Dear DPT Students:

Welcome to the Andrews University School of Rehabilitation Sciences in Berrien Springs, Michigan. You have been selected to be a part of a physical therapist program which fosters excellence. As part of the Entry-Level DPT program, you have the opportunity to learn the skills necessary to become an excellent physical therapist while studying within a caring Christian environment. We are here to help you have a totally rewarding experience.

In accordance with the Seventh-day Adventist Church, Andrews University desires to provide students with an opportunity for professional physical therapist education within a conservative Christian environment. We encourage your Spiritual growth through prayer, scripture, mentorship and sharing our faith. The university has regularly scheduled activities like chapel, week of prayer, weekly Bible study and worship services. In celebration of the Sabbath, the program facilities are closed from sundown Friday to sundown Saturday. We prayerfully approach decisions about the program and God continues to faithfully bless us with wonderful students! Our intent is to educate students for generous service to others with a faithful witness to Christ. We feel it is important for you to understand and hopefully embrace both our mission, “To empower students who dream of becoming excellent physical therapists” – and our Core Values: 1) Family Spirit, 2) Servant’s Heart, and 3) Inquisitive Mind. Our mission is achieved and our core values upheld through our uniquely Christian-based program. The program faculty, staff, and students have a sense of caring and belonging; we hope you experience this too. We encourage you to share how Christ, in your life, has empowered you.

We want your experience at Andrews to be a positive one. The operations of the Doctor of Physical Therapy program are covered under the Andrews University Working Policy. This handbook is intended as a companion to the Andrews University Student Handbook. This handbook is not intended to replace the Andrews University Student Handbook. The DPT Student Handbook will assist you while in the program and is regularly updated to answer questions you may have with respect to your responsibilities. It will also help you become aware of our expectations of you. Please acquaint yourself with the policies and instructions given in both. You will be held accountable for abiding by all items related to your particular situation(s). The Andrews University Student Handbook can be found at https://cmspreview.andrews.edu/services/studentlife/handbook/.

During orientation, you will be given a form to sign which authorizes the release of specific information and verifies that you are responsible for the information contained in this handbook and any updates during your time in the program. Additionally, PTH501 DPT Orientation includes quizzes over the content of the DPT Handbook to assist you in developing a working knowledge of the DPT program.

Please consult with your faculty advisor, school staff, or me if you have questions relating to this handbook or the School of Rehabilitation Sciences here at Andrews University. I am a graduate of this program myself and I understand, as a former student and a faculty member, what a uniquely encouraging place AU is to become the excellent physical therapist you dream of being!

Cordially,

Kim Ferreira, PT, PhD
School of Rehabilitation Sciences, Chair
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Introduction to Andrews University

Andrews University was established over a century ago, in 1874, as Battle Creek College in Battle Creek, Michigan—a collegiate program that offered literature, languages, science and mathematics, training for teachers, and theology. Its founders, the visionaries of the young Seventh-day Adventist denomination, believed they should use every avenue to spread the gospel and serve the world, including higher education.

On the brink of a new century, seeking room for expansion and a fresh start, the school moved in 1901 to a beautiful site near the banks of the St. Joseph River in Berrien Springs and was renamed Emmanuel Missionary College. From woods and farmland on which faculty and students built three wooden frame buildings to hold their new school, the campus has grown to a property of 1,600 acres and a complex of academic buildings, residence halls and apartments, and service buildings.

The vision blossomed still further when, in 1959, the Seventh-day Adventist Theological Seminary and a school of graduate studies, together known as Potomac University and located in Washington, D.C., were moved to the campus of Emmanuel Missionary College. The following year the three entities united under one charter bearing the name Andrews University—with an integrated board of trustees, administration and faculty. The name honors John Nevins Andrews (1829–83), pioneer Adventist theologian and intellectual and the denomination's first official missionary to serve outside North America.

In 1974, the undergraduate division of Andrews was organized into two colleges—the College of Arts and Sciences and the College of Technology. The School of Business Administration, which evolved from the Department of Business Administration, was established in 1980. In a similar move, the Department of Education became the School of Education in 1983. The present organizational structure of the School of Graduate Studies was adopted in 1987. In 1993, the Department of Architecture became the Division of Architecture, and in 2012 became a school. It is now the School of Architecture & Interior Design. In 2011, the School of Distance Education was formed to support distance education and educational programs offered at locations across North America and the world. Because of the many international partnerships, the school has been renamed as the School of Distance Education & International Partnerships. Also in 2012, five departments housed in the College of Arts and Sciences together became the School of Health Professions. All of the colleges and schools offer both undergraduate and graduate degrees, except for the Seventh-day Adventist Theological Seminary, which maintains graduate and professional programs only. The only Seventh-day Adventist doctoral research university, Andrews University is also a comprehensive institution of higher learning integrating an exemplary liberal arts and sciences core with six prestigious professional schools and a number of excellent graduate programs.

Rooted in a tradition of visionaries who saw what was possible and enriched by an international and diverse faculty and student body, Andrews University now offers a wealth of choices in degree and certificate programs to prepare its graduates for life in a complex, fast-changing world. The goal of this distinguished institution, however, remains the same—to provide excellent academic programs in an environment of faith and generous service to God and humankind.

Recognizing that students benefit from studying at an accredited institution, Andrews University is accredited by the Higher Learning Commission for programs through the doctoral level, as well as by the Adventist Accrediting Association of the General Conference of Seventh-day Adventists. Professional organizations have accredited specific degree programs of the University and other programs are moving toward accreditation. (Please see the complete listing of university accreditations, approvals, and memberships.)

The DPT program is also fully accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) to offer the doctoral degree in physical therapist education. On average, 100% of those who complete the DPT program pass the licensure exam and 100% of those who seek employment are employed within six weeks.

Please consult with the School Chair if you have questions relating to this handbook or the School of Rehabilitation Sciences here at Andrews University.

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Introduction to the School of Rehabilitation Sciences

The first MSPT degree was approved by the University Board in 1983. Bill Habenicht was the first Department Chair and program Director of the PT program. The first MSPT class of this three-year program began in July of 1985. The MSPT was accredited in April of 1988, with the first cohort of 23 students graduating in June, 1988.

PT courses were originally taught in various classrooms on campus. In the Fall of 1988, the program moved into the remodel PT Building, except for the Anatomy Lab, which remained in Halezn Hall in the Science Complex. Wayne Perry was hired from Loma Linda in the Fall of 1994 to be the program director of the Masters of Science in Physical Therapy (MSPT) program on the Berrien Springs Campus. Daryl Stuart was hired from Loma Linda in the Fall of 1993 as program director to start the Masters of Physical Therapy (MPT) on the Dayton, Ohio, campus. This two-year program especially appealed to students who had already earned a Bachelor’s degree. The first class graduated in 1996 with 39 students. Bill Habenicht resigned in 2002, and Wayne Perry and Daryl Stuart became co-chairs of the Department of Physical Therapy. In July of 2002, Daryl Stuart resigned, and Wayne Perry became the School of Rehabilitation Science chair. Around this same time, the university consolidated the MPT program in Dayton into the MSPT program in Berrien. In October of 2005, the last Dayton MPT class graduated, after graduating 365 students. Dr. Wayne Perry retired in 2013. Kimberly Ferreira, then the director of clinical education, was hired as the new department chair.

In 2002, the School of Rehabilitation Science followed the APTA recommendation that all PT programs transition curriculum to a Doctor of Physical Therapy degree (DPT). The process to upgrade from a Masters to a Doctoral program transitioned smoothly as the last MSPT cohort completed their requirements. The last MSPT class graduated in 2004 after graduating 568 students. The new DPT three-year program accepted students with a Bachelor’s degree, but also accommodated students who had not yet earned a Bachelor’s degree. These students follow a 3+3 curriculum: three years undergraduate-level courses to complete prerequisites (Freshman, Sophomore, and Junior years), plus three years in the professional/graduate phase of the program with upper division and graduate courses (Senior plus two years of graduate courses). Students without a Bachelor's degree earn a Bachelor of Health Science: Physical Therapy after two semesters in the DPT program. The first cohort of DPT students started classes in 2002, with 12 students.

In 2002, the Department of Physical Therapy was able to remodel existing classroom space in the Johnson Gym building. This classroom was equipped with new electric hi/lo tables and is dedicated to the School of Rehabilitation Science for the use of Postprofessional and Orthopedic courses. The School of Rehabilitation Science gained valuable lab space in 2008, by remodeling warehouse space from our Custodial Department neighbors. The new space provides ample room for Neuro, Peds and General Medicine labs. The new Anatomy Lab opened in the Fall of 2014, after remodeling additional space from the Custodial Department Warehouse. This brought all PT labs under one roof and the management of one department, with 10 state-of-the-art cadaver stations for our current sized cohort of 40 DPT students.

For three years, between 2001 and 2002, the Department of Physical Therapy offered an Advanced Masters of PT (AMPT). A total of five students graduated from the AMPT program. The AMPT, under the direction of Kathy Berglund, was the precursor to the transitional DPT (tDPT) and Doctor of Science in Physical Therapy. The tDPT offers the bachelor’s and master’s trained PT the academic coursework necessary to bring them to the equivalency of the entry-level DPT degree. The target audience for the tDPT was originally US and Canadian trained PTs. The DScPT is an advanced terminal doctorate degree which gives the graduate the necessary credentials to teach in physical therapy programs. Additionally, the original focus of the DScPT degree was to create master clinicians in the area of orthopedic manual physical therapy. The tDPT and the DScPT were designed to be hybrid programs with the majority of coursework online with the exception of courses that required hands-on skills. In 2005, the first tDPT and DScPT students graduated.

With the number of bachelors and masters trained PTs who desired the tDPT dwindling, a new initiative was created to meet the needs of the internationally trained physical therapist. In 2016, the tDPT program expanded to offer an on-campus option to physical therapists who were trained outside of the US and Canada. This program quickly grew in rigor as the faculty identified unique academic and clinical needs for the internationally trained PT. Enrollment continues to grow steadily each year and includes physical therapists from Costa Rica, India, Italy, Pakistan, Nigeria, Saudi Arabia, United Arab Emirates. The cultural and ethnic diversity the tDPT students bring has deeply enriched our academic and social experiences as a School.
Another growth initiative began in 2018 with the planning of a new concentration in Women’s Health within the DScPT program. The DSc common core still includes manual therapy courses to the COMT level however starting in 2019, the student could choose from the orthopedic manual therapy concentration or the women’s health concentration. The orthopedic manual therapy portion of the curriculum is taught by faculty of our partner, ASPIRE OMT. In 2023 a new concentration, Higher Education Teaching was launched to meet the needs for faculty development. The DSc graduates continue to serve their patients as master clinicians and many of them are faculty in entry-level and postprofessional programs across the United States and Canada. The Physical Therapy Department continued to grow, and in 2019, was approved to be renamed the School of Rehabilitation Sciences to recognize the significant growth in degrees offered and number of students enrolled. With the addition of a Doctor of Science in Occupational Therapy in 2021 and plans to add an entry-level degree program in Occupational Therapy in 2025, this was more than just a new change, it signified a new chapter in the history of PT at Andrews University. The DScOT is designed for Occupational Therapists who desire an advanced terminal OT degree.

The School of Rehabilitation Science currently offers the following degrees or programs:

- Entry-level degree (DPT) for college juniors or graduate students
- Transitional DPT (t-DPT) for PTs who have a Bachelor’s or Master’s degree in PT
- Doctor of Science (DScPT) for PTs who desire an advanced terminal PT degree
- Doctor of Science (DScOT) for OTs who desire an advanced terminal PT degree
1. MISSION, GOALS AND STANDARDS

1.1. Andrews University Mission
Andrews University, a distinctive Seventh-day Adventist Christian institution, transforms its students by educating them to seek knowledge and affirm faith in order to change the world.  

Seek Knowledge as they
• Engage in intellectual discovery and inquiry
• Demonstrate the ability to think clearly and critically
• Communicate effectively
• Understand life, learning, and civic responsibility from a Christian point of view
• Demonstrate competence in their chosen disciplines and professions

Affirm Faith as they
• Develop a personal relationship with Jesus Christ
• Deepen their faith, commitment and practice
• Demonstrate personal and moral integrity
• Embrace a balanced lifestyle, including time for intellectual, social, spiritual, and physical development
• Apply understanding of cultural differences in diverse environments

Change the World as they go forth to
• Engage in creative problem-solving and innovation
• Engage in generous service to meet human needs
• Apply collaborative leadership to foster growth and promote change
• Engage in activities consistent with the worldwide mission of the Seventh-day Adventist Church

1.2. College of Health and Human Services Mission
The mission of CHHS is to provide excellence in education for healthcare, wellness, and design professions that foster collaboration, research, and service, thus promoting the healing ministry of Jesus Christ to restore in humanity the image of God.

1.3. College Vision Statement
Global leaders in healthcare, wellness, and design.

1.4. School Vision Statement
Uniting Christian values and healthcare education

1.5. DPT Mission
To empower students who dream of becoming excellent physical therapists.

1.6. School Core Values
Exemplify Christian values through:

Family Spirit
• Advocate for the vulnerable
• Maintain a safe environment
• Work together
• Take responsibility
• Be accountable
• Have fun

Servant Heart
• Live prayerfully
• Lead selflessly
• Listen deeply
• Display compassion
• Model humility
• Show respect

Inquisitive Mind
• Desire life-long learning
• Ask relevant questions
• Integrate knowledge into practice
• Remain contemporary
• Display intellectual courage
• Analyze, produce & apply evidence-based practice

1.7. Entry-Level DPT Statement of Philosophy
The Entry-Level Doctor of Physical Therapy program affirms the mission and values of Andrews University and the College of Health and Human Services in its desire to provide excellence in education that fosters collaboration, research, and service, thus promoting the healing ministry of Jesus Christ to restore in humanity the image of God.

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The Andrews University School of Rehabilitation Sciences is committed to excellence in Christian healthcare education by training individuals to become physical therapists that provide evidenced-based service throughout the continuum of care.

1.7.1. The DPT Curriculum Plan Philosophy
The student’s comprehensive liberal arts and sciences background provide a base for the DPT curriculum’s foundational and clinical sciences. This background will further help students integrate their knowledge into the classroom, clinical environments, and their community.

The DPT curriculum is designed to encourage collaborative attitudes while fostering independent learning. It begins with the foundation sciences and basic assessment and intervention skills and progresses to the more complex systems approach with specialty practice areas and research interwoven where appropriate. The curriculum culminates with the clinical education component.

The DPT Program is sensitive to the interests and changing needs of practitioners, clients, families, caregivers, healthcare and educational systems, and to society at large. This is especially essential within an uncertain healthcare environment, an increasingly accountable higher-education system, and an evolving body of physical therapy knowledge. Critical inquiry within the academic experience enhances the preparation for evidence-based practice as clinicians and contributes to the professional body of knowledge.

It is of utmost importance to instill within the learner the accessibility of the power of Christ. The accessibility of His power is important to utilize not only in their personal life but also within the delivery of care to the clients they serve. The program seeks to prepare the learner to discern the spiritual needs of their clients.

1.7.2. The DPT Graduate Philosophy
Graduates of the Entry-Level Doctor of Physical Therapy program should be knowledgeable, self-assured, adaptable, reflective, and service oriented. Through critical thinking, and evidence-based practice, graduates render independent judgments concerning patient/client needs; promote the health of the client; and enhance the professional, contextual, and collaborative foundations for practice.

The graduate must master the breadth and depth of knowledge to address patient needs throughout the life span. These may be manifested as acute or chronic dysfunction of movement due to disorders of the musculoskeletal, neuromuscular, cardiopulmonary, and integumentary systems. The graduate’s focus should be to decrease the deleterious effects of health impairments, functional limitations, and disability.

The role of the physical therapist is expanding within a changing healthcare system. Graduates must be prepared for all responsibilities and privileges of autonomous practice and be the practitioner of choice for clients with a physical therapy diagnosis. Graduates will provide culturally sensitive care distinguished by trust, respect, and an appreciation for individual differences.

The graduate must also be adaptable and prepared to participate in a broad spectrum of activities from health promotion through comprehensive rehabilitation while being sensitive to market niches and needs that will arise in the healthcare community.

Compassion should be a driving force in the graduate’s work. It is our desire that they follow the example of Christ. As He worked with those in need of physical
healing, it states in Matthew 14:14: "He had compassion on them." Specifically, He felt their hurt.

Entry-level Doctor of Physical Therapy graduates have the requisite knowledge and skills to successfully pass the National Licensing Examination, be prepared for autonomous practice, and provide contemporary evidenced-based service throughout the continuum of care. They will be the practitioners of choice for clients with a physical therapy diagnosis and provide culturally sensitive care distinguished by trust, respect and an appreciation for spirituality in healthcare.

1.8. DPT Program Goals
To achieve the School of Rehabilitation Sciences mission, the DPT program offers professional physical therapy education that:
1. Attracts students who are interested in pursuing a career in physical therapy within a Christian environment.
2. Empowers students to become primary health care providers ready for contemporary professional practice in a variety of settings.
3. Inspires servant leadership in the area of health promotion and advocacy.
5. Promotes professional behavior consistent with current ethical and legal standards.
6. Develops understanding and respect among individuals from a variety of ethnic, cultural and religious backgrounds.
7. Encourages compassion for the patient/client as a whole person, taking into account physical, mental, spiritual and social needs.
8. Prepares students to communicate effectively with patients/clients, colleagues, health care providers and other community members.
9. Contributes to the physical therapy profession through research and creative scholarship.
10. Facilitates faculty educational and professional development.

1.9. DPT Faculty Goals
In order to provide professional physical therapy education consistent with the program goals, the faculty will:
1. Integrate Christian values into the physical therapy classroom.
2. Connect to their profession through licensure and professional membership.
3. Hold a postprofessional degree at the doctoral level.
4. Cultivate contemporary knowledge/practice expertise in assigned teaching area.
5. Develop, review, and revise the physical therapy curriculum plan collectively.
6. Admit students into the DPT program who have an appropriate balance of prerequisite courses and the ability to successfully complete the DPT program and practice in the profession.
7. Maintain currency in instruction and teaching methods including course content, design and assessment methods.
8. Pursue an on-going scholarship agenda which culminates in the peer-reviewed dissemination of original contributions.
9. Serve the department, university, profession and/or community.
10. Model professional behavior.

1.10. DPT Student Learning Outcomes
In accordance with the School of Rehabilitation Sciences mission and program goals, DPT graduates will:
1. Model behavior which reflects Christian values, including an understanding of the role of prayer and faith in the complete healing process.
2. Demonstrate in-depth knowledge of the basic and clinical sciences relevant to physical therapy, both in their fundamental context and in its application within professional clinical practice.
3. Provide primary care to patients/clients within the scope of physical therapy practice.
4. Demonstrate entry-level competency in clinical skills necessary to perform a comprehensive physical therapy examination, and evaluation, establish a differential diagnosis, determine an appropriate prognosis, and establish intervention and/or prevention activities.

5. Understand and value the capabilities of other health care providers and determine the need for referral to those individuals.

6. Participate in practice management including delegation and supervision of support personnel, financial management, business planning, marketing and public relations activities.

7. Possess the critical inquiry skills necessary to evaluate professional knowledge and competencies in relation to evidence-informed physical therapy practice.

8. Demonstrate legal and ethical behavior consistent with professional standards.

9. Demonstrate sensitivity to individual and cultural differences when engaged in physical therapy practice.

10. Demonstrate professional behavior.

1.11. **Student Technical Standards of Performance**

The intent of the Doctor of Physical Therapy program is to graduate individuals who are prepared for all responsibilities and privileges of autonomous physical therapy practice. Therefore, at the request of the university, students may be required to obtain a criminal background check including fingerprinting or a drug and alcohol test while enrolled in the program, before entering a clinical facility or during a clinical experience. The results of the background check or drug and alcohol test may disqualify certain students from successfully completing the program, being eligible to sit for the National Physical Therapy Exam or practicing as a Physical Therapist in certain states.

To function as a physical therapist at entry-level, students must be able to complete, with reasonable accommodation as necessary, certain psychomotor, cognitive, communication and behavioral skills. If a student cannot demonstrate these skills, it is the responsibility of the student to request appropriate accommodation. The university will provide reasonable accommodation as long as it does not fundamentally alter the nature of the program and does not impose undue hardship such as would cause significant expense or be disruptive to the educational process.

The student must be able to perform at least the following skills safely and reliably while in the DPT program:

**1.11.1. Psychomotor Skills:**

1. Attend lecture, lab and travel to clinical locations, move within rooms as needed for changing groups, partners and workstations.

2. Physically maneuver in required clinical settings, to accomplish assigned tasks.

3. Move quickly in an emergency situation to protect the patient (e.g. from falling).

4. Maneuver another person’s body parts to effectively perform evaluation techniques.

5. Manipulate common tools used for screening tests of the cranial nerves, sensation, range of motion, blood pressure, e.g., cotton balls, safety pins, goniometers, Q-tips, sphygmomanometer.

