

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

Introduction

Texas Tech University Health Sciences Center's, School of Health Professions, Doctor of Physical Therapy (DPT) Program affiliates with over 600 outstanding clinical education facilities within Texas and approved states throughout the continental United States. Students enrolled in the DPT program participate in a total of 32 weeks of full-time clinical experience and a 4 week Integrated Clinical Education Experience as outlined below. Students have the opportunity to work with patients of all ages and a variety of settings to provide them with entry-level physical therapy skills. Each student is expected to have clinical experience in both the Inpatient and Outpatient physical therapy practice settings during their eight-week rotations with the third and fourth experiences as an elective of their choice. They must also fulfill their neuro skills throughout the 32 weeks of full-time clinical experience.

Requirements

- Integrative Experience focusing on professionalism and generic abilities
- Inpatient Foundational Skills Experience (inpatient acute care; inpatient acute rehab; skilled nursing subacute rehab; long-term acute care)
- Outpatient Musculoskeletal Experience (OP orthopedic)
- 2 Elective experiences (any above setting or pediatric, wounds, pelvic floor, cardiac, rural health, neuro rehab, home health, etc.)

****Exceptions to these requirements may be granted at the discretion of the faculty during emergency or extenuating circumstances.**

General Order of TTUHSC DPT Clinical Experiences

Experience	Length	Program Year	Timing
Clinical Experience 1	4 weeks	DPT 2	July – August of second Summer semester
Clinical Experience 2	8 weeks	DPT 3	August – October of third Fall semester
Clinical Experience 3	8 weeks	DPT 3	October – December of third Fall semester
Clinical Experience 4	8 weeks	DPT 3	January – March of third Spring semester
Clinical Experience 5	8 weeks	DPT 3	March – April of third Spring semester

Contact Information

TTUHSC DPT program is committed to providing excellent clinical education experiences for our students. Additionally, we desire to support the clinical instructors that are an irreplaceable resource to the TTUHSC DPT program. Questions can be addressed to the Director of Clinical Education (DCE) or one of the Assistant Directors of Clinical Education (ADCE).

Misty Miller, PT, DPT <i>Director of Clinical Education</i> 1400 S. Coulter, Ste 4906 Amarillo, TX 79106 P: (806) 414-9688 F: (806) 354-5591 Email: misty.miller@ttuhsc.edu	Bethany Allen, PT, DPT <i>Assistant DCE</i> 801 W 4 th Street Odessa, TX 79763 P: (432) 703-5426 F: (432) 335-5365 Email: Bethany.allen@ttuhsc.edu	Doug Dendy PT, DPT, ScD, PCS <i>Assistant DCE</i> 3601 4 th Street, STOP 6280 Lubbock, TX 79430-6280 P: (806) 743-3236 F: (806) 743-6005 Email: doug.dendy@ttuhsc.edu
--	--	---

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

Contracting questions may be directed to:

Beatrice Johnson

Clinical Education Support Coordinator

P: (806) 743-9012

F: (806) 743-3518

Email: beatrice.johnson@ttuhsc.edu

Clinical Education Policies and Procedures

Guidelines and Choosing Procedure:

The TTUHSC DPT Program utilizes an optimization and data management program to manage the student placements and assessments. Students receive the list of clinical sites approximately one month prior to the selection of clinical sites. Students will rank their top 10 choices in the optimization system. The optimization system runs an algorithm to place each student at a clinical location based on their selections. Students are matched to a clinical rotation site based on student preferences, any special pre-approved accommodations, and experience availability. The Clinical Education Team will then review this list and determine final placements for each student. Students are not allowed to contact a site in order to ask about their facility without approval from the Clinical Education Team. In addition, students are not allowed to perform clinical experiences in facilities that meet the following criteria:

- The student was formerly or currently employed at the physical location
- The student performed more than 40 observation hours at the physical location within a three year time period prior to the start of the clinical rotation.
- The clinic is owned/operated/or staffed (PT) by student family members

Faculty assist students in selecting sites that will best meet their educational needs, but the final decision is up to the Clinical Education Team. Students that have demonstrated deficiencies in academic performance may be assigned to a specific clinical site by the CE team. Students may request special considerations for their clinical placements and must submit their request for consideration in writing at least two weeks prior to the beginning of the selection process. All requests are subject to approval by the CE team. Approval may require input from the Program Director and the Director of Student Services. Examples of special circumstances include, but aren't limited to pregnancy, documented health issues, family crisis, single parents, etc.

