

LAREDO COLLEGE

PHYSICAL THERAPIST ASSISTANT DEPARTMENT



**LAREDO
COLLEGE**

EST. 1947

CLINICAL EDUCATION HANDBOOK

2023-2024

PREFACE

The PTA Clinical Faculty Handbook was developed for use by clinical instructors assigned students from the Physical Therapist Assistant Program at Laredo College (LC). It is designed to aid in the orientation of clinical instructors and to serve as a working guide during the student's clinical education experience.

This handbook is to be used to supplement the Laredo College Board Manual of Policy, the LC Student Handbook, and the PTA Program Student Handbook.

This handbook contains forms and other tools that will assist you in performing your role as a clinical instructor (CI) to the student physical therapist assistant. The Academic Coordinator of Clinical Education (ACCE) will be available to you to answer questions during the student's clinical rotation. The ACCE will meet with you each clinical rotation as needed to discuss student progress. Appointments for these meetings will be scheduled by the ACCE.

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GENERAL PTA PROGRAM INFORMATION

Mission

The mission of Laredo College's Physical Therapist Assistant Program is to provide a quality education that transforms students into caring, knowledgeable, and skilled entry-level physical therapist assistants committed to safe and ethical practice to meet the healthcare needs in the community and the region.

Vision

The PTA Program at Laredo College seeks to foster learning through quality instruction which will prepare graduates to serve the community's healthcare needs.

The PTA program has developed goals that foster the mission and vision of the program.

Goals

1. Graduates will demonstrate competent and safe entry-level practice.
2. Graduates will exhibit professional behaviors and adhere to ethical practice consistent with the profession and licensure regulations.
3. Graduates will participate in professional growth and lifelong learning activities.
4. The program will produce graduates who will obtain licensure and effectively transition to a physical therapist assistant career.
5. PTA Program faculty will maintain contemporary expertise.

Outcomes

Graduate Outcomes

1. The PTA graduate will be rated good to excellent in the provision of competent and safe patient care under the supervision of a physical therapist by 100% of employers surveyed (Goal 1).
2. PTA graduates will rate themselves good to excellent in the provision of competent and safe patient care under the supervision of a physical therapist by 100% of graduates surveyed (Goal 1).
3. The PTA graduate's professional behaviors will be rated good to excellent by 100% of employers surveyed (Goal 2).
4. The PTA graduate's adherence to ethical standards of practice will be rated good to excellent by 100% of employers surveyed (Goal 2).
5. The PTA graduate's participation in professional development activities will be rated as good to excellent by 100% of graduates surveyed (Goal 3).

Program Outcomes

1. PTA program graduates will have a 95% first-time pass rate on the licensure exam as evidenced by the NPTAE examination results. (Goal 4)
2. One hundred percent of program graduates seeking employment will be employed as PTAs within 12 months of passing the licensure exam. (Goal 4)

Faculty Outcomes

3. One hundred percent of full-time faculty will complete one faculty development activity related to their teaching content area (Goal 5).

Student Learning Outcomes

The Physical Therapist Assistant Program has established central Student Learning Outcomes that are threaded throughout the program's curriculum and correlate to each course's educational objectives.

Upon completion of the PTA Program, the graduate will be able to:

1. Implement physical therapy interventions using appropriate problem-solving skills to progress a patient or modify interventions according to the plan of care established by the physical therapist. (G 1, 4)
2. Demonstrate competent data collection techniques to measure patient progress within the plan of care. (G 1, 4)
3. Demonstrate safe practice in providing physical therapy interventions to reduce risk to patients and others. (G 1, 4)
4. Communicate effectively and appropriately with the physical therapist, families, caregivers and healthcare team members to foster the achievement of therapeutic goals. (G1, 2, 4)
5. Educate patients and others using appropriate instruction methods that the learner understands. (G1, 2, 4)
6. Document relevant information related to physical therapy care according to practice guidelines. (G 1, 4)
7. Display professional behavior when working with patients, families, and other healthcare professionals to facilitate effective patient care (G 2, 4)
8. Exhibit ethical behavior in the delivery of physical therapy services consistent with the practice of the physical therapist assistant. (G2, 4)
9. Assess the efficacy of interventions using professional literature to facilitate achieving therapeutic goals. (G3)

CLINICAL FACULTY ROLES AND REQUIREMENTS

Clinical Instructor Qualifications

Clinical staff includes the Center Coordinators of Clinical Education (CCCE) and the Clinical Instructor (CI) assigned to students. The clinical staff are not paid employees of the college. The following criteria must be met in order to serve as a CI:

1. Must be a graduate of an accredited program in physical therapy education and be licensed in the state of Texas as either a physical therapist or physical therapist assistant
2. Have at least one year of clinical experience in patient care
3. Be willing to accept students and participate in student education
4. Provide effective learning experiences in collaboration with the student
5. Communicate performance expectations to the student and provide constructive feedback in a timely manner
6. Serve as a role model through the delivery of safe and ethical patient care
7. Agree to meet and communicate regularly with the ACCE as may be required
8. Document skill mastery or lack thereof in the PTA MACS, complete surveys and/or requests for information as necessary
9. Traveling physical therapists or physical therapist assistants may be used on a temporary basis in facilities that have lost a regular employee who served as the Center Coordinator for Clinical Education or Clinical Instructor, provided the above criteria have been met

Clinical Instructor Responsibilities for Teaching Effectiveness

Before the Start of the Clinical Experience:

1. Review email sent by ACCE containing student information and clinical course objectives listed in the course syllabus
2. Review the LC PTA Clinical Education Handbook
3. Review the Mandatory Clinical Skills Requirement List
4. Review the PTA MACS CI User Manual describing the use of the e-PTA MACS
5. Schedule a student orientation to the facility, staff, departmental policies and procedures
6. At least two weeks prior to the scheduled start date, inform the student about the following: clinical hours of operation, daily schedule, dress code, parking, department phone number, and other pertinent information to facilitate student preparation for the first day of the clinical

During the Clinical Experience:

1. The following should be completed the first day: provide student orientation as listed above; discuss goals of the clinical experience based on course syllabi objectives and the mandatory clinical skills required to be completed for the clinical
2. Provide proper student supervision during patient care that allows appropriate independence according to the level of the clinical rotation.
3. Ensure that a patient gives consent to the student participating in their care
4. Provide opportunities for the student to discuss patients/clients, questions, concerns, or problems
5. Encourage problem-solving during patient care
6. If the CI is a PTA, ensure that the student has regular contact with the supervising PT to discuss issues related to the patient's care (i.e. patient's progress, lack of progress, regression, etc.)
7. Provide the student with ongoing and timely constructive feedback regarding strengths and weaknesses related to clinical performance (i.e. professional behaviors, skills, etc.) and progress towards goals
8. Monitor whether the student implements the changes recommended based on feedback provided
9. Review the Weekly Summary Report ([Appendix A](#)) and discuss CI summary report findings with the student
10. Provide opportunities for student exposure to additional experiences, if available, including observation of other healthcare disciplines, observation of surgery, etc.
11. Serve as a role model for professional behaviors, and safe/ethical practice
12. Complete student midterm evaluation prior to the ACCE's midterm visit and final evaluation prior to the end of the clinical experience based on objective information
13. Meet with the student to review the midterm and final evaluation, ensuring that all documents are signed
14. Contact the ACCE immediately should questions or concerns arise regarding student performance related to professional behaviors, safety issues, or clinical skills
15. Arrange for the student to be supervised by another PT/PTA if the CI will not be on-site

Clinical Instructor Evaluation

Clinical instructors will be evaluated by students assigned to that facility by completing the Student Evaluation of Clinical Education Experiences (SECEE) form found in the PTA MACS at the conclusion of each clinical experience. Clinical instructors will also be evaluated by the ACCE via the Student-CI Teaching Effectiveness Tool (see [Appendix B](#)), exit interviews conducted by the ACCE with students at conclusion of each clinical experience, and graduate surveys. The ACCE will discuss findings with the CCCE or designated clinical instructor to provide positive or constructive feedback on previously assigned students concerning the student's clinical experience and the effectiveness of the clinical instructor. Clinical instructors will also be required to complete a CI Self-Assessment (see [Appendix C](#)).