6. Safely and effectively guide, facilitate, inhibit, and resist movement and motor patterns through physical facilitation and inhibition techniques (including ability to give time urgent verbal feedback).

7. Move or lift another person’s body in transfers, gait, positioning, exercise, and mobilization techniques (lifting weights between 10-100+ pounds).

8. Manipulate evaluation and treatment equipment safely, and accurately apply to clients.

9. Manipulate bolsters, pillows, plinths, mats, gait assistive devices, and other supports or chairs to aid in positioning, moving, or treating a patient effectively (lifting, pushing/pulling weights between 10-100lbs).
10. Competently perform and supervise cardiopulmonary resuscitation (CPR) using guidelines issued by the American Heart Association or the American Red Cross.

11. Legibly record thoughts in English for written assignments and tests.

12. Legibly record/document evaluations, patient care notes, referrals, etc. in standard medical charts in hospital/clinical settings in a timely manner and consistent with the acceptable norms of clinical settings.

13. Detect changes in an individual’s muscle tone, skin quality, joint play, kinesthesia, and temperature to gather accurate objective evaluative information in a timely manner and sense that individual’s response to environmental changes and treatment.

14. Safely apply and adjust the dials or controls of therapeutic modalities.

15. Safely and effectively position hands and apply mobilization techniques.

16. Use a telephone.

17. Read written and illustrated material in the English language, in the form of lecture handouts, textbooks, literature and patient charts.

18. Observe active demonstrations in the classroom.

19. See training videos, projected slides/overheads, X-ray pictures, and notes written on a blackboard/whiteboard.

20. Receive visual information from clients, e.g., movement, posture, body mechanics, and gait necessary for comparison to normal standard for purposes of evaluation of movement dysfunctions.

21. Receive visual information from the treatment environment (e.g., dials on modalities and monitors, assistive devices, furniture, flooring, structures, etc.).

22. Receive visual clues as to the patient’s tolerance of the intervention procedures. These may include facial grimaces, muscle twitching, withdrawal etc.

23. Hear lectures and discussion in an academic and clinical setting.

24. Distinguish between normal and abnormal lung and heart sounds using a stethoscope.

1.11.2. Cognitive Skills

1. Receive, interpret, remember, reproduce and use information in the cognitive, psychomotor, and affective domains of learning to solve problems, evaluate work, and generate new ways of processing or categorizing similar information listed in course objectives.

2. Perform a physical therapy examination of a client’s posture and movement including analysis of physiological, biomechanical, behavioral, and environmental factors in a timely manner, consistent with the acceptable norms of clinical settings.

3. Use examination data to formulate a physical therapy evaluation and execute a plan of physical therapy management in a timely manner, appropriate to the problems identified consistent with acceptable norms of clinical settings.

4. Reassess and revise plans as needed for effective and efficient management of physical therapy problems, in a timely manner and consistent with the acceptable norms of clinical settings.

1.11.3. Communication Skills

1. Effectively communicate information and safety concerns with other students, teachers, clients, peers, staff and personnel by asking questions, giving information, explaining conditions and procedures, or teaching home programs. These all need to be done in a timely manner and within the acceptable norms of academic and clinical settings.

2. Receive and interpret written communication in both academic and clinical settings in a timely manner.

3. Receive and send verbal communication in life threatening situations in a timely manner within the acceptable norms of clinical settings.
4. 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.

1.11.4. Behavioral Skills
1. Maintain general good health and self-care in order to not jeopardize the health and safety of self and individuals with whom one interacts in the academic and clinical settings.
2. Arrange transportation and living accommodations to foster timely reporting to the classroom and clinical assignments.
3. Demonstrate appropriate affective behaviors and mental attitudes in order not to jeopardize the emotional, physical, mental, and behavioral safety of clients and other individuals with whom one interacts in the academic and clinical settings and to be in compliance with the ethical standards of the American Physical Therapy Association.
4. Sustain the mental and emotional rigors of a demanding educational program in physical therapy which includes academic and clinical components that occur within set time constraints, and often concurrently.
5. Demonstrate professional behaviors and a commitment to learning as outlined in Section 3.
2. OPERATIONS

2.1. Faculty & Staff

Below are the professors and support staff for the School of Rehabilitation Sciences:

School Chair & DPT Program
Director,
Interim DScPT Director
Kim Ferreira, PT, PhD
Associate Professor
(269) 471-6033

Director of Clinical Education
William Scott, PT, MSPT
Assistant Professor
(269) 471-6034

Curriculum Coordinator
Michelle Allyn, PT, DSc, CMPT, COMT
Assistant Professor
(269) 471-3160

Orthopedic Coordinator
Greg Almeter, PT, DSc, OCS, CMPT
Associate Professor
(269) 471-6552

Clinical Science Coordinator
Gerson DeLeon, PT, DPT
Assistant Professor
(269) 471-6076

Behavioral Science Coordinator
Nathan Hess, PT, DPT
Assistant Professor
(269) 471-6372

Research Coordinator
Sozina Katuli, MPH, DrPH
Associate Professor
(269) 471-3588

Foundation Science Coordinator
Ryan T. Orrison, PT, MSPT, OCS
Assistant Professor
(269) 471-3206

General Medicine Coordinator
Letrisha Stallard PT, DPT
Assistant Professor
(269) 471-6073

Neurology Coordinator
TBD
Associate Professor
269-471-6491

Professor Emeritus
Lee Olson, MPT, DC

Professor Emeritus
John Carlos Jr., PT, PhD

Professor Emeritus
David Village, MSPT, DHSc, GCS

DPT Admissions Coordinator & Pre-PT Advisor
Cristina Wilson, RN AAS
(269) 471-6490

Administrative Assistant
Heather Trutwein
(269) 471-6033

Operations Assistant & Clinical Education Assistant
Kirsten Baldwin
(269) 471-6061

Postprofessional Research Coordinator
Betty Oakley, PT, MSPT, DHSc
(269) 471-6301

DScOT Director
Dovison Kereri, OT, PhD
(269) 471-6470

Postprofessional Operations Coordinator & Advisor
Michele Keyes
(269) 471-6305
During a pandemic all supplemental University pandemic policies supersede policies in this handbook.

2.1.1. Program Office Personnel
A physical therapist education program of this magnitude has several major areas of operation that require concentrated administrative attention. The three assistants in the Andrews University School of Rehabilitation Sciences each have specific administrative responsibilities vital to the day-to-day operations of the department and the program on this campus.

2.1.2. Administrative Assistant
The full-time administrative assistant is primarily responsible to the department chair. Responsibilities include:

1. Assists the department chair in monitoring all activities required by the accrediting bodies. These include biannual reports, progress reports, self-study reports and surveys.
2. Maintains program files, including curriculum files, student academic files, faculty/staff personnel files and accreditation files.
3. Organizes Curriculum Committee meeting.
4. Creates 3-year program Class Calendar and Curriculum Outlines for each class.
5. Coordinates the information between department and university administration.
6. Coordinates and schedules appointments for the chair.
7. Manages correspondence for the chair.
8. Coordinates and processes all faculty licensure and professional memberships.
9. Assist the chair by updating the School Handbook on an annual basis, and the Associated Faculty Handbook as necessary.
10. Submits revisions for the AU Bulletin copy information and Course Scheduler via Acalog.
11. Assists chair in monitoring the academic standing of program students.
12. Manages all arrangements, confirmation, and financial paperwork for all contract faculty and guest instructors.
13. Coordinates the annual update of curriculum vitae and abbreviated resumes for all regular faculty, contract faculty and guest lecturers.
14. Coordinates, collects and tallies Course Evaluations each semester.
15. Prepares and processes annual faculty evaluations.
16. Prepares and processes annual Alumni Survey and formats results for the Curriculum Committee.
17. Prepares and processes annual Graduate Exit Survey.
18. Assists the department chair in generating and monitoring program budgets.
19. Inventories and validates all department expenses.
20. Coordinates the reimbursement process for all contract faculty, guest lecturers and graduate assistants.
21. Processes program expense reports per department record management guidelines.
22. Coordinates financial arrangements and department budget for graduate assistants.
23. Monitors student club accounts and initiates disbursement to class accounts.
25. Processes graduate student research reimbursement.
27. Processes donations and disbursements of private gifts and contributions.
28. Handles specific student concerns and assists students to make appointments with the chair, faculty and/or their respective advisors.
29. Assists with registration and orientation day activities for first-year students in the professional program.
30. Serves as recording secretary for the: DPT Physical Therapy Faculty Council and DPT Professional Degree Council.
31. Serves as team leader for the full-time support staff.
32. Manages department graduate assistants and student workers.

2.1.3. Operations & Clinical Education Assistant
The full-time operations assistant is responsible to the department chair. Responsibilities include:

Operations:
- Serves as primary School receptionist and triage.
- Maintains operation files per School records management guidelines.
- Prepares School class lecture and laboratory schedules - dates and times including, exams, seminars, holidays, recruitment fairs, special tests, etc.
- Coordinates Orientation Day activities for the School and prepares necessary materials.
- Maintains appropriate records for equipment checkout. Ensures that the building and equipment is safe and remains in good working order.
- Coordinates School events/social activities.
- Maintains updated Materials Safety Data Sheets in manuals for the office and labs.
- Manages & assists contract teachers with scheduling and other programmatic needs in the event the track coordinator is unable.
- Schedules locations for special accommodation testing.
- Technology Coordinator- assists faculty with classroom technology resources and set-up as needed.
- Assists School Chair in maintaining and updating School webpages.
- Oversees distribution of mail to faculty, staff and students.
- Purchases and mails School greeting cards.
- Briefs the Chair on information from faculty, staff and students.
- Orders, receives and maintains teaching and office supplies for School.
- Ensures office equipment and service contracts are maintained.
- Oversees usage and maintenance of PT building and submits work orders when needed.
- Manages building card access system and lock down for building security.
- Manages room bookings and rentals.
- Responsible for security, opening, and locking up the PT building or, when not available, designating a faculty or staff member.
- Maintains and inventories storage areas.
- Oversees student worker’s maintenance of School bulletin boards.
- Serves as back-up recording secretary for Faculty Council.
- Monitors program office and initiates service calls.
- Maintains the Physical Therapy School library.
- Supervises student workers and graduate assistant direct reports.
- Assists students with their day-to-day specific needs in the program.
- Works with the Admissions Coordinator to contact and assist each new student in the incoming DPT class.
- Advises students on registration process.
- Verifies students are registered in Registration Central each semester. Alerts Chair of those who are still not registered after sending several reminders.
- Assigns faculty advisors and student laboratory sections.
- Gives building access to students and faculty through ID card system.
- Assigns student lockers, mailboxes, and School keys.
- Presents state board and licensure information to the 3-year class
- Prepares graduation paperwork for both undergraduate and graduate students.
- Arranges for photographer to photograph students for; composition photos, clinical bio sheets and database.

Clinical Education:
- Organizes and maintains electronic filing system for accreditation documents in department G drive.
- Works with and maintains data management for clinical education program.
• Maintains documentation of processes and procedures for clinical education handbooks.
• Maintains clinical faculty and students’ electronic and hard copy files as required by accreditation.
• Assists the Department Chair and DCE by updating the Clinical Education Handbook and uploads to the web and distributes hard copy as appropriate.
• Assists the DCE with preparation for all courses and clinical education meetings.
• Assists the DCE with arrangements for clinical education experiences.
• Maintains and updates required documents (clinical site information form, contract, and slot request form) with all clinical facilities and follows up on overdue clinical education materials from students and facilities.
• Assists the DCE with arrangements and contracts for new clinical sites.
• Arranges liability insurance for clinical facilities.
• Gathers, prepares, and monitors clinical education information required for accreditation and the Self-Study Reports.
• Assists the DCE in preparation of reports for curriculum review committee.
• Assists the DCE with clinical observation sites for PHTH120 Introduction to Physical Therapy.
• Maintains clinical education files according to department records management guidelines.
• Maintains and updates the clinical education database and online clinical assessment tools.
• Assists the DCE with all correspondence with students, faculty and clinical facilities.
• Plan and organize an annual CPR certification course and physical exam for students.
• Monitors health records, CPR status, and all other clinical education requirements of students.
• Files incident reports for students injured while on clinicals.
• Processes student paperwork on completion of clinical experience and follows up with students or facilities as needed to obtain required paperwork.
• Processes all licensure paperwork for students and alumni applying for PT license(s).
• Assist DCE to coordinate activities for Alumni Weekend, including the continuing education seminar.

Financial:
• Process all School purchase orders and non-teaching related check requests and processes invoices for payment.
• Time keeper –monitors and approves labor hours for staff, graduate assistants and student workers.
• Processes all charges to student accounts.
• Processes paperwork for program office and lab equipment service contracts.
• Monitors and approves invoices and payments.
• Assists students with financial processes for APTA memberships
• Assists the DCE in preparation, monitoring and processing of budget related to clinical education expenses
• Accepts and processes all financing related to clinical education and/or alumni continuing education seminars
2.1.4. Admissions Office Personnel

The School of Rehabilitation Sciences has a dedicated full-time admissions director who is responsible to the department chair. Responsibilities include:

1. Follows admissions procedures as outlined by the Physical Therapy Faculty Council.
2. Ensures that applicants to the Physical Therapy program are qualified for admission before recommending them to the Physical Therapy Faculty Council.
3. Effectively communicates with the university enrollment services, the graduate admissions office, the School of Rehabilitation Sciences Chair, faculty and staff on admissions policies, procedures and strategies.
4. Carries responsibility for the development of all admissions materials for the School of Rehabilitation Sciences.
5. Serves as the first line of communication for potential program applicants.
6. Advises on-campus and off-campus students regarding the physical therapy profession and admissions requirements including prerequisite courses.
7. Oversees logistics for program admissions.
8. Brings recommended changes of admission policies/procedures to the School of Rehabilitation Sciences chair for approval.


Faculty, staff and students in the School of Rehabilitation Sciences are governed by the policies and procedures of Andrews University as documented in the Andrews University Working Policy, Employee Handbook, Procedure Manual or Student Handbook. This manual along with its related program handbooks are a compilation of policies and procedures that have been developed by the School of Rehabilitation Sciences of Andrews University, specific to our professional education needs. It is intended to supplement (not replace) those of the university. These policies are in recognition of our responsibilities to the faculty, staff and students as well as to the future patients/clients who will be treated by our graduates.

Policy – a statement setting forth criteria identifying what activities will be carried out; identifies the acceptable level of practice; reflects professional standard.

Procedure – Defines policy implementation; identifies course of action to be taken.

This manual is a dynamic document. It is intended to serve as a reference for faculty, staff and students in the Doctor of Physical Therapy Program. Individual policies will be modified or added based on revision of university, college, or accrediting body policies, practices or on identified need. Modifications or additions may be brought before the faculty at any time, during a regularly scheduled faculty meeting. As the governing body of the program, faculty must vote on any additions, deletions, or modifications.

It is the responsibility of each faculty and student member to read, understand and abide by pertinent departmental policies and procedures as well as college and university policies and procedures.

The manual in its entirety is reviewed annually by the Physical Therapy core faculty.

2.2.1. Purpose of Policies and Procedures

- To protect the rights, privacy, dignity and safety of all individuals associated with the program, with specific reference to the chair, the academic faculty and staff, and the students.
- To guide the faculty, staff and students in their behaviors.
- To further the mission and goals of the department.
2.2.2. Related Handbooks
Several handbooks have been developed as companions to this manual. They are tailored for and distributed to the audience they serve. The reader is expected to acquaint him/herself with the information given within. These handbooks are also available through the School of Rehabilitation Sciences office.

- Associated Faculty Handbook
- DPT Student Handbook
- DPT Clinical Education handbook
- Postprofessional Student Handbook

2.3. Individual Rights and Safety
Safety, the right to privacy, confidentiality and informed consent apply to any individual involved with the Physical Therapy educational process, including, but not limited to: students, faculty, staff, visitors to the program, human subjects for classroom demonstration or research, and clients interacting with students at clinical facilities.

Information on the university policies concerning confidentiality may be obtained from the Andrews University Student Handbook.

In compliance with the Family Educational Rights and Privacy Act (FERPA), the federal law that governs release of and access to student education records, Andrews University grants the rights outlined within the Act to our students. For more information please see the Andrews University Student Handbook section on FERPA online.

Due to FERPA, University Faculty and Staff are unable to share confidential information with anyone other than the student unless the student has given specific permission for a third-party to receive information. This can be done through your iVue by selecting ‘Manage FERPA Contacts’ and adding them as a ‘New Contact.’

2.4. Student Rights and Responsibilities
All Physical Therapy students are considered to be full members of the academic community. As such, students have rights and responsibilities which are discussed in detail in the Andrews University Student Handbook, which is available online: https://www.andrews.edu/services/studentlife/handbook. These rights include a right to learn; to be free from discrimination or harassment; to discuss, inquire and express; to petition; to have access to and privacy in educational records; to associate with others and to appeal/grievance.

2.5. Health Risk Situations
If a situation shows a potential personal health risk to the student (or her unborn child, if applicable) the School Chair (or DCE if clinic-related) will review known potential risk with the student (and CCCE if applicable).

2.5.1. Withdrawal
If the student chooses to drop out of the program until the health situation clears, the Academic Policies and Procedures section of this handbook will be followed for exiting and reentering the program (the School of Rehabilitation Sciences
Faculty Council reviews these situations). A statement from the student's physician will be necessary to document the reasons.

2.5.2. Informed Consent
Having been informed of the potential risk, if the student chooses to continue in regular standing in the program they will:
1. Furnish a statement from the student's physician (signed by the physician). This document will indicate the physician's recommendation(s) with any noted comments or limitations.
2. Provide a signed Informed Consent Form (the signature of the spouse may also be required if pregnancy is involved). This may be required for each academic semester or clinical experience and is obtained from the administrative assistant or DCE.
3. If a student is aware that they have been exposed to an infectious disease, for which they have not been immunized, they will share this information immediately with the department chair (or the DCE if the student is in the clinic). The student may be asked to take a test at the student's expense to ascertain if they are a potential carrier of the disease. It may be necessary for the student to withdraw from the program and arrange makeup time. A clinical experience may require rescheduling. A rescheduled or added clinical experience may result in a delayed graduation.
4. Any change noted by a student in their physical condition which has the potential of influencing their skills or judgments or endangering the safety or well-being of themselves, their unborn child, or their clients must be reported to the DCE or the School chair immediately.

2.6. General Complaint Procedure
A student with a complaint or concern about the School of Rehabilitation Sciences or one of its policies, programs, faculty, staff or students will be asked to submit their concern in writing to the Program Director. Persons with a verbal complaint/concern should be asked to submit their issues in writing to the department chairperson or to the dean of the College of Health and Human Services. For the DPT program, if the nature of the concern falls into the possibility of a formal complaint to the programs accrediting body, contact the APTA's Department of Accreditation to discuss the nature of the complaint and to determine what procedures should be taken. This department can be reached by fax at 703-684-7343 or email at accreditation@apta.org.

2.7. Problem Resolution
Several things should be noted:
1. All problems should be resolved at the lowest administrative level possible. If a solution is not attained at any particular level, the next level should be sought. The first contact should be with your faculty advisor if academic or DCE if clinical related. If possible, the advisor should follow through the various progressive administrative steps with the student until the solution is attained. Should the student not be comfortable with their first contact, they may go to the next higher level for assistance. This person will then follow through with the student.
2. If the student feels that the problem has not been dealt with fairly up to and through the vice president level, they should seek the assistance of the president designated ombudsperson prior to proceeding to the university president's office.
3. A petition form may be required. The petition will require approval at the various respective levels prior to the final solution.
4. If a student is dismissed from the PT program and believes there were extenuating circumstances that override policy, they may appeal a dismissal decision to the CHHS dean.
2.8. Student Grievance Procedure

Any person with a complaint or concern about the School of Rehabilitation Sciences or one of its policies, programs, faculty, staff or students will be requested to submit their concern in writing.

Complaints/concerns about the school, or one of its programs or policies should be delivered to the program administrator or dean of the College of Health and Human Services for timely follow-up. If the nature of the concern falls into the possibility of a formal complaint to the schools accrediting body, contact the APTA's Department of Accreditation to discuss the nature of the complaint and to determine what procedures should be taken. The department can be reached by fax at 703-706-3387 or email at accreditation@apta.org.

Complaints/concerns about a particular individual (faculty, staff, or student) We follow the principles in Matthew 18:15-20 therefore the individual should be addressed first. If the person with the complaint feels the situation remains unresolved, that person should
meet with the individual’s immediate supervisor or School Chair. A written response stating how the complaint/concern is to be handled (or was handled) should be submitted. Concerns about a particular program should be addressed by the program’s Faculty Council. If further action is necessary, the complaint/concern will be taken to the appropriate person, or committee, for further review and follow-up. For clinical concerns, please refer to the Clinical Education Syllabus. It is inappropriate and unprofessional to slander or libel in any format or platform (i.e. social media).