Student Initiated Clinical Slots:

Students are able to work with the clinical education team to set up no more than 1 student initiated clinical education slots for clinical experiences 2-5. The student must first submit a formal request using the **Application to Open a New Clinical Site: Student Initiated** to the DCE/ADCE responsible for coordinating student initiated slots. Students are required to meet certain criteria outlined in the application in order to be eligible to apply for opening a new slot. Students must also have faculty

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

endorsement for this request prior to submitting the application. Once approved, the clinical education faculty member responsible for the student initiated process will then work with the facility and direct the student in next steps to secure a slot and ensure proper contracting is in place with the clinical location. Students should not contact facilities to set up clinical experiences without first completing a formal request to the DCE/ADCE by set deadlines.

Student Placements:

Once a student has been placed at a clinical site by either optimization or placement, the student's name and email address is sent out for confirmation of the clinical slot. 6-8 weeks prior to the start of the rotation, student information is updated by the student in the clinical data management system and sent to the designated SCCE for review. The student information form also contains links to (see

Appendix A):

- Copy of the *TTUHSC DPT Curriculum*
- *Grading Criteria*

Once the student is onsite, the student will input Clinical Instructor Information in the data management system that will allow Clinical Instructor Assignments to be made. PT MACS assessments will be released at the midterm and then again at the final for completion by the CI via a link to the assessment sent from the data management system.

Cancellations or non-confirmations:

If a clinical experience is cancelled or the site was unable to confirm a slot, the DCE team will re-evaluate the list of remaining clinical sites or seek additional sites if necessary. The team will discuss various clinical site options with the student in context of areas where the student may have housing opportunities. Once the student provides the DCE team a list of the top three or four choices, a team-member will contact these facilities to see if accommodation can be made.

Clinical Experiences and Expectations:

Before the first clinical experience, students must pass a course (HHPT 8120 – Communication and Clinical Education) designed to prepare them for clinical experiences including documentation, communication, and use of the *Physical Therapist Manual for the Assessment of Clinical Skills* (PT MACS). The PT MACS is a clinical assessment tool used to measure a student's clinical competency while on the clinical experience. Grading criteria and behavior objectives for the clinical experiences courses are described in the HHPT 8120 course. Prior to subsequent clinical experiences, students are provided with syllabi specific to each clinical experience that lay out the grading criteria for each clinical experience. Additionally, students must demonstrate competence in clinical reasoning prior to all clinical experiences as measured by a comprehensive practical examinations that includes oral reasoning, plan

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

of care development, and skill demonstration as part of the courses HPPT 8123 – Clinical Reasoning 1 and HPPT 8224 – Clinical Reasoning 2.

Upon arrival at the clinical experience, the student is expected to have the following items readily available:

1. Current proof of CPR certification
2. Current 2-step annual TB test,
3. Current immunizations/vaccinations for Diphtheria-Tetanus (current DpT or DT), Meningococcal Vaccine (MCV) for adults 22 and younger, and current seasonal Flu vaccination,
4. Positive titers are required for Hepatitis B, Measles-Mumps-Rubella (MMR), and Varicella (Chicken Pox), (see **Appendix B** - TTUHSC SHP Immunization Requirement Form)
5. Current personal health/medical insurance
6. University liability insurance
7. Criminal background check (if required)
 - a. In most cases the DPT program will send an attestation letter for the background check run through the university using a private vendor
 - b. Additional/updated background checks may be required by the facility and payment is the responsibility of the student (see TTUHSC Criminal Background Check Policy)
8. Drug screen (if required)
 - a. Payment for and completion of required drug screenings are the sole responsibility of the student (see the TTUHSC Drug Screen Policy or DRS Student Handbook)

General behavioral objectives for 4 week clinical experiences:

At the end of the clinical experience, the student should be able to:

1. Demonstrate professional behavior in all interactions with patients/clients, family members, caregivers, interdisciplinary team members, consumers, and payers.
2. Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.
3. Practice in a manner consistent with the APTA Code of Ethics and APTA Core Values.
4. Maintain a safe practice environment for both the patient and the therapist.
5. Demonstrate basic clinical decision-making skills including clinical reasoning, clinical judgment, and reflective practice.
6. Obtain and document a patient/client history for use in evaluation and clinical decision making.
7. Assist in determining a physical therapy diagnosis and prognosis that guides future patient/client management.
8. Collaborate with patient/client, family members, payers, and other professionals to determine a plan of care that is acceptable, safe, effective, realistic, and culturally competent to achieve the goals of the patient.
9. Provide physical therapy interventions to achieve patient/client goals and outcomes.

