



OLD DOMINION UNIVERSITY

DOCTOR OF PHYSICAL THERAPY

PROGRAM HANDBOOK

Class Entering May, 2023

COLLEGE OF HEALTH SCIENCES
SCHOOL OF REHABILITATION SCIENCES

2152 HEALTH SCIENCES BUILDING
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DOCTOR OF PHYSICAL THERAPY AT OLD DOMINION UNIVERSITY

The School of Rehabilitation Sciences offers a course of study leading to the degree of Doctor of Physical Therapy (DPT). The degree is designed to prepare students to practice physical therapy in a variety of health care settings. Upon successful completion of the program, the graduate is eligible to apply for state licensure as a physical therapist. The degree program is fully accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) to 2029.

The DPT program is a full-time three-year experience that includes classroom instruction, laboratory instruction and practice, online interactions, readings and homework assignments, discussions, peer-teaching, seminars and clinical experiences. A variety of health care institutions, agencies, and practice settings are utilized for clinical education experiences. Students are responsible for providing their own transportation to and from clinical sites, as well as any other costs that might arise during their matriculation. This handbook describes the curriculum and program policies. We are also subject to University policies. These can be found in the graduate catalog online at <https://catalog.odu.edu/graduate/>. The curriculum is subject to revision as needed to keep abreast of current physical therapy research and practice.

DPT PROGRAM PHILOSOPHY

The Doctor of Physical Therapy program at Old Dominion University is founded on the belief that the delivery of physical therapy services should be patient centered. The physical therapists' role in meeting the needs of patients and clients is founded on the premise that we play an indispensable role in improving the health and the total quality of life of those we serve. This program is guided by the belief that physical therapists provide uniquely specialized services which enhance the total lifestyle and functional abilities of a diverse group of patients in a variety of environments.

We believe that a physical therapist's interactions are driven by a profound respect and appreciation for the rights, freedoms, and abilities of other individuals, and by recognition that inspiring students to embrace these values is best done by example. The faculty are dedicated to excellence in professional teaching, research, and service to the profession, to the university, and to the community. We believe that by serving as role models in these capabilities, we can positively guide students in the development of optimal professional behaviors.

Our profession is grounded in the foundation and clinical sciences. The Program is guided by the belief that each student should be guaranteed an education which promotes a standard of excellence in academic achievement, in the attainment of clinical performance skills, and in professional interaction and communication skills. We believe that a curriculum dedicated to excellence must be continually evaluated and modified to reflect the ever-changing needs of the profession. More importantly, the educational program should develop in its graduates the ability to use critical thinking and methods of problem solving which will provide a basis for a lifetime of learning. While preparing our graduates to continue the quest for professional excellence, we endeavor to inspire in them a lifelong commitment to the profession and its advancement.

ODU MISSION STATEMENT

Old Dominion University, located in the City of Norfolk in the metropolitan Hampton Roads region of coastal Virginia, is a dynamic public research institution that serves its students and enriches the Commonwealth of Virginia, the nation, and the world through rigorous academic programs, strategic partnerships, and active civic engagement.

DPT PROGRAM MISSION STATEMENT

The mission of the Program in Physical Therapy is to prepare graduates to prevent, diagnose, and treat dysfunction and to enhance the well-being of individuals and the community.

The program is dedicated to delivering high quality professional education, advancing research, and engaging in responsive service that will lead our graduates to meet the physical therapy needs of society through the 21st century.

DEFINITION OF PHYSICAL THERAPY

The following definition of physical therapy was obtained from the *Guide to Physical Therapist Practice* written by the American Physical Therapy Association. (Revised February 2023) *Physical therapy is the care and services provided by or under the direction and supervision of a physical therapist. Physical therapists are the only professionals who provide physical therapy interventions including:*

- 1) Provide services to patients/clients who have impairments, functional limitations, disabilities, or changes in physical function and health status resulting from injury, disease, or other causes.
- 2) Interact and practice in collaboration with a variety of professionals.
- 3) Address risk.
- 4) Provide prevention and promote health, wellness, and fitness.
- 5) Consult, educate, engage in critical inquiry, and administrate.
- 6) Direct and supervise the physical therapy service, including support personnel.

DPT PROGRAM EXPECTED STUDENT OUTCOMES

Graduates of the Doctor of Physical Therapy Program at ODU will be able to:

- Create evidence-based treatment plans using foundational knowledge and critical thinking skills within the field of physical therapy.
- Assess, diagnose and appropriately manage the treatment of physical therapy patients.
- Review, understand and contribute to scientific literature.
- Adhere to professional standards while meeting the health care needs of patients/clients and society.

PROGRAM FACULTY

Steven Morrison, PhD – Professor
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Orthopedic Clinical Specialist from the American Board of Physical Therapy Specialties (ABPTS)
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Eric Schussler, PT, PhD, ATC, CSCS – Assistant Professor
ESchussl@odu.edu

PRIMARY ASSOCIATED FACULTY

Ryan McCann, PhD, ATC
Lucas Johnson, PT, DPT, SCS
Lisa Koperna, PT, PhD, SCS
Steven Morrison, PhD
Karen Royall, PT, DPT
Korrin Vanderhoof, MS, LCSW
Diana Williams, PhD

Numerous additional adjunct faculty serve as lab instructors and guest lecturers.

In addition to the adjunct faculty who share their expertise in specialty areas, we acknowledge the invaluable contributions of the dedicated clinical instructors who mentor students during clinical experiences. The program could not exist without them.

PROFESSIONAL PREPARATION (DPT) CURRICULUM

<u>1ST YEAR</u>	<u>CREDIT</u>	<u>SUMMER SESSION</u>
PT 621	(2)	<u>INTRODUCTION TO PHYSICAL THERAPY</u> Intro to Patient Care Skills
AT 691	(6)	<u>GROSS ANATOMY for REHABILITATION SCIENCES</u>
PT 630	(1)	<u>MECHANICAL PROPERTIES OF HUMAN TISSUES IN REHABILITATION</u> Histological Properties of Tissues: behavior under stress, healing times
9 credits		
<u>FALL SEMESTER</u>		
PT 627	(4)	<u>THEORY & PRACTICE I</u> Foundations of Therapeutic Exercise
PT 634	(3)	<u>CLINICAL SCIENCES I</u> Biopsychosocial model of patient care and introduction to basic orthopedic, vascular, integumentary, autoimmune, cardiac and pulmonary pathologies
PT 640	(3)	<u>PATIENT EVALUATION I</u> Intro to Examination/Evaluation skills
PT 655	(3)	<u>CLINICAL PROBLEM SOLVING I</u> Selected small group work on cases designed to integrate material from other courses in the semester to practice clinical reasoning, goal setting, and creating a patient plan of care. Standardized patient experiences.
PT 665	(3)	<u>BIOMECHANICS/KINESIOLOGY I</u>
PT 792	(3)	<u>NEUROSCIENCE I</u>
19 credits		
<u>SPRING SEMESTER</u>		
PT 628	(4)	<u>THEORY AND PRACTICE II</u> Modalities of heat, of cold, e-stim, integrating with exercise. Burn and wound care
PT 635	(3)	<u>CLINICAL SCIENCES II</u> Additional pathology: musculoskeletal system, endocrine, pancreatic, hepatic, biliary, renal and GI pathologies.
PT 641	(3)	<u>PATIENT EVALUATION II</u> Musculoskeletal evaluation of spine and extremities
PT 656	(3)	<u>CLINICAL PROBLEM SOLVING II</u> Selected small group work on cases designed to integrate material from other courses in the semester and the previous semester to practice clinical reasoning, goal setting, and creating a patient plan of care.
PT 666	(2)	<u>BIOMECHANICS/KINESIOLOGY II</u>
PT 638	(2)	Applications of biomechanical principles, movement & force analysis, EMG
PT 793	(3)	<u>EXERCISE PHYSIOLOGY</u> <u>NEUROSCIENCE II</u>
20 credits		

48 Total Credits First Year

2ND YEAR

PT 669 (4)

SUMMER SESSION

CLINICAL EXPERIENCE I

Full-time supervised clinical practice, 8 weeks in an outpatient setting

4 credits

PT 810 (3)

FALL SEMESTER

SCIENTIFIC INQUIRY I

Begin learning to critically analyze and use scientific literature to improve clinical decision-making and practice

PT 826 (4)

THEORY & PRACTICE III

Advanced orthopedic evaluation, interventions, manual therapy, orthotics. Advanced therapeutic exercise progression/regression.

PT 836 (3)

CLINICAL SCIENCES III

Radiology, Pharmacology, Electrophysiologic testing, Burn management, Foot care, Stress management

PT 857 (3)

CLINICAL PROBLEM SOLVING III

Selected small group work on cases designed to integrate material from other courses in the semester and throughout the curriculum to practice clinical reasoning, goal setting, and creating a patient plan of care with emphasis on musculoskeletal conditions.

PT 884 (3)

CLINICAL TEACHING & PROFESSIONAL COMMUNICATION

Basic Communication & the Therapeutic Relationship
Preparation for Teaching/Learning

18 Credits

PT 822 (2)

SPRING SEMESTER

SCIENTIFIC INQUIRY II

Continued practice of critical analysis skills, systemic review development

PT 827 (4)

THEORY AND PRACTICE IV

Interventions for people with medically complex problems: neurological disorders, adults. Spinal cord injuries, advanced acute care.

PT 837 (3)

CLINICAL SCIENCES IV

Congenital and acquired neurological disorders

PT 858 (3)

CLINICAL PROBLEM SOLVING IV

Selected small group work on cases designed to integrate material from other courses in the semester and throughout the curriculum to practice clinical reasoning, goal setting and creating a patient plan of care with emphasis on neurology, acute care, and multi-complex conditions

PT 842 (3)

PATIENT EVALUATION III

Examination/evaluation of people with medically complex problems: neurologic disorders, spinal cord injuries and advanced acute care.