2.9. Discrimination and Harassment (Including Sexual Harassment)
Students should contact their faculty advisor, School Chair, CHHS dean, or vice president for student affairs, in that order, unless one of the above is suspect in which case start with the one higher up (see University Student Handbook for more specific information).

2.10. Right to Ombudsperson
The Office of the Ombudspersons is a confidential, independent and neutral dispute resolution service for the university community. As such, it facilitates understanding, communication and resolution of conflict among students, faculty and staff. The office serves as an impartial and confidential means of facilitating dialogue between parties on campus and as a means, apart from formal grievance procedures, of resolving differences. The office was established as part of the university’s Christian commitment to foster a courteous and considerate climate conducive to productivity and well-being for the university community. 3

2.11. Use of Protected Information
Information collected from students, lab subjects, patients/clients or from research subjects is considered confidential information, and protected by applicable Health and Human Services laws (available through: http://www.os.dhhs.gov/). As such, the information cannot be used for any other purpose than direct health care. Use of protected information for any other purposes requires written informed consent from the patient/client or designated official. Use of the information should still protect the right to anonymity, when possible, and be used for educational purposes, either in the classroom or to other professionals. If images are requested, a separate consent form must be obtained, prior to obtaining and using such images.

2.12. Human Subjects
Subjects used to demonstrate in the classroom setting are afforded the same right to informed consent as in other settings. Forms may be obtained from the operations assistant, and completed forms should be placed in the course curriculum file.

Policies regarding patient/client rights within the clinical setting are established by that institution, and should allow clients the right to refuse to participate in clinical education.

Policies and procedures for the use of human subjects in research is under the oversight of the Andrews University Institutional Review Board (IRB). Prior to research with human subjects, a research proposal and application must be submitted to the IRB, in keeping with federal guidelines. Subject information is confidential and must be properly protected. See Section 4.21.4.

2.13. Drug-Free Workplace
Andrews University is committed to an environment of learning that supports the fullest possible human development. To achieve this goal, the university holds that a drug-free lifestyle is essential and maintains policies that seek an alcohol-, tobacco-, and drug-free campus environment. 4

2.14. Personal Safety
Faculty, staff and students should follow Universal Precautions, as identified by the Centers for Disease Control, available at:

3 AU Working Policy 2:166
4 AU Working Policy 2:153
2.15. Safe Working Environment
It is the intention of Andrews University to provide a safe teaching and learning environment and to comply with all applicable government safety and environmental regulations. While safety is by nature a responsibility of every department head and dean, caring for this can be time consuming and complicated. The university’s risk manager is available to provide inspection, explanation of OSHA and EPA standards, consulting on implementation actions and to answer safety-related questions. The risk manager may initiate a safety or environmental review of a department.  

The department chair is responsible to:
1. Understand and apply the commonly accepted safety and environmental standards of his/her field.
2. Understand and comply with the specific government safety and environmental regulations that apply to his/her department.
3. Call upon the risk manager for assistance as needed.
4. Act favorably upon safety recommendations received from the risk manager.

If the risk manager makes a safety recommendation that is not viewed as workable by the department chair, and if the risk manager feels that this will pose a significant risk, the discussion should widen to include the school dean.

2.16. Injuries
Andrews University’s general liability loss insurance requires that the incident be reported promptly and accurately. The procedures to follow are:
1. Report the injury to the department chair immediately. If serious, call for medical assistance immediately.
2. As soon as possible after the injury, meet with the department chair to complete an Incident Report.

2.17. Personal Electronics Use
Screen use can interfere with the establishment of a productive learning environment. Therefore, cell phones, iPad/tablet, laptop, calculators or any other electronic devices may only be used during lecture or lab if specifically indicated by the instructor. Professionalism is expected. Students are expected to do their part to maintain a class environment of respect, and civility. This includes refraining from texting, non-class computer use, or other disruptive behaviors with electronics.

2.18. Photocopiers
The James White Library has cash-only copiers available for student use. Articles can be scanned for free at the Library and emailed to your email address. Staff in the PT office have been requested not to make copies for students.

2.19. Hazardous Materials
As noted in the AU Written Hazard Communication Program, storage and use of hazardous materials must follow federal guidelines (OSHA, available at: http://www.osha.gov/index.html). The operations assistant will keep records, with the Material Safety Data Sheet (MSDS), of any hazardous materials received within the department. Individual faculty are responsible for following proper storage and use guidelines for material within their area.

2.20. Office Hours: Facility
Office hours may vary during vacations and between semesters. During periods when classes are in session the office hours will be:

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5 AU Working Policy 2:167:2
Monday through Thursday ...........8:00 – 12:00 & 1:00 – 4:30  
Friday ........................................8:00 – 12:00  

Facilities are accessible for use between the hours of 8 am to 11 pm, Sunday through Thursday, and 8 am until 1 hour before sundown on Friday. Use of the building on Friday evening or Saturday is restricted to appropriate Sabbath activities, and must be approved through the department operations assistant.

2.21. Office Hours: Faculty  
All core faculty are expected to maintain regular office hours, which should be updated and posted next to their office door each semester. Office hours should be take into account the student’s schedules and typically should range between 3 – 5 hours per week during the semester. During a pandemic office hours will be remote or outside to allow for adequate distancing.

2.22. Student Use of Facilities  
Remember back to your first visit to our building. What were your first impressions as you walked through the building? First impressions do count. We have many visitors (prospective students, people coming to be research subjects, clients, etc.). We all tend to judge the quality of the program and students by the appearance of the building. This section contains guidelines that we hope will help us project a professional high-quality image.

2.22.1. Dining  
Eating must be restricted to the lobby, hall, and outside areas only. A refrigerator and microwave ovens are in the student lobby. The kitchen in Classroom C is available for group functions, with permission from the Operations Coordinator, but must be cleaned immediately after each use. Students may use the refrigerator in the kitchen, however, the School uses it for special events. Both departmental refrigerators will be cleaned during school breaks. Any items not removed prior to breaks will be discarded. Please be sure to pick up all trash and clean all areas utilized prior to leaving. At no time should food or drinks be opened, handled, eaten, or placed on or near equipment that could be damaged by an accidental spill.

2.22.2. Anatomy Lab  
Risk potentials and the necessary precautions relative to maintaining adequate protection for skin, eyes, airways, etc., relating to air quality, embalming fluid, body fluid and tissues, dissecting tools, are presented to the students by the laboratory instructor. Students are responsible for knowing and practicing all precautions. A faculty member or graduate assistant must be present when students are in the lab.

The human anatomical specimens being studied or dissected must always be treated with dignity and respect. These represent persons who, even after death, are contributing to the cause of education.

Ethical considerations require that proper precautions be taken to protect the privacy of human anatomical materials. Success in continuing to have access to human cadavers depends, in large measure, on our good ethics and discretion. Visitors are not allowed in the anatomy laboratory except by specific permission from the anatomy instructor or the school chair.

Students will read and sign a list of anatomy lab policies and procedures understanding that a violation thereof is a breach of professional conduct.

A list of precautions is published in the anatomy course syllabi. Precautions will be posted in the anatomy laboratories. These will be reviewed and discussed with the students by the respective instructor. These precautions include but are not limited to the following:
1. Anatomy students are required to wear a full-length white lab coat whenever working with the cadavers or any other human material (hearts, brains, etc.).

2. When handling human anatomical subjects, students are encouraged to wear either vinyl or latex examination gloves.

3. The specimens, embalming and moistening solutions, if used properly, should pose no health hazards to the student. Death from an infectious disease is cause for rejection of a specimen. The moistening solution contains fungi-static and surfactant-like compounds. The MSDS for these solutions are on file in the program office and are posted in the laboratory. The instructor will review the MSDS with the students and point out their locations. Each student must then take responsibility for being knowledgeable with respect to their content and location.

4. The anatomy laboratory has an independent air exchange system. The labeled switches in the laboratory activate this system. The students are made aware that these switches must be turned on whenever anatomical specimens are opened for study.

5. Sometimes it is necessary for the student to remove a skeletal structure (clavicle, rib, or mandible) from a cadaver. This requires use of an autopsy (Stryker) saw. Students are not allowed to use these saws without prior training and approval by the anatomy laboratory instructor. Any use of the saw requires that the operator wear a dust/mist respirator and a plastic face shield protecting against the potential spray of miscellaneous fluids or dust particles. **FLUSH EYES IMMEDIATELY IF CONTAMINATED** and notify the laboratory instructor.

6. Should a student cut him/herself with a bone fragment or while dissecting, they should take normal precautions by washing the wound thoroughly and notifying the laboratory instructor. First aid materials are readily available in the lab.

7. Instruments dropped on the floor must be washed immediately and rinsed with the alcohol provided. Failure to follow these procedures may result in mold growth on a specimen, rendering it unsatisfactory for further study.

8. At the end of each laboratory session the specimen must be draped with the terry cloth toweling and the tub cover, if appropriate.

2.22.3. Use of Bicycles, Roller-skates, Roller blades, Skateboards, etc.
Bicycles are not permitted in the SRS building or any other building on campus (see university policy regarding bicycles). A small bicycle rack is located in front of the student entrance for student use. Roller-skates, roller blades and skateboards are not to be used in the SRS building. All persons must remove, or put away, these articles prior to entering the building.

2.22.4. Pets
Pets of any kind are not permitted in the physical therapy building. Documented & certified service pets may be allowed with permission from the School Chair.

2.22.5. Student Computer Resources
DPT students are required to have their own personal computer, although the University does maintain two computer labs on campus—in Haughey Hall (Science Complex) and Chan Shun Hall; both having computer resources available to students. In addition, the DPT program maintains a small computer lab for physical therapy students only. Internet access may be gained in any of these locations and through the AU-secure wireless network on your personal computer. Due to the high cost of maintaining the computer lab, no other persons are permitted. It should be considered a privilege to have access to this lab. If you see someone other than a physical therapy student in this lab, please report
it to the program office immediately. If this is not tightly controlled, the lab may be closed. Students are required to have their own personal computer.

2.22.6. **Student Personal Use of Department Facilities**
Use of any department facilities or equipment must be cleared in advance with the operations assistant. Students are not permitted to use the exercise equipment, (i.e. the exercise bikes, ergometers and treadmill) for personal routine exercising. This does add considerable wear to the equipment. Students have access to the university Andreasen Center for Wellness and are encouraged to use the beautiful facility.

2.22.7. **Student Facility Access**
Every student is issued an Andrews ID card. This card will give each physical therapy student access to the physical therapy student entrance, neuro lab, computer lab, Ortho lab, classrooms, and gym area. Card access is permitted from 6:30 a.m. to 11:00 p.m. Sunday through Thursday and 6:30 a.m. until 1 hour before sundown on Friday. Students have card access again on Saturday one hour after sundown until 11:00 p.m. Students are not permitted in the building after 11:00 p.m. and during Sabbath hours. **The department requests students to turn off lights, close windows and doors upon leaving the building after office hours. Do not prop exterior doors open at anytime.**

2.22.8. **Student Lockers**
Lockers are located in each of the dressing rooms and are assigned by the operations assistant. On occasion two students may need to share a locker. It is expected that lockers will be kept neat and clean, free from wet/soiled clothes/towels and all food and perishable items, and controlled substances. It is the responsibility of the student to remove their belongings when they exit the program.

2.23. **Bulletin Boards**
Bulletin boards are provided for student information.

2.23.1. **Program Bulletin Board**
This bulletin board (located in the short hallway across from the mailboxes) is for general and specific announcements that may relate to the program or students. It provides official notice of schedules, activities, policies, requirements, notes of recognition, TBA schedules, class cancellations, or schedule changes. **Each student must make a point to check this board at least once every day. All students are held responsible for announcements placed on this bulletin board. Students should especially check the bulletin board first thing upon arriving on campus at the beginning of every new semester.**

2.23.2. **Career Opportunities Announcements Housing & Licensure and Scholarship Bulletin Board**
This bulletin board (located near the drinking fountain) is for current listings of job openings in the field of physical therapy as well as for housing availability, licensure information and scholarship opportunities.

2.23.3. **Student Bulletin Boards**
These bulletin boards are located in the classrooms and are maintained by the class officers. Class sponsored activities are posted here along with other student-to-student announcements.

| First Year Students | Classroom A |
| Second Year Students | Classroom B |
| Third Year Students | Classroom B |
2.24. **Mail Service**
Outgoing mail is to be placed in the “Outgoing Mail Slot” next to the student mailboxes by 11:00 a.m. if it is expected to go out that day. Incoming mail will be distributed to your mailbox or designated area. Faculty may obtain a key to the mailroom from the operations assistant.

2.25. **Student Mailboxes**
Student mailboxes are located in the hallway off the student lobby and are provided for:
1. Teachers to return assignments or leave messages for the students(s).
2. Official departmental messages
3. Incoming telephone messages for students

Personal mail or UPS/FedEx shipments should not be sent to the School of Rehabilitation Sciences. Students, faculty and staff are asked to respect the privacy and confidentiality of the individual boxes. Students are expected to check their mailboxes several times each day and before leaving the building at the end of each day. Students wishing to drop off notes and small packages for distribution to classmates’ boxes may leave them with the operations assistant. Replacement cost for a lost mailbox key is currently $20.00.

2.26. **Student Email & Teams**
Each student will receive an email and Teams account through Andrews University. It is important that students check their Andrews email and Teams account daily. Faculty routinely send messages to students concerning changes in class schedules and information for assignments, exams or quizzes. The primary mechanism of communications between the student and the university is through students’ Andrews email and Teams account. Teams also serves as a nice way for students to contact the program office or send messages of encouragement to each other.

2.27. **Student Parking**
Students are asked to follow the published university regulations regarding the parking of vehicles and bicycles. Each student is required to have a parking permit issued by the university campus safety department. To avoid a parking ticket, all physical therapy students are asked to use the two parking lots east of the bookstore and Johnson Gym Parking lot across from the PT building. Students are not to park on the sidewalk side of the street in front of the PT building. Parking on the sidewalk side of the street is reserved for contract and regular faculty, staff, clients, research subjects, delivery vehicles, and visitors. Please remember that parking violations are treated very seriously on campus and cars will be towed regardless of who they belong to.

2.28. **Program Safety**

2.28.1. **Fire**
1. Andrews University is a smoke-free campus.
2. Do not overload outlets or run extension cords under carpets.
3. Familiarize yourself with the use of fire extinguishers, but never fight a fire alone. Do not use a fire extinguisher unless properly trained.
4. Do not block fire extinguishers, stand pipes or sprinkler heads.
5. Report missing, used, or damaged fire extinguishers to the operations assistant.
6. Report broken or defective electric fixtures, switches, or outlets to the operations assistant and discontinue use until proper repairs are made.
7. Do not block or prop open fire doors.
8. Report broken exit lights or alarms to the operations assistant.
9. Maintain clear aisles and exit ways.
10. Check fire doors for automatic closing devices and latching hardware.
11. Keep fire exit doors unlocked.
12. Use approved cans for storing flammable liquids.
13. Remove excessive combustible storage and trash. Good housekeeping is good fire prevention.
14. Report all fires, even small fires, to the Campus Safety Department immediately (ext. 3321)

2.28.2. Evacuation procedure for emergency exit:
1. Upon the discovery of fire, remain calm.
2. Alert other occupants by pulling the manual fire alarm pull station located in the hallways.
3. Check to see that other employees, students and guests are aware of an evacuation.
4. Do not take personal belongings.
5. Close your doors
6. Do not talk during evacuation. Listen for instructions.
7. Select an alternate escape route if your designated exit is blocked by smoke or fire.
8. If you become trapped in an office, close the door and seal off cracks and signal fire fighters for rescue and wait.
9. Do not re-enter the building until the fire chief issues an “all clear”.

2.28.3. Tornado
Tornado warning: By definition, a tornado warning is an alert by the National Weather Service confirming a tornado sighting and location. The weather service will announce the approximate time of detection and direction of movement. Wind will be 75 mph or greater. Public warning will come over the radio, TV, or five-minute steady blasts of sirens by the municipal defense warning system.

Action to take:
1. Get away from the perimeter of the building and exterior glass.
2. Leave your exterior office or classroom area and close doors.
3. Go to the center corridor and protect yourself by putting your head as close to your lap as possible, or kneel protecting your head.

If you are trapped in an outside office:
1. Seek protection under a desk.
2. Keep calm.
3. Keep your radio or television set tuned to a local station for information.

2.28.4. Lockdown
Inside Threat:

RUN
1. Get out of the building if you can do so safely
2. Encourage others to get out, but don’t let them slow you down
3. Don’t try to move unconscious injured
4. Warn others/Prevent them from entering
5. Call 9-1-1

HIDE: If you cannot safely get out
1. Lock and Barricade Doors
2. Turn Off Lights
3. Close Blinds or Cover Windows
4. Turn off Computers and Projectors
5. Get down and Spread Out
6. Silence Cell Phones
7. Call 9-1-1
**FIGHT:** If your life is in imminent danger
1. Commit to your actions, Act Aggressively,
2. Improvise Weapons and Throw Items
3. Rush the attacker together
4. Attack vulnerable body areas
5. Continue until the attacker is no longer a threat

Outside Threat:
If you are in a building:
1. Lock and Barricade Exterior Doors
2. Perform all actions from HIDE above
3. Call 9-1-1

If you are caught outside:
1. Leave Campus, if you can safely do so
2. Run to a Building, if you can safely do so
3. Seek Cover
4. Call or Text 9-1-1

2.28.5. First-Aid
Two first-aid kits are located within the facility. One is in the program office workroom and the other is in the modalities area. There is one automated external defibrillator (AED) located on wall across from classroom C.

2.28.6. Universal Precautions
Universal precautions, as defined by Centers for Disease Control (CDC), are a set of precautions designed to prevent transmission of human immunodeficiency virus (HIV), hepatitis B virus (HBV), and other blood-borne pathogens when providing first aid or health care. Under universal precautions, blood and certain body fluids of all clients are considered potentially infectious for HIV, HBV and other blood-borne pathogens. All faculty, staff and students are expected to follow universal precautions, as identified by the CDC.

*In the even of a pandemic the University may implement supplemental policies.*

**GLOVING, GOWNING, MASKING, AND OTHER PROTECTIVE BARRIERS AS PART OF UNIVERSAL PRECAUTIONS**
All health care workers should routinely use appropriate barrier precautions to prevent skin and mucous membrane exposure during contact with any client's blood or body fluids that require universal precautions.

Gloves should be worn:
- for touching blood and body fluids requiring universal precautions, mucous membranes, or non-intact skin of all clients, and
- for handling items or surfaces soiled with blood or body fluids to which universal precautions apply.

Gloves should be changed after contact with each patient. Hands and other skin surfaces should be washed immediately or as soon as patient safety permits if contaminated with blood or body fluids requiring universal precautions. Hands should be washed immediately after gloves are removed. Gloves should reduce the incidence of blood contamination of hands during phlebotomy, but they cannot prevent penetrating injuries caused by needles or other sharp instruments. Institutions that judge routine gloving for all phlebotomies is not necessary should periodically reevaluate their policy. Gloves should always be available to health care workers who wish to use them for phlebotomy. In addition, the following general guidelines apply:
1. Use gloves for performing phlebotomy when the health care worker has cuts, scratches, or other breaks in his/her skin.

2. Use gloves in situations where the health care worker judges that hand contamination with blood may occur, e.g., when performing phlebotomy on an uncooperative patient.

3. Use gloves for performing finger and/or heel sticks on infants and children.

4. Use gloves when persons are receiving training in phlebotomy.

The Center for Devices and Radiological Health, Food and Drug Administration (FDA), has responsibility for regulating the medical glove industry. For more information about selection of gloves, call FDA at 301-443-8913.

Masks and protective eyewear or face shields should be worn by health care workers to prevent exposure of mucous membranes of the mouth, nose, and eyes during procedures that are likely to generate droplets of blood or body fluids requiring universal precautions. Gowns or aprons should be worn during procedures that are likely to generate splashes of blood or body fluids requiring universal precautions.

All health care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; when cleaning used instruments; during disposal of used needles; and when handling sharp instruments after procedures. To prevent needle-stick injuries, needles should not be recapped by hand, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. After they are used, disposable syringes and needles, scalpel blades, and other sharp items should be placed in puncture-resistant containers for disposal. The puncture-resistant containers should be located as close as practical to the use area. All reusable needles should be placed in a puncture-resistant container for transport to the reprocessing area.

General infection control practices should further minimize the already minute risk for salivary transmission of HIV. These infection control practices include the use of gloves for digital examination of mucous membranes and endotracheal suctioning, hand washing after exposure to saliva, and minimizing the need for emergency mouth-to-mouth resuscitation by making mouthpieces and other ventilation devices available for use in areas where the need for resuscitation is predictable.