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

10. If available at the clinic, supervise and manage personnel to whom tasks have been directed, including the physical therapist's assistant and aides.
11. Complete documentation that follows professional guidelines, guidelines required by health care systems, and guidelines required by the practice setting.
12. Identify the individual members of the clinical education team for the assigned clinical rotation and communicate effectively with each based on the team member's designated role.

General behavioral objectives for 8 week clinical experiences:

At the end of the clinical experience, the student should be able to:

1. Demonstrate professional behavior in all interactions with patients/clients, family members, caregivers, interdisciplinary team members, consumers, and payers.
2. Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management.
3. Practice in a manner consistent with the APTA Code of Ethics and APTA Core Values.
4. Maintain a safe practice environment for both the patient and the therapist.
5. Demonstrate clinical decision-making skills including clinical reasoning, clinical judgment, and reflective practice.
6. Examine patient/clients by obtaining a history, performing system reviews, and selecting and administering age-related tests and measures.
7. Evaluate data from the examination to make clinical judgments regarding patients/clients.
8. Determine a physical therapy diagnosis and prognosis that guides future patient/client management.
9. Collaborate with patient/client, family members, payers, and other professionals to determine a plan of care that is acceptable, safe, effective, realistic, and culturally competent to achieve the goals of the patient.
10. Provide physical therapy interventions to achieve patient/client goals and outcomes.
11. If available at the clinic, supervise and manage personnel to whom tasks have been directed, including the physical therapist's assistant and aides.
12. Manage the Plan of Care in response to the patient/client status using appropriate patient outcome tools.
13. Complete documentation that follows professional guidelines, guidelines required by health care systems, and guidelines required by the practice setting.
14. Identify the individual members of the clinical education team for the assigned clinical rotation and collaborate effectively with each based on the team member's designated role.
15. Develop a personalized plan for how to become a clinical instructor (CI) and/or a site coordinator of clinical education (SCCE) following graduation and licensure.

Problem Situations:

TTUHSC physical therapy students are expected to perform in a manner that is safe, consistent and effective. Ultimately, the goal for 8 week experiences is that the student performs at an "entry-level" for

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

the facility in which they are practicing. If a student has significant difficulties in any area, the Clinical Instructor should contact the clinical education faculty of the DPT program as quickly as possible.

Clear communication is the first step toward resolution of a clinical education problem situation. Problems and concerns should be clearly documented in writing by the clinical instructor, being sure to include specific instances and a description of efforts for resolution to this point. Once a problem situation is reported, a conference should be held between the CI and the clinical education representative. The clinical education faculty member will then discuss the situation with the student and work with the CI to develop a plan for resolution of the problem. Once a plan has been determined, the clinical education faculty member will clarify the plan with the CI and student and provide a time frame for follow up.

If a problem persists, it may be necessary to formally establish a learning contract for the student. Some examples might include a student continuing to be late for work, a student with repeated deficits with goniometry, etc. The purpose of the contract is to give the student certain criteria that must be met in order to continue on with or successfully meet requirements for the clinical experience. See **Appendix C** for an example of a learning contract. Once the contract is agreed upon, it is signed by the student, CI and faculty sign. If the student does not successfully satisfy the objectives set forth in the learning contract, the student may receive an unsatisfactory “U” rating on the related skills, the clinical experience may be terminated, and/or the student may earn a failing score for the clinical experience. Documentation of concerns and performance relative to the learning contract should occur in the *PT MACS* or by other means and should be submitted to the university clinical education team.

Early notification and documentation are key components to successful resolution of clinical education problems. The longer the problem goes undocumented or un-confronted, the more difficult it becomes to reach a satisfactory resolution. Appropriate documentation of student issues include: narrative comments from the CI concerning student performance, comments in the *PT MACS*, comments from other personnel involved in the issue (SCCE, nursing, OT, etc), documentation from the clinical education faculty from discussions with the CI and the student, and even copies of examples of poor documentation if this is an issue.