PT 881 (3)

PT CASE MANAGEMENT OF SPECIAL POPULATIONS

IPE concepts, integration of social determinants of health for special populations; aging. Includes small group work for case scenarios and group presentations on a geriatric case study.

18 Credits

**40 Total
Credits** **Second
Year**

3RD YEAR

SUMMER SESSION

PT 875 (6) CLINICAL EXPERIENCE II
Full time supervised clinical practice, 12 weeks

6 Credits

FALL SEMESTER

PT 870 (3) PEDIATRICS IN REHABILITATION
PT 882 (3) PRACTICE MANAGEMENT
Principles and practice of managing and administering physical therapy in various clinical settings. Includes employment and career development

PT 896 (1) SPECIALIZATION IN PHYSICAL THERAPY
Small group experiences with clinicians or faculty to explore selected topics

PT 890 (3) DIFFERENTIAL DIAGNOSIS SEMINAR
Integration of knowledge through application of problem-solving in differential diagnosis

PT 883 (2) PROFESSIONAL ISSUES IN PHYSICAL THERAPY
Identification, analysis and discussion of issues currently facing the physical therapy professional. Includes ethics/legal issues, and the role of physical therapists in health care system in the US.

PT 891 (3) SEMINAR IN SCIENTIFIC INQUIRY
Students will prepare for presentation and publication a scholarly product such as a clinical case report or systematic review. Presentation will be to peers with poster presentation submitted to research event.

15 credits

*** Written and Oral Comprehensive Exams are held towards the end of this semester ***

SPRING SEMESTER

PT 876 (7) CLINICAL EXPERIENCE IV
Full time supervised clinical practice, 14 weeks

7 Credits

28 Total Credits 3rd Year

Total Credit Hours in the Curriculum = 116 Credits

OPTIONAL COURSE GLOBAL HEALTH STUDY ABROAD

HLSC 705 Interprofessional Global Health Study Abroad

Course Credit 1

This course replaces PT 896 Specialization in Physical Therapy for the DPT curriculum so that a student choosing this option will have the same number of credit hours toward their degree as other DPT students.

Course Description: ODU has partnered with Learn International to create a cultural immersion experience. Students will be introduced to global health concepts, including demographic and epidemiological transitions, the burden of disease, the impact of key health conditions on individuals and on communities, critical issues in the organization and delivery of health services, and the multi-directional links between health and social and economic factors.

The course includes pre-trip learning and preparation that is conducted online. Students will prepare targeted learning activities for local citizens at a Community Health Center. Some examples of health-related workshops by ODU students last year: hand-washing hygiene for elementary school aged children; home exercises using Theraband for older adults; proper use of a glucose monitoring device and diabetes education. The locals also present to the students: a short course on the local language, a tour of health care facilities and information about the country's National Health system, and of course, immersive cultural experiences such as singing and dancing at the pub. In addition, there are visits to health care facilities and field trips of cultural and historic interest.

Students will stay with host families and will take most morning and evening meals at the host family's home.

Target Audience: This course is designed for students in Community Health, Public Health, Dental Hygiene, Nursing, and Physical Therapy, as well as other students who have an interest in Global Health. The course instructors will work to make sure that the various health professional students are represented.

Timeline: Registration occurs in the middle of the fall semester each year. The online preparation portion of the course occurs during the spring semester. Students sign up for one of two Study Abroad trips 1) during spring break or 2) early May. Second year DPT students only have the spring break option due to their summer clinical schedule. First year DPT students could go on either trip, as their summer clinical schedule can be moved to accommodate the course.

Cost: One credit hour of tuition will be charged to the student. In addition, the study abroad cost is approximately \$3,000 to \$3,500 and includes all travel and housing expenses. Some scholarship money may be available to offset a portion of the cost.

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY**

HEALTH SCREENING FORM

NAME _____
BIRTH DATE _____ AGE _____

INSTRUCTIONS: answer ALL questions with YES or NO. Do NOT leave any questions unanswered. Explain ALL YES answers on the back of the page.

1. Give the DATE of your last PHYSICAL EXAM _____
2. Are you currently taking ANY medications? NO / YES (list)
3. Are you currently PREGNANT? YES / NO
4. Have you ever had SURGERY? NO / YES (Please describe with dates)
5. Do you have any PAST or PRESENT HISTORY of any of the following? Answer each item YES / NO. Explain ALL YES answers on the back of the page.

_____ neurological disease or disorder	_____ muscle disease/disorder
_____ fracture/bony deformity	_____ chronic infectious disease/disorder
_____ joint disease/disorder	_____ seizure disorder
_____ cardiovascular or heart disease/disorder	_____ diabetes (Type 1 or Type 2)
_____ chronic/recurrent respiratory disorder	_____ blood pressure abnormality
_____ cancer	
_____ other (specify) _____	

6. Do you have any PAST or PRESENT HISTORY of trauma, signs/symptoms (diagnosed or undiagnosed) in these parts of the body? Explain ALL YES answers on the back of the page.

_____ head/face/TMJ	_____ shoulder/shoulder girdle
_____ cervical spine	_____ upper arm/elbow
_____ thorax/sternum/clavicle/ribs	_____ forearm/wrist
_____ abdomen	_____ fingers/thumb/palm
_____ thoracic spine	_____ hip (which side)
_____ lumbar spine	_____ knee (which side)
_____ SIJ/pelvis/coccyx	_____ ankle/foot
_____ internal organs	
_____ other (specify) _____	

7. Answer ALL QUESTIONS with YES or NO. Explain ALL YES answers on the back.

_____ Have you ever taken steroid medications?
_____ Are 1 or more of your joints hypermobile? Which ones? _____
_____ Do you have past/present history of headaches?
_____ Do you have past/present history of vertigo or dizziness?
_____ Do you have past/present history of numbness/weakness in any part of the body?
_____ Do you have past/present history of sensory impairments?

I understand that objective clinical examination procedures are aimed at reproducing signs & symptoms in order to make a functional diagnosis, and that having these procedures practiced by fellow students/colleagues on my body could potentially elicit or aggravate present and/or previously undiscovered clinical signs/symptoms. I agree to use good judgment & assume *full responsibility* for my own health & welfare in clinical practice labs and I have been advised of reasonable precautions to exercise in the practice of physical therapy procedures. I will update my health information *immediately* if there are any changes that occur in my health status during the course of the Program.

Signature _____ Date _____

DOCTOR OF PHYSICAL THERAPY PROGRAM CHECKLIST

STUDENT NAME: _____

CLASS OF _____

FACULTY ADVISOR: _____

The DPT Program requires students to complete the following requirements during the course of the curriculum. It is the student's responsibility to meet with their advisor at the beginning of each fall and spring semester, and to ensure that requirements are completed as necessary. As an activity is completed, date and initial the appropriate box. Some activities will need to be completed more than once.

Activity	Year 1			Year 2		Year 3	
	Sum	Fall	Spr	Fall	Spr	Fall	Spr
Handbook policy signed							
Continuance policy signed							
Professional Behaviors self- assessment completed & reviewed with advisor							
CITI training for Research compliance annually							
APTA membership# _____							
CPR certification/ recertification <i>as needed</i>							
Criminal Background Check OSHA & HIPAA training Required annually							
Service Learning Activity 1 required (Describe)							
Service Learning Activity (Describe)							
Service Learning Activity (Describe)							
Other Volunteer Event (Describe)							
Other Volunteer Event (Describe)							
Other Volunteer Event (Describe)							
Written Comprehensive Exam							
Oral Comprehensive Exam							

DEFINITION OF SERVICE LEARNING

What is Service Learning?

Service learning is a teaching and learning strategy that integrates meaningful community service with instruction and reflection to enrich the learning experience, teach civic responsibility, and strengthen communities. The faculty in the Physical Therapy Program value service and service learning. Students in the program are required to participate in at least one service-learning activity while in the program outside of those service activities required by specific classes. These activities may take several forms.

Professional service includes a willingness to participate in local, state and national professional organizations in order to help advance the profession of physical therapy. Examples of student participation in professional service would be acting as a student liaison to APTA Virginia, volunteering for a leadership role in the national Student Physical Therapy Association, volunteering to help at the state conference, or participating in congressional visits. Additional activities include participating in recruitment activities or career days at local schools.

Community service learning fulfills a community need related to the practice of physical therapy. Examples of this type of service include presenting information to community groups who demonstrate/request a need, participating in free health clinics, screening events or community wellness programs, and volunteering at an aid station during an athletic or Special Olympics event.

Other types of **volunteer service** may be unrelated to physical therapy. Examples of these would be participating in Old Dominion University's Community Day of Caring where a student may help clean up a park or gathering donations and/or running in the annual breast cancer "Race for the Cure". We applaud these worthy causes because they enrich a person's experiences in the community and help others. They are not, however, in the category of service learning.

PROGRAM IN PHYSICAL THERAPY TECHNICAL STANDARDS

These technical standards describe essential functions needed to complete the educational program and perform the job of a physical therapist. An individual not possessing one or more of these capabilities will not be admitted to the program unless reasonable accommodations can be made that allow the person to perform all required tasks within a standard period of time used in the profession.

Deficiencies in knowledge, skill, judgment, integrity, character, professional attitude or demeanor which may jeopardize patient care and/or safety may be grounds for course/internship failure and possible dismissal from the Program.

Applicants/Students admitted to the DPT program must possess aptitudes, abilities, and skills in the following five areas:

1. Observation

Students must be able to observe and identify anatomic structures to distinguish different tissues in a limited time period. A student must be able to observe a patient accurately at a distance and close at hand, noting nonverbal as well as verbal signals. Specific vision-related requirements include, but are not limited to the following abilities: skin integrity; visualizing and discriminating findings on radiographs and other medical imaging tools; reading written and illustrated material; observing demonstrations in the classroom, including multimedia presentations; observing and differentiating changes in body movement; observing anatomic structures; discriminating numbers and patterns associated with diagnostic instruments and tests, such as sphygmomanometers and electrocardiograms, and using instruments competently, such as stethoscope, monofilaments, etc.

