Dear Faculty and Staff:

Welcome to the Andrews University Physical Therapy Department in Berrien Springs, Michigan. I, along with the faculty and staff, appreciate the interest you have shown in the program and we look forward to working with you. Your experience and education will complement that of the core and clinical faculty as we work to prepare young men and women to be future physical therapists.

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. The university has regularly scheduled chapels and it is not uncommon for faculty to pray with their students. The program facilities are closed from sundown Friday to sundown Saturday. Each Physical Therapy Faculty Council Department Meeting is started with prayer. 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 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 with our students how Christ in your life has empowered you to be excellent at what you do, whether you are a physical therapist, or not.

Finally, we want your experience at Andrews to be a positive one. To facilitate this, the Policies and Procedures Manual was developed and is regularly updated to answer questions you may have with respect to your responsibilities within the DPT program. It will also help you become aware of the university’s expectations of you. Please review these materials at your convenience.

If you have any questions regarding your responsibilities, please contact me directly. If you have questions regarding orientation, paperwork, preparation of class materials or reimbursement, please contact the program’s administrative assistant, Esther Jones, at (269) 471-6033. We trust this experience will be just as rewarding for you as it will be for our students.

Respectfully,

Kim Ferreira, PT, PhD
Physical Therapy Department Chair
Phone: 269-471-6033
Email: kimferreira@andrews.edu
Table of Contents

Introduction to Andrews University ........................................................................................................ 1
Introduction to the Department of Physical Therapy ............................................................................. 3

1. MISSION, GOALS AND STANDARDS .................................................................................. 5
   1.1. Andrews University Mission ............................................................................................... 5
   1.2. School of Health Professions Mission .............................................................................. 5
   1.3. Department Vision Statement ............................................................................................. 5
   1.4. Department Mission ........................................................................................................... 5
   1.5. Department Core Values .................................................................................................... 5
   1.6. Entry-Level DPT Statement of Philosophy ................................................................. 5
       1.6.1. The DPT Curriculum Plan Philosophy ...................................................................... 6
       1.6.2. The DPT Graduate Philosophy ................................................................................. 6
   1.7. DPT Program Goals ........................................................................................................... 7
   1.8. DPT Faculty Goals ............................................................................................................ 7
   1.9. DPT Student Learning Outcomes ...................................................................................... 7
   1.10. Student Technical Standards of Performance .................................................................. 8
       1.10.1. Psychomotor Skills .................................................................................................... 8
       1.10.2. Cognitive Skills ......................................................................................................... 9
       1.10.3. Communication Skills ............................................................................................ 9
       1.10.4. Behavioral Skills ..................................................................................................... 10

2. OPERATIONS .......................................................................................................................... 11
   2.1. Faculty & Staff .................................................................................................................... 11
   2.2. Policies and Procedures Manual ....................................................................................... 12
       2.2.1. Purpose of Policies and Procedures ........................................................................... 12
       2.2.2. Related Handbooks .................................................................................................. 12
   2.3. Admissions: Entry-level DPT Program .............................................................................. 13
       2.3.1. DPT Application Timeline ....................................................................................... 13
       2.3.2. DPT Admissions Decisions ....................................................................................... 13
       2.3.3. DPT Acceptance ....................................................................................................... 13
       2.3.4. Deferment ................................................................................................................ 13
       2.3.5. Freshman Acceptance ............................................................................................... 14
   2.4. Admissions: Postprofessional Program ........................................................................... 14
       2.4.1. Transitional Doctor of Physical Therapy (t-DPT) .................................................. 14
       2.4.2. Doctor of Science in Physical Therapy (DScPT) .................................................. 14
   2.5. Staff Requirements ............................................................................................................ 15
   2.6. Program Office Personnel ................................................................................................ 15
       2.6.1. Administrative Assistant .......................................................................................... 15
       2.6.2. Operations Assistant ................................................................................................ 16
       2.6.3. Clinical Education Assistant .................................................................................... 17
   2.7. Admissions Office Personnel ............................................................................................. 17
   2.8. Faculty Classifications ....................................................................................................... 17
       2.8.1. Core Physical Therapy Faculty .................................................................................. 18
       2.8.2. Associated Physical Therapy Faculty ....................................................................... 18
       2.8.3. Guest Lecturers ....................................................................................................... 19
       2.8.3.1. Guest Compensation ............................................................................................ 19
       2.8.4. Lab Instructor/Assistant ............................................................................................ 19
       2.8.5. Clinical Faculty ........................................................................................................ 19
   2.9. Track Coordinators ............................................................................................................ 20
   2.10. Faculty Mentor .................................................................................................................. 20
   2.11. Faculty Orientation ............................................................................................................ 20
   2.12. Faculty Committee Membership and Attendance ...................................................... 20
   2.13. Faculty Workload ............................................................................................................ 21
   2.14. Faculty Professional Development Policy ......................................................................... 21
   2.15. Vacations and Holidays ................................................................................................... 21
   2.16. Faculty and Staff Travel Policies ..................................................................................... 21
   2.17. Schedules and Class Rosters ............................................................................................ 22
       2.17.1. TBA (To Be Arranged) Class Periods ..................................................................... 22
   2.18. Equal Rights for Hired Personnel ................................................................................... 22
   2.19. Access to Personnel Files ................................................................................................ 22
   2.20. Core Faculty Assessment ................................................................................................ 23
2.21. Faculty Evaluation Check Sheet ................................................................. 23
2.22. Director of Clinical Education (DCE) Evaluation ..................................... 24
2.23. Research Track Coordinator Evaluation .................................................... 25
2.24. Department Chair Evaluation ..................................................................... 25
2.25. Faculty Annual Review ............................................................................... 25
2.26. Faculty Academic Freedom ......................................................................... 26
2.27. Individual Rights and Safety ........................................................................ 26
2.28. General Complaint Procedure ..................................................................... 26
2.29. University Grievance Procedures ................................................................. 26
   2.29.1. Resolution through Informal Discussion (Step 1) .................................... 26
   2.29.2. Written Grievance to Immediate Supervisor (Step 2) ............................ 27
   2.29.3. Written Grievance to President (Step 3) ............................................... 27
   2.29.4. Hearing of Grievance by a Grievance Committee (Step 4) ....................... 27
   2.29.5. Grievance Committee Report to President/Board of Trustees Chair (Step 5) .. 28
   2.29.6. Judgment on the Grievance (Step 6) ..................................................... 28
2.30. Student Rights and Responsibilities ............................................................. 28
2.31. Risk Situations ............................................................................................ 28
   2.31.1. Dropping Out ....................................................................................... 28
   2.31.2. Informed Consent ................................................................................. 28
2.32. Student Problem Resolution ....................................................................... 29
2.33. Student Grievance Procedure ..................................................................... 29
2.34. Discrimination and Harassment (Including Sexual Harassment) .................. 30
2.35. Right to Ombudsperson ............................................................................. 30
2.36. Use of Protected Information ..................................................................... 30
2.37. Human Subjects .......................................................................................... 30
2.38. Drug-Free Workplace ................................................................................. 31
2.39. Personal Safety ........................................................................................... 31
2.40. Safe Working Environment ....................................................................... 31
2.41. Injuries ....................................................................................................... 31
2.42. Faculty Liability .......................................................................................... 31
2.43. Personal Property ....................................................................................... 31
2.44. Supplies ..................................................................................................... 32
2.45. Faculty/Staff Telephone Orientation ........................................................... 32
2.46. Student Use of Telephones ........................................................................ 32
   2.46.1. Outgoing Calls .................................................................................... 32
   2.46.2. Incoming Calls .................................................................................... 32
   2.46.3. Department of Physical Therapy “800” Number ..................................... 32
2.47. Computers .................................................................................................. 32
2.48. Office and Audiovisual Equipment ............................................................. 32
   2.48.1. Audio-Visual Equipment ..................................................................... 32
   2.48.2. Office Equipment ............................................................................... 33
2.49. Photocopiers ............................................................................................... 33
2.50. Equipment Inventory ................................................................................ 33
2.51. Equipment Purchase ................................................................................ 33
2.52. Equipment Maintenance .......................................................................... 33
2.53. Equipment Loans ...................................................................................... 33
2.54. Hazardous Materials ................................................................................ 33
2.55. Program Resources ................................................................................... 33
2.56. Office Hours: Facility ................................................................................. 34
2.57. Office Hours: Faculty ............................................................................... 34
2.58. Facility Access ............................................................................................ 34
2.59. Facility Maintenance ................................................................................ 34
2.60. Facility Extracurricular Use ....................................................................... 34
2.61. Student Use of Facilities ........................................................................... 34
   2.61.1. Dining ................................................................................................. 35
   2.61.2. Anatomy Lab ...................................................................................... 35
   2.61.3. Use of Bicycles, Roller-skates, Roller blades, Skateboards, etc. ............... 36
   2.61.4. Pets ..................................................................................................... 36
   2.61.5. Student Computer Resources ............................................................. 36
   2.61.6. Student Personal Use of Department Facilities ..................................... 36
   2.61.7. Student Facility Access ....................................................................... 36
2.62. Student Lockers ........................................................................................ 37
2.63. Bulletin Boards ......................................................................................... 37
  2.63.1. Program Bulletin Board ......................................................................... 37
  2.63.2. Career Opportunities Announcements .................................................. 37
  2.63.3. Housing, Licensure and Scholarship Bulletin Board ............................... 37
  2.63.4. Student Bulletin Boards ......................................................................... 37
2.64. Mail Service ............................................................................................... 37
2.65. Student Mailboxes ..................................................................................... 37
2.66. Student Email ............................................................................................ 37
2.67. Faculty/Staff Parking .................................................................................. 38
2.68. Student Parking .......................................................................................... 38
2.69. Program Safety .......................................................................................... 38
  2.69.1. Fire ......................................................................................................... 38
  2.69.2. Evacuation procedure for emergency exit: .............................................. 38
  2.69.3. Tornado ................................................................................................ 39
  2.69.4. First-Aid ................................................................................................ 39
  2.69.5. Universal Precautions .......................................................................... 39
3. ACADEMICS ................................................................................................. 41
  3.1. Program Planning and Assessment .............................................................. 41
  3.2. Physical Therapy Faculty Council .............................................................. 41
    3.2.1. Attendees with Voting Privileges ............................................................ 41
    3.2.2. Ex-officio and Other Invitees Without Voting Rights ............................ 41
  3.3. Physical Therapy Professional Degree Council (PTPDC) ............................ 41
  3.4. Curriculum Review Committee ................................................................ 41
    3.4.1. Committee membership: ...................................................................... 41
    3.4.2. Responsibilities ...................................................................................... 42
    3.4.3. Information sources .............................................................................. 42
  3.5. Policies and Procedures Review .................................................................. 43
  3.6. Accreditation Standards ........................................................................... 43
  3.7. PT Postprofessional Curriculum Review .................................................... 43
  3.8. Academic Terms ........................................................................................ 43
  3.9. DPT Class Calendar ................................................................................... 43
  3.10. DPT Curriculum Outline ......................................................................... 43
  3.11. DPT Course Description Outline ............................................................. 43
  3.12. DPT Class Schedule ................................................................................ 43
    3.12.1. Laboratory Scheduling ....................................................................... 43
    3.12.2. To Be Arranged (TBA) Schedule .......................................................... 44
    3.12.3. Schedule Changes .............................................................................. 44
  3.13. Student Work Schedules ......................................................................... 44
  3.14. Registration Procedures .......................................................................... 44
  3.15. Pre-PT Student Advising ........................................................................ 44
  3.16. DPT Faculty Advising Responsibilities ..................................................... 44
    3.16.1. Assignment of Advisors ..................................................................... 45
    3.16.2. Changing Advisors ............................................................................ 45
    3.16.3. Advisor Responsibility ....................................................................... 45
  3.17. Postprofessional Program Advising ........................................................... 45
  3.18. Professional Expectations ....................................................................... 45
    3.18.1. Professional Behaviors ....................................................................... 46
    3.18.2. Department Core Values .................................................................... 47
  3.19. Purpose of the Professional Development Portfolio (PDP) ...................... 47
  3.20. Procedures for the PDP ........................................................................... 48
  3.21. Preparation of Teaching Materials ............................................................. 48
    3.21.1. Typing ................................................................................................ 48
    3.21.2. Photocopying ..................................................................................... 48
    3.21.3. Fax Machine ...................................................................................... 49
    3.21.4. Textbook Selection and Ordering ......................................................... 49
    3.21.5. Course Syllabus ................................................................................ 49
    3.21.6. Course Outline/Handouts .................................................................. 49
  3.22. Evaluation of Teaching .......................................................................... 50
    3.22.1. Course Evaluation by Students ............................................................ 50
    3.22.2. Core Faculty Self-Evaluations .............................................................. 50
    3.22.3. Peer Evaluations .............................................................................. 50
    3.22.4. Associated Faculty Evaluations ......................................................... 50
4. INSTRUCTION ........................................................................................................51
  4.1. Teaching Responsibilities of all Faculty Members ........................................51
      4.1.1. Integration of Faith and Learning ..........................................................51
      4.1.2. Philosophical Foundation for Teaching ................................................51
      4.1.3. Designs Credible Course Content .........................................................51
      4.1.4. Implements Effective Course Content .................................................51
      4.1.5. Assesses Student Learning .................................................................51
      4.1.6. Reflects on Practice and Refine Course Content ...............................51
      4.1.7. Builds Relationships With Students .....................................................51
      4.1.8. Continues Professional Development .................................................51
  4.2. Students as Patient Simulators ......................................................................51
  4.3. Client/Patient Agreement Form ..................................................................52
  4.4. Instructional Technology .............................................................................52
      4.4.1. Audio-Visual Materials ......................................................................52
      4.4.2. James White Library ..........................................................................52
      4.4.3. Learning Hub ......................................................................................53
      4.4.4. Photocopy Copyright Policy ...............................................................53
          4.4.4.1. Multiple Copies for Classroom use ............................................53
          4.4.4.2. Definitions: .................................................................................53
          4.4.4.3. Prohibitions: ..............................................................................54
  4.5. Class Decorum ...............................................................................................54
      4.5.1. Responding to Students ......................................................................55
      4.5.2. Discipline ............................................................................................55
      4.5.3. Accountability ......................................................................................55
  4.6. Classroom Behavioral Policies and Procedures ..........................................55
      4.6.1. Starting and Ending Class ..................................................................55
      4.6.2. Breaks During Extended Lecture Periods ..........................................56
  4.7. Classroom Maintenance ...............................................................................56
  4.8. Assumption of Risk / Day Trip Form .........................................................56
  4.9. Class Attendance ..........................................................................................56
  4.10. Testing ..........................................................................................................56
      4.10.1. Quizzes ..............................................................................................57
      4.10.2. Examinations .....................................................................................57
  4.11. Test Development .......................................................................................57
  4.12. Test Procedures ...........................................................................................58
      4.12.1. Preparation ........................................................................................58
      4.12.2. Administering Exams/Quizzes ..........................................................58
      4.12.3. Test Information ................................................................................58
  4.13. Make-Up Exams or Quizzes .......................................................................58
  4.14. Class Absences ............................................................................................59
      4.14.1. Excused Absences ..........................................................................59
      4.14.2. Unexcused Absences .....................................................................59
  4.15. Class Cancellation: AU Alert .................................................................59
  4.16. Academic Integrity ......................................................................................60
  4.17. Recording of Lectures by Students .............................................................60
  4.18. Grading System ...........................................................................................61
      4.19. Grading/Scoring of Exams ..................................................................61
          4.19.1. Grading Percentage Guidelines ....................................................61
          4.19.2. Final Grade Calculation ...............................................................61
      4.20. Posting Scores or Grades ........................................................................61
          4.20.1. Course Grades ..............................................................................62
          4.20.2. Grade Problems ............................................................................62
  4.21. Late Grades ..................................................................................................63
      4.21.1. Research Project ...............................................................................63
      4.21.2. Internship Grades .............................................................................63
  4.22. Unsatisfactory Scholarship .........................................................................63
  4.23. Grade Points Scale (not GPA) ..................................................................63
  4.24. Course Remediation Plan Policy ...............................................................63
  4.25. Bachelor of Health Science Scholastic Requirements (First 2 Semesters) ..63
  4.26. Doctoral Admission Requirements ............................................................64
  4.27. Graduate Scholastic and Professional Requirements (Last 7 Semesters) ...64
  4.28. Licensure .....................................................................................................64
4.34. Capstone ................................................................. 66
   4.34.1. Capstone Curriculum ........................................ 66
   4.34.2. Capstone Partners ............................................ 66
   4.34.3. Capstone Committee .......................................... 66
   4.34.4. Institutional Review Board (IRB) ......................... 66
   4.34.5. Capstone Completion ....................................... 67
   4.34.6. Capstone Research Expense .............................. 67
   4.34.7. Capstone post-graduation presentation and publication 67
   4.34.8. Capstone University Ownership .......................... 67