Although universal precautions do not apply to human breast milk, gloves may be worn by health care workers in situations where exposures to breast milk might be frequent, e.g., in breast milk banking.
3. **ACADEMICS**

3.1. **Program Planning and Assessment**
The PT faculty regularly assess the program. Planning and assessment will occur in the PT Faculty Council each semester, as needed. Formal curriculum assessment and planning of the DPT program will be held on an annual basis in the Curriculum Review Meeting.

3.2. **Physical Therapy Faculty Council**
Weekly faculty council meetings are conducted to handle the business of the program and to maintain the lines of open communication between all faculty levels. Topics discussed include changes within and without of the department, student concerns, curriculum issues, procedural reminders or changes, etc. The department chair chairs the faculty council and the administrative assistant is the recording secretary.

3.3. **Physical Therapy Professional Degree Council (PTPDC)**
The purpose of the PTPDC is to ensure the basic governance intent for the professional program. Among other things, this council has delegated authority to act as Course and Curriculum Committee, to develop academic, department, financial policies and procedures, to review, revise and approve program development policies and procedures, and formulate and approve general education requirements for all PT programs. Membership on the PTPDC includes all PT core faculty, the CHHS dean (chair of the committee), dean of the School of Graduate Studies (without vote), and select other faculty.

3.4. **Curriculum Review Committee**
The DPT program will hold an annual Curriculum Review Meeting. The review process will address program prerequisites, DPT courses, committee progression, instructional changes and outcomes, and graduate outcomes.

Each instructor, whether regular or associated faculty or clinical instructor, can have input to the Physical Therapy curriculum via the annual Curriculum Review Committee meeting or Faculty Council.

3.5. **Policies and Procedures Review**
Policies and procedures, as presented in the PT Department Policies and Procedures Manual, the student handbooks, the Associated Faculty Handbook or the Facility Clinical Education Handbook will be reviewed and revised on an annual basis.

3.6. **Accreditation Standards**
The DPT program will be administered in a manner consistent with accreditation policies and procedures, including: reports of graduation rates, performance on state licensing examinations, and employment rates; and submission of reports or materials required by CAPTE. The chair or the his/her designee is responsible for writing and submitting such reports or materials within the required timeframe.

3.7. **Academic Terms**
The three years of the program are divided into class standings as follows:

- **First Year**
  - PT-1 Fall Semester
  - PT-2 Spring Semester

- **Second Year**
  - PT-3 Summer Semester
  - PT-4 Fall Semester

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7 AU Working Policy Section 1, Appendix J
PT-5 Spring Semester
Third Year
PT-6 Summer Semester
PT-7 Fall Semester
PT-8 Spring Semester
PT-9 Summer Semester

3.8. **DPT Curriculum Outline**
The Curriculum Outline provides a list of courses that physical therapy students will take throughout the three years of the program, along with the instructor who is currently assigned to teach them. See the Entry-level DPT Program, Student Resources website for current Curriculum Outlines.

3.9. **DPT Course Description Outline**
The Course Description Outline provides an abbreviated course description for each of the required courses in the DPT program. This description is meant to provide a better understanding of each course offered in the program. A copy is included in the back of this handbook.

3.10. **DPT Class Schedule**
The current Class Schedule with lectures, laboratories, TBA’s, chapels, student activities and other reminders for the semester are available on the AU Entry-level DPT Student Resource website, or [https://www.andrews.edu/chhs/pt/resources/index.html](https://www.andrews.edu/chhs/pt/resources/index.html). Schedules for the following semester are added prior to the end of examination week of each respective semester.

3.10.1. **Laboratory Scheduling**
Some labs meet simultaneously as one group. For others, the class may be divided into two or more sections. Students are assigned to the respective lab sections. If students wish to request a particular lab section to accommodate work schedules, they should check with the operations assistant three weeks prior to the end of the preceding semester. Due to lab size restrictions, requests will be considered on a first come basis. Once the lab sections have been determined and the students and instructors have been notified, changes will be made only if the student is able to locate another student willing to exchange lab sections. All changes in lab assignments are subject to the instructor’s approval.

3.10.2. **To Be Arranged (TBA) Schedule**
Approximately once a week during each semester there will be a TBA class period on the Class Schedule. These are utilized to give instructors additional time to make up or add information they feel relevant to their class. Attendance is required during these class periods. The TBA topic sheet is kept on the bulletin board across from the student mailboxes. Each student is accountable to monitor this schedule regularly. If no instructor has signed up for this class period 24 hours before it starts, it will be automatically canceled.

3.10.3. **Schedule Changes**
Situations unique to guest and contract instructor schedules, or unforeseen problems such as inclement weather or other emergencies do arise on occasion which necessitate schedule changes. This makes the course and activity schedules subject to revision prior to or during any respective semester. A notice of the schedule change will be emailed to students, placed in student mailboxes or posted on the whiteboard of the classroom where the class is normally held. An attempt will be made to minimize the number of schedule changes. Students are requested and expected to arrange their work and personal schedules to adapt to revisions in class schedules.
3.11. **Student Work Schedules**  
Class and lab schedules vary. Therefore, student work schedules will need to be flexible to accommodate class schedules. It is recommended that students plan to work no more than 10 hours per week to insure adequate study time.

3.12. **Registration Procedures**  
Before the close of each semester, the Operations Assistant will inform and orient each student to the specific registration procedures.

3.13. **Academic Advising**

    3.13.1. **Assignment of Advisors**  
    Students will receive the name of their academic advisor at their initial registration. They are encouraged and expected to involve their advisor and work with them whenever academic planning and decisions are made, or when other problems arise. It is recommended that you schedule an appointment with your advisor at least twice each semester if for no other reason than to have them get to know you better.

    Academic advisors for physical therapy students are physical therapy faculty members who are assigned to the students at the beginning of the program. The advisor assignments will remain unchanged throughout the program, unless faculty changes occur and the need for equitable distribution of student advisees arises.

    3.13.2. **Changing Advisors**  
    If a student has a valid reason to change their academic advisor, a request may be submitted to the School chair. The Chair will determine the validity of the request and re-assign an advisor as appropriate.

    3.13.3. **Advisor Responsibility**  
    Advisors make themselves available to counsel and assist students in academic, clinical, professional, and student life issues. Specific areas the advisor will work with the student include:

    1. Assisting the student in creating and implementing the "Professional Development Portfolio" (PDP), which will be reevaluated each semester, and serve as a mentor throughout the program.
    2. Advise students about relevant university and program policies when petitioning for waivers or unusual circumstances and bring the petitions to the Physical Therapy Faculty Council for action.
    3. Review the student's academic record each semester, and provide academic counseling when necessary.

    Students are required to meet with their advisor each semester to review their PDP and to develop strategies for continued growth. Students should meet with their individual faculty in specific courses to discuss difficulties related to course content.

    Advisors respect recommendations and actions taken by the School of Rehabilitation Sciences Faculty Council. University policies and input from the dean of the College of Health and Human Services, the Office of Student Services, the Department of Counseling and Testing, and other professional sources are taken into consideration when working with the student.

    Advisors receive a file copy of all academic notices sent to the student and faculty actions regarding the student. If a faculty member notices a student is struggling academically, suggest they meet with their advisor so they can assist them with their academic plan.
3.14. Professional Expectations
All Physical Therapy program faculty are committed to the concept of adult learning where instructors serve as facilitators of the process of learning. Within this environment the student holds the ultimate responsibility to determine the quality of his/her educational experience.

To assist students’ growth in these behaviors, all are regularly assessed, generally at program entry, at the end of each semester, and at program completion. In addition, behaviors may be assessed and reported on when students have engaged in specific instances of unprofessional behavior.

3.14.1. Professional Behaviors
The Professional Behaviors document is the result of the University of Wisconsin—Madison PT education program and May W., Kotney L., and Iglarsh A. The Professional Behaviors reflect the intent of assessing professional behaviors which are deemed critical for professional growth and development in PT education and practice. These behaviors with their criteria are as follows:

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.

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

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

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

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.

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.

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.

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

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.

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.
Students will be oriented to the 10 Professional Behaviors during PTH501 DPT Orientation and PTH510 PT Assessment Skills and will be made aware that they will be assessed on these behaviors multiple times throughout the program.

Each student is expected to demonstrate professional behavior and a commitment to learning. This will include, but not be limited to, punctuality and preparedness for each class session, and timely completion of assignments. Students are expected to participate in class discussions in a manner that demonstrates respect for their instructor, fellow classmates, and the school. Students also represent the DPT program, Andrews University and Christ outside the DPT building and therefore are still held to the professional expectations policy. Including but not limited to social media communications like Facebook, Twitter, Snap chat, Instagram, etc.

Students who do not meet these standards are notified in writing. If this behavior continues and the student receives two written notifications, the student will be required to meet with their advisor to submit a corrective plan of remediation which must be approved by the Physical Therapy Faculty Council in order to continue in the DPT program. If the remediation plan is not followed, the student will disqualify themselves from continuing in the DPT program based on a lack of professional behavior(s). Under certain circumstances, the Physical Therapy Faculty Council may deem certain student infractions as serious enough to warrant immediate dismissal from the program.

Please see Appendix for Professional Behavior Contact Policy sample form.
G drive\STUDENT LAB\Common_Folder\Student Contact Form.pdf

3.14.2. School Core Values

The department core values shape the culture of the SRS and the way in which we meet our mission to empower students to become excellent physical therapists. These core values and mission align with the CHHS and university missions. The faculty, staff and students are expected to exemplify Christian values through their family spirit, servant’s heart, and inquiring mind. Our desire is for continual growth in our core values, therefore, faculty are encouraged to address any behavior that falls outside of these specific expectations. 8

3.15. Professional Development Portfolio (PDP)

The Faculty of the Entry-Level DPT Program in Physical Therapy are committed to a philosophy of continuous self-assessment and professional development as an integral part of the learning process within professional education. We believe that professional behaviors and attitudes are essential for success as a physical therapist, and that academic and clinical faculty serve as mentors and role models within the professional education environment.

Students will work with their faculty advisors to develop a Professional Development Portfolio (PDP) that will be continually assessed and revised as the student grows within the professional role of the physical therapist. The purpose of this portfolio is to provide the student with mentorship and constructive feedback that will facilitate an understanding of professional responsibility and to recognize opportunities for enrichment, development and improvement.

The PDP will be based on an ongoing process of self-assessment using the Professional Expectation policy (3.14). These behaviors allow therapists to apply and integrate cognitive and affective skills, to interact effectively with clients, families, the community and other professionals, and to function successfully within varied health care settings. The assessment of professional behavior provides the student with clear guidelines about professional expectations and complements the more traditional assessment of

8 See AU PT school vision, mission, core values, and philosophy in Section 1
knowledge and skill. The assessment is based on explicit criteria, which reflect multidimensional observation and appraisal of the student in action. It is founded within a context of timely and constructive feedback. See section 4.20 for more information regarding the PDP.

4. INSTRUCTION

4.1. Students as Patient Simulators
By the very nature of the profession, the physical therapy program maintains a hands-on curriculum. Each student is expected to serve as a practice subject (or patient simulator) for other students while in the physical therapy program.

Students objecting to this expectation or who have a legitimate reason or health concern or otherwise feel they should not participate as a patient simulator or subject for purposes of demonstration or practice of a physical therapy skill or modality, are responsible to submit a written request to the instructor for reasonable accommodation. For safety purposes it is expected that a student with any health history that may be a precaution or contraindication, will disclose this information to the appropriate instructor.

If a student plans to practice a skill on a classmate, there is an obligation to respect the rights of the partner and to discontinue a procedure upon request. Further, students should not request the right to practice a skill or modality procedure on a classmate until the appropriate instruction has been received. Therapeutic modalities and equipment are not to be used by students without prior approval of the appropriate instructor. Non-students may be used for demonstration purposes provided they have signed an informed consent that identifies the potential risks associated with his/her participation. At no time should students practice on non-program participants, nor should they bring them to the facility for such purposes unless otherwise instructed to do so as part of a class assignment. Minors who are brought to the facility for purposes of demonstration must be accompanied by a parent or legal guardian. The parent or legal guardian must sign an informed consent making him/her aware of the potential risks associated with the minor’s participation.

4.2. Class Attendance
Because of the interactive and collaborative nature of professional education, especially in laboratory sessions, and the rigor of this program, class attendance is essential for successful learning. Individual instructors have the right to identify course specific attendance policies within their course syllabus. In keeping with the professional behaviors that all health care team members uphold, each student is expected to act in a respectful and professional manner. This includes regular attendance at all classes, and other academic appointments; being present from the beginning to the end of each scheduled class session; respecting one’s classmates, guests, lab subjects and the instructor; and being committed to a positive learning experience. Each student is expected to attend and participate in their assigned laboratory, unless specifically given permission to change labs by the Lab Instructor. Once registered, students are counted as class members and are charged tuition until they file a Change of Registration form in the Academic Records Office.

4.3. Make-Up Exams or Quizzes
1. Students are expected to take all exams or quizzes when they are scheduled.
2. Students are not to ask the instructor to change the scheduled examination times.
3. Exceptions must be cleared by the Physical Therapy Faculty Council, in advance.
4. No provision is made for exams/quizzes missed because of voluntary absences.
5. If ill, the student should call the physical therapy program office, notifying them of the situation so that this information can be passed on to the instructor. Then the student needs to contact Student Health Service at the University Medical Specialty Offices (473-2222) or their physician to obtain written verification of the
illness. This verification must be presented to the instructor when making
arrangements to make up the exam/quiz. When feasible the missed exam/quiz
should be made up within 48 hours after the student returns to class. Make-up
exams are not limited to the original format.

6. Before permission is granted for a student to take a final examination at a time
other than that scheduled in the Class Schedule, a student must submit a typed
letter to the faculty council at the beginning of the semester.

PLEASE NOTE: Students sometimes request to take exams/quizzes early because of
plane reservations, etc. The instructor should not give permission to take a special exam
or give it at a special time without first consulting with the department chair and having
the student submit a written request for approval by the faculty council at least 3 weeks in
advance of the exam.

4.4. Class Absences
Whenever the number of absences (excused or unexcused) exceeds 10% of the total
course appointments, the teacher may give a failing grade. Being absent from campus
does not exempt a student from this policy. Absences incurred due to late registration,
suspension, and early/late vacation leaves are not considered as excused, and the work
missed may not be made up except to the extent the instructor allows. Three tardies are
the equivalent of an absence.

Students are expected to submit a written request for absence(s) to the administrative
assistant or their faculty advisor for presentation at PT Faculty Council. The request
should be submitted 3 weeks in advance of the absence.

4.4.1. Excused Absences
Teachers can excuse absences due to illness for their individual class periods.
Full-day absences are excused on an individual basis by the Physical Therapy
Faculty Council. Any illness or injury requiring more than one-day absence must
be submitted as a written order by a physician. Reasons to request full day
absences include: involvement in PT state or national business, being in an
accident, the wedding or graduation of a student’s immediate family member, a
death in the family, or personal illness. Students are required to submit written
verification of illness obtained from a physician. Excused absences do not
remove the responsibility of the student to complete all requirements of the
course. Work is made up at the discretion of the teacher. When students are
unable to attend a class or lab without prior notice, (for example; illness or
weather complications), they are required to promptly notify the program office at
269-471-6061. See Clinical Education Handbook regarding excused or
prearranged absences from clinical internships.

4.4.2. Unexcused Absences
The Physical Therapy Faculty Council issues excuses for absences not due to
illness. No provision is made for exams, quizzes or assignments missed because
of voluntary absences. Travel arrangements and social events such as
participating in a friend’s wedding or family vacations have traditionally been
treated as an unexcused absence. The DPT class calendar is made available
well in advance to allow for planning these events. Students may automatically
receive a “zero” for all exams, quizzes or assignments missed due to an
unexcused absence. Any accommodation will be at the discretion of the
instructor.

4.5. Class Cancellation: AU Alert
Classes or events canceled due to inclement weather, physical plant problems, or other
uncontrollable situations will be rescheduled. A notice of school closing due to inclement
weather will be reported on radio station WAUS 90.7 FM and WNDU, Pulse FM 96.9 and
on WSBT or WSJV television stations. A banner with any class cancellation information
will be posted on the Andrews University website. Andrews University has also
established a school closing hotline to announce school closings during inclement
weather. Call 471-7660 for a prerecorded message. Physical Therapy students will be
notified of the changes in the class schedule once arrangements have been made. Rescheduling will need to accommodate the teacher’s schedule. Contract teachers are often Clinicians which may require classes be scheduled early or late in the day. Cancellation of a class for reasons other than inclement weather will be emailed to the student, posted on Moodle, posted on the whiteboard of the classroom where the class is normally held or posted on the exterior door by the student lobby. **It is the responsibility of the student to check those locations for notification of canceled classes or schedule changes.**

The University uses **AU Alert**, an emergency notification system that can send email, text messages, voicemails and post to Facebook. Students are encouraged to visit [www.andrews.edu/go/myems](http://www.andrews.edu/go/myems) and click on “Configure SMS Notification Preferences” to configure your personal emergency notification preferences. Andrews’ email addresses are automatically configured into your emergency notifications settings. You can add an additional email and your cell phone number to receive text (also known as SMS messages).

### 4.6. Academic Integrity

In harmony with the mission statement, Andrews University expects that students will demonstrate the ability to think clearly for themselves and exhibit personal and moral integrity in every sphere of life. Thus, students are expected to display honesty in all academic matters.

Academic dishonesty includes (but is not limited to) the following acts:

1. Falsifying official documents.
2. Plagiarizing, which includes copying others’ published work, and/or failing to give credit properly to other authors and creators.
3. Misusing copyrighted material and/or violating licensing agreements (actions that may result in legal action in addition to disciplinary action taken by the university).
4. Using media from any source or medium, including the Internet (e.g., print, visual images, music) with the intent to mislead, deceive, or defraud.
5. Presenting another’s work as one’s own (e.g., homework assignments).
6. Using materials during a quiz or examination other than those specifically allowed by the teacher or program.
7. Stealing, accepting, or studying from stolen quizzes or examination materials.
8. Copying from another student during a regular or take-home test or quiz.
9. Assisting another in acts of academic dishonesty (e.g., falsifying attendance records, providing unauthorized course materials).

Andrews University is a community of scholars where academic honesty is the expected norm for faculty and students. All members of this community are expected to exhibit academic honesty in keeping with the policy outlined in the University bulletin. In addition, the student is expected to comply with ethical and scientific standards, as recognized by the AMA and the US Office of Human Subjects Protection and the US Office of Research Integrity. It is expected that members of the scholarly community will act with integrity at all times, however, should an individual choose to demonstrate dishonesty, it should be understood that acts of academic dishonesty are taken extremely seriously. Acts of dishonesty are classified by level and reported centrally. The consequences of academic dishonesty will be determined by the instructor unless a student’s record demonstrates repeated offenses (either three level-one offenses or two level-two offenses, or a level three and any other level violation). In the situation where the student record demonstrates such repeated violations, or where the student is accused of a level-four violation, the case will be referred to an Academic Integrity Panel for resolution. Serious or repeated violations can result in the issuance of an “XF” grade by Academic Integrity Panels, which indicates that the student failed the class for breach of academic integrity. The XF is placed on the student’s permanent record and can only be removed under certain circumstances.

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9 2023-2024 Andrews University Academic Bulletin, General Academic Policies Section
Additional note about the use of artificial intelligence: Student work may be submitted to AI or plagiarism detection tools in order to ensure that student work product is human created. The submission of AI generated work constitutes plagiarism and is a violation of the Andrews University academic integrity standards for students.

See the Academic Standards at AU: https://www.andrews.edu/academics/academic_integrity.html

4.7. Recording of Lectures by Students

The use of recording devices in the classroom or lab is prohibited without the express consent of the professor or by approval of the student disability office. Students who have this express consent must make their own arrangements to record the class. Permission to record a class applies exclusively to the student who receives the permission. The recording, or its transcript, may not be accessed or utilized by any other individual. No replication or posting of the recording or its transcript may be made without the express permission of the professor or anyone whose voice can be identified, this includes posting on social media platforms.

4.8. Grading System

The department's grading system measures the student's knowledge and ability to comprehend, apply, analyze, synthesize, and evaluate stated physical therapy curriculum objectives. The grading system is designed to encourage cooperation between students and discourage individual competition.

Letter grades are utilized for most lecture and laboratory courses. S/U (satisfactory/unsatisfactory) grades are utilized for some courses and for all clinical experiences. S/U grades do not contribute to the calculated grade point average.

Each clinical experience (practicum or internship) must be successfully completed prior to advancement to the next clinical experience.

During the middle of the semester, students with lower grades may receive an Unsatisfactory Scholarship Report in their mailboxes. Each student who receives this should make an appointment with the instructor of the course and their advisor as soon as possible to ascertain what can be done to improve their grade prior to finals week. A student whose grade point average falls below the minimum required for a course or semester is automatically placed on academic probation and continued enrollment is subject to the recommendation of the Physical Therapy Faculty Council.