2. Communication

Students must be able to relate effectively and sensitively with peers, patients/clients and faculty. A student must be able to communicate clearly with and observe patients in order to elicit information, describe accurately changes in mood, activity and posture, and perceive verbal as well as nonverbal communications. Communication includes not only speech but also reading and writing. Physical Therapy education presents exceptional challenges in the volume and breadth of required reading and the necessity to impart information to others. Students must be able to communicate quickly, effectively and efficiently in oral and written English with all members of the health care team. Specific requirements include but are not limited to the following abilities: communicating rapidly and clearly with the medical team on rounds; eliciting a thorough history from patients; and communicating complex findings in appropriate terms to patients and to various members of the health care team (fellow students, physicians, nurses, aides, therapists, social workers, and others). Students must learn to recognize and respond promptly and appropriately to emotional communications such as sadness, worry, agitation, and lack of comprehension. Each student must be able to read and to record observations and plans legibly, efficiently and accurately in documents such as the patient record. Students must be able to prepare and communicate concise but complete summaries of individual encounters. Students must be able to complete forms according to directions in a complete and timely fashion.

3. Sensory and Motor Coordination or Function

Students must have sufficient sensory function to palpate (touch/feel) pulses and body tissues, feel resistance to movement, discern hot and cold, and auscultate (listen) lungs and heart. A student must have adequate gross motor function (movement, strength, balance and coordination) to perform such tasks as cardiopulmonary resuscitation, lifting people's limbs, assistance with transfers and gait, moving and positioning patients, and getting down to and up from the floor without assistance. A student must have adequate fine motor function to manipulate instruments such as a sphygmomanometer, goniometer, and therapeutic modality equipment. Students must be able to respond promptly to urgencies within the hospital or clinic and must not hinder the ability of co-workers to provide prompt care.

4. Intellectual-Conceptual Integrative and Quantitative Abilities

These abilities include measurement, calculation, reasoning, analysis, judgment, numerical recognition and synthesis. Problem solving, a critical skill demanded of physical therapists, requires all of these intellectual abilities, and must be performed quickly, especially in emergency situations. Students must be able to identify significant findings from history, physical examination, and laboratory data and graphs, provide a reasoned explanation for likely therapy, recalling and retaining information in an efficient and timely manner. The ability to incorporate new information from peers, teachers, and the medical literature in formulating treatment and plans is essential. Good judgment in patient assessment, diagnostic and therapeutic planning is essential; students must be able to identify and communicate the limits of their knowledge to others when appropriate.

5. Behavioral Attributes

Empathy, integrity, honesty, concern for others, good interpersonal skills, interest and motivation are all personal qualities that are required. Students must possess the emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities, and the development of mature, sensitive and effective relationships with peers, patients/clients and faculty. At times, this requires the ability to be aware of and appropriately react to one's own immediate emotional responses. For example, students must maintain a professional demeanor and organization in the face of long hours and personal fatigue, dissatisfied patients, and tired colleagues. Students must be able to develop professional relationships with patients, providing comfort and reassurance when appropriate while protecting patient confidentiality. Students must possess adequate endurance to tolerate physically taxing workloads and to function effectively under stress. Students must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. Students are expected to accept appropriate suggestions and criticism in a respectful manner and if necessary, respond by modification of behavior.

For further information on technical standards and the Americans with Disabilities Act, please contact the Office of Educational Accessibility (757) 683-4655.

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY**

POLICY ON MANAGEMENT OF COMPLAINTS

The Program in Physical Therapy adheres to the University Student Complaint Procedure as published in the Graduate Catalog under Policies and Procedures [University Policies & Procedures < Old Dominion University \(odu.edu\)](http://www.odu.edu/graduate-catalog/policies-procedures)

No student who files a complaint shall be subject to any form of retaliation by any person, department, program or college.

Informal Resolution. Students must first attempt to resolve complaints informally. Given the nature of complaints covered by this procedure, it is expected that in all but the most unusual circumstances, students will first raise the issue with the faculty member. In the event this is not feasible, the student will contact the Program Director. The Program Director will meet with a student to discuss any complaints or concerns relating to the Program, and possible resolutions. The Program Director will document informal complaints and resolutions in a complaint form and complaint log kept in a confidential file in the Program Director's office.

Formal Complaint. If the issue is not resolved informally, the student may contact the Department Chair to initiate the formal complaint procedure. At this point the complaint must be in writing and contain:

- a. The student's name and University Identification Number
- b. The faculty member's name and the course subject area prefix and number
- c. A detailed description of the nature of the complaint
- d. A detailed description of attempts at informal resolution with the faculty member and the faculty member and/or Program Director
- e. A detailed description of the relief sought.

The formal complaint procedure will continue with an investigation, decision, and if applicable an appeal procedure as described in the Graduate Catalog referenced above.

COMMISSION ON ACCREDITATION OF PHYSICAL THERAPY EDUCATION

The ODU Program in Physical Therapy is fully accredited by CAPTE. Any person may submit to CAPTE a complaint about an accredited or developing program. Should a student have concerns related to the Program and wish to register a complaint with CAPTE they may do so by following the Procedure outlined in Part 11 of the CAPTE Rules of Practice and Procedure Accreditation Handbook which can be accessed at: <http://www.capteonline.org/Complaints/>. Additionally, CAPTE can be notified via the contact information listed below.

American Physical Therapy Association
Attention: Accreditation Department
1111 North Fairfax Street
Alexandria, VA 22314-1488
Fax: 703/706-3387

Email at accreditation@apta.org

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY**

POLICY ON AUTHORSHIP

1. When working in a collaborative group, the individual (faculty or student) who develops the basic idea for the research and oversees completion of the project with significant contribution to the writing and editing, will generally be the first author on research reports resulting from that idea. This can be altered if the individual who develops the idea agrees to willingly surrender that first author position to a colleague for reasons such as major contributions to collecting the data and performing the major aspects of work on the project.
2. To be listed as an author requires substantial contribution to the research project. Authors should contribute to at least 2 out of 3 of the following parts of the research enterprise: (1) the conception and design of the study, (2) data collection, analysis, or interpretation, and (3) writing/editing and final approval of the submitted version.
3. For publications/presentations that are a part of a thesis or dissertation the student is the primary author unless they relinquish this status in writing.
4. Students receiving remuneration for performing duties as part of a research project are not automatically considered to be an author on a research paper or presentation.
5. Issues of order of authorship should be settled very early during discussions about collaboration for performing research. This is true both of research between colleagues in the school or research involving students under the supervision of faculty or involving students in completing research projects, theses or dissertations.
6. Disputes regarding authorship will be brought to an ad hoc committee consisting of 2 faculty and 2 students not involved in the research. The committee will determine what the final outcome should be for authorship.

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY**

POLICY ON STUDENT INCIDENT / INJURIES

Any student or faculty involved in an incident that results in injury related to laboratory or classroom experiences must adhere to the following:

- a. Any incident must be reported immediately to the faculty responsible for the class or lab activity and the Graduate Program Director. If immediate medical attention is needed, the student should seek this care as appropriate before completing an incident form.
- b. In case of emergency, someone should be designated to call for emergency services for an ambulance. ODU Campus Security can be reached by dialing “683-4000” for quick security response.
- c. The College of Health Sciences Student Incident Report Form can be obtained from the PT main office in room 2152 Health Sciences Building. It should be completed and signed by the student involved and signed by a faculty member. If referral for treatment is indicated, the treatment facility should complete items 14-17.
- d. The completed incident form should be returned to the Graduate Program Director within seven (7) days of the incident.

Students who need follow-up care should call Student Health Services at 683-3132. After hours assistance may be obtained from the Nurse Practitioner on call for Student Health Services by calling ODU Campus Security at 683-4000 and having the Nurse Practitioner paged.

Students are responsible for expenses associated with laboratory incidents.

Any incident that occurs off campus during an educational experience should be treated following the same procedure as above for on-campus incidents.

Any incident that occurs during a clinical internship will be handled according to the policy of the clinical site. In those cases, the Director of Clinical Education should be notified within seven (7) days of the incident.

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY**

MEDICAL INCIDENT REPORT

(Include accidents, exposure to hazardous substance or disease.)

1. PLEASE PRINT

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

UIN: _____

2. OCCURRENCE DATE: _____

Day of Week: _____

3. OCCURRENCE TIME: _____ AM / PM

4. REPORT DATE: _____

5. LOCATION OF OCCURRENCE: _____

6. ACTIVITY INVOLVED (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Lifting patient | <input type="checkbox"/> Transport patient |
| <input type="checkbox"/> Lifting other | <input type="checkbox"/> Transport equipment |
| <input type="checkbox"/> Invasive procedure/injection | <input type="checkbox"/> Equipment use/repair |
| <input type="checkbox"/> Other patient care | <input type="checkbox"/> Walking |
| <input type="checkbox"/> Non-work activity | <input type="checkbox"/> Hazardous substance/Infectious Exposure |

Explain:

Other:

7. TYPE OF INJURY (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> No apparent injury | <input type="checkbox"/> Foreign body |
| <input type="checkbox"/> Laceration/Abrasion | <input type="checkbox"/> Strain/sprain |
| <input type="checkbox"/> Puncture | <input type="checkbox"/> Fracture |
| <input type="checkbox"/> Burn | <input type="checkbox"/> Amputation |
| <input type="checkbox"/> Bruise/crush | <input type="checkbox"/> Electrical shock |
| <input type="checkbox"/> Bite/scratch | |
| <input type="checkbox"/> Other: | |

Explain:

8. PART of BODY (check all that apply)

<u>LEFT</u>	<u>RIGHT</u>		<u>LEFT</u>	<u>RIGHT</u>	
_____	_____	Head	_____	_____	Elbow
_____	_____	Eye	_____	_____	Hand
_____	_____	Ear	_____	_____	Finger(s)
_____	_____	Face	_____	_____	Wrist
_____	_____	Neck	_____	_____	Leg
_____	_____	Chest	_____	_____	Groin
_____	_____	Abdomen	_____	_____	Knee
_____	_____	Back	_____	_____	Foot
_____	_____	Arm	_____	_____	Toe(s)
_____	_____	Shoulder	_____	_____	Ankle

9. POSSIBLE CAUSES (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Unclear as to Policy/Procedure | <input type="checkbox"/> Unaware of safety hazard |
| <input type="checkbox"/> Patient initiated occurrence | <input type="checkbox"/> Foreign material on floor |
| <input type="checkbox"/> Equipment defect/malfunction/handling | <input type="checkbox"/> Improper Body mechanics |
| <input type="checkbox"/> Poor illumination | |
| <input type="checkbox"/> Other | |

Explain:

10. WAS A FACULTY MEMBER (OR DIRECTOR/ASSOCIATE DIRECTOR OF CLINIC EDUCATION DURING CLINICAL EXPERIENCES) NOTIFIED AT TIME OF OCCURENCE?