Assigning grades:

Clinical experiences are graded on a “pass/fail” basis and are based on the behavioral objectives and grading criteria outlined in the syllabus (see sample grading criteria in **Appendix D**). The clinical instructor is asked to evaluate the student objectively and mark the *PT MACS* appropriately. Areas evaluated by Director of Clinical Education include: number of skills completed in various sections, attendance, appropriate documentation of clinical education progress using the forms, safe and ethical practice in the setting, immunizations and insurance being provided, and VAS ratings provided by the CI. In cases of poor performance, the DCE team may seek further information or clarification from the student, clinical instructor, site SCCE, or other clinicians with experience with the student in question.

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

Assignment of the “pass/fail” grade for each clinical experience is the sole responsibility of the course coordinator which is typically the DCE. The clinical instructor’s feedback on the student’s performance is considered heavily, however, the CI does not assign the grade for the student.

Failure to meet requirements for a clinical experience:

It may be determined that a student has failed to meet requirements for an experience based on the above process and the criteria listed in the Department of Rehabilitation Sciences Student Handbook. Students who fail an experience have the opportunity to perform a recycle experience if they meet the criteria set forth in the student handbook. Timing and location of recycle experiences are at the discretion of the DCE team.

Clinical education faculty responsibilities:

There are various people involved in the clinical education process: the director of clinical education (DCE), the assistant directors of clinical education (ADCE), the center coordinator for clinical education (SCCE), the clinical instructor (CI) and the student. The responsibilities for each role are described below:

DCE/ADCE:

1. Communicate and provide the school’s philosophy and policies for clinical education
2. Provide important information to the facility related to the expectations of the academic program
3. Manage the clinical site selection process and communication with the clinical sites regarding placements
4. Monitor student progress during clinical experiences
5. Counsel with students and clinical instructors as needed

SCCE:

1. Facilitate communication between the clinical facility, clinical instructor and academic program
2. Organize and plan student scheduling and learning experiences
3. Counsel with clinical instructor and the student: provide training, feedback, evaluation of the clinical instructor performance

CI:

1. Supervise the physical therapy student following facility policy and regulatory agency rules and policies. Students must be supervised by a licensed physical therapist when providing direct patient care. PT interns are encouraged to observe other disciplines, but only a licensed physical therapist can supervise a student physical therapist and must be onsite when the student is providing PT services.
2. Educate the student, providing learning experiences specific to the learning styles and needs of the student

Clinical Education Handbook

Doctor of Physical Therapy Program

TTUHSC School of Health Professions

3. Plan and implement remediation when necessary and notify the DCE. Follow up visits will be conducted by the DCE with the CI and with the student on an as needed basis.
4. Evaluate the student, providing objective, honest, specific feedback in both formative and summative evaluations

Student:

1. Provide safe and effective patient care
2. Be an active learner
3. Self-evaluate performance
4. Comply with facility policies
5. Meet school grading criteria

References:

For more information relating to the DPT program's academic policies, please refer to the Department of Rehabilitation Sciences Student Handbook:

<https://app4.ttuhschool.edu/StudentHandbook/default/School-of-Health-Professions>

For more information about expectations of students while on clinical experience, please refer to the TTUHSC Student Handbook - Code of Professional Conduct:

<https://www.ttuhschool.edu/student-affairs/handbook.aspx>

Appendix A: Curriculum

DPT 1- Summer Semester	Credit Hours
HPPT 8100- Professional Development	1 hour
HPPT 8203- Functional Anatomy	2 hours
HPPT 8500- Gross Anatomy	5 hours
Total Hours	8 hours

DPT 1- Fall Semester	Credit Hours
HPPT 8201- History and Systems Screening	2 hours
HPPT 8205- Evidence Based Practice 1	2 hours
HPPT 8209- Clinical Applied Physiology	2 hours
HPPT 8301- Foundational Skills and Assessment	3 hours
HPPT 8303- Biomechanics	3 hours
HPPT 8407- Pathophysiology	4 hours
Total Hours	16 hours