Development of the Clinical Instructor

One program expectation is that the clinical instructor will possess the appropriate qualifications to serve as a clinical instructor for the PTA Program's students. Effectiveness of the clinical instructor will be based on ACCE interviews with clinical staff during midterm on-site visits, SECEE form, and exit interviews conducted by the ACCE with students after each rotation.

If the ACCE determines that a clinical instructor lacks the expertise to provide effective instruction based on the data collected from these sources, then the ACCE will provide the clinical instructor with a professional development in-service onsite. Topics will be based on the areas of deficiency identified, and can include, but are not limited to:

- Use of the PTA MACS
- Dealing with Students in the Clinical Setting

If after the in-service is completed and the data collected still reflects a deficit, then the clinical instructor will not be given any further clinical education assignments.

Clinical Instructor Evaluation of the ACCE

Clinical instructors will assess the ACCE via the Performance Assessment of ACCE Clinical Instructor Survey, to provide additional feedback and enhance the clinical education program (see [Appendix D](#)).

Communication with Clinical Education Instructors

The ACCE will communicate with Clinical Coordinators of Education (CCCE) and the respective clinical members assigned to students as Clinical Instructors (CI) via email to confirm site availability, to inform the site of student placement, midterm visits, etc. Information may also be further clarified via telephone as deemed appropriate.

GENERAL STUDENT PROCEDURES

Student Records and Privacy During Clinical Rotations

Clinical coordinators of education and clinical instructors will have access to student directory information, including student name, address and phone. They will also be informed whether students' health information documents have been submitted and satisfy LC requirements as required for placement of students at clinical affiliation sites.

The health information verified by the ACCE may include, but is not limited to:

- Student name, address, and phone
- Current CPR certification
- Current immunizations
- Negative TB skin test or chest x-ray
- Physical Exam
- Drug test results
- Criminal background check results
- Student liability insurance

Clinical staff is responsible for making provisions to ensure protection of student records against invasion of privacy according to clinical facility policy. These records include: student directory information, Clinical Evaluation Tools (PTA MACS), anecdotal notes, CI/student conferences, ACCE/CI conferences. **CCCEs and CIs are reminded that it is their responsibility to keep student information confidential.**

At the discretion of certain clinical sites, the student may be required to provide physical documentation to said clinical sites before starting the clinical experience. The Program Director/ACCE will provide direction regarding the submission of documents and time frames.

The following documents may be required for submission by the student to the clinical site:

- A negative criminal background check completed through www.Castlebranch.com and the local sheriff's office
- Negative 10-panel drug screen
- Immunization records
- Negative COVID-19 test(s)
- Recommended: Some clinical agencies may require the COVID-19 vaccine. As a guest in the facility, programs must adhere to the agency's requirements. If a student chooses to not take the vaccine, an exemption waiver request may be submitted to the facility. If denied, the student may be unable to complete the clinical requirements and may need to "withdraw" from the course.

Students must submit documentation as deemed necessary to avoid clinical site(s) refusing placement to a student who does not provide the requested records.

Student Complaint Process

Student Complaints - Informal Process

The PTA Program adheres to the [Student Complaints Policy](#) FLD(Local) as stated in the LC Manual of Policy. If the complaint involves a problem with an instructor, the student shall discuss the matter with the instructor before requesting a conference with the program director at Level One. Concerns should be expressed as soon as possible to allow early resolution at the lowest possible administrative level.

Student Complaints - Formal Process

Laredo College has a formal process to address issues that have not been resolved through the established Laredo College Student Complaints Informal Process. Students who wish to file a formal complaint must follow the Laredo College [Student Complaints Policy](#) FLD(Local) outlined in the LC Manual of Policy.

Complaints About the PTA Program, Faculty, Students, or Program Graduates

Community members may submit concerns or complaints about Laredo College's PTA Program, faculty, students, or program graduates. Comments must be submitted by completing the Complaint Referral Form available online on the PTA Program's website ([Complaints](#)). Completed forms should be emailed to the PTA Program Director at esmeralda.vargas@laredo.edu.

The PTA Program Director and PTA faculty will review and investigate all complaints made against program faculty, a PTA student, or a graduate. They will address the concerns and identify methods to resolve the issue. If the issue is not resolved, then the complaint should proceed with the appropriate chain of command:

1. Program Director
2. Dean of Health Sciences
3. Provost/Vice President of Academic Affairs

Records of the complaint forms will be kept for two years in a locked file in the Physical Therapist Assistant Department Office.

Complaints regarding the accreditation of this program and CAPTE itself should be addressed to the Commission on Accreditation in Physical Therapy Education (CAPTE). For further information, refer to [File a Complaint](#) (www.capteonline.org/Complaints/).

Neither the Board nor any College employee shall unlawfully retaliate against any general public member for bringing a concern or complaint.

CLINICAL EDUCATION

The PTA Program curriculum at Laredo College provides the student with three full-time general clinical experiences during the first and second years of the program.

Clinical I (summer session I of the 1 st year):	160 hours (4 weeks)
Clinical II (spring semester of the 2 nd year):	224 hours (7 weeks)
Clinical III (spring semester of the 2 nd year):	240 hours (6 weeks)

The student is assigned to a clinical instructor who is a physical therapist or physical therapist assistant with a minimum of one-year of experience and is an employee of the facility and ultimately responsible for the care of the clinical instructor's patients when a student is involved in that particular patient's care.

Readiness for Clinical Experiences

Before starting the first clinical rotation, the student must have demonstrated competency by satisfactorily completing all the required courses during the first year of the PTA Program. Student competency will be demonstrated by passing all professional behavior requirements, didactic tests, competency skill checks, and critical and safety components of lab practical exams with a grade of 70% or better to be considered as possessing safe behaviors and skills necessary to progress to a clinical rotation (refer to Appendix E, [First Year Expected Competencies](#)). If the student has not completed those requirements satisfactorily, the student will not be allowed to begin the first clinical rotation and will be dismissed from the program.

Before the start of the second clinical rotation, the student must have demonstrated competency by passing all professional behavior requirements, required didactic coursework, including tests, competency skill checks, critical and safety components of lab practical exams, and the first clinical rotation with a grade of 70% or better before the spring semester of the second year (refer to Appendix E, [Second Year Expected Competencies](#)). If the student has not completed those courses satisfactorily, the student will not be allowed to begin the second clinical rotation and will be dismissed from the program.

To progress to the third clinical rotation, the student must have demonstrated competency in PTHA 2361 Clinical Rotation II by mastering 80% of the skills identified for the PTA MACS and completing the second clinical rotation with a grade of 70% or better. Competency will be demonstrated in PTHA 2362 Clinical Rotation III by mastering 90% of skills identified for the PTA MACS and completing the third clinical

rotation with a grade of 70% or better. If the student does not complete those requirements satisfactorily, the student will be dismissed from the program (refer to Evaluation of Student Clinical Skills, [page 15](#)).

Verification of Documents

The ACCE is responsible for verifying that students have submitted copies of the required documentation to the Immunization tracker in Castlebranch. Before the clinical experience, the student must have documented proof of the following:

1. Physical exam
2. Required immunizations: Hepatitis A; Hepatitis B vaccine series (HBV); measles, mumps, rubella (MMR); varicella (chickenpox) vaccine or documented exposure; Tetanus/Diphtheria/Pertussis (Tdap); bacterial meningitis; flu vaccine
3. Current TB skin test (annual)/chest x-ray (every two years)
4. Current American Heart Association BLS Healthcare Provider CPR Certification
5. Negative criminal background check
6. Proof of negative drug 10-panel drug screen
7. Student liability insurance
8. Blood-borne pathogen training

**The student will assume full costs of the physical exam, immunizations, CPR certification, criminal background check and drug test.