____ Yes

____ No

11. DESCRIPTION OF OCCURRENCE

12.

Name: _____

Telephone: _____

Name: _____

Telephone: _____

13. DESCRIBE MEASURES TAKEN TO PREVENT REOCCURRENCE:

14. IMMEDIATE TREATMENT

- No treatment necessary
- Employee health
- Emergency room
- Other
- First-aid
- Refused treatment
- Hospital/Medical Center

Explain: _____

15. WAS STUDENT REFERRED TO PHYSICIAN?

_____ Yes

_____ No

Treatment Facility: _____

Physician Name: _____

Brief Description of Rx: _____

OR

If incident is a blood or body fluid exposure, please adhere to Blood-Borne Pathogen Post Exposure guidelines. Document only as directed.

16. DISPOSITION

- Return to school
 - Released to home
 - Hospitalized
 - Fatality
 - Other
- Name of hospital: _____
- Explain: _____

17. TIME LOST:

- Yes
- No

Estimated absence (hours, days, weeks): _____

18. SIGNATURES

Student: _____ Date: _____

Clinical Supervisor: _____ Date: _____

Course Supervisor: _____ Date: _____

Comments: _____

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY
Professional Behaviors Assessment**

Student Name: Click or tap here to enter text.

Graduation Year: Click or tap here to enter text.

Advisor: Click or tap here to enter text.

Date: Click or tap to enter a date.

Directions: 1. Read the description of each Professional Behavior.

1. Become familiar with the behavioral criteria described in each of the levels.
2. Self - assess your performance continually, relative to the Professional Behaviors, using the behavioral criteria.
 3. Each fall semester, complete this form.
 - a) **Using a Highlighter Pen**, highlight all criteria that describes behaviors you demonstrate in Beginning (column 1), Intermediate (column 2), Entry Level (column 3) or Post-Entry Level Professional Behaviors.
 - b) Identify the level within which you predominately function.
 - c) Document specific examples of when you demonstrated behaviors from the highest level highlighted.
 - d) For each Professional Behavior, list the areas in which you wish to improve.
 4. Email your self-assessment to your advisor prior to your advising meeting. Please save the document with your **last name, first initial, year_ Professional Behaviors Self Assessment**. (Doe_J_2021_ Professional Behaviors Self Assessment). Discuss your self- assessment with your advisor, specifically seeking his/her feedback during your fall advising session.
 5. Have your advisor sign that they have read and discussed your self-assessment; your advisor will place a copy in your electronic file.

**Professional Behaviors were developed by Warren May, Laurie Kontney and Annette Iglarsh (2010) as an update to the Generic Abilities.

1. Critical Thinking - The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.

Beginning Level:	Intermediate Level:	Entry Level:	Post-Entry Level:
<ul style="list-style-type: none"> ❖ Raises relevant questions ❖ Considers all available information ❖ Articulates ideas ❖ Understands the scientific method ❖ States the results of scientific literature but has not developed the consistent ability to critically appraise findings (i.e. methodology and conclusion) ❖ Recognizes holes in knowledge base ❖ Demonstrates acceptance of limited knowledge and experience in knowledge base 	<ul style="list-style-type: none"> ❖ Feels challenged to examine ideas ❖ Critically analyzes the literature and applies it to patient management ❖ Utilizes didactic knowledge, research evidence, and clinical experience to formulate new ideas ❖ Seeks alternative ideas ❖ Formulates alternative hypotheses ❖ Critiques hypotheses and ideas at a level consistent with knowledge base ❖ Acknowledges presence of contradictions 	<ul style="list-style-type: none"> ❖ Distinguishes relevant from irrelevant patient data ❖ Readily formulates and critiques alternative hypotheses and ideas ❖ Infers applicability of information across populations ❖ Exhibits openness to contradictory ideas ❖ Identifies appropriate measures and determines effectiveness of applied solutions efficiently ❖ Justifies solutions selected 	<ul style="list-style-type: none"> ❖ Develops new knowledge through research, professional writing and/or professional presentations ❖ Thoroughly critiques hypotheses and ideas often crossing disciplines in thought process ❖ Weighs information value based on source and level of evidence ❖ Identifies complex patterns of associations ❖ Distinguishes when to think intuitively vs. analytically ❖ Recognizes own biases and suspends judgmental thinking ❖ Challenges others to think critically

*I function predominantly in the **beginning/intermediate/entry/post entry** level.*

Examples of behaviors to support my self assessment:

Click or tap here to enter text.

Regarding this Professional Behavior, I would like to improve in the following ways:

Click or tap here to enter text.

2. Communication - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Demonstrates understanding of the English language (verbal and written): uses correct grammar, accurate spelling and expression, legible handwriting ❖ Recognizes impact of non-verbal communication in self and others ❖ Recognizes the verbal and non-verbal characteristics that portray confidence ❖ Utilizes electronic communication appropriately 	<ul style="list-style-type: none"> ❖ Utilizes and modifies communication (verbal, non-verbal, written and electronic) to meet the needs of different audiences ❖ Restates, reflects and clarifies message(s) ❖ Communicates collaboratively with both individuals and groups ❖ Collects necessary information from all pertinent individuals in the patient/client management process ❖ Provides effective education (verbal, non-verbal, written and electronic) 	<ul style="list-style-type: none"> ❖ Demonstrates the ability to maintain appropriate control of the communication exchange with individuals and groups ❖ Presents persuasive and explanatory verbal, written or electronic messages with logical organization and sequencing ❖ Maintains open and constructive communication ❖ Utilizes communication technology effectively and efficiently 	<ul style="list-style-type: none"> ❖ Adapts messages to address needs, expectations, and prior knowledge of the audience to maximize learning ❖ Effectively delivers messages capable of influencing patients, the community and society ❖ Provides education locally, regionally and/or nationally ❖ Mediates conflict

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self-assessment:

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

3. Problem Solving – The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Recognizes problems ❖ States problems clearly ❖ Describes known solutions to problems ❖ Identifies resources needed to develop solutions ❖ Uses technology to search for and locate resources ❖ Identifies possible solutions and probable outcomes 	<ul style="list-style-type: none"> ❖ Prioritizes problems ❖ Identifies contributors to problems ❖ Consults with others to clarify problems ❖ Appropriately seeks input or guidance ❖ Prioritizes resources (analysis and critique of resources) ❖ Considers consequences of possible solutions 	<ul style="list-style-type: none"> ❖ Independently locates, prioritizes and uses resources to solve problems ❖ Accepts responsibility for implementing solutions ❖ Implements solutions ❖ Reassesses solutions ❖ Evaluates outcomes ❖ Modifies solutions based on the outcome and current evidence ❖ Evaluates generalizability of current evidence to a particular problem 	<ul style="list-style-type: none"> ❖ Weighs advantages and disadvantages of a solution to a problem ❖ Participates in outcome studies ❖ Participates in formal quality assessment in work environment ❖ Seeks solutions to community health-related problems ❖ Considers second and third order effects of solutions chosen

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self-assessment:

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

4. Interpersonal Skills – The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Maintains professional demeanor in all interactions ❖ Demonstrates interest in patients as individuals ❖ Communicates with others in a respectful and confident manner ❖ Respects differences in personality, lifestyle and learning styles during interactions with all persons ❖ Maintains confidentiality in all interactions ❖ Recognizes the emotions and bias that one brings to all professional interactions 	<ul style="list-style-type: none"> ❖ Recognizes the non-verbal communication and emotions that others bring to professional interactions ❖ Establishes trust ❖ Seeks to gain input from others ❖ Respects role of others ❖ Accommodates differences in learning styles as appropriate 	<ul style="list-style-type: none"> ❖ Demonstrates active listening skills and reflects back to original concern to determine course of action ❖ Responds effectively to unexpected situations ❖ Demonstrates ability to build partnerships ❖ Applies conflict management strategies when dealing with challenging interactions ❖ Recognizes the impact of non-verbal communication and emotional responses during interactions and modifies own behaviors based on them 	<ul style="list-style-type: none"> ❖ Establishes mentor relationships ❖ Recognizes the impact that non-verbal communication and the emotions of self and others have during interactions and demonstrates the ability to modify the behaviors of self and others during the interaction

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self-assessment::