4.35. Practical Comprehensive Exams (OSCE) .......................... 68
   4.35.1. Registration .................................................. 68
   4.35.2. Emphasis ..................................................... 68
   4.35.3. Format ....................................................... 68
   4.35.4. Administration .............................................. 68
   4.35.5. Content ..................................................... 68
   4.35.6. Schedule .................................................... 68
   4.35.7. Grading ....................................................... 69
   4.35.8. Remediation .................................................. 69
   4.35.9. Failure to pass the practical examination ............... 69

4.36. Written Comprehensive Exams .................................... 69
   4.36.1. Registration .................................................. 69
   4.36.2. Format ....................................................... 69
   4.36.3. Grading and Remediation .................................. 69
   4.36.4. Student Notification of Results .......................... 70

4.37. Clinical Education .................................................. 70
   4.37.1. Clinical Education Handbook ............................ 71
   4.37.2. Clinical Assignments ..................................... 71
   4.37.3. Clinical Communications .................................. 71
   4.37.4. DCE Clinical Site Visits ................................ 71
   4.37.5. Clinical Practicum ....................................... 71
   4.37.6. Clinical Internships ...................................... 71
   4.37.7. Clinical Education Agreement ............................ 71
   4.37.8. Confidential Student Information ....................... 72
   4.37.9. Clinical Facility Requirements .......................... 72
   4.37.10. Clinical Attire ............................................ 72
   4.37.11. Personal Injury Procedure .............................. 73

4.38. Graduation ............................................................... 73
   4.38.1. Baccalaureate (BHS Degree) .............................. 73
   4.38.2. Graduate (DPT Degree) ................................... 74

4.39. Student Evaluation of Program/Curriculum ...................... 74
   4.39.1. Course/Teacher Evaluations ............................... 74
   4.39.2. Graduate Exit Survey ..................................... 75
   4.39.3. Alumni Survey ............................................. 75