Student Liability Insurance

All PTA students must obtain professional liability insurance before being allowed onto the clinical site. This insurance fee is included in the tuition fees for the fall semester courses.

Conduct

The student must be aware of and abide by the facility's policies & procedures APTA's Value-Based Behaviors; Standards of Practice for Physical Therapy; Standards of Ethical Conduct for the PTA; State of Texas Physical Therapy Practice Act; the PTA Program policies & procedures; and the Code of Conduct policies listed in the LC Student Handbook.

The clinical site reserves the right to refuse admission to any student involved in any activity not considered professional or conducive to proper patient care. **If the student is asked to leave the clinical for just cause and the ACCE/Program Director substantiates this after further investigation, the student will be dismissed from the program.**

Students will adhere to the following:

1. Students will always conduct themselves in a professional manner. Unwarranted conversation, giggling, excessive noise, inappropriate laughter, dirty jokes, gossip, and loitering are unprofessional behavior that will not be tolerated.
2. Students will not discuss personal problems with patients or staff.
3. Students will not engage in conversations with staff or fellow students within the patient's hearing range that is not intended for the patient to hear.
4. Student cell phone use in the clinical setting is prohibited (see [Use of Electronic Devices](#) policy) unless required by the facility. Electronic devices should only be used during a scheduled break (lunch period). Emergency use of phones or other electronic devices should be discussed with the clinical instructor first.
5. Students will not chew gum or eat/drink in front of patients.
6. The student must provide the clinical instructor with current emergency telephone numbers and home telephone numbers.
7. The student will always remain busy in the clinic via direct patient care, observing treatment by another discipline, observing a new treatment technique, reading a textbook, or reviewing a lesson, etc.
8. The student will not leave the clinic area without permission from the clinical instructor nor leave early for lunch or at the end of the day.
9. If the clinical instructor must leave early or is absent, it is the student's responsibility to determine who will substitute for the clinical instructor and relay this information to the ACCE. **Only licensed physical therapy personnel may supervise a student, NOT a physical therapy tech or aide.**
10. The student will not discuss other patients, CIs, personnel or clinical sites.
11. The student will be courteous to patients and staff, conducting themselves in a professional manner at all times.
12. The student will not become personally involved with a patient.
13. The student will not become personally involved with clinical staff during the length of the clinical rotation, including after hours.
14. The student will direct any concerns or issues with the ACCE or Program Director related to the clinical facility or clinical instructor.

Confidential Information

The Physical Therapist Assistant Program students will abide by the Health Insurance Portability and Accountability Act (HIPAA) to safeguard the confidentiality of health record information. All hospital and clinic records are confidential, and any requests for information concerning a patient should be referred to the clinical instructor. No component of a patient's medical record shall be copied or removed (written or electronic). Patient information should only be discussed with the clinical instructor in a private venue. **Violation of HIPAA or confidentiality policy will lead to dismissal from the program.**

Students are reminded not to discuss classmates' performance nor criticize previous clinical sites or clinical instructors with individuals at the current clinical site.

Clinical Orientation

All students in the PTA Program must attend a mandatory orientation of local acute care facilities annually (Laredo Medical Center, Doctor's Hospital, and Laredo Specialty Hospital). Other clinical sites may require students to attend an orientation before starting their assigned clinical. Failure to attend will preclude a student from attending starting a clinical rotation. An accurate record of a student's attendance will be maintained.

The ACCE will conduct a student orientation before the start of the clinical rotation to review clinical course requirements, including identified skills from PTA MACS for mastery, course syllabus, course assignments, and grading criteria, and use of EXXAT, the education management platform used to access the digital PTA MACS.

Clinical Site Assignments

The PTA Program strives to provide the student with three clinical experiences to include inpatient and outpatient settings. Students will treat various medical conditions, including medical, orthopedic, and neurological conditions. The ACCE will confirm availability with clinical sites prior to assigning a student to that location. The ACCE will only assign a student to a clinical education site based on the following criteria:

1. The site has a current written affiliation agreement with Laredo College
2. The type of clinical setting is needed to fulfill skill requirements based on clinical course objectives
3. The student has received didactic preparation consistent with the clinical site assigned.

Students' input concerning the type of setting that interests them is welcomed. However, the PTA Program/ACCE makes the ultimate decision regarding placement. Clinical experiences may be assigned out of town. PTA program students living outside Laredo are not guaranteed placement in a clinical site near their hometown.

The ACCE will send clinical faculty, including the Center Coordinator of Clinical Education (CCCE) and Clinical Instructor (CI) assigned to students, an email providing the following information:

1. Student biographical information (name, contact information, learning style, student introduction, previous learning experiences)
2. Length of clinical rotation with start and end dates and calendar showing midterm visit schedule
3. List of verified documents (including TB skin test, immunizations, physical exam, Hepatitis B series completed, CPR certification, liability insurance, negative drug screen, cleared criminal background check, and completion of orientation as required for Doctor's Hospital of Laredo, Laredo Medical Center and Laredo Specialty Hospital)

A link is also provided to Cis with the following clinical education documents available on the PTA Program website:

1. Clinical course syllabus
2. Clinical Skills Requirement List
3. Academic skills learned (First Year and Second Year Expected Competencies)
4. User manual for the e-PTA MACS
5. LC PTA Program Clinical Faculty Handbook

Inservices

Students must provide a short inservice to the therapy or facility staff during all three clinical affiliations. Students will be provided with details in the respective clinical course syllabus.

Student Responsibility for Clinical Education

Student Transportation

The student is expected to provide their own transportation to and from the clinical site and is responsible for costs incurred with off-campus travel. The student is expected to report on time to the appropriate assigned agency.

Travel, Housing, and Other Expenses

Since many of our clinical site affiliates are based out-of-town, students can anticipate completing at least one (1) clinical experience out-of-town. The student is responsible for all costs incurred during the clinical education experience (i.e. gas, lodging, meals, etc.).

Structure of Clinical Education

Students will complete three clinical experiences starting summer session I of the first year. Each of the three clinical rotation courses consists of specific objectives and competency requirements to be met by each student. The overall structure of the program's clinical education component reflects a progression of required competencies. To progress to the next level within the PTA Program, the student must demonstrate mastery of the minimum number of skills required for each clinical education experience.

Student Supervision

A clinical instructor (CI), who is a physical therapist or physical therapist assistant, will be assigned to each student and will be responsible for student supervision, which may include reviewing the facility's safety policies before the start of each experience, scheduling student hours, data collection, patient treatment interventions, and assessment of clinical skills. The student will report directly to the clinical instructor. The ACCE will conduct regular site visits and communicate via telephone or email, to consult with the clinical instructor and the student regarding student progress and problems.

If the CI is unavailable on-site, another licensed PT/PTA who is on-site may be assigned to that student for that period. If there is no PT/PTA on-site while the student is on their clinical experience, the student may perform non-patient care duties (i.e., medical record review, documentation, in-service preparation, observe other healthcare practitioners). Students must contact the ACCE immediately if supervision violates these guidelines.

Obtaining Patient Informed Consent

Before initiating a physical therapy procedure with a patient, a student will introduce themselves as a student PTA, explain the treatment or data collection technique that will be performed, and obtain the patient's consent. A patient has the right to decline to receive treatment from the student.

Evaluation of Student Clinical Skills

The student and clinical instructor will receive the Clinical Skills Requirement List at the onset of each clinical affiliation. The clinical facility will provide the student with opportunities to complete the required skills and will assess the student based on entry-level practice (Refer to the *PTA MACS* for the definition of entry-level). The assessment will be based on the criteria described in the *PTA MACS* clinical assessment tool.