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

5. Responsibility – The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Demonstrates punctuality ❖ Provides a safe and secure environment for patients ❖ Assumes responsibility for actions ❖ Follows through on commitments ❖ Articulates limitations and readiness to learn ❖ Abides by all policies of academic program and clinical facility 	<ul style="list-style-type: none"> ❖ Displays awareness of and sensitivity to diverse populations ❖ Completes projects without prompting ❖ Delegates tasks as needed ❖ Collaborates with team members, patients and families ❖ Provides evidence-based patient care 	<ul style="list-style-type: none"> ❖ Educates patients as consumers of health care services ❖ Encourages patient accountability ❖ Directs patients to other health care professionals as needed ❖ Acts as a patient advocate ❖ Promotes evidence-based practice in health care settings ❖ Accepts responsibility for implementing solutions ❖ Demonstrates accountability for all decisions and behaviors in academic and clinical settings 	<ul style="list-style-type: none"> ❖ Recognizes role as a leader ❖ Encourages and displays leadership ❖ Facilitates program development and modification ❖ Promotes clinical training for students and coworkers ❖ Monitors and adapts to changes in the health care system ❖ Promotes service to the community

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self-assessment:

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

6. Professionalism – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Abides by all aspects of the academic program honor code and the APTA Code of Ethics ❖ Demonstrates awareness of state licensure regulations ❖ Projects professional image ❖ Attends professional meetings ❖ Demonstrates cultural/generational awareness, ethical values, respect, and continuous regard for all classmates, academic and clinical faculty/staff, patients, families, and other healthcare providers 	<ul style="list-style-type: none"> ❖ Identifies positive professional role models within the academic and clinical settings ❖ Acts on moral commitment during all academic and clinical activities ❖ Identifies when the input of classmates, co-workers and other healthcare professionals will result in optimal outcome and acts accordingly to attain such input and share decision making ❖ Discusses societal expectations of the profession 	<ul style="list-style-type: none"> ❖ Demonstrates understanding of scope of practice as evidenced by treatment of patients within scope of practice, referring to other healthcare professionals as necessary ❖ Provides patient/family centered care at all times as evidenced by provision of patient/family education, seeking patient input and informed consent for all aspects of care and maintenance of patient dignity ❖ Seeks excellence in professional practice by participation in professional organizations and attendance at sessions or participation in activities that further education/professional development ❖ Utilizes evidence to guide clinical decision making and the provision of patient care, following guidelines for best practices ❖ Discusses role of physical therapy within the healthcare system and in population health ❖ Demonstrates leadership in ❖ collaboration with both individuals and groups 	<ul style="list-style-type: none"> ❖ Actively promotes and advocates for the profession ❖ Pursues leadership roles ❖ Supports research ❖ Participates in program development ❖ Participates in education of the community ❖ Demonstrates the ability to practice effectively in multiple settings ❖ Acts as a clinical instructor ❖ Advocates for the patient, the community and society

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors that support my self-assessment:

Click or tap here to enter text.

Regarding this Professional Behavior, I would like to improve in the following ways:

Click or tap here to enter text.

7. Use of Constructive Feedback – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Demonstrates active listening skills ❖ Assesses own performance ❖ Actively seeks feedback from appropriate sources ❖ Demonstrates receptive behavior and positive attitude toward feedback ❖ Incorporates specific feedback into behaviors ❖ Maintains two-way communication without defensiveness 	<ul style="list-style-type: none"> ❖ Critiques own performance accurately ❖ Responds effectively to constructive feedback ❖ Utilizes feedback when establishing professional and patient related goals ❖ Develops and implements a plan of action in response to feedback ❖ Provides constructive and timely feedback 	<ul style="list-style-type: none"> ❖ Independently engages in a continual process of self evaluation of skills, knowledge and abilities ❖ Seeks feedback from patients/clients and peers/mentors ❖ Readily integrates feedback provided from a variety of sources to improve skills, knowledge and abilities ❖ Uses multiple approaches when responding to feedback ❖ Reconciles differences with sensitivity ❖ Modifies feedback given to patients/clients according to their learning styles 	<ul style="list-style-type: none"> ❖ Engages in non-judgmental, constructive problem-solving discussions ❖ Acts as conduit for feedback between multiple sources ❖ Seeks feedback from a variety of sources to include students/supervisees/peers/supervisors/patients ❖ Utilizes feedback when analyzing and updating professional goals

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self-assessment:

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

8. Effective Use of Time and Resources – The ability to manage time and resources effectively to obtain the maximum possible benefit.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Comes prepared for the day's activities/responsibilities ❖ Identifies resource limitations (i.e. information, time, experience) ❖ Determines when and how much help/assistance is needed ❖ Accesses current evidence in a timely manner ❖ Verbalizes productivity standards and identifies barriers to meeting productivity standards ❖ Self-identifies and initiates learning opportunities during unscheduled time 	<ul style="list-style-type: none"> ❖ Utilizes effective methods of searching for evidence for practice decisions ❖ Recognizes own resource contributions ❖ Shares knowledge and collaborates with staff to utilize best current evidence ❖ Discusses and implements strategies for meeting productivity standards ❖ Identifies need for and seeks referrals to other disciplines 	<ul style="list-style-type: none"> ❖ Uses current best evidence ❖ Collaborates with members of the team to maximize the impact of treatment available ❖ Has the ability to set boundaries, negotiate, compromise, and set realistic expectations ❖ Gathers data and effectively interprets and assimilates the data to determine plan of care ❖ Utilizes community resources in discharge planning ❖ Adjusts plans, schedule etc. as patient needs and circumstances dictate ❖ Meets productivity standards of facility while providing quality care and completing non-productive work activities 	<ul style="list-style-type: none"> ❖ Advances profession by contributing to the body of knowledge (outcomes, case studies, etc) ❖ Applies best evidence considering available resources and constraints ❖ Organizes and prioritizes effectively ❖ Prioritizes multiple demands and situations that arise on a given day ❖ Mentors peers and supervisees in increasing productivity and/or effectiveness without decrement in quality of care

I function predominantly in the **beginning/intermediate/entry/post entry** level.
 Examples of behaviors to support my self-assessment:
[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:
[Click or tap here to enter text.](#)

9. Stress Management – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Recognizes own stressors ❖ Recognizes distress or problems in others ❖ Seeks assistance as needed ❖ Maintains professional demeanor in all situations 	<ul style="list-style-type: none"> ❖ Actively employs stress management techniques ❖ Reconciles inconsistencies in the educational process ❖ Maintains balance between professional and personal life ❖ Accepts constructive feedback and clarifies expectations ❖ Establishes outlets to cope with stressors 	<ul style="list-style-type: none"> ❖ Demonstrates appropriate affective responses in all situations ❖ Responds calmly to urgent situations with reflection and debriefing as needed ❖ Prioritizes multiple commitments ❖ Reconciles inconsistencies within professional, personal and work/life environments ❖ Demonstrates ability to defuse potential stressors with self and others 	<ul style="list-style-type: none"> ❖ Recognizes when problems are unsolvable ❖ Assists others in recognizing and managing stressors ❖ Demonstrates preventative approach to stress management ❖ Establishes support networks for self and others ❖ Offers solutions to the reduction of stress ❖ Models work/life balance through health/wellness behaviors in professional and personal life

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self-assessment:

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

10. Commitment to Learning – The ability to self direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

Beginning Level:	Intermediate Level:	Entry Level:	Post Entry Level:
<ul style="list-style-type: none"> ❖ Prioritizes information needs ❖ Analyzes and subdivides large questions into components ❖ Identifies own learning needs based on previous experiences ❖ Welcomes and/or seeks new learning opportunities ❖ Seeks out professional literature ❖ Plans and presents an in- service, research or cases studies 	<ul style="list-style-type: none"> ❖ Researches and studies areas where own knowledge base is lacking in order to augment learning and practice ❖ Applies new information and re-evaluates performance ❖ Accepts that there may be more than one answer to a problem ❖ Recognizes the need to and is able to verify solutions to problems ❖ Reads articles critically and understands limits of application to professional practice 	<ul style="list-style-type: none"> ❖ Respectfully questions conventional wisdom ❖ Formulates and re-evaluates position based on available evidence ❖ Demonstrates confidence in sharing new knowledge with all staff levels ❖ Modifies programs and treatments based on newly-learned skills and considerations ❖ Consults with other health professionals and physical therapists for treatment ideas 	<ul style="list-style-type: none"> ❖ Acts as a mentor not only to other PT's, but to other health professionals ❖ Utilizes mentors who have knowledge available to them ❖ Continues to seek and review relevant literature ❖ Works towards clinical specialty certifications ❖ Seeks specialty training ❖ Is committed to understanding the PT's role in the health care environment today (i.e. wellness clinics, massage therapy, holistic medicine) ❖ Pursues participation in clinical education as an educational opportunity

I function predominantly in the **beginning/intermediate/entry/post entry** level.

Examples of behaviors to support my self- assessment:

[Click or tap here to enter text.](#)

Regarding this Professional Behavior, I would like to improve in the following ways:

[Click or tap here to enter text.](#)

Professional Development Plan:

Based on my self-assessment of my Professional Behaviors and the areas I have identified for improvement, I am setting the following goals:

To accomplish these goals, I will take the following specific actions:

By typing my name below, I indicate that I have completed this self-assessment and sought feedback from my CI regarding my self-assessment.

Student Signature: Click or tap here to enter text. Date: Click or tap to enter a date.

Advisor feedback/suggestions.

Advisor signature: Click or tap here to enter text. Date: Click or tap to enter a date.

EXPECTED PROFESSIONAL BEHAVIORS

All students are required to adhere to the APTA Professional Code of Conduct and Code of Ethics (see APTA website at www.apta.org).

Examples of expected professional behavior include:

1. Being on time and prepared for class; timely completion of assignments; class participation
2. Adhering to the dress code for laboratory, clinical and other school related functions
3. Respectful interpersonal interactions with classmates, faculty, clinicians, clients and their family members
4. Respectful use of social media. Consider that posts, blogs, tweets and pictures represent you, the Program, and influence how your character is perceived.

Failure to demonstrate appropriate professional behaviors may be grounds for grade reduction or failure of a course or dismissal from the DPT Professional Program.