4.9. Posting Scores or Grades

Student scores may be posted during the semester, at the discretion of the instructor, through the Learning Hub. No final exam score or final grade for the semester shall be posted until after the last final exam for the cohort is given. Semester grades are not sent to students, as they are accessed on the AU web site, vault (iVue or Degree Works). Grades may be sent to parents or sponsoring institutions if FERPA permission was given and an address was provided in Ivue.

4.9.1. Course Grades

Course grades are issued by the course (lecture/lab) instructor(s) or the track coordinator. Explanation of the grading process for each course is detailed in the respective course syllabus. Grades are normally submitted to the Records Office on the Wednesday after the close of each semester and posted on the web within the following week.

4.9.2. Grade Problems

Only the instructor or track coordinator is allowed to discuss grades with the student(s). Any grades given to the student by means other than the official university postings on the Web are considered unofficial and are not binding.
Grading problems not resolved by the respective instructor must be taken to the track coordinator or School Chair.

4.10. Late Grades

4.10.1. Research Project
A final grade for the research project will not be given until the capstone chair has given a signed approval of the completed project.

4.10.2. Clinical Education Grades
Due to the timing of Clinical experiences, remoteness of the clinical sites and the extensive grading process involved, the clinical grades may not be finalized prior to the grade deadlines. For this reason, clinical grades may be recorded originally as Deferred Grades (DG). The permanent grade is submitted later when the grading process is completed.

4.11. Unsatisfactory Academic Performance
The instructor must notify and meet with each student, before the final, whose performance is unsatisfactory to ascertain what the student can do to improve their grade. This should be done as soon as possible to avoid legal difficulties and to give the student the best chance to improve. A student whose grade point average falls below the minimum required for a course or semester is automatically placed on academic probation and continued enrollment is subject to the recommendation of the Physical Therapy Faculty Council. Faculty will use the Student Contact Form to notify the appropriate individuals, by completing and submitting it to the administrative assistant who will distribute a copy to the appropriate individuals.

4.12. Grade Points Scale (not GPA)
Students who receive less than a "C+" (2.33) or a "U" on a Satisfactory/Unsatisfactory (S/U) course or clinical practicum will be given an “Incomplete” (I) and grade points equal to the semester credit for the course and will appear on their official grade summary letter from the DPT program Director. For example, a three-credit course would equal three points. Students who receive an “I” will be charged the university’s incomplete grade fee. These students will be required to complete a course remediation plan as detailed by the instructor or track coordinator. A student who accumulates a total of six grade points throughout the physical therapy program will academically disqualify him/herself from continuing in the physical therapy program. Each Clinical Education (CE) experience (PTH885, PTH886, PTH887) is equivalent to three (3) grade points. Students who receive a "U" (Unsatisfactory) on any of the aforementioned CE experiences will receive three grade points and may be required to register for and repeat the CE. See Sections 4.22 and 4.23 for grade points related to comprehensive exams.

4.13. Course Remediation Plan Policy
When a student receives less than a C+ and is given an incomplete (I), a course remediation plan is designed by the course instructor/track coordinator and may consist of additional assignments, practical or written examination, research papers, etc. Dependent upon the amount of remediation work required and Faculty Council vote, the student may be required to register and pay for credit(s) of PTH585 Remediation in: (Topic). This work will need to be completed by a time set by the instructor/track coordinator but no later than 6 weeks following the grading period. Upon successful completion of the course remediation plan, the student’s grade will be adjusted to the passing grade of “C+” (2.33) or "S" for S/U courses, however, the grade points earned remain on the student’s record for the duration of the DPT program.

4.14. Bachelor of Health Science/ Exercise Science Academic Performance Requirements (First 2 Semesters)
Students entering the program without a bachelor’s degree must successfully complete the appropriate requirements and all scheduled coursework in the first two semesters of the DPT program. Successful completion for courses in the DPT program is defined as:
1. A grade of "C+" (2.33) or greater in each undergraduate DPT course.
2. An “S” grade in all courses that have Satisfactory/Unsatisfactory grading.
3. A 3.00 first-semester (PT-1) GPA; students not achieving a first-semester GPA of 3.00 will be on academic probation the following semester (PT-2) and must obtain a 3.00 minimum semester GPA. The probationary semester is a one-time opportunity and may not be granted again in the graduate course work (PT-3 thru PT-9).
4. No more than a cumulative total of six points earned on the grade-points scale throughout the physical therapy program.
5. Per the Academic Bulletin that is applicable to the student, the required cumulative GPA in all credits used to meet the Bachelor’s degree requirements.

4.15. Doctoral Admission Requirements- 3+3 Students Only
Undergraduate DPT students entering the graduate phase of the program (PT-3) must have completed all requirements for their bachelor’s degree, have their degree conferred, and have an undergraduate cumulative grade point average of 3.00 or a grade point average of 3.00 in a minimum of 16 graded, semester credits of program courses. Promotion is also contingent on satisfactory professional performance as outlined in Section 3.15 Professional Expectations.

4.16. Graduate Academic Performance and Professional Requirements
All graduate course work (lectures, laboratories and clinical experiences) scheduled for each semester must be successfully completed prior to advancing to the next semester. Successful completion is defined as:
1. A grade of "C+" (2.33) or greater in each DPT program course.
2. An "S" grade in all courses which have Satisfactory/Unsatisfactory grading.
3. No more than a cumulative total of five points earned on the grade-points scale throughout the physical therapy program.
4. A cumulative GPA of 3.00 or greater in all graduate physical therapy course work used to meet the degree requirements. One probationary semester (the semester immediately following) is given to students below 3.00 to allow the student to raise their graduate cumulative GPA back above the 3.00 minimum. All probationary students must file a petition to continue their research activity. Students who entered the program without a Bachelor’s Degree and received a probationary semester during PT-2 are not eligible for any additional probationary semesters during the last seven semesters (PT-3 thru PT-9).
5. Satisfactory completion of the graduate practical and written comprehensive exams.
6. Satisfactory completion of the capstone project and presentation.
7. Satisfactory professional performance as outlined in Section 3.15.

4.17. Program Remediation Policy
Exceptions to Grading Policies:
If a student is disqualified from continuing in the program because they:
1. earn six points on the grade points scale, or
2. do not meet minimum GPA standards, or
3. cannot pass a comprehensive exam, or
4. do not successfully complete a professional expectation, remedial plan, or
5. do not complete any other program requirement,
the student will disqualify themselves from continuing in the DPT program. A one-time program remediation plan may be developed at the discretion of the School of Rehabilitation Sciences Faculty Council upon the recommendation of the respective instructor(s), track coordinator or the student's academic advisor. This plan must be implemented and agreed upon by the student prior to the student returning to the program. Dependent upon the amount of remediation work required and Faculty Council vote, the student may be required to register and pay for credit(s) of PTH585 Remediation in: (Topic) or repeat DPT courses and complete successfully prior to readmission into the program.
The Physical Therapy Faculty Council may request that the student undergo testing and remedial/refresher work in the clinic or repeat courses to upgrade professional and clinical knowledge and skills prior to being readmitted into the program. Repeated/remedial work must meet a grade level that will be established by the instructor or Physical Therapy Faculty Council. Being out for a year may, among other things, require that the student repeat their last clinical experience.

Only the Physical Therapy Faculty Council makes exceptions. Some decisions will require an action by a higher council or administrative approval.

4.18. **Program Withdrawal**

If a student withdraws from the program or leaves without withdrawal request, for academic, personal or medical reasons, both the School of Rehabilitation Sciences and the University have exit procedures which must be followed. Students should contact the Operations Assistant regarding exit procedures and make an appointment to meet with their academic advisor and the School Chair.

4.19. **Readmission Policy**

Readmission to the program, after the remediation program or withdrawal for any reason is not automatic and requires the approval of the SRS Faculty Council. Students wishing readmission to the DPT program must submit a written petition to the SRS Faculty Council. This petition must be received during the semester following the dismissal or withdrawal from the program as the remediation plan may take multiple semesters to complete. Readmission to the program following a second absence from the program for any reason or being absent for three or more semesters will require that the student reapply through the DPT Admissions Office using the standard application process, including payment of a new confirmation deposit to the program. This new application will receive equal consideration by the DPT Admissions Committee along with any and all other applicants who may be applying at that time. The School of Rehabilitation Sciences Faculty Council reserves the right to require students in the aforementioned situation to retake any and all DPT courses no matter the previously earned grade.

4.20. **Professional Development Portfolio (PDP)**

The Faculty of the Entry-Level DPT Program in Physical Therapy are committed to a philosophy of continuous self-assessment and professional development as an integral part of the learning process within professional education. We believe that professional behaviors and attitudes are essential for success as a physical therapist, and that academic and clinical faculty serve as mentors and role models within the professional education environment.

Students will work with their faculty advisors to develop a Professional Development Portfolio (PDP) that will be continually assessed and revised as the student grows within the professional role of the physical therapist. The purpose of this portfolio is to provide the student with mentorship and constructive feedback that will facilitate an understanding of professional responsibility and to recognize opportunities for enrichment, development and improvement.

The PDP will be based on an ongoing process of self-assessment using the Professional Expectation policy 3.15. These behaviors allow therapists to apply and integrate cognitive and affective skills, to interact effectively with clients, families, the community and other professionals, and to function successfully within varied health care settings. The assessment of professional behavior provides the student with clear guidelines about professional expectations, and complements the more traditional assessment of knowledge and skill. The assessment is based on explicit criteria, which reflect multidimensional observation and appraisal of the student in action. It is founded within a context of timely and constructive feedback.
4.20.1 Procedures for the PDP
During PTH501 DPT Orientation each student must complete a self-assessment based on Clifton’s Strengths Finder, and each semester includes an element of service as part of their PDP. Every designated semester the PDP must be submitted to their faculty advisor. The self-assessment will be completed by the student at the beginning of their academic experience and may be repeated at designated times to measure student growth. Goals that relate to the specific generic abilities should be formulated with specific strategies that may be achieved within clinical or academic settings. Professional development activities/assignments that provide opportunities for leadership growth will be included in the portfolio along with reflection on these opportunities and how this is helping the student reach their goals. The PDP is interwoven within one course each semester and due dates for submissions will be announced at the beginning of each semester.

Students are required to meet with their academic advisors each designated semester to review their PDP, discuss recent achievements, evaluate goals, and develop strategies for further growth and progress. The instructions and advisor evaluation forms for each designated semester are available on the DPT Portfolio page of the Learning Hub. Students must meet with their advisor and complete their portfolio assignment prior to finals week of each semester. Failure to do so will result in an incomplete for the course, a reduction of the final grade by ½ letter for the course which the PDP is assigned, and an additional assignment plus paper assigned with discretion of PDP coordinator. The student will then have the first two weeks of the new semester to successfully complete the previous semester’s PDP assignment and the additional assignment and paper as per PDP coordinator’s instructions. Failure to do so will prohibit the student from attending classes until the PDP is completed. Part of professional expectations includes reading portfolio assignments at the beginning of each semester and completing all assignment before the due date/time. Successful completion of portfolio assignment is indicated by the signature of the advisor on the Advisor Evaluation Form Submitting this form (+all the artifacts) to DPT Portfolio site dropbox prior to the due date/time. Students will use their PDP to guide them as they develop into a Physical Therapist professional.

4.21. Capstone
Each DPT student is required to complete and present a capstone research project. The capstone project is spread over two years and should be considered a major project representing a culmination of the DPT program. The purpose of the capstone project is to strengthen the students’ critical inquiry and presentation skills necessary to evaluate and present professional knowledge and competencies in relation to evidence-based physical therapy practice.

4.21.1. Capstone Curriculum
Several classes, devoted to the research experience, provide the information that will guide the student through the research process. These courses include Scholarly Inquiry and Dissemination, Research Statistics, and Research Projects. Each research group will defend their project through both an oral and a poster presentation to their peers and other members of the academic and clinical community. All third year students must attend all oral presentations. Second year students must attend a minimum of 50% of the oral presentations, and first year students must attend a minimum of two oral presentations as assigned by an instructor.

4.21.2. Capstone Partners
Students work together on the capstone project. Project partners will be assigned to a faculty chair and will share equally in the research development, implementation and presentation. Partners of the faculty-driven research be evaluated separately during the project defense and in the grading of the final copy of their research project report if the partners cannot work together, or if one
of the students in the group is not doing his/her share of the work. The faculty Chair of the Capstone project is the principal investigator of the study and therefore gives the direction of the research project. Each student would be responsible for a final written document, if this were to occur. If a student who is a research partner academically disqualifies themselves from the program, they may be allowed to continue their research if approved by the Physical Therapy Faculty Council and with an approved petition through appropriate administrative channels.

4.21.3. Capstone Committee
A faculty chair will be assigned to each research group and the second committee member may be assigned or chosen by the faculty chair. In some instances, an outside clinician may be the second committee member, when they have clinical expertise that will benefit the project. If desired, a third committee member may be utilized, especially where expertise is required. The DPT Research Coordinator provides consultation and assessment to all groups.

4.21.4. Institutional Review Board (IRB)
All student researchers, clinicians involved in a student Capstone Project, and a minimum of one faculty advisor MUST complete NIH Ethics Training for Human Subjects Research prior to submission of Andrews University IRB application and proposal. All research addressing or involving human subjects or data collected by researchers on human subjects MUST have full IRB approval letter on file in the department chair and research coordinator's office prior to data collection. Furthermore, any changes to the initial IRB proposed study must be reported in writing to AU IRB, faculty chair, and research coordinator prior to data collection. In addition, to AU IRB, if research is conducted at an offsite facility, written permission from the facility must be obtained and if an IRB Council exists, an additional IRB must be submitted and approved prior to research data collection. Student researchers who fail to abide by this policy and are found collecting data without official AU IRB approval and facility approval will be held in violation of AU IRB and disciplinary measures will be taken by the research coordinator and the AU IRB. Disciplinary measures may include but are not limited to: failing grade for the research project and related research coursework, academic integrity report offense, report to OHRP National Research Protection Agency, and in certain circumstances, dismissal from the program.

4.21.5. Capstone Completion
The capstone research project is not considered complete until the capstone chair receives all the raw data and has approved and signed the capstone completion form. Students may receive a DG in PTH799 Research Project (PT-8) if the capstone chair has not given the final approval of the project. Students with a DG in PTH799 must successfully complete the capstone research project before the end of PT-9 to graduate on time.

4.21.6. Capstone Research Expense
Reimbursement for capstone project expenses must have prior authorization by the faculty chair. For items less than $150, the students may purchase the material and be reimbursed during spring semester of the third year. For items over $150 or special needs, the faculty chair is responsible for obtaining the funding and materials. Faculty Research Grants from Andrews University Office of Research and Scholarly Activity may be applied for prior to the deadline. The cost will be charged to both the student and faculty research fund. A copy of the form for reimbursable expenses is located in: G:\STUDENTLAB\Common_Folder\Research and Statistics. These forms need to be completed with receipts attached for all items listed and turned in to the research coordinator, research forms must be turned in at least two weeks prior to the end of the term.
4.21.7. Capstone post-graduation presentation and publication
The faculty generates research topics, thus the committee chairperson is the primary author of the research project and will have her/his name included on the final document. Authorship on presentations and publications will include all student and committee members if they remain involved with the project after graduation. It is recommended that publication authorship meet national recommendations, thus authors must have significantly contributed to "(1) conception and design, or analysis and interpretation of data; and to (2) drafting the article or revising it critically for important intellectual content; and on (3) final approval of the version to be published." – International Committee of Medical Journal Editors, JAMA 1997. Additionally, the manuscript should follow author guideline of the journal the paper is submitted to. Order of authorship should be discussed and agreed upon prior to submission. The accepted rule is that the faculty chair is the first author of the presentation/publication.

4.21.8. Capstone University Ownership
All components of the research process are property of Andrews University and must be kept on file within the DPT Program. This includes, but is not limited to research data, consent forms, electronic copies of the capstone, presentation and all research related photos. When a student leaves the program all materials must be turned over to their research chair. Any equipment or unused supplies funded or obtained by Andrews University for the capstone project will also remain the property of the Andrews University Doctor of Physical Therapy Program. All files, electronic and hard copies, must be kept in a locked or password-protected file to ensure IRB primary guidelines are met.

4.22. Practical Comprehensive Exams (OSCE)
Each DPT student is required to successfully complete the practical comprehensive examination prior to starting PTH881 Clinical Education I. The purpose for the practical comprehensive examination is to appraise the student's ability to demonstrate an overall grasp of the practical/clinical knowledge and contemporary clinical expertise in the various areas of consideration and to demonstrate appropriate understanding of patient/client safety issues. Each scheduled section of the practical examination must be successfully passed at each scheduled station.

4.22.1. Registration
Students must register for the Practical Comprehensive Examination during Summer Semester of the second year (PT-6).

4.22.2. Emphasis
The emphasis of the examination will center on clinical skills in client/patient care and management including:
1. Examination and evaluation
2. Diagnosis, prognosis, program planning and intervention
3. Patient/Client and family education
4. Communication and professional behavior
5. Documentation
6. Discharge planning
7. Social, ethical and legal issues
8. Patient safety
9. Awareness of principles of research applicable to evidence-based therapy
10. Awareness of complications and contraindications associated with common diagnosis

4.22.3. Format
The format of the practical Comprehensive exam is an Objective Structured Clinical Exam (OSCE). The examination shall occur in multiple stations. One or
more examiners shall supervise each station. Another student, faculty member, or person provided by the School of Rehabilitation Sciences may serve as the patient simulator. Examiners include SRS faculty, core and adjunct, clinicians and other CHHS faculty as determined by the section coordinator.

4.22.4. Administration
The practical comprehensive examination is developed and administered within the School of Rehabilitation Sciences. The instructor(s)/examiner(s) giving the exam for the respective areas of the test are free to use materials from any source.

4.22.5. Content
Practical comprehensive examination content is based upon overall course and laboratory work and/or knowledge represented from reading materials and/or clinical experience. The practical examinations are not, however, to be a repeat of the final examination questions selected from the courses of the individual student. Questions will show an integration of learning across the various aspects of the discipline. Students will be required to perform each activity safely and professionally with the requisite knowledge in order to pass the exam. The content and format of the examination will be announced prior to the examination week of the semester prior to the Practical Comprehensive Exam.

4.22.6. Schedule
The practical comprehensive examination is usually scheduled during the summer semester of the second year.

4.22.7. Grading
Four grades are possible at each station and they are as follows: Pass with distinction; Pass; Pass with remediation; and Fail. “Remediation” applies in situations where the examiner deems that the student requires further study to bring their knowledge/skill to a level appropriate for entering a clinical rotation. “Fail” applies in the situation where the examiner deems that the student performed unsafely or at a level below “remediation” status.

4.22.8. Remediation
A remediation plan will be established by the section coordinator of any station in which a student receives a “pass with remediation” or a “fail” grade. The remediation plan should be developed and communicated to the student within 5 school days of grade notifications. Students will be notified of grades within two weeks after the exam.

4.22.9. Failure to pass the OSCE
Students are allowed a “fail” grade in a limited number of stations. The acceptable number of fails is determined each year and based on a percentage of the number of stations tested that year. If a student exceeds the accepted number of failing grades, they are considered to have failed the exam and will be required to:
1. Complete remediation for each station they received a “pass with remediation” or a “fail” score, and
2. Complete a second comprehensive exam
3. Receive 1 grade point (section 4.12)

If a student fails the second examination, the individual will be referred to the SRS Faculty Council to determine an appropriate action, which may include one or more of the following:
1. Further study of specific content and reexamination including the student being required to register and pay for credit(s) of PTH585 Remediation in: (Topic).
2. Postponing of clinical education experiences until the student is deemed to have reached an appropriate level of knowledge/skill and safety
Psychoeducational Assessment.
Receive an additional 1 grade point (section 4.12)
Disqualification from the DPT program

4.23. Written Comprehensive Exams
Each DPT student is required to successfully complete the Written Comprehensive Examinations prior to graduating from the program. Written Comprehensive Exam I (PTH670) will assess foundational science knowledge and application from semesters PT-1 & PT-2. Mastery of the content from PT-1 & PT-2 is essential for success in the remaining semesters and as a future clinician. Written Comprehensive Exam II (PTH870) will appraise the students’ overall grasp of contemporary physical therapy practice and assess the students’ knowledge, comprehension, and application in various areas of concentration as well as the integration of learning across the physical therapy profession.

4.23.1. Registration
Students must register for the PTH670 Written Comprehensive Examination I Summer Semester of their first year (PT-3).
Students must register for the PTH870 Written Comprehensive Examination II Spring Semester of their third year (PT-8).