The student must ensure that all required skills are completed by the end of the clinical experience.

To ensure that the student achieves the required skills, weekly meetings between the student and the clinical instructor will be required to identify the required skills to be addressed and to arrange for opportunities to work on those skills. A completed summary of the student's weekly progress will be submitted to the ACCE weekly. (Refer to [Appendix A](#)). The ACCE will also monitor student clinical progress via telephone or email as needed and will conduct midterm site visits. Students must be graded entry-level (√) on minimum required skills and the final CI rating on the VAS scale, and achieve a grade of "C" or better to consider the clinical experience passed.

The ACCE will determine final clinical rotation grades based on grading criteria listed in the course syllabus.

Students who demonstrate poor performance on any critical element within the PTA MACS or who require clinical remediation will be required to:

1. Be counseled and receive a written evaluation of the behavior delineating corrective measures.
2. If necessary, refer the student to the ACCE for an assignment or tutoring as designated by the instructor. It is the student's responsibility to meet with the course instructor.

Student Evaluation of Clinical Experience

The student will also assess their clinical experience after the clinical affiliation using the Student Evaluation of Clinical Education Experiences form (SECEE), a component of the *PTA MACS*. This data will aid the PTA Program faculty in assessing the clinical site and the clinical instructor. Students will also assess the ACCE via the Performance Assessment of ACCE Student Survey (see Appendix F), and complete a clinical exit interview with the ACCE to provide additional feedback on the clinical experience.

After completing the last clinical education course, terminal objectives are evaluated to assess final competency and entry-level skills.

Clinical Education Attendance

To meet accreditation requirements, 100% attendance is required in all clinical affiliations and students must complete the required number of hours and weeks for each of the three clinicals. Students must remember that completing required objectives and competencies must be met while the assigned clinical instructor is on duty. The PTA student shall abide by the clinical facility's hours of operation which may include weekday hours beyond the typical 8 am to 5 pm workday and weekends.

Students must report any changes to clinical hours of operation (i.e., facility closing for the day, holidays, etc.) to the ACCE immediately. Failure to do so will result in the student being counseled by the ACCE.

Clinical Education Absences

Students are required to complete the clinical day according to facility guidelines. Leaving a clinical site early is unacceptable and will result in disciplinary action.

All missed clinical hours/days (excused/unexcused) must be made up before final grades are submitted to the registrar. Students must make arrangements with the clinical instructor for any missed clinical hours. Failure to make up missed clinical time by the end of the semester will result in an incomplete (I) or a grade of (F). **If absent, failure to contact the clinical instructors and the ACCE prior to the assigned reporting time constitutes an unexcused absence. Any student having an unexcused absence will be counseled by the ACCE or Program Director.**

Clinical Education Punctuality

PTA students are expected to be at their assigned clinical site at the time designated by the PTA Program faculty or facility clinical instructor. If an unavoidable circumstance arises resulting in tardiness, the student must contact the clinical instructor via phone or email before the scheduled clinical time.

At the clinical faculty members' discretion, the student may be sent home for being late to the clinical site, and the student will need to make up those hours before the end of the clinical experience. All missed clinical hours must be made up before final grades are turned in for the respective semester. Failure to make up missed time may result in an "I" (Incomplete) or a failed clinical affiliation.

Habitual tardiness will not be tolerated under any circumstances. If a pattern of tardiness is noted, whether the CI is notified (i.e., student calls to inform the CI of late arrival on two or more occasions or the student is late more than an hour on two or more occasions) or not, disciplinary action will be taken. Minimal action taken may include being counseled by the ACCE, or being placed on probation, and receiving a "U" rating on the e-PTA MACS Skill #9 *Responsibility*. Maximal action taken may include student removal from the clinical facility and immediate failure of the clinical course.

Clinical Education Lunch and Work Breaks

Lunch breaks are to be scheduled according to facility protocol, which may consist of 30 minutes to an hour for lunch. A work break is a privilege and should not be abused. The student should not arrive at the clinical site and then take a break. The student should only take a break according to facility protocol and with proper authorization from the clinical instructor.

Clinical Dress Code

The students must adhere to the same PTA Program Dress Code and Other Dress Code requirements. A student found non-compliant with dress rules in a clinical setting may be sent home and will need to make up the missed clinical time. Students must use PPE during clinical activities to protect the health and welfare of students participating in clinical experiences.

All PTA students are required to adhere to the following dress code while on campus or at a clinical facility:

Personal Appearance

1. Good personal hygiene via daily bathing, use of deodorant, regular hair shampooing, and teeth brushing.

2. Hair should be neat and clean and should not interfere with performing duties. Shoulder-length hair and longer must be tied back so that it does not fall loosely over the face and shoulders. The instructor must approve hair accessories.
3. Nails should be short and clean. Nail polish, if worn, should be clear or neutral in color. Artificial nails are not permitted.
4. Make-up should be worn in good taste. Only moderate application is allowed.
5. No offensive perfume or cologne.
6. Tattoos or any body decorations should be covered.
7. PTA student uniform must be clean and wrinkle-free; it consists of a black and white polo shirt and black scrub pants; no denim jeans are allowed.
8. White undershirt (T-shirt) is allowed under the polo shirt.
9. Shoes should be closed-toe and clean. No open-toe shoes, sandals, or clogs.
10. Student identification badges must be visible and worn on the upper left side of the uniform collar during the clinical affiliation. No decorations or stickers are allowed on nametags or uniforms. Student identification badges may be purchased at the LC Student Services department.
11. Lab coat with a nametag on the left chest area may be worn during the clinical affiliation.
12. Smoking is not allowed within clinical facilities.

Jewelry

1. Stud earrings only, no hoops, loops, or drop earrings; no more than one earring per ear. Earrings must be worn in the EAR LOBE only.
2. Visible pierced jewelry other than the earlobe IS NOT ALLOWED.
3. No more than one ring may be worn one each hand.
4. Only one unobtrusive chain necklace is allowed.
5. Jewelry should not interfere with the performance of duties.
6. A wristwatch with a secondhand or digital watch allowing the timing of seconds must be worn.

HEALTH AND SAFETY

Off-Campus Safety

The student and clinical instructors are responsible for adhering to specific safety policies set by the facility when participating in off-campus laboratories, observation experiences or clinical affiliation activities. If an LC student is injured, becomes ill, or is exposed to potentially harmful substances during any of these off-campus activities, the student must follow the reporting procedure listed in the PTA Student Handbook, Incident Report: Procedure for Student Injury, Illness, Exposure to Substances (see [page 20](#)).

Guidelines to Prevent Transmission of Infectious Disease

Control of microorganisms that cause disease is vital in the health care setting. Although the risk of infection transmission exists, the risk can be minimized through appropriate education and actions taken to avoid transmission. Students will be provided with information regarding protection from infectious diseases to which a student may be exposed while enrolled in the program.

Per the Occupational Safety and Health Administration (OSHA) guidelines, the student will receive information and training on Blood Borne Pathogens and other potentially infectious materials, the use of universal precautions, and infection control measures. Instruction will be provided in PTHA 1405 Basic Patient Care Skills and during mandatory hospital orientations prior to the start of the clinical education experience. Instruction will be reinforced throughout various program courses.

The student must review the policy and procedures for infection control in each clinical facility before providing care to clients. A student exposed to a potentially infectious agent must contact the instructor immediately, follow the policy and procedure for infectious agent exposure, complete an incident report, and follow up with their medical physician.

Communicable Diseases

The PTA Program adheres to Laredo College's Notifiable Conditions statement (please refer to the current syllabus). The student is expected to report physically and mentally fit to the clinical sites. A student identified as having a communicable disease (e.g., TB, Scabies, etc.) must be treated and obtain a release form from a U.S. licensed physician or nurse practitioner indicating that the student is non-communicable and may return to the PTA Program.