PHYSICAL THERAPY CLUB

The Physical Therapy (PT) Club is a recognized Old Dominion University student organization comprised of students enrolled in the DPT Program. The mission of the PT Club is to enhance the awareness of the physical therapy profession in the community, volunteer for local charitable organizations, and facilitate mentorship among students and faculty in the physical therapy program.

The PT Minority Alliance is a sub-group of the PT Club comprised of underrepresented students in the physical therapy program.

The PT Club holds meetings at least once per semester and sponsors a social event once per semester. Previous events have included a self-defense course, fall Halloween party, Angel Tree sponsorships, canned food drives, Relay for Life events, Race for the Cure events, fundraisers for the PT Foundation, and fall and spring formals.

The PT Club elects officers each fall consisting of: President, Vice-President, Secretary, Treasurer, Class Historian, and Social Chair. In addition, each class elects a class representative in the fall of the first year. DPT 1 and DPT 2 students are eligible to run for officer positions. Dr. Mariano serves as the advisor to the PT Club.

CODE OF STUDENT CONDUCT

Expected student conduct is documented in the Code of Student Conduct found in the Policy and Procedures of the ODU Graduate Catalog (<http://www.odu.edu/about/policiesandprocedures/bov/bov1500/1530>)

HONOR CODE/ PLAGIARISM

When you register each semester for your courses you are also signing an Honor Code Pledge to uphold Old Dominion University's Honor System.

"I pledge to support the Honor System of Old Dominion University. I will refrain from any form of dishonesty or deception such as lying, cheating, and plagiarism, which are honor violations. I am further aware that as a member of the academic community it is my responsibility to turn in all suspected violators of the Honor Code. I will report to a hearing if summoned."

Plagiarism: A student will have committed plagiarism if he or she reproduces someone else's work without acknowledging its source. Plagiarism includes making simple changes to borrowed materials while leaving the organization, content or phraseology intact. Plagiarism also occurs in a group project if one or more of the members of the group does none of the group's work and participates in none of the group's activities, but attempts to take credit for the work of the group.

"Zero" (0) is:

- a. the Program in Physical Therapy's tolerance for plagiarism or cheating of any kind, and
- b. the grade that will be assigned for any plagiarized work.

Cases will be reported to the University Hearing Officer, and the instructor may assign the student a grade of F for the course, regardless of the numerical average accumulated by the student for work that was not plagiarized.

Students who are unsure of the meaning of "cheating" or "plagiarizing" should visit the web site of the Old Dominion Honor Council; page 20 of the ODU Graduate catalog.

Objectives of the Student Conduct System

- a. Create an environment that provides the best opportunity for academic inquiry and learning;
- b. Assure students a fundamentally fair opportunity to resolve allegations when they have been accused of violating the Code;
- c. To protect members of the University community from harm resulting from the misconduct of the few students who fail to respect the rights of others; and
- d. 4. To help ensure order in the University community.

Social Media Policy

PROGRAM IN PHYSICAL THERAPY POLICY ON GRADING

The Program in Physical Therapy utilizes the following grading scale:

A = 90 and above

B = 80 to 89

C = 70 to 79

F = 69 and below

No pluses or minuses will be given. Rounding of final grades will be at the discretion of the Course Coordinator for each course.

Clinical education courses will be graded pass/fail

GRADUATION REQUIREMENTS

In addition to satisfactorily completing the didactic and clinical education curriculum, students must pass both written and oral comprehensive examinations prior to graduation. These exams are given at the end of the fall semester of program year three.

Doctor of Physical Therapy (DPT) Comprehensive Examination Policy and Procedure

One requirement for graduation from the Doctor of Physical Therapy Program (DPT) is the successful completion of a comprehensive examination. The comprehensive examination is given at the end of the fall semester of year 3, prior to beginning the final, full-time clinical experience in the spring semester.

The comprehensive examination consists of 2 components – a written and an oral component.

Successful completion of the written component is required before proceeding to the oral component. Successful completion of both components is required before proceeding to the final clinical experience.

Written Component:

1. The written examination is structured to simulate the National Physical Therapy Examination (NPTE) and is intended to determine preparedness for the final clinical experience and the licensure examination. The ODU DPT Program uses the Practice Exam Assessment Tool (PEAT) for the written component of the comprehensive examination.
 - a. The written examination will be administered in the same format as the NPTE exam via computer in a secure testing environment at ODU
 - b. A maximum allotted time of 5 hours with one scheduled 15-minute break after section 2. Three unscheduled breaks are allowed after each section but the examination timer continues to elapse, which is identical to the administration of the NPTE.
2. Passing score:
 - a. The examination is graded as pass/fail. The passing score has been set at 600 to align with the NPTE. Scores of 580 or greater will be considered a passing score for the written

component of the comprehensive examination and the student will be allowed to progress to the oral component.

- i. Students who score **600 or greater** will be qualified to apply for early testing (taking the NPTE prior to graduation) if permitted by state regulations.
 - ii. Students who score between **580 and 599** will NOT be allowed to apply for early testing (taking the NPTE prior to graduation)
 1. An exception will be considered if the student repeats the PEAT exam PRIOR to the FSBPT deadline for validation of graduation AND scores 600 or greater on the repeat exam.
- b. Scores of **579 and below** will be considered failure of the written component.
- i. The student will NOT progress to the oral component of the examination.
 - ii. The student's spring clinical experience will be postponed.
 - iii. The student will no longer be eligible for May degree conferral.*
 1. The student will need to register for 1 credit hour during the semester of degree conferral per university policy.
 - iv. The student will enter a period of remediation with a repeat PEAT exam to be administered in approximately 60 days.
 - v. If the student scores 580 or higher on the second PEAT exam, they progress to the oral component of the examination.
 - vi. If the student scores 579 or below they will be dismissed from the program.**

Oral Component:

3. The oral component will consist of a scenario-based discussion with 2-3 students and 3 examiners.
 - a. 2 scenarios will be completed for the examination
4. Passing score:
 - a. The examination is graded as pass/fail. An overall score of 70% on all scenarios is considered passing.
 - i. Students are scored individually by each examiner. Scores of the 3 examiners are averaged to determine final score.
 - b. An overall score of 70% and above will be considered passing for the oral component and the student will have successfully completed the comprehensive examination.
 - i. The student will progress to the final clinical experience.
 - c. An overall score of 69% or below will be considered a failure of the oral component
 - i. Remediation will begin.
 - ii. Oral examination will be repeated individually with 2 examiners following the same structure and rules as the initial testing prior to the scheduled clinical experience start date.
 - iii. For the retake a score of 70% or greater will be considered passing the oral component and successfully completing the comprehensive examination
 1. The student will progress to their final clinical experience
 2. If a longer remediation period is required:
 - a. The student will register for 1 credit hour during the summer session if requirements for degree conferral are NOT completed by May graduation date.

- iv. A score of 69% or below on the repeat oral exam will result in dismissal from the program. **

*ODU has set degree conferral dates in January, March, May, June, August, October, and December. The date of degree conferral other than May will be determined on an individual basis, based on the completion of requirements for the DPT degree, including successful completion of comprehensive examination and final clinical experience. Final clinical experience location and dates are subject to clinical site availability and may impact degree conferral date.

**Any student who is dismissed from the program for unsuccessful completion of the comprehensive examination can appeal the decision as outlined in the graduate catalog

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY
POLICY ON CONTINUANCE**

1. Students must maintain a 3.0 GPA to remain in good academic standing in the program. Any student experiencing academic difficulty should reach out to the course instructor first, then to their advisor and/or the Graduate Program Director (GPD) as soon as possible. The advisor will communicate the student's academic situation to the GPD for review and collectively develop an appropriate course of action.
2. Any student who accumulates more than 2 C's during the program will meet with their advisor who will communicate the student's academic situation to the GPD for review and collectively develop an appropriate course of action.
3. Any student receiving an "F" in any course in the curriculum will meet with the GPD to determine an appropriate course of action. Possible actions may include remediation followed by repeating the course the following year, or dismissal from the program.
4. Any student with a GPA below 3.0 will be placed on academic probation as per University policy ([Graduate Policies & Procedures < Old Dominion University \(odu.edu\)](#)). Students on academic probation have 12 credits hours to bring their overall GPA up to 3.0. For students in this program, the next twelve credits will be taken in one semester. Students who are unable to increase their GPA to 3.0 after the completion of twelve credits will be suspended from the University.
5. A suspended student may follow the ODU Graduate Continuance Policy to apply for reinstatement. ([Graduate Policies & Procedures < Old Dominion University \(odu.edu\)](#)). Reinstatement is not automatic.
6. Because the curriculum is designed to integrate information across courses, a student who withdraws from a class for any reason **must** withdraw from every class in the same semester. Students will follow the withdrawal guidelines outlined in the ODU Graduate Catalog. Please consult with your advisor and the GPD prior to withdrawing.
7. Any student who leaves the program for any reason is required to communicate in writing to the GPD. GPD will complete and submit any necessary forms to the Graduate School.
8. If a leave of absence for either medical or personal reasons is needed, the student will contact their faculty advisor who will communicate the student's situation to the GPD for review and collectively develop an appropriate course of action. Requests of this nature will be reviewed/approved on a case-by-case basis.
9. As stated in the Clinical Education Handbook, a student who fails a clinical education course may repeat that course at the discretion of the Director of Clinical Education (DCE). Two failed clinical education courses will result in dismissal from the program.
10. Failure to demonstrate appropriate professional behaviors as described in the Student Handbook and the APTA Code of Ethics may be grounds for grade reduction or failure of a course or possible dismissal from the DPT Professional Program.

Continuance Committee

The program has a Continuance Committee of 3-5 faculty members who, under the direction of GPD, may be directed to review any situation relative to a student’s progress in the program and provide recommendations to the GPD as to the plan of action. The GPD, in consideration of the Continuance Committee recommendations, will decide the final plan of action. In the event of a voluntary separation from the program or dismissal, the GPD will submit the necessary documentation through the appropriate administrative channels to the Graduate School.