5. STUDENT EXPERIENCE .................................................. 77
   5.1. Campus Services .................................................. 77
      5.1.1. Campus Cafeteria and Gazebo (ext. 3161) ............... 77
      5.1.2. Campus Ministries (ext. 3211) .......................... 77
      5.1.3. Campus Safety (ext. 3321) ............................... 77
      5.1.4. Campus Store (ext. 3287) ................................ 77
      5.1.5. Computer Lab (ext. 6020) ................................ 77
      5.1.6. Counseling and Testing Center (ext. 3470) ............ 77
      5.1.7. Health Services (473-2222) ............................ 78
      5.1.8. Housing Information .................................... 78
      5.1.9. International Student Services (ext. 6378) ........... 78
      5.1.10. Intramurals (ext. 6568) ............................... 78
      5.1.11. Library Services (ext. 3275) ........................... 78
5.11.2. Student Financial Services (ext. 3334) ......................................................... 78
5.11.3. Student Success Center (ext. 6036) ................................................................. 78
5.11.4. Students With Disabilities (ext. 3227) ............................................................. 78
5.11.5. Writing Center (ext. 3358) .............................................................................. 79
5.11.6. Notary Services (ext. 6490) ............................................................................. 79
5.2. Communication .................................................................................................79
5.3. Student Class Clubs .........................................................................................79
5.3.1. Election of Student Club Officers ................................................................... 79
5.3.2. President ........................................................................................................ 79
5.3.3. Vice President ............................................................................................... 79
5.3.4. Academic Coordinator ................................................................................ 79
5.3.5. Secretary ........................................................................................................ 79
5.3.6. Treasurer ....................................................................................................... 79
5.3.7. Chaplain(s) ..................................................................................................79
5.3.8. Social Representative & Sports Coordinators .............................................. 80
5.3.9. APTA Representative ................................................................................... 80
5.3.10. Historian/Photographer ............................................................................... 80
5.3.11. Community Outreach & Volunteer Coordinator(s) ................................... 80
5.3.12. Student Club Responsibilities ..................................................................... 80
5.3.13. Student Club Faculty Sponsor ................................................................... 80
5.3.14. Student Club Participation in PT Faculty Council ...................................... 81
  5.3.14.1. Privilege .................................................................................................. 81
  5.3.14.2. Voting ..................................................................................................... 81
5.3.15. Student Class Club Account ........................................................................ 81
5.4. Departmental Assemblies .............................................................................. 81
5.5. PT Student Dress Policy .................................................................................. 81
5.5.1. University Dress Code .................................................................................. 81
5.5.2. Anatomy Lab Attire ..................................................................................... 82
5.5.3. PT Lab Attire ................................................................................................. 82
5.5.4. Clinical Attire ................................................................................................ 83
5.6. Transportation .................................................................................................. 83
5.7. Prospective Students ....................................................................................... 83
5.8. Accepted and Enrolled Students ..................................................................... 83
5.9. Student Handbooks ........................................................................................ 83
5.10. Recruitment of PT Students .......................................................................... 83
  5.10.1. Bulletin Board ............................................................................................. 84
  5.10.2. Email Job Postings ..................................................................................... 84
  5.10.3. Health Careers Fair .................................................................................... 84
5.11. Program Application Fee(s) & Deposit ........................................................... 84
  5.11.1. Tuition & Professional Education Fees ..................................................... 84
  5.11.2. Medical Insurance ...................................................................................... 85
  5.11.3. Student Internship Expenses .................................................................... 85
  5.11.4. Syllabus Photocopy Expenses .................................................................. 85
  5.11.5. Other Financial items ................................................................................ 85
5.12. Professional Organizations .......................................................................... 85
  5.12.1. APTA ......................................................................................................... 85
  5.12.2. Michigan Chapter or MPTA ...................................................................... 86
  5.12.3. APTA/MPTA Meetings and Conferences .................................................. 86
  5.12.4. APTA Combined Sections Meeting ............................................................ 86
  5.12.5. Annual Meeting and Scientific Exposition of the APTA ......................... 86
  5.12.6. APTA Student Conclave ......................................................................... 86
  5.12.7. Michigan Chapter Meetings ...................................................................... 87
  5.12.8. Western District Meetings ....................................................................... 87
  5.12.9. Commission on Accreditation in Physical Therapy Education (CAPTE) ... 87

APPENDICES ........................................................................................................89
2016 DPT Curriculum Track ...............................................................................91
DPT Curriculum Outline for the Class of 2018 ..................................................... 93
Completion of Faculty Orientation ...................................................................... 95
Curriculum Vitae ..................................................................................................97
Sample Abbreviated Resume and Teaching Confirmation .................................101
Writing Behavioral Objectives ..........................................................................103
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.) ¹

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 department chair if you have questions relating to this handbook or the Physical Therapy Department here at Andrews University.

Introduction to the Department of Physical Therapy

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 remodeled PT Building, except for the Anatomy Lab, which remained in Halenz Hall in the Science Complex.

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.

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.

Bill Habenicht resigned in 2002, and Wayne Perry and Daryl Stuart became co-chairs of the PT Department. In July of 2002, Daryl Stuart resigned, and Wayne Perry became the PT department 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.

For three years, between 2001 and 2002, the department offered an Advanced Masters of PT (AMPT). A total of five students graduated from the AMPT program. The AMPT was the precursor to the current Postprofessional Program under the direction of Kathy Berglund.

In 2002, the PT Department 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 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: Wellness after two semesters in the DPT program. The first cohort of DPT students started classes in 2002, with 12 students.

Also in 2002, the PT Department 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 PT Department for the use of Postprofessional and Orthopedic courses. The PT Department 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.

Wayne Perry retired in 2013. Kimberly Ferreira, then the director of clinical education, was hired as the new department chair.

The new Anatomy Lab opened in the Fall of 2014, after remodeling additional space from the Custodial Department Warehouse. This brings 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 students.

The PT Department 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
- * Orthopedic Residency for graduates seeking to advance their professional preparation

* degrees offered through the PT Department’s Postprofessional Program

From 2005-2015, 316 students have earned a Doctor of Physical Therapy from Andrews University.
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. ²

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. School of Health Professions Mission
To provide excellence in education for health care professions that fosters collaboration, research, and service within a Christ-centered environment. ³

1.3. Department Vision Statement
Uniting Christianity with Healthcare Education.

1.4. Department Mission
To empower students who dream of becoming excellent physical therapists.

1.5. Department 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

1.6. Entry-Level DPT Statement of Philosophy
The Entry-Level Doctor of Physical Therapy program affirms the mission and values of Andrews University and the School of Health Professions in its desire to educate professionals for generous service to others with a faithful witness to Christ.

The Andrews University department of physical therapy 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.

1.6.1. 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 the 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.

1.6.2. 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 in order 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.

1.7. **DPT Program Goals**  
In order to achieve the Physical Therapy Department 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.

1.8. **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.

1.9. **DPT Student Learning Outcomes**  
In accordance with the Physical Therapy Department 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.

1.10. **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:

1.10.1. **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.

1.10.2. 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.

1.10.3. 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.
1.10.4. 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 the PT Department:

Department Chair and DPT Program Director:
Kim Ferreira, PT, PhD
Associate Professor
(269) 471-6033

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

Orthopedic Coordinator:
Greg Almeter, MSPT, OCS, DScPT
Associate Professor
(269) 471-6552

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

Behavioral Science Coordinator:
Caryn F. Pierce, PT, MSPT, JSCC, BCSI, MTC
Assistant Professor
(269) 471-6302

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

Clinical Science Coordinator:
Betty Oakley, MSPT, DHSc
Associate Professor
(269) 471-6301

Neurology Coordinator:
Lee Olson, MPT, DC
Associate Professor
(269) 471-6491

General Medicine Coordinator:
David Village, MSPT, DHSc, GCS
Professor
(269) 471-6073

Admissions Director:
Jillian Panigot, BS
(269) 471-6490

Administrative Assistant:
Esther Jones, AS
(269) 471-6033

Clinical Education Assistant:
Cristina Wilson
(269) 471-6551

Operations Assistant:
Penny Sisson, BS
(269) 471-6061

Postprofessional Program Director:
Valerie Coolman, PT, DScPT, OCS, FAAOMPT
Associate Professor
(269) 471-6076

Postprofessional Operations Coordinator & Advisor
Stefanie Marschner, MA
(269) 471-6305
Faculty, staff and students in the Physical Therapy department 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 Physical Therapy Department 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 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 Physical Therapy Department office.
- Associated Faculty Handbook
  [https://www.andrews.edu/shp/pt/zzz-pdf/dpt_associate_faculty.pdf](https://www.andrews.edu/shp/pt/zzz-pdf/dpt_associate_faculty.pdf)
- DPT Student Handbook
- DPT Clinical Education handbook
  [https://www.andrews.edu/shp/pt/entry-level/2015-2016-ceh.pdf](https://www.andrews.edu/shp/pt/entry-level/2015-2016-ceh.pdf)
- Postprofessional Student Handbook
2.3. **Admissions: Entry-level DPT Program**

The DPT program goal is to accept 40 students in each cohort.

2.3.1. **DPT Application Timeline**

Students interested in the DPT entry-level program must apply via the online application service found at [www.ptcas.org](http://www.ptcas.org). The admissions cycle begins each year on July 1. The application deadline for the AU entry-level PT program is October 15, but eligible applicants will be considered on a "rolling admissions" process beginning as soon as applications are received from PTCAS. The rolling admissions applicant class size timeline is based on the combined Science and Core GPAs (see Applicant Funnel in Appendix). All application prerequisite requirements are to be submitted by July 1 of the admissions cycle.

2.3.2. **DPT Admissions Decisions**

Minimum criteria for the Physical Therapy Faculty Council (PTFC) admissions committee consideration are: completed 64 credits documented by official transcripts found in PTCAS, completed 5 of the 9 science courses, a minimum Science/Core GPA of 3.2, and three references. Information presented to the PTFC will include the applicant’s name, Science and Core GPAs, academic degree status, and SDA affiliation. In keeping with the university mission and dedication to Christian environment, priority will be given to SDA Christian students, when all other individual attributes are equal.

Religious preference is not used as a university or PT Admissions criteria. Andrews University does not discriminate in admissions on the basis of race, color, national origin, sex, disability, religion, age, veteran status, or any other legally protected status in Michigan or federal law.

2.3.3. **DPT Acceptance**

Once a decision is made, the student will receive a phone call and email from the admissions director, informing the student of the decision of the Faculty Council. If the student is accepted, the acceptance will be provisional until the GRE, observation hours, and final prerequisite transcripts, have been received. At that time the acceptance will become regular. Included with the provisional acceptance email will be a list of missing documents or prerequisite courses, the date the confirmation deposit is due in the Admissions Office and directions on how the student can view the DPT Student Handbook prior to submitting their deposit.

Students who have been accepted will also receive a series of emails outlining additional information needed to prepare them to enter the DPT program. These emails include financial aid, housing, curriculum information, and a schedule for the professional program.

2.3.4. **Deferment**

1. Deferment is normally awarded for only one year to an applicant who has been accepted into the professional program. Deferments are usually given for a student to serve as a student missionary. Occasionally, students request deferment for major life events such as a death in the immediate family, or a personal event such as getting married or the birth of a child.