Title IX and Disability Services

The Physical Therapist Assistant Program adheres to Laredo College's Title IX and Disability Services Policy (please refer to the current syllabus).

Pregnancy and Breastfeeding

Please refer to the Title IX and Disability Services policy (see current syllabus).

Incident Report

Procedure for Student Injury, Illness, Exposure to Substances

If a LC student is injured, becomes ill, or is exposed to potentially harmful substances while in the role of student PTA during academic, laboratory, or clinical affiliation activities, the student will:

1. Address the injury, illness, or exposure immediately and must report the injury to the instructor or clinical instructor immediately.
2. If the incident occurred on campus, the student must refer to Campus Police or their physician or call 911. If the incident occurred in the clinic, the student must be sent to ER or be referred to their physician.
3. Request that the supervisor call the Academic Coordinator of Clinical Education (ACCE) and notify her of the incident immediately.
4. Complete an incident report at the clinical site and LC Safety and Risk Management Office.
5. Follow up with their physician if necessary.
6. The student must contact Laredo College's Safety and Risk Management Office to complete an accident health insurance coverage form. Primary insurance will be filed for payment, and LC insurance will be filed for expenses not covered by the primary insurance.
7. If the student has no other health insurance coverage, the LC insurance will cover expenses up to \$10,000 per occurrence. LC insurance does not cover any underlying condition.
8. The student is responsible for the expenses incurred.
9. Contact the [Safety and Risk Management Office](#) at 956-721-5852 for further questions.

APPENDICES

APPENDIX A
LAREDO COLLEGE
 Physical Therapist Assistant Program
Weekly Clinical Summary Report

Student _____

FAX # (956) 721-5431

Week # _____ From _____ to _____

DATE	TIME IN	TIME OUT	LUNCH	TOTAL TIME
Mon.				
Tues.				
Wed.				
Thurs.				
Fri.				
Sat.				
Sun.				
**TOTAL HOURS COMPLETED THIS WEEK =				

STUDENT:

Skills addressed this week: _____

Skills to be addressed next week: _____

Plan of Action:

CLINICAL INSTRUCTOR:

CI Summary Report: _____

Student's Signature

CI's Signature

Date

LAREDO COLLEGE
Physical Therapist Assistant Program
Weekly Clinical Summary Report
Student Self Reflection

SPTA: [Click here to enter text.](#)

Week # and Dates: [Click here to enter text.](#)

The student is to reflect on the following questions and provide sincere responses. Submit with the Weekly Clinical Summary Report.

1. How do you think you did during this week of clinical? (Please elaborate.)

[Click here to enter text.](#)

2. Give examples that support statement under number one.

[Click here to enter text.](#)

3. Was there anything that did not go as well or could have gone better this week? Give examples of this.

[Click here to enter text.](#)

4. What might you do differently next time to prevent the above mentioned from happening again?

[Click here to enter text.](#)

Appendix B
 Physical Therapist Assistant Program
Student/Clinical Instructor Teaching Effectiveness Tool Form

Student: [Click here to enter text.](#)

Clinical Instructor: [Click here to enter text.](#)

Facility: [Click here to enter text.](#)

Clinical: I II III

Date: [Click here to enter text.](#)

Clinical Instructor:	YES	NO
Has more than 1 year experience	<input type="checkbox"/>	<input type="checkbox"/>
Certified Clinical Instructor	<input type="checkbox"/>	<input type="checkbox"/>
Supervised only 1 PTA student	<input type="checkbox"/>	<input type="checkbox"/>
Has been a CI before	<input type="checkbox"/>	<input type="checkbox"/>

The following scale is used to answer the following questions

4 = Excellent 3 = Good 2 = Fair 1 = Poor 0 = NA

	4	3	2	1	0
1. CI understands the role of a PTA student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. CI understands the PTA MACS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. CI creates an open, supportive learning environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. CI and Student demonstrate clear communication between them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. CI provides constructive feedback	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. CI provides appropriate learning opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. CI provides appropriate student supervision for safe and effective patient treatment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. CI challenges student based on identified student weaknesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. CI demonstrates appropriate role modeling of the PT/PTA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. CI provides time for student to have appropriate amount of interaction with supervising PT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. CI demonstrates professional behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Overall effectiveness of the CI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix C

Clinical Instructor *Self-Assessment* Tool
Physical Therapist Assistant Program
Laredo College

The purpose of this tool is to provide a method for clinical instructors to reflect on the Clinical Education Experience they participated in during the year. This tool will help evaluate the CI's areas of strengths and needs for development as clinical educators.

The data collected from this tool will be kept strictly confidential. It will be used by the ACCE at Laredo College only to identify individual clinical faculty development needs. This information will be shared with the PTA Program Director.

This form should be completed by the clinical instructor at the end of the clinical experience and emailed to the LC PTA program ACCE. CIs are encouraged to share this information with the CCCE at their clinical site. Please contact Yolanda Guzman, PTA, ACCE at yolanda.guzman@laredo.edu or 956-721-5253 or 956-236-7315 should you have any questions. Thank you.

DATE	Click or tap to enter a date.
Clinical Instructor Name	Click or tap here to enter text.
Name of Clinical Site	Click or tap here to enter text.
Work Email address	Click or tap here to enter text.
Phone number	Click or tap here to enter text.
Clinical rotation	I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/>
How many years of clinical experience do you have?	Click or tap here to enter text.
Are you an APTA Credentialed CI or Certified by the Texas Consortium for Physical Therapy Clinical Education?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, when did you receive this training?	Click or tap here to enter text.
If no, are you interested in becoming a credentialed CI?	
Have you been a clinical instructor before?	Yes <input type="checkbox"/> No <input type="checkbox"/>

RATING SCALE						
Consistently (3)	Frequently (2)	Occasionally (1)	Never/Rarely (0)			
			3	2	1	0
I clarify the style of supervision/leadership that will be used based on the student's experience			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I set up specific opportunities for communication with student			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I clarify expectations for student and myself as clinical instructor			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I work with students with varied learning styles			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I provide timely and constructive feedback that is effective in improving student performance			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I modify/change teaching strategies based on student feedback and/or developing levels of independence			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I encourage reflection and suggest/teach specific strategies that will facilitate in-depth understanding of situations			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I enjoy teaching students			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendix D
 Laredo College
 Physical Therapist Assistant Program
ANNUAL PERFORMANCE ASSESSMENT OF ACCE
CLINICAL INSTRUCTOR SURVEY

The following assessment survey is intended to acquire feedback on the performance of the Academic Coordinator of Clinical Education (ACCE) to enhance the clinical education program at Laredo College.

Please respond to the following items below using the Likert scale provided.

4 = Always	3 = Usually	2 = Sometimes	1 = Rarely/Never	0 = Not Applicable
------------	-------------	---------------	------------------	--------------------

The ACCE:	4	3	2	1	0
Encourages students' self-assessment of clinical performance					
Meets and dialogs with students to maximize learning during clinical experiences					
Offers feedback to clinical instructors to improve clinical teaching effectiveness					
Evaluates the strengths and needs of the clinical facilities using feedback from a variety of sources					
Encourages students' adherence to program and clinical site policies and procedures					
Uses technology to enhance clinical education					
Provides timely communication with CI and student					
Invites comments and feedback regarding clinical education experiences and addresses concerns					
Performs clinical site visits					
Demonstrates a positive helpful attitude towards students and clinical education instructors					
Responds to unforeseen student situations using productive problem-solving skills					

Areas of strength:

Areas for improvement:

Appendix E
Physical Therapist Assistant Program
First Year Competencies

Students have demonstrated competency through Skill Checkouts and/or Practical Exams in the following skills prior to the start of Clinical I

***Indicates Knowledge Only**

PTHA 1405 BASIC PATIENT CARE SKILLS

Demonstrate safe and effective **application of interventions** for **patients with non-complicated diagnosis related to:** (7D1, 7D23.B,D,E,F,L)