I, _____, have read and understand the ODU Program in
Physical Therapy Continuance Policy.

Student Signature

Date

Revised May 15, 2023

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY
POLICY ON ATTENDANCE**

Attendance in all courses is required, including lecture, laboratory, and clinical education sessions. As a professional education program, these policies should be considered within the context of professional responsibility and behavior. This program prepares students for professional clinical practice as a physical therapist which requires timeliness, dependability, respect for client’s time, and responsible behavior. Attendance of all classes, labs, and clinical education sessions is required for the following reasons:

- Class lectures include information and discussions which cannot be replicated at another time including presentations by outside experts and guests.
- Laboratory sessions require equipment and physical area set-up that cannot be replicated. This includes demonstration of techniques, dyad learning opportunities, observation and practice of clinical skills which includes feedback from skilled instructors. These opportunities should not be missed and cannot be performed in another fashion. Additionally, the student’s partner is then penalized by the student’s absence as skills are practiced and instructed in pairs.
- Attendance during clinical education is mandatory and is reflective of the student’s ability to function as a physical therapist. See the clinical education section for specific details of the clinical education procedure.

A calendar of classes and educational experiences for each semester will be provided to the students as soon as possible by the instructors of each class and the program. Every effort will be made to adhere to this schedule. Situations may arise in which classes and learning experiences must be rescheduled. This often arises with patient/client visits, interprofessional education events, or collaboration with outside organizations such as clinics or hospitals. Students must be flexible with their schedules and adapt to these changes. This program must be considered the priority of the student and any changes in curricular schedule must be accommodated. Every effort will be made to keep these rescheduled experiences within the Monday to Friday 8 am to 5 pm time frame. Students who will miss class are responsible for informing the instructor of that class via email and cc’ing the Conduct Officer of the program. All absences must be approved by the instructor who will inform the Conduct Officer or the absence will count as unexcused. It is the discretion of the faculty member or the Conduct Officer as to determine an excused vs unexcused absence.

Students are allowed 2 excused absences per academic year. For all absences after 2 excused absences or 1 unexcused absence, the student will be required to meet with the Conduct Officer to determine the reasons for these absences. Any repercussions of these absences will be determined by the Conduct Officer and can include: a conduct letter in permanent file, point deduction from the class, lowering a letter grade, suspension, or dismissal from the program. A single absence can cover more than one class if the circumstances dictate, but all faculty involved should be notified. Determining the number of absences assigned will be at the discretion of the Conduct Officer.

I, [Click or tap here to enter text.](#), have read and understand the ODU Program in Physical Therapy Attendance Policy.

Student Signature

Date

Revised May 9, 2022

CLASS AND LABORATORY INFORMATION

Students accepted into the Program are responsible adults seeking a truly professional education. Individuals seeking a professional education can take responsibility for their own actions. Students are expected to attend all classes, except in the case of illness or emergency. When a student might miss class, they should follow the guidelines per the Policy on Attendance and discuss make-up requirements for assignments missed during lab and class sessions with the instructor in advance. If a student misses a class due to an emergency, then it is the student's responsibility to discuss make-up requirements for assignments missed during lab sessions with the instructor. It is imperative that students remain up-to-date in their class work in all classes due to the intense nature of the program. Please refer to each individual class syllabus for any additional expectations required by the instructor.

STUDENT ACCESS TO HEALTH SCIENCES BLDG., PT LABS, & EQUIPMENT

The physical therapy student roster list is given to Campus security each year. Students will be allowed liberal access, seven days a week to the Health Sciences Bldg. by contacting the Campus Security office (757- 683-4000) during those times in which the building is locked.

RULES FOR STUDENT USE OF PHYSICAL THERAPY LABS

1. PT students may use the PT labs whenever they are not in use for lectures or lab. .
PLEASE ENSURE THAT THE PT LAB DOORS ARE SHUT/LOCKED AFTER USE.
2. No equipment or supplies should be removed from the premises at any time.
3. The student using the lab is responsible for locking the lab door when done and returning all items to their original place. Please clean up after yourselves!
4. Eating and drinking are NOT ALLOWED in the PT lab. Equipment can become damaged; mice and insects will be attracted to any can or food that is left in the labs. You may bring in water bottles to the lab.
5. Students are only permitted to use therapeutic equipment if a licensed physical therapist is present to supervise. Safety is of the utmost importance.
6. Students are to leave the PT labs neat and clean and sanitized when they are finished using the facilities. Please return all mat tables to their upright position, pillows in place, furniture moved back to their original place, and equipment put away.
7. Please report any personal injuries or equipment problems to the course coordinator, instructor or PT school office (Room 2152) immediately. Equipment that becomes broken, faulty, or inoperable should be reported immediately.
8. Students are prohibited from using physical therapy equipment to treat friends, family members, or themselves.

Violation of these rules will result in TERMINATION OF THE PRIVILEGE OF UNLIMITED ACCESS TO THE LABS AND EQUIPMENT for that student who abuses the privilege.

STANDARDS FOR STUDENT GROOMING AND PROFESSIONAL DRESS

Your physical appearance should reflect pride in who you are, what you do, and all that you represent. As a Student Physical Therapist (SPT), you will represent Old Dominion University, the Program in Physical Therapy, the physical therapy profession, and yourself across a variety of settings and circumstances. You are expected to present a neat, clean, well-groomed, professional appearance consistent with the traditional dignity of healthcare professions.

Failure to adhere to stated policies for grooming and dress will be considered a violation of program and University standards. Students will be dismissed if attire is inappropriate, and an unexcused absence will be recorded. If you have specific questions, consult the faculty member responsible for the educational experience in advance of the class or event. Exceptions will be made for students based on medical needs or cultural customs.

Practiced daily, professional dress should become second nature. Academic and clinical faculty will direct you to adapt your style of dress as appropriate, but the following standards are expected and enforced under most circumstances in the skills lab or patient care setting.

EXPECTATIONS OF PROFESSIONAL ATTIRE

Laboratory Attire, Clinical Attire, and Business Attire are subsets of Professional Attire.

- All attire should cover your midsection, gluteal fold, chest/cleavage
 - All attire **MUST** continue to cover these areas whether you are sitting, standing, reaching as high as possible overhead, bending over to touch your toes, squatting
 - Draping is expected when these regions are being addressed in lab
- Tops must be of a length that can be tucked into and remain in bottoms OR continue to cover your torso if designed to be worn untucked.
- Generally, bottoms should be at least knee-length when standing and cover your thighs when sitting; laboratory attire is often an exception to this standard.
- Undergarments should not be visible under clothes.

LABORATORY ATTIRE (gender neutral)

Laboratory – Anatomy: Students are to always wear gloves while working with cadavers. Protective eyewear is also recommended. Students should wear clothing which will weather the lab environment. A lab coat or a change of clothing is recommended. No open-toed shoes are allowed in the cadaver lab.

Laboratory – PT Skills:

- *Tops:* sleeveless, short-sleeved, and long-sleeved tops are permitted but should cover midsection, chest/cleavage.
- *Bottoms:* athletic shorts or compression shorts (i.e. NOT denim or cargo-type shorts) that allow free movement, maintain modesty, and provide adequate coverage of undergarments
 - Leggings do not easily allow inspection or palpation of the lower extremities due to their tight fit; they should be avoided for labs focusing on lower extremity exam or treatment
- *Undergarments:* a sports bra (BLACK OR NAVY BLUE)
 - For spine examination or intervention, the bra needs to fasten at the back and/or have thin straps
 - One-piece swimsuits and two-piece bathing suit tops are NOT acceptable
- *Footwear:* shoes should be clean with a closed-toe and non-slip sole; sandals are permitted for foot/ankle examination or intervention
- *Other:* sweatpants, sweatshirts, etc. are allowed over lab clothes when desired and appropriate.

BUSINESS CASUAL/CLINICAL ATTIRE

- Name tags identifying the student as “student physical therapist” must be always worn and be easily visible to others
- *Tops*: Short or long-sleeved shirts, sweaters, or blouses that maintain modesty and provide coverage with movement. Camisoles or undershirts may be used as needed.
 - “Golf” or “polo” type shirts are allowed by many clinical instructors and host facilities.
 - If a dress shirt and tie are required by your clinical instructor, please make sure the tie can be tucked out of the way during treatment sessions.
- *Bottoms*: Dresses, skirts, or slacks that are free of rips and allow the movements necessary when providing patient care, such as squatting, bending, kneeling.

PROFESSIONAL/BUSINESS ATTIRE

You are expected to demonstrate good judgment and taste. Courtesy to others and consideration of your professional image should be the factors that are used to assess whether you are dressing in business attire that is appropriate. Business attire is recommended for the White Coat Ceremony, graduation events, interviews, oral examinations, etc. Traditionally, business attire is:

- a sport coat or suit jacket with matching or coordinating bottoms (slacks, pants, skirts)
- dress shirt and tie (if applicable)
- a modest dress
- shoes in a variety of styles (flats, heels, loafers, oxfords, etc.)

SETTING-SPECIFIC GUIDELINES

Classroom: The Health Sciences Building is on the main campus of our urban university with a diverse undergraduate and graduate student population. Casual attire is permitted, but please be considerate since the building houses professional programs and you are a professional student.

On-campus visits by guests: Standard CLINICAL or BUSINESS ATTIRE may be required when a guest speaker is visiting. When clients from the community visit the skills lab, please wear CLINICAL ATTIRE unless otherwise directed by your instructor.

Off-campus visits by students: If you are expected to provide care to a patient or client (simulated or actual), a minimum of CLINICAL ATTIRE is required. Examples include but are not limited to standardized patient experiences, Interprofessional Clinic visits, fall risk assessments, and Eastern Shore health fairs.