4.23.2. Format
The Written Comprehensive Examination is administered by the School of Rehabilitation Sciences. They are timed, computer-based, multiple-choice question examinations. PTH670 Written Comprehensive Examination I is written by DPT faculty and is typically administered on day two of PT-3. PTH870 Written Comprehensive Examination II is similar to a National Physical Therapy Exam and is typically administered on the first day of PT-8.

4.23.3. Grading and Remediation
The minimum score for successfully completing the examinations is set by the PT Faculty Council and are based on the overall pass rate of candidates taking the exam at that time.

**PTH670 Written Comprehensive Examination I**
Written Comprehensive Exam I is a Pass or Fail course. Students will be given three attempts to successfully complete the examination. **Students who fail the first attempt will receive one (1) grade point** (see section 4.12) and be required to register for a one credit remediation course (PTH585), at their own expense outside of block tuition. This remediation course will be a self-directed experience with oversight by a PT faculty member and include further study to bring their knowledge/skill to an appropriate level prior to taking attempt two. The remedial course and the second attempt must be completed prior to the end of the semester (PT-3). If the student passes on the second attempt the **one (1) grade point** will be removed from their record as an act of grace and reward. Failure on the second attempt will result in a third/final attempt to successfully complete the examination. The third/final attempt must be completed prior to the start of PT-4. Each attempt must be in-person and proctored by an individual approved by the Written Comprehensive Coordinator. **Failure to pass the third attempt will result in academic disqualification** from the DPT program no matter the current grade points accumulated or GPA.

**PTH870 Written Comprehensive Examination II**
Students are required to complete an academic PEAT exam on February 16th (Class of 2024) for the Written Comprehensive Examination II, date may vary slightly each year. The faculty will decide the passing score.
Historically, the score has varied from 580-585 scale score. Written Comprehensive Exam II is a Pass or Fail course. "Remediation" applies when a student requires further study to bring their knowledge/skill to an appropriate level before receiving a satisfactory grade for the written comprehensive experience. Remediation plans and a due date will be given to students who "fail" within five days after a passing score is determined. Students receiving a failing grade will be required to complete remediation along with taking a second academic PEAT exam. These students will be notified, and the second academic PEAT exam will be scheduled and completed by March 25th (Class of 2024) and will be proctored by the SRS, date may vary slightly each year.

1. The student will need to purchase (credit card only) the online exam one week prior to the exam date, February 20.
2. Once the student has purchased the exam, a login and password will be issued which will then need to be emailed to the Written Comprehensive coordinator one week prior to the exam date. Exams taken outside of the appointed date and time, without making prior arrangements with the Written Comprehensive coordinator, will be considered invalid, resulting in an automatic "fail".
3. Because the exam processes simulate the licensure exam and results have been correlated with the ability to pass the licensure exam, it is important that the student work closely with their advisor for preparation for this second attempt. The student must make an appointment with their advisor to discuss areas of academic weakness and to develop a strategy to address these deficits prior to the scheduled remediation exam date.

If unsuccessful on the second attempt the student will be given one final remediation attempt to achieve a passing score. A third and different computer-based exam in the same style and format of the previous exams will need to be purchased – again at the student's expense as outlined above. Because of the seriousness of this final attempt, the student must work closely with their advisor for preparation and scheduling:

1. The student must make an appointment with their advisor to discuss areas of academic weakness and to develop a strategy to address these deficits prior to scheduling the third and final exam. This plan should be developed by the student and formalized in writing, with a copy to the department chair.
2. As the third and final exam usually takes place off-campus during Clinical Education 3, the student must talk with the DCE about how to request permission from their CI to take the exam during internship hours. The DCE will confirm these arrangements with the CI.
3. This test must be supervised by a suitable proctor (such as the CI, CCCE, the director of the facility/department) and will be subject to the approval of the Written Comprehensive coordinator. The student must make arrangements with the approved proctor for a date, time and location to remediate the exam. The student will give their proctor's contact information to the Written Comprehensive coordinator.
4. Once the date of the exam has been set, the student will need to purchase the exam at least one week prior to the exam date. Prior to taking the exam, the student must ensure that the Written Comprehensive coordinator has received the login/password issued at the time purchase. Exams taken outside of the appointed date and time, without making prior arrangements with the Written Comprehensive coordinator, will be considered invalid, resulting in an automatic "fail".
5. This third and final attempt must be completed by April 19. Students who fail to pass the exam on the third attempt will receive one (1) grade point (see section 4.12) and be referred to the Physical Therapy Faculty Council to determine appropriate action which may include:
a. Further study of specific content, which may include registration for remedial course(s) including accompanying tuition charges, and/or student purchasing external resources and successfully completing as assigned by PTFC. The student will bear the financial responsibility of the further study designated by PTFC.

b. Psychoeducational Assessment.

c. Postponing of clinical internships until student is declared to have reached an appropriate level of knowledge/skill.

d. Disqualification from the DPT program.

4.23.4. Student Notification of Results
Students will be officially notified of their performance on the Written Comprehensive Examination within two weeks following the examination.

4.23.5. NPTE “early” testing in July
For NPTE “early” testing in July, students must pass the PTH870 Written Comprehensive Examination II and one additional PEAT with a Scale Score of 600 or above, at least 30 days but not more than 60 days prior to the NPTE registration deadline for July testing to receive Faculty Council approval for NPTE early testing. Student must successfully complete all other academic requirements to test early.

4.24. Clinical Education
Clinical education, comprising classroom preparation and clinical experiences, is an integral portion of the formal professional education program. It takes the student out of the classroom and laboratory and into the actual patient care setting. Here the student learns to apply his newly acquired knowledge and skills through actual hands-on patient care in a carefully controlled setting under the guidance and supervision of qualified physical therapist clinical instructors.

The Director of Clinical Education (DCE) is responsible for the clinical education component of the DPT curriculum. This includes planning, coordinating, facilitating, administering and monitoring activities related to the clinical education experiences and practicum. The following sections are an overview of clinical education; please consult the DPT Clinical Education Handbook for more complete information.

4.24.1. Student Clinical Education Handbook
Students must read and follow the guidelines for clinical education as specified in their Student Clinical Education Handbook.

4.24.2. Clinical Assignments
All clinical assignments will be made by the DCE or a designate. Because of the limited number of facilities available, assignments cannot be made on the basis of the student’s family/marital status or personal preference. Although the department makes an effort to accommodate the student’s preference, the student agrees to accept the clinical assignments made by the department at any of the affiliated facilities, whether local or out of state.

4.24.3. Clinical Communications
The DCE will hold educational sessions prior to the clinical experiences to inform the students about the policies and procedures relevant to that portion of their education. All students will be given a DPT Student Clinical Education Handbook, which will be reviewed with them during the educational sessions. The DCE will communicate the clinical education expectations to the clinical facilities through the DPT Clinical Education Handbook, personal visits, emails, letters or other appropriate means of communication.

Clinical Education Handbook

4.24.4. DCE Clinical Site Visits
The purpose of clinical site visits is to monitor student progress, build relationships with personnel at clinical sites, and give/receive feedback on the clinical education curriculum.

The DCE will attempt to visit, in person, all students at least once during their clinical experiences. Site visits are also conducted at the DCE’s discretion for the purposes of recruitment of clinical sites.

4.24.5. Clinical Practicum
Practice of the knowledge and skills developed in the classroom and laboratory in a patient-care setting. This practicum consists of an Integrated Clinical Experiences (ICE) each semester where students will have patient encounters under the supervision of a clinical faculty. ICE will consist of the student being assessed for clinical skill sets, safety, interpersonal skills, and critical thinking progression. Schedule TBD

4.24.6. Clinical Education Experience
Clinical experiences occur during the fall, spring, and summer semesters of the third year of the program. During these experiences the students develop their skills to reach professional entry-level qualifications. These activities will provide the student with progressively refined experiences. The students will practice newly acquired professional knowledge and skills in selected patient environments under comprehensive but progressively decreasing guidance and scrutiny of the supervising clinical instructors. Prior to graduating, students must have documentation indicating successful completion of each clinical experience, including all course requirements. Students must also show documentation of entry-level skill in each criteria of the Clinical Performance Instrument with no areas of significant concern by the final clinical experience.

4.24.7. Clinical Education Agreement and Assignment
The DPT Program has current contracts with over 400 clinical institutions for clinical experiences. These contracts are local, national and international.

Clinical experiences (clinical slots) are arranged for each student utilizing a placement software program from 6 to 12 months prior to the scheduled assignment. Once the arrangements become finalized they are considered the same as a firm contract, and no changes will be allowed. In the unfortunate event that a clinical site cancels an assignment the DCE will work with the student to expedite a new placement.

4.24.8. Confidential Student Information
Students will take a health information form to each clinical facility which documents their medical history and current health findings. It is the student's responsibility to maintain possession of the original health information form once it has been given to them by the DCE or Clinical Education Assistant. Information regarding academic performance or previous clinical experiences is typically not shared with the facility by the program. When appropriate, select information may be shared with the Site Clinical Coordinator Education’s as adjunct faculty to optimize student success in the clinic.

4.24.9. Clinical Facility Requirements
All students are expected to meet certain requirements prior to attending any clinical assignment. These requirements include completion of previous coursework, a standard physical, CPR, OSHA and HIPPA certification, TB tests, Hepatitis B vaccination and proof of personal health insurance. Students are also expected to meet any additional requirements specifically requested by their clinical practicum or internship facility. These may include further health services such as additional TB tests, immunizations, titers, x-rays, HIV testing, hepatitis B vaccinations (if waiver not accepted), COVID vaccination status, flu vaccines or other medical screenings and treatments, criminal background checks, drug
testing (urine or blood), finger printing, character references, N-95 mask fitting, etc. It is the responsibility of the student to obtain and pay for requirements not provided by the DPT program, prior to the first day of the clinical experience. Failure to complete facility requirements may result in the loss of the clinical assignment, placement at different facility and/or delayed clinical start.

### 4.24.10 Clinical Attire

As representatives of Andrews University and doctoral members of the physical therapy profession, students within clinical facilities are required to be well groomed and to dress in a professional manner. The following guidelines should be observed in the clinic unless the facility has provided students with a dress code more suitable for that particular setting.

1. The standard clinical uniform is a white lab jacket worn over slacks (not jeans) or a skirt (of modest length) unless otherwise stipulated in the clinical facility dress code. In most clinics the Andrews University Physical Therapy polo shirt is acceptable (no other logos).
2. Andrews University student nametags must be worn during clinical education. Some facilities also provide a nametag which students are expected to use.
3. Shoes are to be sturdy with non-skid soles and heels. For safety, sandals and open-toed shoes are not to be worn. Athletic shoes are not acceptable unless specifically requested by the facility.
4. Hairstyles must meet clinical standards. Hair must be neat, clean, well-groomed and socially acceptable in a professional physical therapy setting. Long hair should be fastened with hair fasteners. Men should keep facial hair neatly trimmed (able to be covered with a face mask).
5. Personal cleanliness and hygiene are to be maintained at all times. Perfume colognes or aftershave lotions should be used with caution as they may be an irritant to clients.
6. All tattoos should be covered with clothing, discreet makeup or Band-Aid.
7. No shorts, capris, T-shirts, sweatshirts, or sheer tops should be worn at any time.
8. At no time should the midriff or bust/waist line be exposed.
9. Nails need to be trimmed, not extending past the end of fingertips. Colored fingernail polish is not permitted.
10. Accessories, including jewelry should reflect professional clinical standards in harmony with the conservative standard of dress outlined in the Andrews University student handbook. “Examples of jewelry and accessories that are not appropriate at Andrews University are ornamental rings and bracelets; necklaces and chains; ear, tongue, nose and eyebrow rings. Modest symbols of marital commitment, such as wedding and engagement rings, are acceptable.” Also broaches, if worn, should be small and unobtrusive.
11. Cell phones are not to be carried or used in patient care areas, and should remain in a silenced mode in all other areas of a facility.
12. Clinical facilities reserve the right to send the student home if their attire or appearance are deemed inappropriate.

### 4.24.11 Personal Injury Procedure

If you are injured while practicing at an Andrews University clinical assignment, please use the following procedure:

1. **Seek medical treatment if:**
   a. You have had contact with blood or body fluids to an open wound, or mucous membrane, or during an invasive exposure,
   b. Your on-site supervisor or campus instructor/coordinator asks you to seek medical evaluation/treatment,
   c. You feel that medical evaluation/treatment is needed,
   d. You have been injured, i.e. fall, sprain, over-stretch, fracture, etc.
2. **Report the incident** to your on-site supervisor. Use the incident report form required by your clinical site AND the Andrews University incident report.

3. **Report the incident** to the DCE

4. **Follow any instructions** given by your on-site supervisor and by the DCE.

Each student is responsible to take the university’s incident report form to the clinical site. One will be provided to you by the DCE.

### 4.25. Graduation

#### 4.25.1. Baccalaureate (BHS Degree)

Satisfactory completion of all required course work and a minimum GPA of 3.00 is required for the Bachelor of Health Science degree. Note the grade requirements for progressing to the graduate year in the next section. Additional requirements include:

1. **Senior Exit Test**: This test is required in your first year (PT-1 or PT-2). It is mandatory for all students except those who already have a Bachelor's Degree.

2. **Undergraduate Application & Agreement Form**: must be completed early Fall Semester (PT-1).

3. **Collegiate Cap and Gown**: ordered on AU website early spring semester of graduation if student plans to march.

#### 4.25.2. Graduate (DPT Degree)

Satisfactory completion of all required course work and a minimum graduate GPA of 3.00 is required for the graduate phase of the Doctor of Physical Therapy degree. See previous section. Additional requirements for graduation are:

1. **Capstone Project**: Students must have satisfactorily completed their capstone project and presentation by the published dates in the course outline. Graduation will be delayed if the student does not have their capstone project completed by the deadline.

2. **Comprehensive Exams**: Students must successfully complete both the practical and written comprehensive examination. Failure to successfully complete a comprehensive exam may lead to delayed graduation or academic disqualification from the DPT Program.

3. **Clinical Experience**: It is the student's responsibility to see that all clinical rotations are successfully completed on time and evaluation forms are returned to the Director of Clinical Education (DCE) within the deadlines as listed by the DCE. The student's graduation will be delayed if any clinical rotation is unsatisfactory and/or is extended beyond the graduation date or the evaluation forms are not received by the deadline.

4. **Exit Survey**: Each student must complete the Graduate Exit Survey in order to graduate. This is normally given as part of PTH880 PT Seminar during the last semester (PT-9) of the DPT program.

5. **Composite Photograph**: Students must have their photograph taken for clinical assignments and the class composite picture. The original sitting appointment is arranged by the Operations Assistant and paid for by the SRS. Students who miss the appointment for the picture or would like a retake are personally responsible for arranging a sitting with the original photographer and having the retake submitted to the School of Rehabilitation Sciences prior to the end of the final spring semester (PT-8). All additional costs are the responsibility of the student.

6. **Advancement to Candidacy and Candidacy Course Check Sheets**: are to be completed by the operations assistant during Summer Semester (PT-9) of the third year. Students must be on regular academic status and must have filed a Graduate Application for Graduation.
7. **Graduate Application for Graduation Form:** must be completed on-line during the Spring Semester (PT-8).

8. **Collegiate Cap, Hood & Gown:** ordered on AU Bookstore website early during the summer of graduation.

9. **Report of Completion of Project form:** will be filed for each student at the completion of their research project. This needs to be completed at least two months before graduation. The deadline is determined by Academic Records and prepared by the operations assistant and research coordinator during Spring Semester, PT-9.

4.25.3. **Licensure**

Students will need to work with the clinical education assistant regarding all forms they receive pertaining to the physical therapy licensure in individual states. This may include notary public service and letters verifying graduation or AIDS education. Requests for official transcripts are to be made to the AU Records Office.

4.26. **Student Evaluation of Program/Curriculum**

4.26.1. **Course/Teacher Evaluations**

Course evaluations are essential to the success of the teacher and program, therefore, are required before receiving a grade for each course. Teachers may choose to give credit for completion of the course evaluation. Students complete a course/teacher evaluation on all didactic courses. They may be computer based or paper and pencil. If paper and pencil, the instructor may hand the evaluations to the students or assign a student to do so. In either case, there should be a student assigned to collect the course evaluations and return them to the office for tabulation. When completing the course/teacher evaluation, remember to address your comments directly to the instructor in a professional manner. Although not required, you should feel comfortable putting your name after your comment. If you have a suggestion for the instructor, be sure to write your comments as you would like to hear them if they were being addressed to you. Some instructors may choose to offer a mid-course evaluation in paper or online format.

4.26.2. **Graduate Exit Survey**

Typically part of PTH880 PT Seminar during the ninth and final semester, all students complete a Graduate Exit Survey. Areas addressed include the admissions process and personnel, University and program resources, the clinical education program, overall program and student goals, and each core faculty member individually. It is important that strengths and suggestions are written in a professional manner.

4.26.3. **Alumni Survey**

Approximately one year after graduation we will send you our last department survey assessing how you feel the program prepared you for the clinic in which you work. There will be a survey for you to complete, along with a survey for your immediate supervisor or peer (depending on your work environment), and for 3-4 of your clients. This is probably the most important survey as you have the opportunity to compare your education to your current practice. Please take the time to complete these surveys as quickly as possible.
4.27. **Campus Services**
A variety of services are available to all university students and faculty. Andrews University is committed to helping students succeed by keeping each learner “classroom ready.” This handbook only briefly introduces the reader to some of the many services offered. The University Bulletin and Student Handbook provide a more comprehensive view of available services.

4.27.1.1. **Dining Services and Gazebo (ext. 3161)**
Located on the second floor of the Campus Center, the Terrace Café operates a vegetarian dining service sold on flat-rate plans. Check out their website at [https://andrews-university.cafebonappetit.com/](https://andrews-university.cafebonappetit.com/) to explore the meal plan choices.

The Gazebo is located on the main floor of the Campus Center for carry-out. The menu includes a wide selection of vegetarian sandwiches, side orders, fountain items and an extensive salad bar sold ala carte, with menu items individually priced.

4.27.1.2. **Wellness Center**
Located near the entrance of the University, offering a wellness space that provides the students with the opportunity to explore the concepts of wellness intentionally. The Wellness Center offers many amenities that include a weight training gym, cardio equipment, pool, recreation center and many more. Information about the Wellness Center can be found at [https://www.andrews.edu/wellnesscenter/](https://www.andrews.edu/wellnesscenter/).

4.27.1.3. **Campus Ministries (ext. 3211)**
Located in the Student Center, the Campus Ministries office helps create an atmosphere where the university family can become an interdependent community whose highest purpose is service to Christ and humanity. It directs and coordinates the chapel, the Student Missions program, Task Force, University Sabbath School, and Church services. Campus Ministry provides pastoral and counseling visits, Bible studies, Engaged Encounter seminars, and Marriage Enrichment seminars.

4.27.1.4. **Campus Safety (ext. 3321)**
The Campus Safety Department is available 24 hours a day, seven days a week 365 days a year to help you. It is located in the one story red brick building on Seminary Drive at the end of Garland Avenue. Their regular office hours are from 8:00 A.M. to 8:00 P.M. Monday through Thursday and 8:00 to 4:00 on Friday. The Campus Safety Department can assist you with parking permits, opening locked doors, escorting service, contacting the local police and answering questions on university rules and regulations.

4.27.1.5. **Campus Store (ext. 3287)**
Located in the Campus Plaza, the Bookstore’s normal operating hours are from 9:00 A.M. to 5:00 P.M. Monday through Thursday, and 9:00 A.M. to 1:00 P.M. Friday and Sunday. Here is where individuals can purchase text and reference books, office and school supplies, and university imprinted clothing and gifts. Merchandise can be purchased with cash, checks, credit cards or by placing items on the student’s account.

4.27.1.6. **Computer Lab (ext. 6020)**
There is one major computer lab on campus that is available for use by registered students and faculty who supply their own external flash drives to store personal data files. Various computer programs are available including word
processing, spreadsheets, databases and statistical packages. This lab is located in Bell Hall 182. Students can access the internet while on campus through the au-secure wireless network. The School of Rehabilitation Sciences also maintains a small computer lab for use by physical therapy students and faculty only.

4.27.2. Counseling and Testing Center (ext. 3470)
Located in Bell Hall 123 the Counseling and Testing Center assists students, without charge, in reaching their maximum potential when confronted by social, intellectual, or emotional problems. Professional counselors and doctoral students in counseling are available for any student by appointment or immediately, if necessary. Services rendered include career counseling, personal/emotional counseling, educational counseling, marital/premarital counseling and substance abuse counseling.

4.27.3. Health Services (473-2222)
Students may direct their health needs to the University Medical Specialties, located next to Apple Valley Market, between 8:00 A.M. and 4:30 P.M. Monday through Thursday, and 8:00 A.M. and 12:00 noon on Friday. Physician appointments and nurse visits, as well as most short-term medications are available to all students.