- Functional Training including patient turning and positioning, draping, bed mobility, transfer training with dependent transfers and assisted functional transfers (7D23.D)
- Standard Precautions/Aseptic techniques and infection control including proper handwashing; donning & doffing non-sterile gloves and PPE* (7D23.I, 7D27)
- Application of an assistive device for gait training (7D23.B, 7D23.F, 7D24.D, 7D24.K)
- Gait and locomotion training (7D23.F)
- Wheelchair management & mobility skills (7D23.D, 7D23.F)
- Passive ROM exercises to upper extremity and lower extremity joints (7D23.E, 7D23.H)

Demonstrate proper **data collection techniques** for **patients with non-complicated diagnosis related to:** (7D24.A,B,D-F, J, M)

- Assess standard vital signs (7D24.A)
- Monitors pain level (7D24.J)
- Measures height and weight* (7D24.B)
- Recognizes and monitors responses to positional changes & mobility activities (7D24.A)
- Monitors patient's and caregiver's ability to care for and safely use assistive devices (7D24.D)
- Recognizes changes in skin condition while using an assistive device (7D24.D)
- Recognizes safety, status and progression of patients engaged in gait, locomotion, wheelchair management & mobility (7D24.E)
- Recognizes normal and abnormal integumentary changes* (7D24.F)
- Recognizes activities, positioning or postures that may aggravate or relieve pain or altered sensations, or that can produce associated skin trauma (7D24.F, 7D24.J)
- Inspects the physical environment and measures physical spaces (7D24.M)
- Recognizes safety and barriers in home, community, and work environments* (7D24.M)
- Recognizes level of functional status (7D24.M)

Identifies relevant useful information to report to the supervising PT (7D11, 7D15, 7D16, 7D18, 7D20, 7D21)

Accurately documents relevant information using appropriate medical terminology and format and for billing

purposes (7D16, 7D22, 7D25, 7D31)
Demonstrates clarity in communicating instructions to achieve patient outcomes (7D12, 7D23.G)
Demonstrates safe and ethical behaviors consistent with the work of a physical therapist assistant during delivery of select interventions and data collection (7D1, 7D2, 7D3, 7D4, 7D5, 7D21, 7D26, 7D27)
Develop behaviors to interact with sensitivity to individual differences (7D8, 7D9, 7D29)
Observes a professional demeanor (7D4, 7D28)
Identify possible barriers in a home or community environment, describe potential modifications to enhance patient access, and present findings to faculty and peers (7D7, 7D12, 7D24.M)
Discuss concepts that will promote the development of the professional role as a physical therapist assistant related to: * (7D1, 7D4, 7D5, 7D7, 7D8, 7D14) <ul style="list-style-type: none"> • Awareness of self • Ethical Values • Moral dilemmas • Effective helping • Effective communication • Assertiveness & conflict resolution • Establishing rapport • Cultural sensitivity • Identifying documentation fraud and abuse • Communicating with persons with disabilities • Sexuality & disability • Communicating with the dying and their families
Demonstrates correct body mechanics during select patient care activities (bed mobility, transfers, ROM, gait training, and wheelchair mobility) for patients with non-complicated diagnosis (7D27)
<i>Physical therapy considerations for patients with bariatric diagnosis*</i>
PTHA 1413 FUNCTIONAL ANATOMY
Demonstrate proper data collection techniques accurately and efficiently required to carry out the plan of care for patients with non-complicated diagnosis related to:
<ul style="list-style-type: none"> • Manual muscle testing of the upper extremity, lower extremity, neck and trunk. (7D24.H) • Identify the presence or absence of muscle mass (7D24.H) • Recognize normal and abnormal muscle length of the upper extremity and lower extremity (7D24.H) • Recognize normal alignment of the trunk and extremities (Posture) (7D24.K) • <i>Differentiate between normal & abnormal joint movement (7D24G)</i> • <i>Gait cycle assessment & locomotion* (7D24E)</i> • <i>Manual muscle testing of muscle of the face* (7D24H)</i>
Identify information related to manual muscle testing that would be useful to report to the supervising physical therapist (7D11, 7D15, 7D16, 7D18, 7D20, 7D21)

Accurately document relevant information using appropriate medical terminology and format (7D16, 7D25)
Demonstrate clarity when communicating manual muscle testing results to a patient (7D12)
Observe a professional demeanor (7D4, 7D28)
Develop behaviors to interact with sensitivity to individual differences (7D8, 7D9, 7D29)
Demonstrate safe and ethical behaviors consistent with the work of a physical therapist assistant during manual muscle testing (7D1, 7D4, 7D5, 7D26)
<i>Demonstrates proper body mechanics during manual muscle testing techniques (7D27)</i>
PTHA 2201 ESSENTIALS OF DATA COLLECTION
Demonstrate proper data collection techniques accurately and efficiently required to carry out the plan of care and determine patient progress for a patient with non-complicated diagnosis as it pertains to: (7D1, 7D4, 7D24.B, C, F-H, J, L)
<ul style="list-style-type: none"> • Limb length and girth/volumetric measurements (7D24B) • Recognizes normal and abnormal joint movement (7D24G) • Administer standardized pain scales (7D24.J)
<ul style="list-style-type: none"> • Measures range of motion to upper extremity, lower extremity, neck & trunk using a goniometer, tape measure and inclinometer (7D24.L)
<ul style="list-style-type: none"> • Performs basic neurological tests and measures as delegated by the physical therapist, including light touch, superficial pain, vibration, (temperature*), joint position, movement sense, two-point discrimination, tactile localization, (texture recognition*), stereogosis, graphesthesia, & barognosis (7D24.F)
<ul style="list-style-type: none"> • <i>Densitometry measurements* (7D24B)</i> • <i>Measures functional ROM* (7D24L)</i>
<ul style="list-style-type: none"> • <i>Recognizes normal and abnormal muscle length to upper extremity and lower extremity *(7D24H)</i> • <i>Recognizes changes in cognition, arousal, and attention* (7D24C)</i>
<ul style="list-style-type: none"> • <i>Performs muscle length tests including: Thomas test, Ober test, Ely test, SLR test, Popliteal Angle test (7D24*)</i>
Identify information related to data collection that would be useful to report to the supervising physical therapist (7D11, 7D15, 7D16, 7D18, 7D20, 7D21)
Demonstrate the ability to document relevant information on data collection using appropriate medical terminology and format (7D16, 7D25)
Demonstrate clarity when communicating findings from data collection to a patient/caregiver (7D12)
Demonstrate safe and ethical behaviors consistent with the work of a physical therapist assistant during data collection (7D1, 7D4, 7D5, 7D21, 7D26)
Develop behaviors to interact with sensitivity to individual differences (7D8, 7D9, 7D29)
Observe a professional demeanor (7D4, 7D28)
<i>Differentiates between normal and abnormal peripheral joint end-feels (7D24G)</i>
<i>Demonstrates proper body mechanics during data collection techniques (7D27)</i>

PTHA 1531 PHYSICAL AGENTS

Demonstrate safe and **effective application of biophysical agents** for **patients with non-complicated diagnosis related to:** (7D1, 7D4, 7D11, 7D19, 7D23C,E)

- Superficial thermal agents (hot pack, paraffin, contrast bath) (7D23C)
- Deep thermal agents (ultrasound: contact and (under water*), diathermy) (7D23.C)
- Cryotherapy (cold packs, ice massage) (7D23C)
- Electrotherapeutic agents (TENS, NMES, IFC, HVGS, FES*, Iontophoresis*) (7D23.C)
- Compression therapies (pneumatic compression and wrapping) (7D23C)
- Hydrotherapy* (7D23C)
- Mechanical traction (cervical and lumbar) (7D23C)
- LASER (7D23C)
- Therapeutic massage to neck & full back, upper & lower extremities, & face (7D23E)
- Biofeedback* (7D23C)