2. Any other deferments must be approved by the Physical Therapy Faculty Council.

3. A plan must be in place with the admissions director for completion of any admissions requirements before the deferment is accepted.

4. A confirmation deposit must be in place to hold the deferred applicant’s position for the next year.

5. The Admissions Office must be informed of a current postal and email address and phone numbers where the applicant can be reached during the deferred year.
6. Deferred applicants must confirm to the admissions director, in writing or by email, of their intention to return to take their place in the following cohort. This written notice must be received by March 31 of the following cycle, or that seat will be given to another applicant.

7. Students who defer are counted as part of the 40-student cohort for the following admission cycle.

2.3.5. Freshman Acceptance
Freshman Acceptance or Guaranteed Acceptance applies to Andrews University Freshman who meet the following criteria:

1. Enroll during their first semester as a freshman to Andrews University School of Health Professions as a pre-physical therapy major.
2. Complete at least 90% of prerequisite course work at Andrews University (See the DPT Prerequisite Course List) while attending full time.
3. Complete 80 observation hours in three practice settings, and submit documentation.
4. Uphold university standards and display professional behavior.
5. Earn a minimum Science and Core GPA of 3.4.
6. Have no repeats.
7. Attend all pre-PT assemblies.
8. Submit application via www.ptcas.org by October 15 deadline.
9. No interview is required since these students become well-known as they are regularly advised by AUPT admissions staff.
10. No confirmation deposit is required.

2.4. Admissions: Postprofessional Program
The Transitional Doctor of Physical Therapy (t-DPT) and the Doctor of Science in Physical Therapy (DScPT) programs are designed to provide practicing physical therapists with the opportunity to obtain Postprofessional studies and an advanced clinical doctoral degree in the field of their discipline without the need to terminate or significantly change their regular employment or lifestyle. Classes are either taught in a short-course format of no more than six days per session, or by distance learning. All courses may be taken to earn academic credit or continuing education units (CEUs).

2.4.1. Transitional Doctor of Physical Therapy (t-DPT)
The minimum requirements to be considered for admission are:

1. Hold current licensure as a physical therapist in U.S. or Canada.
2. Submit graduate application.
3. Submit a minimum of three satisfactory recommendations: one from a currently practicing physical therapist, one from a medical doctor, and one from another person familiar with the candidate.
4. Graduate of an accredited physical therapy school.
5. Receipt of GRE scores taken within the last 5 years.
6. For candidates holding a bachelor’s degree with no advanced master’s, receipt of PTET scores.

2.4.2. Doctor of Science in Physical Therapy (DScPT)
This degree is designed to prepare the clinical specialist in orthopedic manual therapy and incorporates courses from the North American Institute of Orthopedic Manual Therapy.

The minimum requirements to be considered for admission are:

1. Hold current licensure as a physical therapist in U.S. or Canada.
2. Proof of employment in an orthopedic setting, at least 20 hours per week.
3. Submit graduate application.
4. Submit a minimum of three satisfactory recommendations: one from a currently practicing physical therapist, one from a medical doctor, and one from another person familiar with the candidate.
5. Graduate of an accredited physical therapy school.
6. Receipt of GRE scores taken within the last 5 years.
7. For candidates holding a bachelor's degree, with no advanced master's, receipt of PTET scores.
8. For candidates holding a master's degree, receipt of professional portfolio.

2.5. **Staff Requirements**
AUPT staff will be sufficient in number and qualifications to meet the operational needs of the department. DPT staff positions will include an administrative assistant, an operations assistant a clinical education assistant, and director of admissions. PPPT staff will include an operations coordinator-advisor.

2.6. **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 Physical Therapy Department each have specific administrative responsibilities vital to the day-to-day operations of the department and the program on this campus.

2.6.1. **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 Physical Therapy Student 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 vitas 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.

2.6.2. Operations Assistant
The full-time operations assistant is responsible to the department chair. Responsibilities include:
1. Serves as the primary program receptionist and triage person.
2. Assists with orientation for first-year students in the professional program.
3. Assists students with registration activities in the professional program.
4. Develops the class schedule which includes times for classes, laboratories, final examinations, TBAs, and special activities involving instructors, students, and the Physical Therapy department facilities and equipment.
5. Assigns classrooms, laboratories, equipment and facilities as needed.
6. Arranges with the Student Life Office for necessary chapel/assembly excuses for students.
7. Assigns faculty advisors.
8. Coordinates department events/social activities including the semi-annual auxiliary faculty banquet.
9. Proctors exams and make-up exams.
10. Technology coordinator.
11. Briefs the chair on information from faculty, staff and students.
12. Backup for administrative assistant.
13. Monitors program office and student lobby photocopiers and initiates service calls.
14. Purchases items and oversees assembly of students’ AUPT kits.
15. Assigns student lockers and key assignments.
16. Maintains general information bulletin board across from the mailboxes.
17. Arranges for student photographs, video, and audio recordings made for program use.
18. Processes paperwork for student APTA memberships.
19. Assists students with the graduation paperwork.
20. Prepares Advancement to Candidacy and Completion of Project for graduates.
21. Organizes research presentations and poster presentations by creating invitations, programs and ordering catering.
22. Coordinates schedule, handouts, quizzes, and tests for contract teachers.
23. Orders, receives and maintains teaching and office supplies.
24. Manages the department's petty cash.
25. Manages the building access and security.
26. Verifies that students in DPT program are registered every semester.
27. Oversees maintenance of PT building and submits work orders when needed.
29. Supervise & maintains student custodial workers in PT building.
30. Processes program capital expenditure requests, purchase orders, check requests and monitors, approves and processes invoices for payment.
31. Time keeper – enters and monitors labor hours for staff, graduate assistants and student workers.
32. Prepares and presents state board review exam information to students.

2.6.3. Clinical Education Assistant
The part-time clinical education assistant is primarily responsible to the DCE and the program director. Responsibilities include:
1. Records clinical sites used for practicums and internships.
2. Monitors all forms and paperwork involved with clinical education.
3. Files incident reports for students injured while on clinical rotations.
4. Arranges and monitors student health records including physicals, CPR certification, Hepatitis B, TB immunizations and other clinical requirements.
5. Orders name tags for internships.
6. Schedules pre- and post-clinical conferences with the DCE before and after each clinical.
7. Assists students with State Board licensing paperwork including proof of academic achievements, verification of graduation and AIDS education, and other requirements.
8. Assists students with issues related to the PT computer lab.
10. Maintain site affiliations/contracts.
11. Update CPI prior to every internship.
12. Assist with preparations for PHTH120 Intro to PT course Spring Semester.

2.7. Admissions Office Personnel
The Physical Therapy Department 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 Physical Therapy department chair, faculty and staff on admissions policies, procedures and strategies.
4. Carries responsibility for the development of all admissions materials for the department of Physical Therapy.
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 Physical Therapy chair for approval.

2.8. Faculty Classifications
The Andrews University Physical Therapy Department affords five general opportunities for instruction which include:
2.8.1. Core Physical Therapy Faculty
Those individuals appointed to and employed primarily in the PT department. Each of these faculty teach as well as perform additional functions in the physical therapy department. Some of their additional responsibilities include:
1. Serve as track coordinator of a specialty area of physical therapy practice/education.
2. Establish academic regulations and design, implement and evaluate the curriculum.
3. Advise students.
4. Serve on university/school/department committees.
5. Perform research and other scholarly activities.
6. Other administrative responsibilities as needed.

2.8.2. Associated Physical Therapy Faculty
In this role the instructor teaches most, if not all, of a course. Lecture courses can range from one to four credits. Each lecture credit is calculated as 16 contact hours per semester. A two-credit lecture course meets for approximately 30-32 hours during the semester. Most laboratory courses range from one to three credits. Each laboratory credit is calculated as 30-45 contact hours per semester. Instructors usually divide two or more credit labs into two or more sessions per week to guard against overloading students.

The instructor’s responsibilities include:
1. Provide the department chair with current CV in CAPTE format.
2. Development or revision of the existing Course Syllabus to meet the needs of the curricular plan, student, and accrediting bodies. Of particular importance are the course objectives. The track coordinator or department chair will assist with this task.
3. Insuring that the program office has a copy of any course-related material distributed to the students.
4. Providing exam and quiz questions as appropriate.
5. Contacting and arranging for any additional guest instructors who may be teaching a lecture or semester in a course and securing approval from the track coordinator or department chair before the semester begins.
6. Leaving the instruction areas neat and orderly with equipment and supplies put away.
7. Attending weekly faculty council meetings for purposes of sharing experiences, insights and monitoring progress across the student body.
8. Associated Faculty Handbook: Upon employment, all DPT associated faculty who teach 50% or more of a course are given a copy of the Physical Therapy Associated Faculty Handbook, which identifies university and departmental resources, expectations, policies, and procedures. The program administrator is responsible to review this handbook with the associated faculty.
9. Associated Faculty Assessment: To improve teaching, all associated faculty who teach 50% or more of a course will be assessed through a course evaluation completed by the students near the end of each semester. The program administrator will summarize the results of the evaluation and provide this feedback to the associate faculty member for their personal growth and to improve teaching effectiveness and future interaction with students. Copies of these evaluations are sent to the dean of the School of Health Professions and the associated faculty member’s personnel file.
10. All associated faculty who teach less than 50% of a course are under the guidance and supervision of the track coordinator and/or course instructor. It is expected that the track coordinator/instructor will guide and mentor their respective associated faculty members and administer a Peer Evaluation of Teaching annually.
2.8.3. **Guest Lecturers**
Throughout the academic portion of the program, individuals with recognized expertise in select areas are regularly invited to instruct the Physical Therapy students. This complements the expertise of the regular faculty and enhances the quality of instruction to the students. Guest lecturer presentation formats can vary, including anything from a pure lecture to small group interaction, to a multimedia presentation. It is the guest lecturer’s responsibility to make the primary instructor, track coordinator, or the operations assistant aware of space, material, and AV needs well in advance of the scheduled presentation time.