4.27.4. Housing Information
On-campus housing is available to all university students. Lamson Hall (ext. 3446) houses the women while Meier and Burman halls (ext. 3390) house the men. Single undergraduate students under 22 are required to live in one of these residence halls. Full time students living with a spouse and/or children qualify for renting one of the Beachwood, Maplewood, Garland apartments. The housing office (ext. 6979) also maintains a list of non-campus rentals.

4.27.5. International Student Services (ext. 6378)
Located in the Student Center, the International Student Services office provides counseling on immigration regulations and coordinates orientation programs for international students. Assistance is available in both their home country and on campus.

4.27.6. Intramurals (ext. 6568)
Located in the Johnson Gymnasium, this office helps individuals develop their professional and physical abilities. Activities offered include badminton, basketball, flag football, floor hockey, racquetball, soccer, softball, tennis and volleyball.

4.27.7. Library Services (ext. 3275)
The James White Library serves the information resource needs of Andrews University. It houses more than one million volumes and subscribes to almost 3,000 periodicals. The library’s online system, JeWeL, serves as the library’s catalog and as an electronic gateway to a rich variety of Internet resources. The DPT program also maintains a small resource room rich with physical therapy related materials.

4.27.8. Student Financial Services (ext. 3334)
The Student Financial Services office, located in the Administration Building, handles all applications and processing of financial aid as well as payment arrangements. Students desiring financial aid should contact Student Financial Services by February 1 of each school year.

4.27.9. Student Success Center (ext. 6096)
Located in Nethery Hall, the Student Success Center provides academic services such as individual and small group tutoring on specific course content and on
general topics such as note-taking, time management, memory techniques and reducing test anxiety.

4.27.10. Students With Disabilities (ext. 3227)
Located in Nethery Hall with Student Success, this department helps determine if and what reasonable accommodations are needed for students with qualified disabilities. Students are required to provide necessary documentation of disability from a qualified licensed professional and make an application for accommodation before the accommodation can be considered.

4.27.11. Writing Center (ext. 3358)
Located in Nethery Hall, the writing center provides assistance with writing papers, from small assignments to thesis projects. Students can receive assistance with everything from grammar and punctuation to format and styles.

4.27.12. Notary Services (ext. 6490)
Free Notary services are provided free of charge to all DPT students, faculty, and staff by Heather Trutwein, the School of Rehabilitation Sciences Administrative Assistant. Notary services are also provided for a small fee through the university accounting department on the second floor of the Administration Building.

4.28. Communication
Open, honest communication is important for good collegial relations and professional growth. Faculty and students are encouraged to keep all lines of communication open and in a Christian spirit. Communication regarding course concerns or requirements should be documented appropriately.

4.29. Student Class Clubs
The purpose of the PT student club is to foster a socialization of the student with her/his new profession, peers, faculty and department staff. Recreation, religious and social activities, special projects, mentoring relationships and other ideas materialize and are carried out by the student clubs.

4.29.1. Election of Student Club Officers
Students will elect officers during the Fall Semester of their first year. The term of office will terminate at the end of the third program semester. At that time new officers will be elected who will serve until graduation from the physical therapist education program. Students may serve a second term if they are re-elected. Traditional offices are:

4.29.2. President
A mature Christian leader, able to organize the class and promote cohesiveness that will bind the class together. The president is the class spokesperson and is present at faculty council to represent you. They are also involved with graduation weekend activities.

4.29.3. Vice President
Qualities similar to the president. Able to assist the president by following through on given responsibilities. They represent the class at faculty council every-other week as well as assisting with graduation weekend activities.

4.29.4. Academic Coordinator
An individual is responsible to facilitate various study groups and review sessions. In the past, they have coordinated study groups with their fellow class members in the evenings, invited a student from a previous year to lead out as a tutor in a particular content area, or requested involvement from a professor for specific review sessions, such as lunch reviews.
4.29.5. Secretary
An individual who can take accurate minutes of class meetings and make arrangements for class functions.

4.29.6. Treasurer
An individual who knows how to handle money. This person is responsible for processing receipts and operating the class account.

4.29.7. Chaplain(s)
An individual who shows interest in working with the students and faculty in organizing activities of a spiritual nature such as beach vespers, prayer groups, P.T. church, and class service projects.

4.29.8. Social Representative & Sports Coordinators
An individual who arranges social activities; such as parties, beach trips, ice or roller skating outings, picnics and class banquet, as well as other graduation weekend activities. Usually students elect one male and one female, at least one from the dorms. These individuals keep the class informed and encourage participation in activities occurring on campus such as intramurals, concerts, SA events, etc.

4.29.9. APTA Representative
An individual who is really interested in the P.T. professional organization and what it has to offer. This person will keep the class informed on issues relating to the profession including National Physical Therapy month and may attend local, state or national organization meetings.

4.29.10. Historian/Photographer
An individual who shows an interest in recording what the class has done and how it has evolved. This can include still pictures, videos, etc. Usually the historian puts together a video/slide show for the reception and/or organizes a class yearbook.

4.29.11. Community Outreach & Volunteer Coordinator(s)
An individual who promotes and coordinates volunteer and outreach opportunities for PT students in the community and the PT Department. For example: the HERBIE Clinic, Operation Christmas Child, department recycling program, etc.

4.29.12. Student Club Responsibilities
Some traditional activities include:
Mentor/Mentee Program (First Semester)
• Initiate fellowship and mentoring for the new DPT class.
National Physical Therapy Month (Fall Semester)
• Both student clubs work together in planning campus and/or community activities during October.
Health & Fitness Expo (Fall Semester)
• Both student clubs work together in planning and running the PT booth for the Expo
Departmental Assembly
• See Section 5.4.
Graduation Banquet (Summer Semester, PT-9)
• Students work with the program assistants to plan the banquet and any programming needs.
Graduation White Coat Ceremony (Summer Semester, PT-9)
• Work with faculty advisor in planning the White Coat Ceremony.
4.29.13. Student Club Faculty Sponsor
The faculty sponsor for the physical therapy class holds an appointment in the Department of Physical Therapy and is appointed by the department chair on a rotating basis. The faculty sponsor should be notified of all extracurricular activities organized by the class. The faculty sponsor can assist with any special arrangements for activities or areas not normally available to students. A faculty sponsor may not serve as a sponsor for more than one class at the same time.

<table>
<thead>
<tr>
<th>Class of 2024</th>
<th>Bill Scott</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class of 2025</td>
<td>Gerson De Leon</td>
</tr>
<tr>
<td>Class of 2026</td>
<td>Letrisha Stallard</td>
</tr>
</tbody>
</table>

4.29.14. Student Club Participation in PT Faculty Council Privilege
The president or vice president of the class (one member) is invited to represent their class on the Physical Therapy Faculty Council. From time to time the student representatives are asked to leave if a council member feels it necessary to discuss a particular issue in their absence. Attendance at this council is a privilege that can be removed if confidentiality is not maintained. Students are encouraged to elect their representatives responsibly.

4.29.14.1. Voting
All class representatives are allowed one vote total. If a conflict between representatives occurs, the vote will be given to the representative whose class is most closely associated with the subject matter.

4.29.15. Student Class Club Account
Each class has a treasury of class funds that are maintained in a university account. Withdrawal of funds requires the signature of the class president, treasurer, or faculty sponsor. The department chair may sign in the absence of the faculty sponsor.

4.30. College and School Assemblies
College assemblies are normally scheduled each semester. These assemblies meet in various locations. Students will receive notification in advance of each assembly. The College of Health and Human Services Dean’s office will plan the school assemblies.

The physical therapy program office will plan the DPT student assemblies. All program students are required to attend these assemblies.

4.31. DPT Student Dress Policy
Student attire for lectures and general school activities is expected to follow the conservative standard as outlined in the Andrews University Student Handbook https://www.andrews.edu/services/studentlife/handbook. The DPT department houses professional programs and therefore has high expectation for our students, at times the department dress code varies from the university code. These variations are in italics in section 5.5.1

4.31.1. University Dress Code
Andrews University’s philosophy of dress is grounded in biblical ideals and the professional standards expected of a university. As members of a Christian community, we aspire to glorify our Creator and to show respect for self and others in our dress. 10

The specifics of the “Andrews Look” illustrate the fundamental principles of modesty, simplicity and appropriateness.

1. Modesty—Appropriately covering the body, avoiding styles that are revealing or suggestive.
2. Simplicity—Accentuating God-given grace and natural beauty rather than the ostentation encouraged by the fashion industry.
3. Appropriateness—Wearing clothing that is clean, neat and suitable to occasion, activity and place.

As a Seventh-day Adventist university, we interpret these principles in accordance with our faith tradition. While respecting individuals who may view them differently, we ask all who study, work or play on our campus to abide by our dress code while here.

Specifics of the Andrews Look:
1. Men’s Attire—Pants or jeans with shirts or sweaters are the most appropriate dress for everyday campus wear. Examples of inappropriate attire are tank tops, bare midriffs and unbuttoned shirts. Modest shorts are acceptable.
2. Women’s Attire—Dresses, skirts, pants or jeans with shirts, blouses, sweaters and/or jackets are appropriate for most occasions. Examples of inappropriate attire are sheer blouses, tube tops, low necklines, bare midriffs, spaghetti straps or no straps, tank tops, short skirts, leggings, unless pelvis and buttocks area are covered with a long shirt, skirt/dress or shorts and two-piece bathing suits. Modest shorts are acceptable.
3. Accessories—These should be minimal and carefully chosen after considering the principle of simplicity above. Examples of jewelry and accessories that are not appropriate at Andrews University are ornamental rings and bracelets, necklaces and chains, earrings and piercings of all kinds. Modest symbols of a marital commitment, such as wedding and engagement rings, are acceptable.

Students not conforming to these standards of dress should anticipate being asked to come into compliance. This is especially true in the workplace, in leadership positions and when taking a role in activities representing Andrews University.

Students should be guided by principles of neatness, modesty, appropriateness, and cleanliness. In practice, this means that:
1. Students should avoid clothing that is tight-fitting or too revealing.
2. Students should wear clothing appropriate to their gender.
3. Fingernails should be trimmed so as not to interfere with treatment techniques.
4. Shoes generally are to be worn in all public places.
5. Bicycles, roller blades/skates and skateboards may not be used in public buildings.
6. Tattoos should be covered with clothing or camouflaged with discreet makeup or Band-Aid.

4.31.2. Anatomy Lab Attire
Students are required to wear a lab coat for anatomy. Each student is responsible for maintaining the cleanliness of his/her lab coat through regular laundering. When handling human anatomical subjects, students are required to wear vinyl or latex gloves and shoe covers.

4.31.3. PT Lab Attire
While in the Physical Therapy Building, laboratory attire is required, which may include loose shorts and T-shirts for women and men. Some labs will require women to have a halter top, sports bra, camisole or bathing suit top for activities dealing with the neck, back, shoulders and abdomen. Laboratory attire should be worn in the classroom only when a class/lecture is combined with laboratory or applicable research activities.
Students should change into appropriate attire as outlined in the University Dress Code at the completion of the lab session. Students are assigned a locker in their dressing room for this purpose.

4.31.4. Clinical Attire
Clinical education attire is outlined in the student Clinical Education Handbook.

4.32. Transportation
Each student is responsible for their own transportation to and from classes, internships, or any other school function. Some classes are held at a site other than the Andrews University campus. The department may facilitate arrangements for transportation by posting sign-up sheets for ride sharing. In doing so, the department does not accept liability for the student while traveling.

4.33. Prospective Students
Information regarding the physical therapy programs will be available to all students in several forms. The AUPT web site will include information regarding admissions and will have a link to the PT Student Handbooks, which cover expectations relevant to students.

1. Entry-level program
https://www.andrews.edu/chhs/pt/index.html
2. Entry-level admissions
https://www.andrews.edu/chhs/pt/pt/entry-level-chhs/admission_dpt.html
3. PT student resources and PT Student Handbook
https://www.andrews.edu/chhs/pt/resources/index.html

4.34. Accepted and Enrolled Students
Students who are accepted into one of the School of Rehabilitation Sciences programs receive access to the policies and procedures and appropriate student handbooks online. During orientation all DPT students will be given a copy and web address of the appropriate DPT Student Handbook and the AU Student Handbook. The department chair, or designee, will review contents of the handbook with the students at orientation. Students will be asked to sign a general informed consent form, a release of information form and verify that they have received and agree to abide by the policies and procedures outlined in their DPT Student Handbook.

1. PT Student Handbook
https://www.andrews.edu/chhs/pt/resources/index.html
2. AU Student Handbook
https://www.andrews.edu/sed/resources/adjunct/2-6-au-stud-hndbk.html

4.35. Student Handbooks
Policies and procedures relevant to the AU student will be identified in the DPT or Post professional Student Handbooks. These handbooks are intended as a companion to the Andrews University Student Handbook. In addition to policies and procedures, information should include rights and responsibilities of the students, as well as services available to help the student.

1. PT Student Handbook
https://www.andrews.edu/chhs/pt/resources/index.html
2. AU Student Handbook
https://bulletin.andrews.edu/mime/media/view/21/5051/handbook_20230807_FIN_AL_web_lo_2.pdf
3. Postprofessional Student Handbook

4.36. Recruitment of PT Students
Recruitment activities of facilities wishing to come to campus to talk with the physical therapy students will be coordinated by the DCE in consultation with the department chair.

4.36.1. Bulletin Board
The program maintains a student bulletin board with current job opportunities in the field of physical therapy. It is located in the hallway above the drinking fountain.

4.36.2. Email Job Postings
Faculty and staff who receive job postings via email will forward that email to the DCE, who will then determine distribution to current students and/or alumni.

4.36.3. Health Careers Fair
A Health Careers Fair coordinated by the University Student Success Center is held each year. Class schedules are arranged to allow students time to visit the exhibits and talk with the different facility representatives. Attendance at this event is expected of all physical therapy students.

4.37. Program Application Fee(s) & Deposit
Please see the Andrews University's General Information Bulletin for amounts and the Physical Therapy website for specific details on how and when they should be paid.

This confirmation deposit confirms for the accepted student a position in the physical therapy class beginning the same year. The deposit will be credited to the successful student’s tuition account following registration for the second semester of the program.

4.37.1. Tuition & Professional Education Fees
Tuition for the DPT program is not dependent on number of credits and is charged in a block format of three equal amounts for the three terms (Fall, Spring and Summer) of each academic year. The professional fee is set by the PT department and is charged at the beginning of each term along with the block tuition. Additional Andrews fees include the University General Fee, dorm/housing, food, insurance, certain medical expenses, books and supplies. There are no discounts for students who already have a degree from Andrews University. Contact the Student Finance Office for answers to specific questions.

Student expenses covered by the block tuition include:
1. DPT program courses
2. Normal teaching and office equipment/supplies as with other similar departments on campus
3. Student liability insurance
4. Fees for specialized lectures/seminars within the physical therapy curriculum
5. Other university services as outlined in the University Bulletin

Student expenses covered by the professional education fee include:
1. PT Kit contents
2. Annual CPR course expenses as required for clinicals
3. Annual student memberships to the American Physical Therapy Association
4. DCE travel expenses related to clinical visits
5. Physical therapy related equipment for laboratories and research
6. Travel reimbursement of up to $600.00 annually for the class APTA representative to attend APTA/APTA-Michigan events
7. Laboratory equipment, materials and other supplies
8. Software fees related to clinical education
9. Professional head-shot photographs for internships and cohort composite
10. The Graduate Class banquet for the student and a significant other
11. The NPTE preparation materials/exams
12. A portion of faculty professional development, licensure, certification and APTA membership fees

4.37.2. Medical Insurance
DPT students are required to take the medical insurance coverage provided by Andrews University or provide evidence of personal insurance. The university must have documented proof that students are covered for personal medical care.

To waive the university insurance coverage, the student must provide proof of insurance (photocopy of the front and back of insurance card) from their personal or parent’s insurance company to the office of Student Insurance in the Administration Building.

4.37.3. Student Clinical Expenses
It is the student’s responsibility to schedule and pay for a standard physical examination and TB skin test. This can be scheduled by the student at University Medical Specialties, Inc. If the student misses the scheduled appointment or chooses to have it done by another physician, the student will use the form provided by the department and is still responsible for the cost. If a student is known to have a positive TB skin test, they may omit the skin test and proceed with a chest x-ray. This will be the responsibility of the student to schedule and cover monetarily.

Payment for any further tests, Hepatitis B vaccinations, immunizations, titers, x-rays, or other medical treatments are the responsibility of the student. Some clinical facilities require stringent criminal background checks which may include fingerprinting, drug testing, etc. Payment for any additional tests, background checks, etc. required by a clinical site for clinical experience are the responsibility of the student.

It is the student’s responsibility to search out information on facility health test requirements on EXXAT or consult with the DCE, clinical education assistant, or from information provided by them prior to the selection of the clinical site for a clinical experience.

4.37.4. Syllabus Photocopy Expenses
Some courses in the Physical Therapy program have a large syllabus due to the high volume of content information and/or intensity of the subject. Syllabi that are 100 pages or less will be provided at no charge as part of the professional education fee to the students. Syllabi greater than 100 pages will be charged to the students and distributed by the instructor of each course or through the University Bookstore. All syllabi that include a copyright charge will also be charged to the student. Charges will be placed on each student’s account.

4.37.5. Other Financial items
Finances related to other items such as student club funds or research are covered under their own sections of this handbook. Information on other fees charged by the university such as computer usage or student activities fees can be found in the University Bulletin.
4.38. Professional Organizations

4.38.1. APTA
The APTA is the professional association for physical therapists, representing 95,000 physical therapists and physical therapist assistants and 27,000 PT students across the United States. The APTA's goal is to foster advancement in physical therapy practice, education, and research. Applications for membership are distributed to students and mailed during the first term of the DPT program.

The APTA can be accessed via their website at http://www.apta.org. The national office is located at 1111 North Fairfax St, Alexandria, VA 22314 (800-999-APTA). Membership services can be reached at extension 3124. Student outcomes and matriculation rates from all physical therapy programs are available through their "education" website.

All students in the entry-level program are enrolled as student members of the APTA. The annual student membership, paid as part of the professional education fee, entitles the student to all student member privileges and benefits. This includes a subscription to the professional journals and bulletins.

The APTA offers membership in 19 sections, which represent special interest groups. These sections provide a forum to therapists with similar interests to interact, share professional experiences, and further the activities of the profession in that content area. Many sections publish newsletters or journals that provide information on research, clinical practice and health policy issues related to that section. Students interested in joining a section can pay the optional Specialty Section dues to the operations assistant when applying for or renewing membership.

4.38.2. Michigan Chapter or MPTA

4.38.3. APTA/MPTA Meetings and Conferences
Information on national APTA conferences is generally published in PT In Motion, listed on the APTA website, and is mailed to all APTA members. MPTA meetings are published in the MPTA Shorelines Newsletter or the MPTA webpage.

Students are encouraged to participate in APTA meetings and conferences. Students who wish to attend national or regional meetings that overlap with scheduled classes should meet with their academic advisor to discuss strategies for making up missed work. If conferences overlap with clinical experiences, the student must get permission from the DCE and the clinical facility.

4.38.4. APTA Combined Sections Meeting
The Combined Sections Meeting (CSM) is usually held in early February and is organized by the sections of the association. Registration for CSM is at reduced cost for student members. Early-bird registration rates are also available.

4.38.5. Annual Meeting and Scientific Exposition of the APTA
The APTA sponsors an Annual Meeting and Scientific Exposition in June of each year. This meeting offers educational sessions and research presentations. The APTA House of Delegates meets prior to this meeting. Registration for this conference is at a reduced cost for student APTA members. Early-bird registration rates are also available.
4.38.6. APTA Student Conclave
The APTA holds a Student Conclave in October of each year, providing programming for students from physical therapist and physical therapist assistant programs. The Conclave usually includes educational sessions, a Mock House of Delegates, sessions on resume writing and opportunities to meet with members of the APTA Board of Directors.

4.38.7. APTA Michigan Meetings
The Michigan Physical Therapy Association sponsors an annual conference in October. Student members receive a reduced cost registration. Education sessions are offered at this conference as well as the presentation of research papers and posters.

4.38.8. Western District Meetings
The Western District holds meetings approximately six times per year in the western half of Michigan. Topics covered include clinical, educational and professional issues. Students are encouraged to attend as most meetings are free and close to home.