If you are attending an event, a minimum of CLINICAL ATTIRE is required. Examples include but are not limited to IPE Day or Seminar; district, state, or national APTA meetings and conferences; continuing education courses. If you are presenting at an event, PROFESSIONAL/BUSINESS ATTIRE is expected.

Clinical Experiences: Students are expected to abide by the policies and procedures of the assigned facility during clinical education experiences. The Program suggests the following:

- Lab coat may be required by your clinical instructor or host facility
- Scrub wear and head coverings may be worn according to assigned clinical facility policies/procedures
- Footwear should be clean and closed-toe with non-slip sole and adequate support
 - Leather, non-mesh uppers are often required in hospital or rehab settings
 - Boots (cowboy, riding, rain, etc.), high heels, and sandals are not permitted
- No t-shirts with emblems and/or signs; University or facility specific logos may be appropriate
- No denim or athletic wear unless allowed by your clinical site (e.g. athletic wear in pediatrics or sports medicine settings, “jeans day” for fundraiser)

Grooming, Hygiene, Use of Accessories in Patient Care Environments (Lab, Clinic, Community)

- Groom hair in a neat, clean, and conservative style
 - This includes facial hair (e.g. beards, mustaches, sideburns)
 - Hair should be tied back or styled up and away from the face
- Groom nails to not be visible over the tips of fingers
 - Only neutral colors of nail polish are permitted in some medical settings
 - Artificial nails, extenders, and gel polish are not permitted in most medical settings due to possible association with bacteria/yeast
- Limit accessories to appropriate style and amount
 - Head: hats, caps, visors, and other head coverings should not be worn indoors unless required for medical or cultural reasons
 - Ears: a single pair of stud earrings is permitted
 - Wrists: a watch is permitted; a watch with a second hand or timer is recommended
 - Hands: only wedding rings permitted; use judgment regarding rings if wearing gloves
 - Other piercings: host facility may require you to remove or cover jewelry
- Avoid excessive cologne or perfume
- Use cosmetics in a conservative manner
- No gum chewing unless in designated areas
- No cell phone use unless in designated areas or approved by your instructor
- Host facilities may require that tattoos be covered

LABORATORY SESSION ETIQUETTE PT SKILLS LAB

When lab sessions are scheduled you are expected to arrive on time dressed and ready for lab. This means that lab clothes must be on (including name tags) and you are ready to participate in the session at the designated time. If a lab follows a lecture you will have 10 minutes to change. In that case you may want to consider dressing for lab prior to lecture so that you are not rushed during the break. We suggest that you keep extra lab clothes and your FirstHand kit in your locker so it may be accessible at any time. Please label your FirstHand kit, textbooks, etc. as all student items look similar.

As responsible students we probably don't need to remind you - BUT - please bathe daily and wash your lab clothes frequently so that perspiration does not become offensive.

We will require that you frequently change your lab partner. You will eventually be treating different types of patients and the more exposure you have to different body types, the more comfortable you will be in the clinic. You will experience laboratory practical examinations that will involve other classmates as well as "simulated patients" and examinations/interventions of PT faculty during the curriculum.

Clinical Education

Full-time clinical education courses in the Doctor of Physical Therapy program in the School of Rehabilitation Sciences at Old Dominion University empower students to develop clinical competencies in practice and management of the physical therapy client in a variety of clinical practice settings. Clinical learning takes place during three full-time clinical education experiences offered at off-campus locations in the United States and abroad. These courses are Clinical Experiences I (beginning), II (intermediate), III (terminal). A clinical education course is 8, 12, or 14 weeks on a full-time basis. All students are required to complete two clinical education core courses in clinical areas specific to general medical-surgical/medically complex and general orthopedics/general outpatient. All students are required to complete one elective course. Electives may focus on a physical therapy specialty or be completing another core practice area in a different venue. Specific details of these categorized setting lists are listed in ODU DPT Clinical Education Handbook and Exxat Prism through which the Director and Associate Director of Clinical Education manage and administer the clinical education component of the DPT curriculum.

The Director of Clinical Education (DCE) is the core faculty member who has administrative oversight of all full-time clinical education assignments in collaboration with input from stakeholders. The Associate Director of Clinical Education (ADCE) is also a core faculty member responsible for assisting with clinical education and is responsible for the first full time clinical education experience. Professional development of student physical therapists through clinical education experiences is supported by clinical sites and clinical faculty in several states throughout the United States and abroad. Students are responsible for all health and training requirements, travel, apparel, and lodging/accommodation costs associated with clinical education.

Students from the Class of 2022 and beyond will be assessed using the Clinical Internship Evaluation Tool (CIET). Students are required to complete midterm and final self-assessments using the CIET and discuss both self-assessments with assigned Clinical Instructor(s). The Clinical Instructor(s) will provide the students with a formative evaluation at midterm and a summative evaluation at the conclusion of the clinical education experience. The DCE/ADCE will utilize the final, summative CIET evaluation as a primary means of determining each student's final course grade. The assignment of grades is the sole responsibility of the DCE/ADCE, however CI feedback from is critical in determining a final grade.

Students are advanced-trained and encouraged to develop technological skills required to utilize assessment and data management components of Exxat Prism, CastleBranch Corporation, and other site-based standardized clinical education tools/forms used in conjunction with the DCE/ADCE and clinical faculty to evaluate, manage documents and self-assess clinical performance behaviors.

Criminal Background Checks

Old Dominion University has selected CertifiedBackground, a division of Castle Branch, Inc. as the approved company for obtaining and reporting background checks with Extensive Review. CertifiedBackground may be accessed at www.certifiedbackground.com. Only background checks obtained via CertifiedBackground or the Virginia State Police will be accepted for pre-placement review by the Director of Clinical Education. The package code is OD23. Costs associated with annual background checks are the responsibility of the student.

All students planning to enroll in a clinical education course are required to complete an annual criminal background check no later than September 30th of each year immediately preceding full-time clinical education placement for the subsequent calendar year. This annual pre-placement screening will be completed using the online process established by CastleBranch (CastleBranch.com). The six (6) required indices are listed as follows:

1. 7-Year U.S. County of Residence Criminal Search;
2. Nationwide Federal Criminal Search;
3. Nationwide Sex Offender Index;
4. Nationwide Patriot Act;
5. Social Security Alert; and
6. Residency History.

All criminal background checks will receive Extensive Review by CastleBranch. Descriptions of each above-listed index may be found on the CastleBranch website.

A student with criminal history or is convicted or pleads guilty or nolo contendere to a felony or other serious (barrier) crime may be prevented from receiving a clinical education placement. Any of the above findings will be immediately reported by the Director of Clinical Education to Old Dominion University's Office of the General Counsel for further action. In addition, students with any of the convictions listed above must meet with the Director of Clinical Education and the Graduate Program Director to discuss continued progress in the program.

All enrolled students are expected to abide by the policies and procedures of all clinical affiliation sites. Clinical sites affiliated with Old Dominion University may require students to obtain additional background checks within a specific time frame and/or share results of all pre-clinical background checks and toxicology screens prior to beginning any assigned on-site clinical experience. It is the responsibility of the enrolled student to comply with clinical site policies relating to securing and reporting background check results.

Students are also reminded that licensing boards for certain health care occupations and professions may deny, suspend, or revoke a license or may deny the individual the opportunity to sit for an examination if an applicant has a criminal history or is convicted or pleads guilty or nolo contendere to a felony or other serious crime. Successful completion of the DPT Program at Old Dominion University does not guarantee PT licensure, the opportunity to sit for the PT licensure examination, or certification/employment in the physical therapy workforce.

**OLD DOMINION UNIVERSITY
PROGRAM IN PHYSICAL THERAPY
ACKNOWLEDGEMENT FORM**

I, _____, have read the *Program in Physical Therapy DPT Student Handbook*. I understand the information outlined in the handbook and have had the opportunity to ask questions regarding the contents of this handbook. I agree to abide by the following policies and regulations, including but not limited to:

- Professional abilities for professional growth
- Program in Physical Therapy Technical Standards
- University Honor Code
- Grading, continuance, attendance, student incident/injuries, authorship, and management of complaints policies
- Advising guidelines
- Guidelines for professional behavior
- Student access and use of laboratories and equipment
- Dress codes
- Health information forms

I agree to be a subject for laboratory exercises/practice during the curriculum. It is my responsibility to notify the instructors if I have a condition that will not allow me to be a subject during a particular portion of the curriculum.

Student signature _____

Date Click or tap to enter a date.

Faculty Member Signature _____

Date Click or tap to enter a date.

Quick Information

Physical Therapy Program main office:
Administrative Assistant Ms. Nadine White NSWhite@odu.edu
2152 Health Sciences Bldg.
Old Dominion University Norfolk, VA 23529
(757) 683-4519

ODU Monarch Physical Therapy Clinic (757) 683-7041
1015 West 47th Street

Health and Safety <http://www.odu.edu/life/health-safety>

Campus Police: (757) 683-4003 (office)

EMERGENCY (757) 683-4000 (on campus phone= 3-4000)

Safety Escort – to accompany you safely to your car or another building on campus anytime you don't feel safe. (757) 683-5665

SAFE RIDE (757) 683-3477
Using the TapRide App. Not available over the summer
(<https://www.odu.edu/life/health-safety/safety/saferide>)

Student Health: (757) 683-3132

Counseling Center: (757) 683-4401

ODU Alerts: Sign up for notifications to your cell phone at
<http://www.odu.edu/life/health-safety/safety/alerts>

In Case of Distress – your distress or another student you are concerned about – there are three ways to contact Student Outreach & Support (SOS)

Ph (757) 683-3442

e-mail ODUCares@odu.edu

webpage with link to live chat <https://www.odu.edu/life/dean-students/student-outreach>

National Suicide Prevention Lifeline 1-800-273-8255

Technology Support ITSHelp@odu.edu

Graduate catalog: contains University regulations that pertain to all graduate students. All students are held individually responsible for the information contained in this catalog.
<https://catalog.odu.edu/graduate/>