A guest lecturer’s responsibilities include:
1. Preparing a brief list of instructional objectives for your presentation.
2. Insuring that the program office has a copy of everything you distribute to the students.
3. Providing possible exam questions related to the content of your presentation to the track coordinator or department chair.

2.8.3.1. **Guest Compensation**
If you are planning to use a guest lecturer or a patient/lab subject in the classroom/laboratory, you must personally make arrangements for their compensation with the track coordinator or department chair in advance of teaching the course. Each lecturer or patient may receive compensation as appropriate for her/his course contact time provided there are adequate funds in the budget.

A guest pass for parking may be obtained from the operations assistant; however, this is only good for the date of the visit. This is very important as it will help your guest avoid the embarrassment of receiving a parking ticket.

2.8.4. **Lab Instructor/Assistant**
Lab instructors usually lead out during lab courses. Lab assistants usually assist the lab instructor and may lead certain portions of the lab class period. Labs are typically 2-3 hours in length. Most labs take place on the Andrews campus. Occasionally, they can be held at a clinical facility.

A lab instructor/assistant's responsibilities include:
1. Attendance at meetings with other lab instructors/assistants to develop, organize, adapt, and evaluate the laboratory experience in the course.
2. Attendance at scheduled labs.
3. Assistance in the organization and selection of lab schedules, topics, methods of instruction, etc.
4. Supervision of student skills.
5. Lab instructing and assisting in front of small or large groups.
6. Acting as a patient simulator for student instruction.
7. Development of lab examination procedures, as well as implementation of the evaluation process.
8. Leaving the lab neat and orderly with equipment and supplies put away.

2.8.5. **Clinical Faculty**
Clinical faculty supervise students while they are on clinical rotations in various clinical facilities. This usually occurs using a 1:1 model with one student to one clinical instructor (CI) or a 2:1 model with two students to one CI. Occasionally, a student will have two CIs during a rotation. The Physical Therapy program’s Clinical Education Handbook details the responsibilities of the CI and the center coordinator of clinical education (CCCE). This handbook is available through the office of the director of clinical education (DCE). The final grade issued for performance during a clinical rotation is determined by the DCE, in consultation with the CCCE, the CI, and the student.
2.9. **Track Coordinators**
Each DPT core faculty member is assigned to coordinate a track of the entry-level curriculum related to their specialty. This may range from teaching specific courses to arranging for associated faculty to teach specialty courses. Specific responsibilities of that faculty member will vary by the area they coordinate. The identified tracks include:

1. Behavioral Sciences
2. Clinical Education
3. Clinical Sciences
4. Foundational Sciences
5. General Medicine
6. Neurology
7. Orthopedics
8. Research

Specifically, track coordinators will:
1. Review syllabi to ensure adequacy of learning objectives, stated in behavioral terms
2. Coach associated faculty in their course development and professional growth appropriately using the following resources: Normative Model, Guide to PT Practice, Guide to Professional Conduct, Standards of Practice for Physical Therapists
3. Ensure course meets Physical Therapy Department and accrediting body requirements.
4. Propose and/or encourage a variety of teaching methods.
5. Assist in designing effective tests and measures.
6. Review or propose various student evaluation processes.
7. Introduce all associated faculty and guest speakers.
8. Sit in on at least one lecture/lab for faculty peer evaluation.
9. Provide instructional support and coaching as needed throughout the semester.
10. Monitor all changes in curriculum, textbook, methods, guest lecturers, off-site labs, etc. for annual preparation of formal Curriculum Review report.

2.10. **Faculty Mentor**
The department chair will assign a faculty mentor to all new-hire core faculty. This mentor will serve as a source of guidance and encouragement to the new faculty mentee during their first two years in the department. In addition, the department chair maintains an open-door policy and is available for consultation to all core faculty, preferably by appointment.

2.11. **Faculty Orientation**
All faculty must be adequately oriented to the policies and procedures of the PT department. This process includes but is not limited to (1) reviewing both the Faculty and Student Handbooks, (2) completing the “FERPA” and the “Preventing Workplace Harassment” modules; and (3) printing out, signing, and submitting the “Acknowledgement of Completion of Faculty Orientation” form (see Appendix for a copy of this form). Common semester tasks are listed on the Faculty Semester Checklist (see Appendix for a copy of this form).

The department chair will orient faculty to the PT department and the School of Health Professions. Orientation may involve (1) meeting the dean, faculty, and staff; (2) visiting classrooms; and (3) reviewing guidelines for using and/or operating instructional facilities/equipment and accessing office supplies.

New employees must attend the New Employee Orientation provided by the AU HR department and the New Faculty Orientation as appropriate.

2.12. **Faculty Committee Membership and Attendance**
Faculty members with at least half-time appointments in the Physical Therapy department are automatically part of the following committees:
- Physical Therapy Faculty Council
• Physical Therapy Professional Degree Council
• Physical Therapy Curriculum Review Committee

Additional committee membership within the department will be assigned as needed. The chair of any committee is responsible to convene the committee and to ensure that proper minutes and follow-up are provided for any committee. The chair of any committee will bring feedback from the committee to the Physical Therapy Faculty Council as needed.

Faculty membership in university committees is determined by the AU Nominating Committee along with recommendations from the dean or designee. Faculty are expected to participate on up to two school/university wide committees.  

2.13. Faculty Workload
Core faculty workload determination is outlined within the AU working policy. The typical expectation for division of the workload is 70% teaching, 30% scholarly and service activity (10% minimum for each).  

2.14. Faculty Professional Development Policy
In alignment with the Andrews University policy on professional, the Department of Physical Therapy supports the efforts of faculty members to develop new knowledge and skills through attending continuing education courses, conferences, workshops, and reading professional journals, etc. Each full-time Department of Physical Therapy faculty member receives $1000 per fiscal year for professional development expenditures, which can include conferences or workshops (registration, travel, and hotel costs), books, videos/DVDs, professional journals, professional. It is the responsibility of the faculty member to ensure that these expenses remain within their annual professional development budget. The PT department convention budget covers up to $1,000 in expenses (submission fees, registration, travel, and hotel costs) per faculty member presenting at state/national/international conferences related to physical therapy. The faculty member should present the acceptance letter/invitation to the department chair prior to registering or making travel plans for the convention.

Associated faculty will be invited to participate in various professional development activities that will assist in positively impacting student learning, including but not limited to access to the James White Library, bi-annually associated faculty workshop, annual faculty institute, opportunities to be co-investigators on research projects and subsequently co-publish or co-present with PT faculty at conferences.

2.15. Vacations and Holidays
Faculty and staff should request approval, from the department chair, for vacation time off prior to making travel plans.
• Faculty are eligible for annual vacation per the policy.
• Hourly staff are eligible for annual vacation per policy https://www.andrews.edu/services/hr/current_employees/handbook/timeoff.html
• Salary staff are eligible for annual vacation per policy https://www.andrews.edu/services/hr/documents/payroll/salariedemployeevacationpolicy.pdf.

Prior to departing for vacation the faculty/staff member should inform the department chair how they may be contacted in an emergency.

2.16. Faculty and Staff Travel Policies
In accordance with policy, faculty and staff of the Department of Physical Therapy may be reimbursed from their departmental budget or their professional development funds for certain approved travel, lodging, registration, and per diem expenses related to

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4 AU Working Policy 2:376:2
5 AU Working Policy 2:376:2
6 AU Working Policy 2:378
7 AU Working Policy 2:394
8 AU Working Policy 2:764
participation in work-related professional conferences, conventions, and workshops or other PT department, or program business.

Generally, costs associated with professional conferences, etc. must be covered by the faculty member’s professional development/convention funds (see 2.14 Faculty Professional Development Policy). It is the responsibility of the faculty member to ensure that all professional development travel expenses do not exceed their allotted professional development/convention funds without prior authorization from the department chair. For travel that is approved department business (purchasing, recruiting, etc.), the faculty member may be reimbursed from the departmental travel budget with prior authorization from the department chair. All travel must be approved in writing by the department chair, using the SHP Travel Authorization Form. See sample of this form in appendix and G:\COMMON\Forms. Travel insurance is provided by Andrews University for all approved travel.

2.17. Schedules and Class Rosters
Instructors will receive a class schedule, can access a list of students, and pictures of students they teach, at the beginning of the semester. If lab classes are involved, the lab schedule will also be given to the instructor by the operations assistant. The course/lab schedule is also available on the PT website: https://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html.

2.17.1. TBA (To Be Arranged) Class Periods
The TBA class period is used as a make-up time to provide information an instructor was not able to provide during the normally scheduled class period or additional information they may wish to add. The TBA class period times are listed in the class schedule for each semester. There is approximately one, 1-hour block of time reserved each week.

Each instructor is encouraged to use this block of time as needed to make up lectures or enhance their course but it should not be used as a permanent extension of a course. The students are aware that during this time period attendance is required and they need to check the schedule regularly. It is a good idea to let them know you have signed up for a TBA so they will plan on being there.

The sign-up sheet for the TBA class is kept on the Student Information Bulletin Board across from the student mailboxes. To sign up for a TBA class period, remove the TBA sign up list that pertains to the class you are teaching, write in your class information, and give it to the operations assistant to be retyped. Students must be given at least one-day notice if the TBA time block is to be utilized.

2.18. Equal Rights for Hired Personnel
Decisions for hire of employees will be based upon the qualifications of the individual as related to the requirements of the position for which the person is being considered and shall be done with input of the course coordinator and the department chair. Equal employment conditions with no discrimination against any employee because of race, color, creed, ethnic background, country of origin, age, sex, height, weight, physical handicap, marital status, political or gender preference, or past military service, except where a bona fide occupational qualification exists.