DPT 1- Spring Semester	Credit Hours
HPPT 8212- Pharmacology	2 hours
HPPT 8216- Physical Agents and Modalities	2 hours
HPPT 8314- Inpatient/Integumentary Physical Therapist Practice	3 hours
HPPT 8310- Therapeutic Exercise	3 hours
HPPT 8318- Neuroscience	3 hours
HPPT 8414- Cardiopulmonary Physical Therapist Practice	4 hours
Total Hours	17 hours

DPT 2- Summer Semester	Credit Hours
HPPT 8120- Communication and Clinical Education	1 hour
HPPT 8123- Clinical Reasoning 1	1 hour
HPPT 8222- Full-Time Clinical Experience 1 (4 weeks)	2 hours
HPPT 8228- Motor Control	2 hours
Total Hours	6 hours

DPT 2- Fall Semester	Credit Hours
HPPT 8231- Diagnostic Imaging	2 hours
HPPT 8329- Human Development	3 hours
HPPT 8425- Musculoskeletal Physical Therapist Practice I	4 hours
HPPT 8521- Neuromuscular Physical Therapist Practice	5 hours
Total Hours	14 hours

DPT 2- Spring Semester	Credit Hours
HPPT 8114- Evidence Based Practice 2	1 hour
HPPT 8226- Orthotics and Prosthetics	2 hours
HPPT 8327- Health Care and Business Management	3 hours
HPPT 8422- Pediatric Physical Therapist Practice	4 hours
HPPT 8426- Musculoskeletal Physical Therapist Practice II	4 hours
Total Hours	14 hours

DPT 3- Summer Semester		Credit Hours
HPPT 8142- Assistive and Adaptive Technology		1 hour
HPPT 8224- Clinical Reasoning 2		2 hours
HPPT 8240- Differential Diagnosis		2 hours
HPPT 8246- Advanced Topics in Physical Therapy- (Women's Health; Ergonomics; Wellness Promotion)		1 hour
Total Hours		7 hours
DPT 3- Fall Semester		Credit Hours
HPPT 8144- Professional Project		1 hour
HPPT 8453- Clinical Experience 2 (8 wks)		4 hours
HPPT 8455- Clinical Experience 3 (8 wks)		4 hours
Total Hours		9 hours
DPT 3- Spring Semester		Credit Hours
HPPT 8160- Graduate Seminar		1 hour
HPPT 8456- Clinical Experience 4 (8 wks)		4 hours
HPPT 8458- Clinical Experience 5 (8 wks)		4 hours
Total Hours		9 hours
CURRICULUM TOTAL		100 HOURS

Appendix B: TTUHSC Immunization Requirements

R# _____ NAME _____
Email: _____ Phone number: _____

TTUHSC SHP Immunization Requirements

Copies of lab reports, immunizations and/or health records must be provided.

1. **Varicella (Chicken Pox)** Positive Varicella Titer (blood test) Date of Test: _____ (Attach Report)

TTUHSC does not accept vaccine for this requirement

2. **Measles, Mumps, and Rubella (MMR)** Positive MMR titer (blood test) Date of Test: _____ (Attach Report)

TTUHSC does not accept vaccine for this requirement

3. **Tuberculosis:** **2 –STEP TB skin test (within the past 3 months)**

Visit 1, day 1: Place the 1st TST and have the employee return in 7 days for the test to be read.

Visit 2, day 7: Place 2nd TST on all employees/volunteers whose 1st test is negative at 7 days.

Visit 3, day 9 or 10: Read the 2nd test at 48-72 hours.

1st test Date: _____ Result: _____ mm

2nd test Date: _____ Result: _____ mm

If positive on TST

Negative Chest X-Ray if (+) TST Date: _____ Result: _____

Chest X-Ray must be no older than 1 year, if TB skin test is positive.
(Attach Report)

TTUHSC will also accept **IGRA (T-SPOT or quantiFERON)** testing in place of a TB test

Date: _____ Results: _____

4. **Hepatitis B :** Positive Hepatitis B titer (Quantitative blood test) Date of Test: _____ (Attach Report)

TTUHSC does not accept vaccine for this requirement

5. **Tetanus/diphtheria (Td): Tetanus Diphtheria booster (required within past 10 years)**

Td Date: _____ (Tdap will suffice)

6. **Tdap (Tetanus, Diphtheria, and Acellular Pertussis): One time **Adult Dose** (these are only good for 10 years, must be good for you entire length of stay)**