Demonstrate **proper data collection techniques** accurately and efficiently required to carry out the plan of care, determine appropriate use of the biophysical agent, and determine patient progress **for patients with non-complicated diagnosis** as it pertains to: (7D4, 7D24.B, F, J)

- Determine pain level before and after application of a biophysical agent or therapeutic massage using standardized visual analog scales (7D24.J)
- Determine absent or altered sensation before treatment or sensory changes during or after treatment (7D24.F)
- Measures limb girth before and after compression therapy (7D24.B)
- Inspect skin before, during and after application of a biophysical agent or therapeutic massage to determine normal and abnormal integumentary changes (7D24.F)

Identifies relevant useful information to report to supervising Physical Therapist (7D11, 7D15, 7D16, 7D18, 7D19, 7D20, 7D21, 7D26)

Accurately documents relevant information about interventions and data collection using appropriate medical terminology and format (7D16, 7D22, 7D25)

Demonstrate appropriate patient, caregiver, & healthcare personnel education regarding the physiological effects of biophysical agents to achieve patient outcomes (7D12, 7D23.G)

Apply safe and ethical behaviors consistent with the work of a physical therapist assistant during the application of select biophysical agents and data collection based on an adverse response to treatment (7D1, 7D4, 7D5, 7D6, 7D21, 7D26, 7D27)

Select accurate billing codes for biophysical agents or therapeutic massage applied (7D4, 7D5, 7D30, 7D31)

Observe behaviors that interact with sensitivity to individual differences (7D8, 7D9, 7D29)

Observes a professional demeanor (7D4, 7D28)

Demonstrates proper body mechanics during assessment techniques (7D27)

PTHA 2509 THERAPEUTIC EXERCISE

Discuss the indications, contraindications, and outcomes for the use of range of motion, stretching, resistance, aerobic, and balance exercises* for patients with non-complicated diagnosis (7D4, 7D23.H)

Demonstrate safe and effective **application of therapeutic exercise interventions** identified in the plan of care for a patient with non-complicated diagnosis related to: (7D1, 7D4; 7D23.A, F, H)

- Passive, Active-Assistive, and Active ROM exercises (7D23.H)
- Stretching (manual, self, mechanical, PNF) exercises (7D23.H)
- Strengthening exercises (7D23.H)
- Aerobic conditioning or reconditioning (7D23.H)
- Balance and coordination training (7D23.F)
- Breathing techniques (7D23.A)
- Postural awareness and stabilization training (7D23.F)
- CPM (7D23.H)
- *Grade I & II peripheral joint mobilizations of selected joints and motions (7D23E)*

Demonstrate **proper data collection techniques** accurately and efficiently to carry out the plan of care, determine an appropriate therapeutic exercise, and determine patient progress as it pertains to: (7D4, 7D24. (A, E, G-N)

- Measures vital signs before, during and after a therapeutic exercise (7D24.A)
- Monitors pain level using standardized visual analog scales (7D24.J)
- Measures functional range of motion and/or range of motion using a goniometer (7D24.L)
- Performs and interprets a manual muscle test (7D24.H)
- Recognizes exercises, activities, positions, or postures that increase, decrease, or relieve pain or sensations (7D24.J)
- Determines the safety, status and progression of patients during gait, balance and mobility activities (7D24.E)
- Recognizes normal and abnormal joint movement (7D24.G)
- Recognizes righting and equilibrium reactions (7D24.I)
- Monitors breathing patterns during therapeutic activity (7D24.N)
- Recognizes normal and abnormal alignment of trunk & extremities at rest & during therapeutic activities (7D24.K)

Examine information that would be useful to report to the supervising physical therapist regarding utilization, continuance, progression, or discontinuance of therapeutic exercise interventions (7D11, 7D15, 7D16, 7D18, 7D19, 7D20, 7D21, 7D26)

Accurately document relevant information about therapeutic exercise interventions and data collection (7D16, 7D22, 7D25)

Demonstrate appropriate patient education by developing a home exercise program to achieve patient outcomes (7D12, 7D23.G)

Apply safe and ethical behaviors consistent with the work of a physical therapist assistant during the delivery of select therapeutic exercise interventions and data collection based on an adverse response to treatment (7D1, 7D4, 7D5, 7D6, 7D21, 7D26, 7D27)
Select accurate billing codes for therapeutic interventions provided (7D4, 7D5, 7D30, 7D31)
Observe behaviors that interact with sensitivity to individual differences (7D8, 7D9, 7D29)
Observe a professional demeanor (7D4, 7D28)
<i>Demonstrates proper body mechanics during therapeutic exercise activities and data collection techniques (7D27)</i>

Laredo College
Physical Therapist Assistant Program
Second Year Competencies

Students have demonstrated competency through Skill Checkouts and/or Practical Exams and Clinical I in the following skills prior to the start of Clinical II & III

***Indicates Knowledge Only**

PTHA 2535 REHABILITATION TECHNIQUES

Demonstrate safe and effective **implementation, progression and adaptation of interventions** identified in the plan of care and based on patient response related to **Integumentary, Gait Deviations, Lower Extremity Amputations, Cardiopulmonary, and Vestibular**: (7D1, 7D4, 7D11, 7D19, 7D23 (A-I))

- Sterile technique (7D23.I)
- Application and removal of dressings or agents (7D23.I)
- Identification of precautions for dressing removal* (7D23.I)
- Hydrotherapy* (7D23.C)
- Patient/client education (7D23G)
- Functional training in self-care (ADLs) (7D23.D)
- Application of assistive devices (7D23.B)
- Range of motion exercises (passive, active-assistive, active or self-range of motion) (7D23.E, H)
- Stretching and strengthening exercises (7D23.H)
- Balance training, gait training, postural awareness (7D23.F)
- Application of assistive/adaptive devices (7D23.B)
- Application of prosthetic and orthotic devices (7D23.B)
- Wheelchair management skills (7D23.D)
- Airway clearance techniques: breathing exercises, coughing techniques and secretion mobilization (7D23.A)
- Motor function training (bed mobility, transfer training, balance training, gait training) (7D23.F)
- Postural awareness (7D23.F)
- Aerobic conditioning and reconditioning (7D23.H)
- Vestibular adaptation exercises and habituation exercises (7D23.H)
- Motor function training (balance training, gait training) (7D23.F)
- Functional training in self-care (ADLs), domestic, education, community, social life, civic life (7D23.D)

Analyze and demonstrate **proper data collection techniques** accurately and efficiently required to carry out the plan of care related to **Integumentary, Gait Deviations, Lower Extremity Amputations, Cardiopulmonary, and Vestibular**: (7D4, 7D24 (A, C-H, J-N))