2.19. Access to Personnel Files
In harmony with the Bullard-Plawecki Employee Right to Know Act, former and current employees of Andrews University may periodically (no more than twice a year) review their personnel files for purposes of identification, employment, promotion, transfer, additional compensation and disciplinary action. Application for access to all personnel files is made to the director of Human Resources who shall authorize and arrange for

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9 AU Working Policy 3:768
10 AU Working Policy 2:110
the requested inspection. If any employee disagrees with a written statement in his/her file, he or she may write a statement of rebuttal which is added to the file. 11

Information regarding the various aspects of employment are available through the AU Human Resources website at: http://www.andrews.edu/HR/emp_policies.html.

All policies and procedures pertinent to staff positions are also available in the Employee Handbook, located at: http://www.andrews.edu/HR/emp_handbook.html.

2.20. **Core Faculty Assessment**
Each Physical Therapy core faculty will be formally evaluated annually in January of each year. The purpose of this evaluation is to support the Mission and Goals of the physical therapy department by ensuring that each faculty has the knowledge base and teaching skills necessary to prepare students for contemporary clinical practice. It is the responsibility of each faculty member to meet with the department chair and provide evidence through a portfolio that the previous year’s goals have been met. The faculty member and department chair work together to develop a new professional growth plan for the following year. This plan must be approved by the department chair and, if applicable, the SHP dean. Although the process of evaluation and collection of evaluation data is ongoing, the process shall be formalized and summarized once per year.

The evaluation initiates five separate processes:
1. The Annual Faculty Activity Report (FAR, Office of Scholarly Research) which triggers payment of your annual cash bonus (if eligible) for scholarly productivity.
2. The Annual Professional Evaluation (Human Resources Office) which triggers your appropriate salary increase and your faculty appointment letter for the following year.
3. The Individual Faculty Advancement Plan (SHP dean & Academic VP’s office) for all faculty who are not already tenured full professors.
4. The Graduate Faculty Status Review (School of Graduate Studies) if applicable.
5. The Physical Therapy Department Annual Exit Survey: Faculty Review.

A copy of the peer evaluation, self-evaluation, Annual Faculty Activity Report, and Parts II, III, IV, and V are submitted to the SHP dean by the department chair. The Andrews University Working Policy outlines procedures for appealing should the evaluatee feel reasons for such.

2.21. **Faculty Evaluation Check Sheet**
Each core faculty member must make an appointment before January 15 for their evaluation with the department chair. The following items should be included in the portfolio and presented to the department chair at least two weeks prior to your annual evaluation. Each faculty member is to develop a portfolio of current activities related to the previous year’s goals, teaching, scholarly activity and service which includes the following items:

1. All Course evaluations (in Portfolio) – Course evaluations are completed for each course by the students toward the end of each semester. Faculty teaching a course for the first time are normally not given course evaluations by students unless requested by the faculty member. Bring to the appointment: Fall evals from previous year, Spring and Summer evals from eval year.
2. Graduate Exit Survey (in Portfolio + provide 1 copy) – The Graduate Exit Survey is done during the last term of the program. Results (Part II) pertaining to the faculty are typed and given to each individual faculty member when the students leave for their final clinical affiliation. Each faculty is to evaluate and utilize this feedback as appropriate and add this to their portfolio.
3. Peer evaluation (in Portfolio + provide 2 copies) – Peer Evaluation forms are completed prior to the conference with the department chair. Peer evaluators are to visit the classroom, lab, or tutorial of the evaluatee as many times as

11 AU Working Policy 2:152
necessary in order to thoroughly address all areas of classroom/lab teaching. The evaluator should document observations on the Faculty Peer Evaluation form. The two faculty will then meet to discuss and summarize the findings of the peer evaluation and sign the form signifying that the evaluation is complete (see Appendix for a copy of this form).

4. Annual Faculty Activity Report (in Portfolio + provide 2 copies) – At the end of each calendar year each faculty member is to complete an Annual Faculty Activity Report. Scholarly activity for the year should be recorded. These activities should also be included in the updated CV.

5. Self-evaluation (in Portfolio + provide 2 copies) – Faculty Self-evaluation forms are completed once a year prior to the summary conference with the department chair.

6. Part I: Updated Curriculum Vitae in new format (in Portfolio + provide 2 copies) – Each faculty member will update their CV once a year with continuing education, conferences, research, etc. as appropriate.

7. Part II(a): Annual Review of Teaching & Service Goals (in Portfolio) – Each faculty member is to evaluate their progress on the stated goals for the year and to develop, in consultation with the department chair, new goals for the coming year. These goals should direct the faculty member toward promotion and/or tenure. If the faculty member is already at full professor, then the goals should be toward activities to maintain this status. Remember, these should be consistent with your Faculty Advancement Plan” (Part IV).

8. Part II(b): Annual Review of Research & Scholarly Activity (in Portfolio) – At the end of each calendar year each faculty member is to complete a Research & Scholarly Activity report. This includes topics of scholarly inquiry, peer-reviewed accomplishments, scholarship goals and specific activity toward those goals. These should be consistent with your Faculty Advancement Plan” (Part IV).

9. Part III: Chair Recommendation for Salary Implementation (To be completed by chair) – The Chair Recommendation is completed by the department chair in consultation with the assistant program director and/or dean of the School of Health Professions. The department chair shall conduct and evaluation interview with the faculty member. As part of this evaluation interview, the faculty member is to be provided an opportunity to read, discuss, and receive a copy of the evaluation summary. If the faculty member disagrees with any evaluation statements made thereon, he or she shall be given the opportunity to prepare a written comment that shall become part of the evaluation summary.

10. Part IV: Individual Faculty Advancement Plan & Worksheet Summary for Advancement Planning (All those seeking future advancement or continuous appointment) – Prepare an Individual Faculty Advancement Plan to review with your chair. Year 1 should be in harmony with what you have entered as suggested goals for the next year.

11. Part V: Chair and Dean Recommendation for Graduate Faculty Status (if applicable) – Each faculty member is to check whether they are listed for review of Graduate Status each year. If up for review this current year they are to give Part V to their chair for completion prior to their annual review so it may be discussed at that time.

2.22. Director of Clinical Education (DCE) Evaluation

The purpose of the DCE evaluation process is to give formative feedback to the DCE on his/her performance as track coordinator of the total clinical education program. The following forms replace the “Course Evaluation” forms, however all other forms remain the same.

1. Center Coordinator of Clinical Education (CCCE) Evaluation of the DCE Summary – Once a year during summer semester all CCCEs with which the respective program maintains contracts and send students complete an evaluation of the DCE. The DCE or clinical education assistant provides a set of labels to the department chair at a time designated by the department chair. The administrative assistant mails out, collects and tallies the results and gives them to the department chair for review. The department chair reviews these
evaluations with the DCE. The results are submitted and discussed as part of the DCE’s portfolio during the Annual Evaluation process.

2. Student Evaluation of the DCE Summary – Students complete an evaluation of the DCE annually during their final academic term. The administrative assistant tallies the results and gives them to the department chair for review. The department chair reviews these evaluations with the DCE. The results are submitted and discussed as part of the DCE’s portfolio during the annual evaluation process.

2.23. Research Track Coordinator Evaluation
Research Track Coordinator Evaluation Summary – The purpose of this evaluation is to give the research track coordinator feedback on communication and support throughout the capstone project. The Research Coordinator Evaluation form is completed annually by students in their final year of the program. These evaluations should be distributed to the students by the research track coordinator. The research track coordinator will designate a student to return them to the administrative assistant who tallies the results. The department chair summarizes and returns these results to the research track coordinator who adds them to their portfolio for submission during the annual evaluation process.

2.24. Department Chair Evaluation
Department Chair Evaluation Summary – Department chair evaluations are completed annually by all physical therapy department core and associated faculty, and staff who report directly to the department chair. This survey provides to the department chair formative feedback on communication, leadership, and management of the physical therapy department. This survey is provided by an on-line link sent via email to those eligible to participate. The dean’s office will summarize and review these evaluations with the department chair, as part of the annual evaluation process.

2.25. Faculty Annual Review
Throughout the year, each faculty member is responsible to direct their activities towards completing their personal goals developed for that year and to collect assessment data which shows evidence of goal completion as well as excellence in teaching, scholarly activity and service. This evidence, along with a draft of the faculty member’s goals for the new year should be included in the portfolio and given to the department chair at least two weeks prior to your annual evaluation meeting. The department chair and the assistant program director will review the portfolio during this time. During the evaluation meeting the participants will discuss the faculty member’s performance on the past year goals, and teaching, scholarly and service activities. Goals for the coming year will be negotiated and finalized as well. After the evaluation meeting the department chair will complete the “Department Chair Evaluation of Faculty,” a “Chair Recommendation for Salary,” and when appropriate, a “Chair and Dean Recommendation for Graduate Faculty Status.” Copies of complete forms will be distributed as follows:

<table>
<thead>
<tr>
<th>Department File</th>
<th>Dean’s Office</th>
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<tbody>
<tr>
<td>Part IV (if applicable)</td>
<td>Part V (if applicable)</td>
</tr>
<tr>
<td>Part V</td>
<td>Part IV (if applicable)</td>
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<td>Part III</td>
<td>Part III</td>
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<tr>
<td>Part II (a &amp; b)</td>
<td>Part II (a &amp; b)</td>
</tr>
<tr>
<td>Dept Chair Evaluation of Faculty</td>
<td>Dept Chair Evaluation of Faculty</td>
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<tr>
<td>Faculty Self-Evaluation</td>
<td>Faculty Self-Evaluation</td>
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<tr>
<td>Faculty Peer Evaluation</td>
<td>Faculty Peer Evaluation</td>
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<tr>
<td>Graduate Exit Interview</td>
<td>Curriculum Vitae</td>
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<td>Curriculum Vitae</td>
<td>Faculty Research/Creativity Report</td>
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<td>Faculty Research/Creative Activity Report</td>
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<tr>
<td>Course Evaluations</td>
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</table>
2.26. Faculty Academic Freedom
The following are excerpts from the university’s policy. 12

The university espouses the principle of academic freedom, not only to protect a faculty member from intramural and external pressures that hinder the pursuit of truth, but also to foster disciplined and creative investigation in all phases of learning. Like all other freedoms, academic freedom is subject to limitations and requires certain responsibilities of those who enjoy it. Faculty members are assumed to be responsible in the context of their advanced training, education, and experience.