Tdap date: _____

7. **Meningococcal Vaccine (MCV): Adults 22 and younger (vaccine within the last 5 years)**

MCV date: _____ circle exemption (age, online)

8. **Influenza Vaccine:** Influenza date: _____ (required during FLU season October- Mar)

This completed form and supporting documentation should be forwarded as soon as possible to:

Office of Institutional Health- TTUHSC
3601 4th st MS 8150
Immunization Coordinator
Lubbock TX 79430
fax 806-743-2056 or email to
Nicole.hines@ttuhsc.edu

Appendix C: Sample Learning Contract

Appendix C: Sample Learning Contract

*Learning Contract for XXXX XXXX, SPT
TTUHSC DPT Program
January 1, 20XX*

This contract for XXXX XXXX is being implemented due to concerns raised about clinical performance at XXXX in Lubbock, TX. Areas of concern include the following PT MACS skills and appropriate objectives:

- Skill 6: *Problem Solving*
 - Objectives b, d
- Skill 9: *Critical Thinking*
 - Objectives b, d, e, f
- Skill 10: *Stress Management*
 - Objective d
- Skill 11: *Safety During Patient Management*
 - Objective a

It is understood that the greatest area for concern involves the appropriate and smooth application of critical thinking and problem solving during patient evaluation, plan of care development, and patient treatment. It is understood that XXXX and his clinical instructor, XXXX XXXX, have discussed these deficiencies, and XXXX is working to remediate the concerns. As a follow-up to these discussions, the following action plan is proposed. **By the end of the internship on February 1, 20XX, XXXX will:**

1. Demonstrate ability to apply didactic knowledge to fluid patient cases of various diagnoses common to this practice setting. This includes:
 - a. Ability to integrate new information discovered during patient interview or examination into evaluation or treatment planning with minimal disruption of the evaluation or treatment session
 - b. Ability to prioritize problem lists as discovered from patient history and assessment and articulate possible solutions to these problems
2. Clearly and appropriately articulate ideas related to current patient cases including:
 - a. Adapting patient instruction and education in the light of ongoing assessment
 - b. Engaging in meaningful discussion with the clinical instructor related to patient cases or plans of care
3. Consider pertinent information regarding a patient case/current presentation in maintaining safe patient management including:
 - a. Adhering to physician orders and observing appropriate contraindications and precautions in patient care

Appendix C: Sample Learning Contract

- b. Ensuring a “least-harm” assessment and treatment philosophy that places the patient’s comfort and well-being at the forefront

To meet expectations in this clinical internship, XXXX will work to achieve the above goals with minimal cueing from his clinical instructor and at a level that is commensurate with a new graduate physical therapist (entry level) in this setting. Signatures on this form indicate that all involved have reviewed the areas of concern and the action plan as written.

XXXX XXXX, SPT
TTUHSC DPT Class of 20XX

XXXX XXXX, PT, DPT, OCS, FAAOMPT
Clinical Instructor

Misty Miller, PT, DPT
Director of Clinical Education

Kerry Gilbert, PT, ScD
DPT Program Director, TTUHSC

Appendix D: Clinical Rotation Grading Criteria

Texas Tech University Health Sciences Center
School of Allied Health Sciences-DPT Program

Clinical Experience 1

Grading Criteria

Definitions: "Complete" means a final rating of "Entry Level"

PT MACS Section		Skill(s)	Expectations
I.	Professional Behaviors	1-11	Complete at least 5
II.	Patient/Client Management	12.1-12.3	Complete skill 12.1 and practice the remainder
	Tests and Measures	13.1-13.14	Complete at least 4
	Evaluation	14.1-14.2	Practice these
	POC	15.1-15.2	Practice these
	Interventions	16.1-16.8	Complete at least 4
III.	Management of Care Delivery	17-22	Complete skill 17 and practice the remainder
IV.	Practice Management	23-24	Practice these if appropriate
V.	Site Specific Skills	25.1-28.2	Complete 4 TOTAL by the end of all 5 internships
Other Requirements			Expectations
	In-service project	Skill 11	Complete at least twice by the end of all 5 internships
	Level of Performance on THIS Clinical Internship	Likert Scale rated by CI in EXXAT	Meets expectations for this level (score of 5 or more)
EXXAT Tasks			Expectations
	Clinical Information Form	Assigned in EXXAT	Complete by Friday of week 1 of rotation CI Information
	PT Skills: Student Self-Assessment – Final	Assigned in EXXAT	Complete by Sunday at start of Week 4
	PT Skills: CI Evaluation of Student – Final	Assigned by student in EXXAT	Complete during Week 4
	PT Student Assessment of Clinical Experience	Assigned in EXXAT	Complete during Week 4 about clinical site
	PT Student Assessment of Clinical Instruction	Assigned in EXXAT	Complete during Week 4 about clinical instruction

