by the undersigned while participating in the Program operated by ________________ (“Institution”) at Affiliate unless such injury or loss arises solely out of Affiliate’s gross negligence or willful conduct.

___________________________
Signature of Student / Print Name

___________________________
Date

___________________________
Parent or Legal Guardian if Student is under 18 /Print Name

___________________________
Date
Exhibit C
PROTECTED HEALTH INFORMATION, CONFIDENTIALITY, AND SECURITY AGREEMENT

Protected Health Information (PHI) includes patient information based on examination, test results, diagnosis, response to treatment, observation, or conversation with the patient. This information is protected and the patient has a right to the confidentiality of his or her patient care information whether this information is in written, electronic, or verbal format. PHI is individually-identifiable information that includes, but is not limited to, patient’s name, account number, birthdate, admission and discharge dates, photographs, and health plan beneficiary number. Medical records, case histories, medical reports, images, raw test results, and medical dictations from healthcare facilities are used for student learning activities. Although patient identification is removed, all healthcare information must be protected and treated as confidential.

Students enrolled in school programs or courses and responsible faculty are given access to patient information. Students are exposed to PHI during their clinical rotations in healthcare facilities. Students and responsible faculty may be issued computer identifications (IDs) and passwords to access PHI.

Initial each to accept the Policy

___ 1. It is the policy of the school/institution to keep PHI confidential and secure.

___ 2. Any or all PHI, regardless of medium (paper, verbal, electronic, image or any other), is not to be disclosed or discussed with anyone outside those supervising, sponsoring or directly related to the learning activity.

___ 3. Whether at the school or at the clinical site, students are not to discuss PHI, in general or in detail, in public areas under any circumstances, including hallways, cafeterias, elevators, or any other area where unauthorized people or those who do not have a need-to-know may overhear.

___ 4. Unauthorized removal of any part of original medical records is prohibited. Students and faculty may not release or display copies of PHI. Case presentation material will be used in accordance with healthcare facility policies.

___ 5. Students and faculty shall not access data on patients for whom they have no Responsibilities or a “need-to-know” the content of PHI concerning those patients.

___ 6. A computer ID and password are assigned to individual students and faculty. Students and faculty are accountable for all work done under the associated assess.

___ 7. Computer IDs or passwords may not be disclosed to anyone. Students and faculty are prohibited from attempting to learn or use another person’s computer ID or password.

___ 8. Students and faculty agree to follow Hospital’s privacy policies.

___ 9. Breach of patient confidentiality by disregarding the policies governing PHI is grounds for dismissal from the Hospital.

I agree to abide by the above policies and other policies at the clinical site. I further agree to keep PHI confidential.

I understand that failure to comply with these policies will result in disciplinary actions.

I understand that Federal and State laws govern the confidentiality and security of PHI and that unauthorized disclosure of PHI is a violation of law and may result in civil and criminal penalties.

____________________________________________
Signature of Student / Print Name

____________________________________________
Date

____________________________________________
Parent or Legal Guardian if Student is under 18/Print Name

____________________________________________
Date
TSU-17-0061 (A) – 14-13670  Tennessee State University does not discriminate against students, employees, or applicants for admission or employment on the basis of race, color, religion, creed, national origin, sex, sexual orientation, gender identity/expression, disability, age, status as a protected veteran, genetic information, or any other legally protected class with respect to all employment, programs and activities sponsored by Tennessee State University. The following person has been designated to handle inquiries regarding non-discrimination policies: Tiffany Cox, Director, Office of Equity and Inclusion, rseay@tnstate.edu, 3500 John Merritt Blvd., McWherter Administration Building, Suite 260, Nashville, TN 37209, 615-963-7435. The Tennessee State University policy on nondiscrimination can be found at www.tnstate.edu/nondiscrimination.