The instructor’s zeal for exploring the growing edge of knowledge must be balanced by his/her concern for the impact of his/her influence in word and example upon others.

The religious character of the university provides a context for the responsible exercise of academic freedom. Subversion of, or overt disharmony with, the standards or teachings of the Seventh-day Adventist church, as contained in its statement of Fundamental Beliefs, are grounds for dismissal.

Academic freedom allows a faculty member to question institutional plans, objectives, or policies. Should informal discussions prove unsatisfactory, the faculty member has recourse to due representation through faculty participation in accord with the provisions of the Andrews University Working Policy without fear of administrative reprisal. The faculty member is expected to follow existing policies while seeking their repeal or revision, and to refrain from utilizing the classroom to debate unresolved issues.

2.27. 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.

2.28. General Complaint Procedure
Any person with a complaint or concern about the Physical Therapy Department or one of its policies, programs, faculty, staff or students will be asked to submit their concern in writing. 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 School of Health Professions. 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.

2.29. University Grievance Procedures
Grievances that grow into conflicts are endemic in a sin-tainted world. Responsible Christians seek to minimize them, and, where necessary, to resolve them. The process used for resolving any grievance is founded on the scriptural principle (Matt 18:15-17) of settling differences among believers. Discussion begins between the two parties concerned. Others become involved only if attempts to resolve differences fail. The university prefers to resolve conflict within the community of faith where possible, using only non-litigious mechanisms. 13

Any faculty member in any constituent school of the university may initiate a request to resolve a grievance that he/she feels relates to his/her rights, academic freedom or working conditions and may petition their grievance as outline below:

2.29.1. Resolution through Informal Discussion (Step 1)
As the first step in the process, an aggrieved party must seek to resolve the grievance through an informal discussion with the appropriate immediate
supervisor or other person whose action led to the grievance. The aggrieved person may also appeal to the ombudsperson for counsel on resolving the problem or for assistance in bringing the disputants together for dialog.

2.29.2. Written Grievance to Immediate Supervisor (Step 2)
The grievant may file his/her written grievance (with details of the grievance as described below) with the appropriate supervisor. Where practicable, this should be done not later than fifteen (15) working days following the grievant's knowledge of the act, event, or commencement of the condition which forms the basis of the grievance.

Within five (5) working days of receipt of the written grievance, a further discussion of the grievance shall occur between the aggrieved party and the appropriate supervisor to resolve the grievance. A written decision shall be provided to the grievant by the supervisor within five (5) working days of this discussion.

2.29.3. Written Grievance to President (Step 3)
If the grievant believes the problem remains unresolved through Step 2, this may be stated in writing within five (5) working days to the president. Within five (5) further working days the president shall refer the case to the relevant grievance committee.

The letter of the grievant should simply state the problem at issue, the wrong believed to have occurred or about to occur, efforts made to resolve the conflict, the relief to which the grievant claims to be entitled, and the lowest-ranking administrator able to resolve the problem. The written statement may contain all of the facts or alleged facts that the grievant deems pertinent to the case.

2.29.4. Hearing of Grievance by a Grievance Committee (Step 4)
1. The relevant grievance committee shall act within ten (10) working days to hear the case.
2. All grievance hearings shall be open only to participants, their non-legal representatives and persons presenting information to the relevant grievance committee or being questioned by the grievance committee.
3. When a grievance is heard by the committee, any party involved may submit documents and other materials related to the case, question witnesses, and otherwise make a full presentation of information to the committee. The university is not obligated to present documentation on behalf of the witness.
4. No reprisals of any kind shall be taken by the university or any employee thereof against any grievant, any witness, any member of the grievance committee or any other participant in the grievance procedure by reason of such participation.
5. The burden of persuading the grievance committee that the actions or inactions at issue were not proper rests upon the grievant and shall be satisfied only by a preponderance of evidence in the record considered as a whole.
6. At any point in the proceedings prior to the time at which the committee meets to make a decision, the aggrieved party may withdraw the grievance with the consent of the relevant grievance committee.
7. In reaching its decision, the committee shall not consider or review any document or other material to which both parties in the grievance are not given access.
8. The meeting(s) at which the grievance committee considers its decision shall be closed to all parties except the committee members.
9. At no time in the process should the grievance committee or any of its members reveal details of evidence heard except as revealed in the final report to the president.
2.29.5. Grievance Committee Report to President/Board of Trustees Chair (Step 5)
The decision of the grievance committee is advisory to the parties only and shall be submitted in writing to the president or the chair of the Andrews University Board of Trustees with copies to the grievant, and the appropriate department head or comparable immediate supervisor or the president, within two (2) weeks following closure of the case.

2.29.6. Judgment on the Grievance (Step 6)
The president is responsible to make a judgment on the grievance, in the light of the findings of the grievance committee and to inform the committee and the involved parties in writing of the reasons for that judgment within ten (10) working days. (or, where appropriate, the chair of the Andrews University Board of Trustees), shall be final and binding in all cases.

2.30. 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.

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

2.31.1. Dropping Out
If the student chooses to drop out of the program until the situation clears, the Academic Policies and Procedures section of this handbook will be followed for exiting and reentering the program (the Physical Therapy Faculty Council reviews these situations). A statement from the student's physician will be necessary to document the reasons.

2.31.2. 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 department chair immediately.
2.32. Student 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 SHP dean.

2.33. Student Grievance Procedure
Any person with a complaint or concern about the Physical Therapy Department or one of its policies, programs, faculty, staff or students will be requested to submit their concern in writing.
Complaints/concerns about the department, or one of its programs or policies should be delivered to the program administrator or dean of the School of Health Professions for timely follow-up. 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. 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) should be addressed with that individual first. If the person with the complaint feels the situation remains unresolved, that person should meet with the individual’s immediate supervisor or department 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.

2.34. Discrimination and Harassment (Including Sexual Harassment)
Students should contact their faculty advisor, department chair, SHP 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).

2.35. 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.  

2.36. 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 can only be used for purposes other than direct health care, upon 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.

2.37. 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 4.42.4.

14 AU Working Policy 2:166
2.38. **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.  

2.39. **Personal Safety**
 Faculty, staff and students should follow Universal Precautions, as identified by the Centers for Disease Control, available at: [http://www.cdc.gov/ncidod/dhhp/bp_universal_precautions.html](http://www.cdc.gov/ncidod/dhhp/bp_universal_precautions.html), when there is the possibility of contact with body fluids or potential contaminant. This policy will be presented in the DPT Student Handbook and DPT students will be taught Universal Precautions during their first semester in the program. See Section 2.69.5.

2.40. **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.

2.41. **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.

2.42. **Faculty Liability**
 As identified in the AU Working Policy, all faculty members, both full or part-time, are covered by the Andrews University liability policy “against all reasonable expenses necessarily incurred by him/her in connection with the defense of any litigation, action, suit, proceeding, or investigation to which he/she is a party by reason of being or having been a part-time faculty member of Andrews University, except in situations where the faculty member’s conduct is outside the scope of the employment, is negligent or intentional misconduct violates Andrews University policies or procedures, or is illegal.”

2.43. **Personal Property**
 Insurance for personal property that must be kept on university premises and is mandatory to fulfill a faculty member’s teaching responsibilities is available through the university. Personal property that is not essential to a faculty member’s teaching responsibility is not insured by the university against loss or damage. Everyone is  

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15 AU Working Policy 2:153
16 AU Working Policy 2:167:2
advised not to bring personal property of value to the university unless it is covered by personal insurance.

2.44. Supplies
Teaching supplies, i.e. overhead markers, tablets of paper, transparencies, etc. can be obtained through the operations assistant. Some of these supplies are kept on hand in the Workroom (Room 134). If supplies are not available through the above, the instructor may be given a department charge card to pick up the needed items from the Andrews Bookstore. A receipt with a list of items purchased must be returned with the charge card immediately after the purchase. If enough lead time is given by the instructor, these supplies will be gathered by the operations assistant and reserved for the instructor.

As part of the PT team, please inform the operations assistant when you are taking the last of any item, or if you notice stock is running low on a frequently-used item. This will allow her to replace stock in a timely manner.

2.45. Faculty/Staff Telephone Orientation
The operations assistant will schedule an orientation to the telephone system and the University Information Directory. This directory provides 1) on-campus schools and departments, 2) emergency numbers, 3) building code list, 4) dialing instructions, 5) telephone system, 6) voice mail, and 7) emergency service.

2.46. Student Use of Telephones
2.46.1. Outgoing Calls
Personal Calls
- A phone is provided in the student lounge for campus and local calls.
- Long distance calls are made at the expense of the student using their personal phones.

2.46.2. Incoming Calls
- Students are requested not to have personal calls directed to the department.
- Written notice of urgent messages will be placed in student mailboxes. Students should check their boxes several times daily.
- Only in an emergency will the student be called from a class or laboratory.

2.46.3. Department of Physical Therapy “800” Number
The incoming 800 number calls are for departmental and clinical assignment calls only. Students should not ask friends, relatives, employers or others to use the “800” line to contact them or to leave messages.

2.47. Computers
Each faculty will be assigned a computer for work use. Through these computers you have access to word processing, spreadsheet programs, and the Internet. Access to the Internet may also be gained through your personal laptop and the wireless web. Access to university services such as the James White Library is also available through the Internet. The PT department contracts with ITS for computer technology support. If you need assistance, contact the operations assistant to arrange for help.

2.48. Office and Audiovisual Equipment
As part of the general tour, there will also be an introduction to the audio-visual equipment with a brief explanation in their use as requested. Items available include:

2.48.1. Audio-Visual Equipment
1. Overhead projectors
2. Slide projectors
3. TV with VCR/DVD players
4. Video projection units
5. Laser pointer
6. Classroom ports for internet access
2.48.2. Office Equipment
1. Copiers
2. Shredder
3. Fax Machine
4. Computers
5. Printer
6. Telephones

2.49. Photocopiers
Copiers are available for student use in the student lobby and James White Library. Each student will be given a one-time deposit of $20 on their copy account on the first day of the PT program for the student lobby copier. Students may purchase additional copies from the operations assistant. A minimum of $2 may be added to this account at any one time. Report any copier problems to the operations assistant. 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.