Texas Tech University Health Sciences Center
School of Health Professions-DPT Program

Inpatient Experience
Grading Criteria

Definitions: “Complete” means a final rating of + or √; A final rating of NI means “Not Independent”

PT MACS Section	Skill(s)	Expectations
I. Professional Behaviors	1-10	Complete all 10 skills
II. Patient/Client Management		
History/Systems Review	12.1-12.3	Complete all 3 skills
Tests and Measures	13.1-13.14	Complete at least 9 skills
Examination/Evaluation	14.1, 14.2	Complete both skills
Prognosis/POC	15.1, 15.2	Complete both skills
Interventions	16.1-16.8	Must complete 6 of the 8 skills (16.1 – must have 3 different modalities to consider complete)
III. Management of Care Delivery	17 – 22	Complete all
IV. Practice Management	23 & 24	Complete both if appropriate
V. Site Specific Skills	25.1-28.2	Complete a minimum of 4 TOTAL by the end of all internships
Other Requirements		Expectations
In-service project	11	Complete at least twice by the end of all internships
Level of Performance on THIS Clinical Internship	Likert Scale rated by CI in EXXAT	Meets expectations for this level (score of 5 or more)
EXXAT Tasks		Expectations
Clinical Information Form	Assigned in EXXAT	Student completes by end of week 1
PT Skills: Student Self-Assessment – Midterm	Assigned in EXXAT	Complete by Sunday of Week 4
PT Skills: CI Evaluation of Student – Midterm	Assigned by student in EXXAT	Complete during week 4
PT Skills: Student Self-Assessment – Final	Assigned in EXXAT	Complete by Sunday of Week 8
PT Skills: CI Evaluation of Student – Final	Assigned by student in EXXAT	Complete during Week 8
PT Student Assessment of Clinical Experience	Assigned in EXXAT	Complete during Week 8 about clinical site
PT Student Assessment of Clinical Instruction	Assigned in EXXAT	Complete during Week 8 about clinical instruction – will be sent to the CI following clinical experience

Texas Tech University Health Sciences Center
School of Health Professions-DPT Program
Outpatient Orthopedics Experience
Grading Criteria

Definitions: “Complete” means a final rating of + or √; A final rating of NI means “Not Independent”

PT MACS Section	Skill(s)	Expectations
I. Professional Behaviors	1-10	Complete all 10 skills
II. Patient/Client Management		
History/Systems Review	12.1-12.3	Complete all 3 skills
Tests and Measures	13.1-13.14	Complete at least 9 skills
Examination/Evaluation	14.1, 14.2	Complete both skills
Prognosis/POC	15.1, 15.2	Complete both skills
Interventions	16.1-16.8	Must complete 6 of the 8 skills (16.1 – must have 3 different modalities) 16.5 Required
III. Management of Care Delivery	17 – 22	Complete all
IV. Practice Management	23 & 24	Complete both
V. Site Specific Skills	25.1-28.2	Complete a minimum of <u>4 TOTAL</u> by the end of <u>all</u> internships
Other Requirements		Expectations
In-service project	11	Complete <u>at least twice</u> by the end of all internships
Level of Performance on THIS Clinical Internship	Likert Scale rated by CI in EXXAT	Meets expectations for this level (score of 5 or more)
EXXAT Tasks		Expectations
Clinical Information Form	Assigned in EXXAT	Student completes by end of week 1
PT Skills: Student Self-Assessment – Midterm	Assigned in EXXAT	Complete by Sunday of Week 4
PT Skills: CI Evaluation of Student – Midterm	Assigned by student in EXXAT	Complete during week 4
PT Skills: Student Self-Assessment – Final	Assigned in EXXAT	Complete by Sunday of Week 8
PT Skills: CI Evaluation of Student – Final	Assigned by student in EXXAT	Complete during Week 8
PT Student Assessment of Clinical Experience	Assigned in EXXAT	Complete during Week 8 about clinical site
PT Student Assessment of Clinical Instruction	Assigned in EXXAT	Complete during Week 8 about clinical instruction – will be sent to the CI following the clinical experience