4.38.9. Commission on Accreditation in Physical Therapy Education (CAPTE)
The Doctor of Physical Therapy (DPT) Program at Andrews University is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: accreditation@apta.org; website: http://www.capteonline.org. The transitional DPT (t-DPT), Doctor of Science in Physical Therapy (DScPT) and the Orthopedic Residency Programs are not accredited by CAPTE.
APPENDICES
### 2023 DPT CURRICULUM TRACK

#### School of Rehabilitation Sciences
Entry-Level DPT Program

<table>
<thead>
<tr>
<th>Foundational Sciences</th>
<th>Behavioral Sciences</th>
<th>Clinical Sciences</th>
<th>Orthopedic Sciences</th>
<th>Neurologic Sciences</th>
<th>General Medicine</th>
<th>Research Sciences</th>
<th>Clinical Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ryan Morrison Coordinator</td>
<td>Nathan Hess Coordinator</td>
<td>Gerson De Leon Coordinator</td>
<td>Greg Almeter Coordinator</td>
<td>Lee Olson Coordinator</td>
<td>Letisha Stallard Coordinator</td>
<td>Sozina Katul Coordinator</td>
<td>Bill Scott Coordinator</td>
</tr>
</tbody>
</table>

- Anatomy
- Anatomy Lab
- Pathokinesiology Lab
- Pathokinesiology Lab
- Neuroscience & Motor Control Lab
- Neuroscience & Motor Control Lab
- Pathophysiology I
- Pathophysiology II

- Comparative Religion
- Spirituality in Healthcare
- PT Administration
- Psychosocial Issues in Healthcare
- Health Promotion & Wellness I & II
- Ethical & Legal Issues in Healthcare

- PT Assessment Skills
- PT Assessment Skills Lab
- Ther Interventions
- Ther Interventions
- Ther Exercise
- Ther Exercise Lab
- Differential Diagnoses
- Prof. Compendium
- PT Seminar
- Written Comprehensive I & II

- Intro to Orthopedic PT
- Orthopedics I Lab
- Orthopedics II Lab
- Musculoskeletal Clinical Reasoning Lab

- Neurology I
- Neurology I Lab
- Neurology II
- Neurology II Lab
- Practical Comps
- Neuromuscular Clinical Reasoning
- Neuromuscular Clinical Reasoning Lab

- General Medicine
- General Medicine Lab
- Cardiopulmonary Lab
- Cardiopulmonary Lab
- Prosthetics & Orthotics
- Pediatrics
- Pediatrics Lab
- Geriatrics

- Scholarly Inquiry & Dissemination I
- Scholarly Inquiry & Dissemination II
- Research Statistics Lab
- Research Project (Topic) [PT-5 Spring]
- Research Project (Topic) [PT-6 Summer]
- Research Project (Topic) [PT-8 Spring]

- Clinical Practicum
- Clinical Practicum
- Clinical Practicum
## DPT Curriculum Outline for the Class of 2026
(110 Semester Credits)

### FIRST YEAR

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Instructor</th>
<th>Credits</th>
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<tbody>
<tr>
<td>PTH501</td>
<td>DPT Orientation (starts Aug. 23)</td>
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<td>18</td>
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<td>PTH505</td>
<td>Anatomy</td>
<td>4</td>
<td>Omison</td>
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<td>PTH515</td>
<td>Anatomy Lab</td>
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<td>Omison/Hess</td>
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<tr>
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<td>PT Assessment Skills</td>
<td>3</td>
<td>DeLeon</td>
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<td>PTH520</td>
<td>PT Assessment Skills Lab</td>
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<td>DeLeon</td>
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<tr>
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<td>Pathokinesiology</td>
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### SECOND YEAR

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<td>PTH513</td>
<td>Health Promotion &amp; Wellness I</td>
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<td>DeLeon</td>
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<tr>
<td>PTH518</td>
<td>General Medicine</td>
<td>2</td>
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<td>PTH528</td>
<td>General Medicine Lab</td>
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<td>Greene</td>
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<tr>
<td>PTH509</td>
<td>Principles of Therapeutic Exercise</td>
<td>1</td>
<td>Stailard</td>
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<td>PTH519</td>
<td>Principles of Therapeutic Exercise Lab</td>
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<tr>
<td>PTH562</td>
<td>Comparative Religion</td>
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<td>Tompkins</td>
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<tr>
<td>PTH563</td>
<td>Neuroscience &amp; Motor Control</td>
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<td>PTH530</td>
<td>Pathophysiology I</td>
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### THIRD YEAR

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<td>Orthopedics I Lab</td>
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<td>PTH621</td>
<td>Scholarly Inquiry &amp; Dissemination II</td>
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<td>PTH622</td>
<td>Research Statistics</td>
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<td>Research Statistics Lab</td>
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<td>PTH647</td>
<td>Differential Diagnosis</td>
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<td>PTH680</td>
<td>Clinical Practicum</td>
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<table>
<thead>
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<td>PTH613</td>
<td>Health Promotion &amp; Wellness II</td>
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<td>PTH625</td>
<td>Cardiopulmonary</td>
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<td>Prosthetics &amp; Orthotics</td>
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<td>PTH665</td>
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<td>PTH745</td>
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### FOURTH YEAR

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<tr>
<td>PTH886</td>
<td>Clinical Education II (12 weeks)</td>
<td>Scott</td>
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</table>

Core Faculty
Supporting Faculty
Associated Faculty

Total Credits = 116
DPT Course Descriptions

All course work (lectures and laboratories) scheduled for each semester must be successfully completed prior to advancing to the next semester.

PTH501
DPT Orientation
This orientation course reviews the principle and practices underlying the Curriculum and Instruction of the DPT Program. Mandatory for all incoming DPT students. This course also facilitates bonding with cohort classmates to enrich the students’ experience in the DPT program and assists the student and cohort in emulating the core values of the School. Students will learn and apply the concepts of Strengths, Emotional Intelligence GRIT and Metacognitive Learning Strategies.

PTH505
Anatomy
A comprehensive study of human anatomy with emphasis on the nervous, skeletal, muscle, and circulatory systems. Introduction to basic embryology and its relation to anatomy and the clinical sciences concludes the course. Provides a solid morphological basis for a synthesis of anatomy, physiology, and the physical therapy clinical sciences. Co requisite: PTH515.

PTH509
Principles of Therapeutic Exercise
This course is designed to provide the student with fundamental principles of therapeutic exercise to develop and implement exercise interventions associated with specific impairments and assess patient responses during exercise and in response to training over time. Discussion of specific pathological conditions in relation to exercise testing and prescription and the process of clinical decision-making will be presented. Co requisite: PTH519

PTH510
PT Assessment Skills
Introduction to assessment principles and examination skills utilized in all areas of physical therapy. The PT Guide to Physical Therapy Practice is referenced for the basic skills required in the assessment, intervention and documentation guidelines. Co requisite: PTH520.

PTH513
Health Promotion & Wellness I
Analysis and application of prevention, health promotion, wellness and fitness for individuals, groups and communities. Examination and application of education theory and skills. An exploration of the role of the physical therapist in teaching, learning and leadership in the classroom, clinical setting and community.

PTH515
Anatomy Lab
Dissection and identification of structures in the cadaver supplemented with the study of charts, models, prosected materials and radiographs are utilized to identify anatomical landmarks and configurations. Co requisite: PTH505.

PTH516
Pathokinesiology
The study of human movement including an introduction to the basic concepts of biomechanics with an emphasis on human joint/muscle structures and function, advancing to analysis of body mechanics, normal gait analysis, and pathological movement analysis. Joint abnormalities will be identified using radiographs, related to the resultant movement dysfunction. Prerequisites: PTH505 and 515. Co requisite: PTH526.
PTH518
General Medicine
Greene
Physical therapy management of patients in general, medical, acute care, and subacute care settings with emphasis on examination, evaluation, establishment of prognosis, and intervention with relevant factors. Management of pain and physical complications during medical treatment. Management of special populations, including wound/burn care and women’s health care. Co requisite: PTH528.

PTH519
Therapeutic Exercise Laboratory
Stallard
Practical demonstration and experience with responses to exercise, testing procedures, and exercise prescription, focusing on activities appropriate for clinical situations. Tests and interventions noted in the Physical Therapy Guide to Practice are highlighted. Co requisite: PTH509.

PTH520
PT Assessment Skills Laboratory
DeLeon
Basic examination skills including surface palpation of specific underlying muscle and bone structures, joint motion (goniometry), manual procedures for testing muscle strength, sensation, vital signs, assistive devices, gait patterns, transfers, limb girth and volumetric measurement will be practiced. Clinical application in basic physical therapy care procedures will be introduced. Co requisite: PTH510.

PTH525
Therapeutic Interventions
Hess
Basic principles, physiologic effects, indications and contraindications, application and usage of equipment, and intervention rationale for hydrotherapy, thermal agents, wound care, soft tissue mobilization, ultrasound, electrotherapy and mechanotherapy (traction) and other therapeutic interventions. Co requisite: PTH535.

PTH526
Pathokinesiology Laboratory
Stallard/Hess
Biomechanical and observational analysis of normal and abnormal human movement. Integration of basic examination skills with gait and movement analysis. Prerequisites: PTH505 and 515. Co requisites: PTH516.

PTH528
General Medicine Laboratory
Greene
Practice in examination and evaluation modified for the acute-care environment. Applications include functional examination procedures, following precaution and safety procedures of hospital equipment, women’s health exercise, modification of interventions for acute care, and appropriate documentation for inpatient physical therapy. Co requisite: PTH518.

PTH530
Pathophysiology I
Allyn
Sequence studying disease processes affecting major body systems and the resulting anatomical and pathophysiological changes. Clinical presentations and treatment of patients with those disease processes are presented, as well as diagnostic tests and laboratory values used to identify pathological conditions.

PTH535
Therapeutic Interventions Lab
Hess
Supervised practicum includes patient positioning and application of the therapy to obtain desired physiological response. Techniques of hydrotherapy, thermal agents, wound care, and soft tissue mobilization, ultrasound, as well as specific electrotherapy and mechanotherapy treatments and assessment of physiological responses to those treatments. Co requisite: PTH525.

PTH540
Pathophysiology II
Orrison
Sequence studying disease processes affecting major body systems (not covered in PTH 530 – Pathophysiology I) and the resulting anatomical and pathophysiological changes. Clinical presentations
and treatment of patients with those disease processes considered, as well as diagnostic tests and laboratory values used to identify pathological conditions.

**PTH560** (2)
Topics in Comparative Religion Tompkins
This course surveys the major religious traditions of the world. Study includes an overview of origins; major philosophical and theological underpinnings; typical aspects of worship and ethics; and major social, cultural, and political influences. Study is done from a consciously Christian framework.

**PTH565** (2)
Neuroscience & Motor Control TBA/Orrison
An examination of the basic anatomy and function of the central and peripheral nervous system with an emphasis on those structures involved in the control of human movement. Students are introduced to terminology and concepts associated with normal and abnormal function of selected areas of the neuraxis. This course provides the foundation for the neurology sequence.

**PTH575** (1)
Neuroscience & Motor Control Lab TBA/Orrison
Study of the prosected central and peripheral nervous tissues, models, and charts. Imaging will be used to compare normal to abnormal CNS presentation. Portions of lab will concentrate on making connections between neurologic structures and their role in controlling human movements. Prerequisites: PTH505 and 515. Co requisite: PTH565.

**PTH580** (1)
Introduction to Orthopedic Physical Therapy Almeter
Medical lectures covering selected topics in orthopedics, including common orthopedic diseases and the use of diagnostic testing and imaging in the orthopedic field. History taking and the subjective examination are taught. Cervical and lumbar scanning exams are taught.

**PTH601** (2)
Orthopedics I Almeter
Presentation of fundamental physical therapy knowledge in the assessment and intervention of a patient with both acute and chronic conditions of the extremities. Screening of the cervical and lumbar spine are reviewed as well as progressing to complete assessment and treatment of extremity joint pathologies. Diagnostic tests and results pertinent to the orthopedic patient are related to a physical therapy differential diagnosis. Co requisite: PTH611.

**PTH602** (2)
Orthopedics II Allyn
A continuation of the presentation of information regarding orthopedic pathology of the spine with emphasis on treatment techniques for the different pathologies from a physical therapist's perspective. A decision making model focusing on a differential diagnosis is incorporated throughout the course. Co requisite: PTH612.

**PTH606** (1)
Pharmacology in Physical Therapy Orrison
Introduction to the general principles of pharmacology including pharmacokinetics and the development of a non-prescriptive knowledge of drug nomenclature, classification and medications specifically impacting physical therapy practice.

**PTH611** (2)
Orthopedics I Laboratory Almeter
Clinical application and practice in the special techniques to assess and treat acute and chronic orthopedic pathologies of the extremities and spine. Taught by working through the evaluation process, by using case studies and occasionally actual patients. Co requisite: PTH601.
PTH612
Orthopedics II Laboratory
Designed for practice of the special techniques required in the assessment of intervention of acute and chronic orthopedic pathologies of the cervical, thoracic, and lumbar spine. Co requisite: PTH602.

PTH 613
Health Promotion & Wellness II
Advanced evaluation and application of personal and interpersonal principles of leadership, prevention, health promotion, wellness and fitness for individuals, groups and communities. Synthesis of the role of Physical Therapists in teaching, learning and leadership through design and integration of a community assessment and prevention of disability service project.
Prerequisite: PTH513

PTH616
Scholarly Inquiry and Dissemination
Introduction to the principles and practice of research including: research and null hypothesis, research questions, research design, research ethics and IRB protocol, sampling, validity and reliability, methodology, hypothesis testing and critical evaluation of physical therapy literature. Knowledge of the concepts needed for writing a graduate research proposal is interwoven throughout this course to prepare students for the Capstone Project.

PTH617
Scholarly Inquiry and Dissemination
Application of the principles and practice of research, including designs, IRB, ethics, hypothesis testing and critical evaluation of clinical literature as they relate to preparation of the Capstone Research Project. Preparation and development of a graduate research proposal is interwoven throughout this course.

PTH622
Research Statistics
Fundamental procedures in data management, summarizing, presenting, analyzing, and interpreting statistical data. Statistical tests applied to medical specialties. Prerequisite: Co requisite: PTH632.

PTH625
Cardiopulmonary
Lectures covering selected topics in cardiopulmonary medicine, focusing on clinical presentation, diagnostic tests, and medical and physical therapy interventions. Co requisite: PTH635.

PTH627
Prosthetics and Orthotics
Orthotic management of individuals with disabilities requiring orthotic intervention, prosthetic management of those with upper and lower-limb amputation, and application/management of orthotic devices.

PTH632
Research Statistics Laboratory
Practice in the computation of statistical data using appropriate tests. Practical applications of techniques in research and statistical computations including probability, normal distribution, Chi Square, correlations, linear regressions and logistic regression. Co requisite: PTH622.

PTH635
Cardiopulmonary Laboratory
Emphasis on physical therapy assessment and intervention with cardiac and pulmonary patients. Practice of relevant techniques, such as stress testing, percussion, pulmonary function tests and breathing techniques, as well as other techniques identified in the Physical Therapy Guide to Practice. Co requisite: PTH625.
PTH640 (2)
Pediatrics Pawielski
An overview of embryologic development, followed by normal infant/child development to 5 years of age with an emphasis on motor development. Identification of assessment techniques for infants and children with normal and abnormal development. Description of various pediatric pathologies encountered in physical therapy with appropriate corresponding assessment and treatment approaches. Co requisite: PTH650.

PTH645 (3)
Physical Therapy Administration Aerts/Bermingham
A study of the organizational structures, operations, and financing of healthcare delivery institutions and an examination of the organization and interrelationship of their professional and support elements. Application of current health care management strategies and theory are related to the acute-care facility and independent practice.

PTH646 (2)
Spirituality in Healthcare Dent
A discussion of spiritual values from a Christian perspective, how faith and spirituality facilitate the healing process, and how these can be incorporated into patient care. Attention will be given to discerning and addressing the spiritual needs of patients/clients, family members, and ancillary medical staff in a professional environment.

PTH647 (2)
Differential Diagnosis Allyn
Analysis of the clinical decision-making process, with special focus on clinical guidelines, Physical Therapy Guide to Practice, and differential diagnosis. Differential diagnosis is addressed through comparison of systemic signs and symptoms, as well as appropriate diagnostic tests which may indicate involvement of a problem outside of the scope of PT practice.

PTH650 (2)
Pediatrics Lab Pawielski
Practice of physical therapy assessment of the infant/child that address different developmental domains. Practice in the special techniques required in assessment and treatment of pediatric patients diagnosed with selected pathologies. Introduces current treatment approaches, such as Neurodevelopmental Treatment (NDT), with their effects on treatment goals. Co- requisite: PTH640.

PTH651 (2)
Neurology I TBA
Review of basic neurophysiological mechanisms specific to nervous system dysfunction, related to clinical concepts in treatment of conditions affecting the nervous system, such as spinal cord injury, head injury, stroke, and selected peripheral pathologies. Emphasis on comparing and contrasting facilitation techniques. Co requisite: PTH661.

PTH652 (2)
Neurology II Lee
Continuation of Neurology I, focusing on assessment of and intervention in selected neurologic conditions. Common treatment techniques are compared, with rationale for use of each. Co-requisite: PTH662.

PTH661 (2)
Neurology I Laboratory TBA
Clinical application, rehabilitation practice, and techniques applied to nervous system dysfunction. Intervention techniques for conditions affecting the nervous system, such as spinal cord injury, head injury, stroke, and selected peripheral pathologies. Co requisite: PTH651.

PTH662 (2)
Neurology II Laboratory Lee
Clinical application, rehabilitation practice, and techniques applied to basic physiological and neurophysiological mechanisms specific to nervous system dysfunction. Focus on techniques
Prerequisite: PTH662. Co requisite: PTH652.

PTH670
Written Comprehensive Examination I
De Leon
Assesses the student physical therapist’s ability to understand and apply concepts from the foundational and introductory clinical sciences to the practice of physical therapy.

PTH680
Clinical Practicum
Scott
To allow for flexibility in schedule times and locations for clinical experience. It also creates more opportunity for integrated clinical experience in the curriculum. Repeatable.

PTH711
Clinical Reasoning I, Musculoskeletal
Almeter
A course intended to enhance the skills associated with clinical reasoning within the Physical Therapy setting. It will address the thought process that enter into every aspect of patient care in the practice of physical therapy, from the history to the physical exam; the differential diagnosis to the development of the prognosis; the plan of intervention to the eventual discharge. Corequisite: PTH721

PTH712
Clinical Reasoning II, Neuromuscular
TBD
A continuation of PTH711 Clinical Reasoning I. Prerequisite: PTH711 Co requisite: PTH722

PTH721
Clinical Reasoning I Laboratory, Musculoskeletal
Almeter
A continuation of PTH721 Clinical Reasoning I. Labs are designed to reinforce specific skills (evaluative or therapeutic) applicable to each lecture topic and add advanced exercises and treatments not previously covered. Corequisite: PTH711

PTH722
Clinical Reasoning II, Neuromuscular
TBD
A continuation of PTH712 Clinical Reasoning I Laboratory. Prerequisite: PTH712 Corequisite: PTH721

PTH726
Geriatrics
Stallard
Study of the unique characteristics of the geriatric patient, especially the physiological, psychological and social aspects, related to special needs in the physical therapy assessment, plan of care, and intervention.

PTH736
Psychosocial Issues in Healthcare
Baltazar
An introduction to psychosocial responses to illness and disability, especially the interpersonal relationships between the therapist, the family and the patient. Common psychiatric disorders are discussed along with their clinical diagnosis, treatment regimes, projected outcomes and methods for handling these responses in clinical situations.

PTH765
Ethical & Legal Issues in Healthcare
De Leon
Contemporary ethical issues are examined, including the relationships among peers, superiors, subordinates, institutions, clients, and patients. Illustrations include actual cases related to Christian biblical principles.

PTH768
Professional Compendium
Hess
Exploration and application of practical skills for DPT professionals; includes preparation of a professional portfolio, interviewing practice, personal financial literacy and planning, evaluating continuing education options, and preparation for professional licensure examination.
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<td>PTH770</td>
<td>0</td>
<td>Practical Comprehensive Examination</td>
<td>Almeter</td>
<td>Provides guidelines and supervision for data collection, management, analysis, thesis preparation and oral presentation. To be repeated to 3 credits.</td>
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<tr>
<td>PTH799</td>
<td>1,1,1</td>
<td>Research Project (topic)</td>
<td>Katuli</td>
<td>Provides students with guidelines and supervision for data collection, management, analysis, thesis preparation and oral presentation. To be repeated to 3 credits.</td>
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<td>PTH870</td>
<td>0</td>
<td>Written Comprehensive Examination II</td>
<td>De Leon</td>
<td>Assesses the student physical therapist’s entry level preparedness to apply the concepts of the clinical sciences to safe and effective patient-centered care in the practice of physical therapy.</td>
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<td>PTH880</td>
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<td>PT Seminar</td>
<td>Ferreira</td>
<td>Application of advanced skills from previous or new learning experiences relative to contemporary issues in physical therapy.</td>
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<td>PTH885, 886, 887</td>
<td>6,6,6</td>
<td>Clinical Education I, 2, 3</td>
<td>Scott</td>
<td>Advanced full-time clinical experience (12 weeks each) in a variety of physical therapy practice settings involving patients/clients with diseases and conditions representative of those typically seen across the lifespan and continuum of care. Prerequisite: PTH680</td>
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