• Assesses normal, decreased or absent sensation (7D24.F)
• Recognizes normal and abnormal integumentary changes (7D24.F)
• Recognizes activities, positions, or postures that aggravate, decrease, or relieve pain or sensations, or that can produce associated skin trauma (7D24.F, 7D24.J)
• Identifies viable versus nonviable tissue (7D24.F)
• Performs wound measurement (7D24.F)
• Recognizes level of functional status* (7D24.M)
• Monitors patient’s and caregiver’s ability to care for and safely use assistive device (7D24.D)
• Recognizes changes in skin condition while using devices and equipment (7D24.D)
• Recognizes normal and abnormal joint movement (7D24.G)
• Performs and interprets a manual muscle test (7D24.H)
• Identifies the presence or absence of muscle mass (7D24.H)
• Recognizes normal and abnormal muscle length (7D24.H)
• Identifies normal and abnormal muscle tone (7D24.H)
• Recognizes normal and abnormal alignment of trunk & extremities at rest & during activities (7D24.K)
• Measures functional ROM (7D24.L)
• Identifies safety barriers in the home, community and work environments (7D24.M)
• Administer standardized gait assessment tools (7D24.M)
• Monitors patient’s and caregiver’s ability to care for and safely use assistive device (7D24.D)
• Determines the safety, status and progression of patients engaged in gait, locomotion, balance, and mobility (7D24.E)
• Recognizes activities, positioning & postures that aggravate or relieve pain or altered sensations (7D24.J)
• Identifies safety barriers in the home, community and work environments (7D24.M)
• Measures vital signs and recognizes responses to positional changes and activities (7D24.A)
• Identifies thoracoabdominal movements and breathing patterns with activity (7D24.N)
• Recognizes changes in patient’s state of arousal, mentation and cognition (7D24.C)
• Identifies signs and symptoms of respiratory distress (7D24.N)
• Recognizes activities that aggravate or relieve edema, pain, dyspnea or other symptoms (7D24.N)
• Identifies cough and sputum characteristics (7D24.N)
• Recognizes activities, positioning & postures that aggravate or relieve pain or altered sensations (7D24.J)
• Administer standardized assessment measures used with cardiopulmonary conditions (7D24.M)
• Administer standardized assessment measures used with vestibular conditions (7D24.M)
Appraise information that would be useful to report to the supervising physical therapist regarding continuance, progression and discontinuance of interventions within the plan of care (7D11, 7D15, 7D16, 7D18, 7D19, 7D20, 7D21, 7D22, 7D26)
Document relevant information about interventions and data collection that is accurate and concise (7D16, 7D22, 7D25, 7D31)
Demonstrate appropriate education to patients, family members, caregivers or healthcare team members on

appropriate exercises and functional activities based on the plan of care (7D12, 7D23.G)
Demonstrate safe and ethical behaviors consistent with the work of a physical therapist assistant during the delivery of select interventions and data collection (7D1, 7D2, 7D3, 7D4, 7D5, 7D6, 7D21, 7D26, 7D27)
Select accurate billing codes for interventions provided according to a physical therapy plan of care (7D4, 7D5, 7D30, 7D31)
Apply learned behaviors to interact with sensitivity to individual differences (7D8, 7D9, 7D29)
Demonstrate a professional demeanor (7D4; 7D28)

PTHA 2431 MANAGEMENT OF NEUROLOGICAL DISORDERS

Demonstrate safe and effective implementation, progression and adaptation of interventions identified in the plan of care and based on patient response for a given neurological patient to include: (7D1, 7D4, 7D11, 7D19, 7D23 (A-B, D-H))
<ul style="list-style-type: none"> • Breathing exercises (7D23.A) • Range of motion exercises, including passive, active-assistive, active or self-range of motion (7D23.E, H) • Stretching exercises (7D23.H) • Strengthening exercises (7D23.H) • Neurorehabilitation techniques, including facilitation, inhibition, and PNF techniques (7D23.F) • Developmental activities (7D23.F) • Gait and locomotion activities (7D23.F) • Balance and coordination training (7D23.F) • Postural control (7D23.F) • Application of assistive devices (7D23.B) • Wheelchair management skills (7D23.D) • Patient/client education (7D23.G) • Functional training in self-care (ADLs) (7D23.D)
Analyze and demonstrate proper data collection techniques accurately and efficiently required to carry out the plan of care for a given neurological patient as it pertains to: (7D4, 7D24 (A, C-N))
<ul style="list-style-type: none"> • Measures vital signs and recognizes responses to positional changes and activities (7D24.A) • Recognizes changes to patient’s status of arousal, mentation and/or cognition (7D24.C) • Assess pain levels using behavior scales, visual analog scales or numerical scales (7D24.J) • Recognizes activities, positions, or postures that aggravate, decrease, or relieve pain or sensations, or that can produce associated skin trauma (7D24.F, 7D24.J) • Assesses normal, decreased or absent sensation (7D24.F) • Recognizes normal & abnormal integumentary changes (7D24.F) • Recognizes normal and abnormal joint movement (7D24.G) • Performs and interprets a manual muscle test (7D24.H) • Identifies the presence or absence of muscle mass (7D24.H) • Recognizes normal and abnormal muscle length (7D24.H) • Identifies normal and abnormal muscle tone (7D24.H)

<ul style="list-style-type: none"> Recognizes normal and abnormal alignment of trunk & extremities at rest & during activities (7D24.K)
<ul style="list-style-type: none"> Measures functional range of motion (7D24.L)
<ul style="list-style-type: none"> Monitors patient's and caregiver's ability to care for and safely use assistive devices (7D24.D)
<ul style="list-style-type: none"> Recognizes changes in skin condition while using devices & equipment (7D24.D)
<ul style="list-style-type: none"> Determines the safety, status and progression of patients engaged in gait, locomotion, balance, wheelchair management and mobility (7D24.E)
<ul style="list-style-type: none"> Identifies gross motor and fine motor milestones (7D24.I)
<ul style="list-style-type: none"> Recognizes righting & equilibrium reactions (7D24.I)
<ul style="list-style-type: none"> Recognizes level of functional status (7D24.M)
<ul style="list-style-type: none"> Administer standardized outcomes measures used with neurological conditions (7D24.M)
<ul style="list-style-type: none"> Recognize safety issues or barriers related to the use of an assistive device or wheelchair management skills (7D24.M)
<ul style="list-style-type: none"> Recognize activities that increase or decrease pain, dyspnea, or edema (724.N)
Appraise information that would be useful to report to the supervising physical therapist regarding continuance, progression and discontinuance of interventions within the plan of care (7D11, 7D15, 7D16, 7D18, 7D19, 7D20, 7D21, 7D22, 7D26)
Document relevant information about interventions and data collection that is accurate and concise (7D16, 7D22, 7D25)
Demonstrate appropriate education to patients, family members, caregivers or healthcare team members on appropriate exercises and functional activities based on the plan of care (7D12, 7D23.G)
Demonstrate safe and ethical behaviors consistent with the work of a physical therapist assistant during the delivery of select interventions and data collection (7D1, 7D2, 7D3, 7D4, 7D5, 7D6, 7D21, 7D26, 7D27)
Select accurate billing codes for interventions provided according to a physical therapy plan of care (7D4, 7D5, 7D30, 7D31)
Apply learned behaviors to interact with sensitivity to individual differences (7D8, 7D9, 7D29)
Demonstrate a professional demeanor (7D4, 7D28)

Appendix F
 Laredo College
 Physical Therapist Assistant Program
ANNUAL PERFORMANCE ASSESSMENT OF ACCE
STUDENT SURVEY

The following assessment survey is intended to acquire feedback on the performance of the Academic Coordinator of Clinical Education (ACCE) to enhance the clinical education program at Laredo College.

Please respond to the following items below using the Likert scale provided.

4 = Always	3 = Usually	2 = Sometimes	1 = Rarely/Never	0 = Not Applicable
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The ACCE:	4	3	2	1	0
Encourages students' self-assessment of clinical performance					
Maximizes students' learning opportunities by assuring a variety of clinical site choices necessary to fulfil clinical education requirements for entry-level practice					
Endorses adherence to current policies and procedures of the clinical education program					
Objectively grades students' clinical education course work based on clinical performance and programs grading policies					
Uses technology to enhance clinical education					
Provides timely communication					
Invites comments, feedback, and concerns					
Performs clinical site visits					
Demonstrates a positive attitude, is approachable, and accessible					
Responds to unforeseen situations using productive problem-solving skills					

Areas of strength:

Areas for improvement:



Laredo College

Physical Therapist Assistant Program

PTA CLINICAL EDUCATION HANDBOOK ACKNOWLEDGEMENT FORM

I, _____, have read and understand the content of the PTA Clinical Education Handbook and have been given the opportunity to inquire about the content. I agree to abide by all the guidelines of the LC Clinical Education Handbook, of the PTA program, and of the Division of Health Sciences. I understand that the guidelines may change and that I will abide by the changes (and will be given notice of the changes).

CCCE/CI Signature

Date