Texas Tech University Health Sciences Center
School of Health Professions-DPT Program

Neuro Experience

Grading Criteria

Definitions: “Complete” means a final rating of + or √; A final rating of NI means “Not Independent”

PT MACS Section	Skill(s)	Expectations
I. Professional Behaviors	1-10	Complete all 10 skills
II. Patient/Client Management		
History/Systems Review	12.1-12.3	Complete all 3 skills
Tests and Measures	13.1-13.14	Complete at least 9 skills
Examination/Evaluation	14.1, 14.2	Complete both skills
Prognosis/POC	15.1, 15.2	Complete both skills
Interventions	16.1-16.8	Must complete 6 of the 8 skills (16.1 – must have 3 different modalities)
III. Management of Care Delivery	17 – 22	Complete all
IV. Practice Management	23 & 24	Complete both
V. Site Specific Skills	25.1-28.2	Complete a minimum of 4 TOTAL by the end of <u>all</u> internships
Other Requirements		Expectations
In-service project	11	Complete <u>at least twice</u> by the end of all internships
Level of Performance on THIS Clinical Internship	Likert Scale rated by CI in EXXAT	Meets expectations for this level (score of 5 or more)
EXXAT Tasks		Expectations
Clinical Information Form	Assigned in EXXAT	Student completes by end of week 1
PT Skills: Student Self-Assessment – Midterm	Assigned in EXXAT	Complete by Sunday of Week 4
PT Skills: CI Evaluation of Student – Midterm	Assigned by student in EXXAT	Complete during week 4
PT Skills: Student Self-Assessment – Final	Assigned in EXXAT	Complete by Sunday of Week 8
PT Skills: CI Evaluation of Student – Final	Assigned by student in EXXAT	Complete during Week 8
PT Student Assessment of Clinical Experience	Assigned in EXXAT	Complete during Week 8 about clinical site
PT Student Assessment of Clinical Instruction	Assigned in EXXAT	Complete during Week 8 about clinical instruction – will be sent to the CI following the clinical experience

Texas Tech University Health Sciences Center
School of Health Professions-DPT Program

Elective Experience

Grading Criteria

Definitions: “Complete” means a final rating of + or √; A final rating of NI means “Not Independent”

PT MACS Section	Skill(s)	Expectations
I. Professional Behaviors	1-10	Complete all 10 skills
II. Patient/Client Management		
History/Systems Review	12.1-12.3	Complete all 3 skills
Tests and Measures	13.1-13.14	Complete at least 9 skills
Examination/Evaluation	14.1, 14.2	Complete both skills
Prognosis/POC	15.1, 15.2	Complete both skills
Interventions	16.1-16.8	Must complete 6 of the 8 skills (16.1 – must have 3 different modalities)
III. Management of Care Delivery	17 – 22	Complete all
IV. Practice Management	23 & 24	Complete both as appropriate
V. Site Specific Skills	25.1-28.2	Complete a minimum of 4 TOTAL by the end of <u>all</u> internships
Other Requirements		Expectations
In-service project	11	Complete <u>at least twice</u> by the end of all internships
Level of Performance on THIS Clinical Internship	Likert Scale rated by CI in EXXAT	Meets expectations for this level (score of 5 or more)
EXXAT Tasks		Expectations
Clinical Information Form	Assigned in EXXAT	Student completes by end of week 1
PT Skills: Student Self-Assessment – Midterm	Assigned in EXXAT	Complete by Sunday of Week 4
PT Skills: CI Evaluation of Student – Midterm	Assigned by student in EXXAT	Complete during week 4
PT Skills: Student Self-Assessment – Final	Assigned in EXXAT	Complete by Sunday of Week 8
PT Skills: CI Evaluation of Student – Final	Assigned by student in EXXAT	Complete during Week 8
PT Student Assessment of Clinical Experience	Assigned in EXXAT	Complete during Week 8 about clinical site
PT Student Assessment of Clinical Instruction	Assigned in EXXAT	Complete during Week 8 about clinical instruction – will be sent to the CI following the clinical experience