2.50. Equipment Inventory
A regular inventory of all equipment will be kept by the operations assistant and reviewed annually by the Physical Therapy Faculty Council.

It is the faculty member’s responsibility to notify the operations assistant and department chair if a piece of equipment is no longer working or no longer repairable, and needs to be removed from the inventory list, or replaced.

2.51. Equipment Purchase
PT faculty and staff are responsible for identifying equipment needs of the program. Requests for equipment should be submitted to the departmental chair by October each year for future budgeting purposes. All requests should provide a description of the item, rationale for the purchase, estimated cost and distributor information. If multiple large requests are received, the chairperson may prioritize the purchases based upon feedback during the Physical Therapy Faculty Council.

2.52. Equipment Maintenance
All major equipment will be checked annually for safety and calibration by a certified repairman. Any equipment which is found to be faulty will be removed from use and will be repaired as soon as feasible. The repair will occur in-house when possible; otherwise, the equipment will be sent to the authorized service provider. Faculty are responsible for arranging for repairs to any equipment in their specialty which fails during the year. The operations assistant will maintain records of equipment checks and maintenance.

2.53. Equipment Loans
Selected equipment can be loaned to students or other individuals for use outside of the classroom as long as the equipment is not needed at the time for teaching, research, or other assigned uses. Individuals wishing to sign out equipment will do so with the operations assistant, signing for the equipment and providing contact information.

2.54. 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.

2.55. Program Resources
The following additional resources located in the physical therapy building are available to faculty.
1. Research Lab
2. Workroom
3. Conference Room
4. Instructional areas
5. Faculty lounge
6. Physical Therapy “Kitchen”

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

- 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.

2.57. 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 taken into account the student’s schedules and typically should range between 3 – 5 hours per week during the semester.

2.58. Facility Access
Physical Therapy students are free to use the facilities as needed, when they are not in use for a class. Those individuals conducting research for their capstone will have priority for facilities over those simply wishing to practice skills. Access to the facilities after regular hours is allowed via use of faculty, staff or student ID, during appropriate hours. 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.

All faculty members scheduled to teach during evening hours are to ensure that the classroom is locked after the session ends. Instructional equipment should be safely stored. The department requests faculty to turn off lights, close windows and doors upon leaving the building after office hours.

2.59. Facility Maintenance
Maintenance of the facilities will be coordinated between AU Custodial Services and the operations assistant. The operations assistant will arrange for student workers to clean PT facilities.

2.60. Facility Extracurricular Use
The department facilities are available for extracurricular use by PT students, faculty and staff, as well as use by affiliated organizations, such as clinical facilities, upon request. Use by anyone else requires special permission from the department chair. Requests for use of the facilities should be directed to the department operations assistant. When the requested use is more extensive, the requesting party will complete a building usage agreement and provide a paid deposit to cover potential damage.

2.61. 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.
2.61.1. Dining
Eating must be restricted to the lobby, hall, and outside areas only. A refrigerator and microwave ovens are located in the student lobby. The physical therapy kitchen (Classroom C) is available for group functions but must be cleaned immediately after each use. Students may use the refrigerator in the kitchen, however, the PT Department 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.

2.61.2. 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 department 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.

2.61.3. **Use of Bicycles, Roller-skates, Roller blades, Skateboards, etc.**

Bicycles are not permitted in the physical therapy 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 physical therapy building. All persons must remove, or put away, these articles prior to entering the building.

2.61.4. **Pets**

Pets of any kind are not permitted in the physical therapy building.

2.61.5. **Student Computer Resources**

The University maintains two large computer labs on campus—in Bell Hall and Chan Shun Hall; both having computer resources available to students. In addition, the physical therapy program maintains a small computer lab for physical therapy students only. Internet access may be gained by use of the five computers in the computer lab or through the AU-secure wireless network. Five dollars are added to each student’s printing account on the first day of each month. (Printing is charged at 10c per black/white prints and 25c per color prints.) Additional printing can be purchased from the operations or administrative assistant in the program office. 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.

2.61.6. **Student Personal Use of Department Facilities**

Use of any department facilities or equipment must be cleared in advance with the operations assistant. It is requested that the students do not use the exercise equipment, specifically the exercise bikes, ergometers and treadmill, for personal routine exercising. This does add considerable wear to the equipment. Students have access to the university health clubs in the women's and men's resident halls and are encouraged to use them.

2.61.7. **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, research 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.**
2.62. **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.

2.63. **Bulletin Boards**

Bulletin boards are provided for student information.

2.63.1. **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.**

2.63.2. **Career Opportunities Announcements**

This bulletin board (located in the hallway across from classroom C entrance) is for current listings of job openings in the field of physical therapy.

2.63.3. **Housing, Licensure and Scholarship Bulletin Board**

This bulletin board (located across from the Career Opportunities Bulletin Board) is an area for housing availability, licensure information and scholarship opportunities.

2.63.4. **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

2.64. **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.

2.65. **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 Physical Therapy Department. 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

2.66. **Student Email**

Each student will receive an email account through Andrews University. It is important that students check their Andrews email 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 account. It also serves as a nice way for students to contact the program office or send messages of encouragement to each other.

2.67. **Faculty/Staff Parking**
A regular parking permit can be obtained through the Campus Safety office on Garland Ave. Please remember that parking violations are treated very seriously on campus and cars will be towed regardless of who they belong to.

2.68. **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 north of the pool. 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.

2.69. **Program Safety**

2.69.1. **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)

2.69.2. **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".
2.69.3. 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.

2.69.4. 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.

2.69.5. 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.

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.

3.2.1. Attendees with Voting Privileges
1. Department chair (tie-breaking vote)
2. Admissions director
3. All core program faculty
4. Administrative assistant (vote represents all program staff)
5. All associated faculty who teach greater than 50% of a course and are instructing the physical therapy students that semester
6. The class president or vice president for each Physical Therapy class (One vote total between the student representatives).

3.2.2. Ex-officio and Other Invitees Without Voting Rights
1. Department chair (if not program administrator)
2. Health professions marketing coordinator
3. Guest representatives from the university or School of Health Professions
4. Physical Therapy alumni
5. Representatives from clinics who employ our graduates

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 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 SHP dean (chair of the committee), dean of the School of Graduate Studies (without vote), and select other faculty. 17 18

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.

3.4.1. Committee membership:
Voting members of the committee will include the:
1. Department chair
2. Admissions director
3. Physical Therapy core faculty

18 AU Working Policy Section 1, Appendix J
4. Selected contract teachers
5. One or two representatives from a PT clinical education faculty
6. One or two representatives from alumni
7. One or two representatives from the current student body

Additional guests may be invited, and often include the:
1. SHP dean
2. Graduate dean
3. Assistant dean for graduate studies.

The Curriculum Review Committee is chaired by the department chair, and is comprised of the physical therapy program core faculty and representatives from the associated faculty, clinical faculty, student body and alumni. It convenes as an annual comprehensive program review meeting. It affirms the strengths and establishes the need for change and recommends that change to the Physical Therapy Faculty Council for action.

Feedback can be given to the Curriculum Review Committee directly or through contact with the track coordinator, department chair, or any one of the attendees listed above. Clinical faculty can give feedback directly through the director of clinical education.

Major curriculum changes are taken to the Physical Therapy Degree Council, which has the final authority for course and curriculum content. The Physical Therapy Faculty Council functions with authority of the Curriculum Review Committee for any and all matters concerning curriculum between the annual curriculum meetings.

3.4.2. Responsibilities
The program administrator and assistant program administrator are responsible for organizing the meeting, gathering and compiling the assessment information, and identifying follow-up on previous recommendations. Assessment tools will address programmatic and graduate outcomes. The tools will be reviewed, and modified if needed, on an annual basis.

3.4.3. Information sources
Assessment tools will be used to collect information regarding all phases of the program, starting from initial prospective student contact, through alumni status. Assessment tools will include, but are not limited to:
1. Outcomes Survey Of Graduates
2. Outcomes Survey Of Patients/Clients
3. Outcomes Survey Of Supervisors
4. NPT Exam Results
5. DPT Program Graduate Exit Interview
6. Clinical Performance Instrument
7. Clinical Instructors’ Report
8. Students’ Assessment Of Academic Preparation
9. Clinical Instructors’ Report
10. Students’ Assessment Of Academic Preparation
11. DPT Physical Therapy Admissions Evaluation & Stats

Outcome surveys will be sent to alumni who graduated one year prior to the review. All committee attendees will be given a copy of Curriculum Review Document, which will include data from all the assessment tools, as well as minutes from the previous year, with the recommended plan of action. When possible, data from assessment tools, such as the NPT Exam results and exit survey, will be present for at least three years.
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 Clinical Education Handbook will be reviewed 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. **PT Postprofessional Curriculum Review**
Currently under revision; will be added at a later date.

3.8. **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
- PT-5 Spring Semester

Third Year
- PT-6 Summer Semester
- PT-7 Fall Semester
- PT-8 Spring Semester
- PT-9 Summer Semester

The clinical practicum and internships are listed separately in the Class Calendar.

3.9. **DPT Class Calendar**
The Class Calendar will provide the semester dates for each class and is meant to give the student an overall picture of the program. The actual dates are subject to change. Updates are given in the Class Schedule. See the Entry-level DPT Program, Student Resources website for current class calendars.

3.10. **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.

3.11. **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.

3.12. **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 webs page, or [http://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html](http://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html). Schedules for the following semester are added prior to the end of examination week of each respective semester.

3.12.1. **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.

3.12.2. 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.

3.12.3. 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.

3.13. 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.

3.14. Registration Procedures
Before the close of each semester the operations assistant will inform and orient each student to the specific registration procedures and time schedules to follow for registration for the successive semester.

3.15. Pre-PT Student Advising
All students who have identified themselves as “Pre-PT” students through the registrar’s office will be assigned to the “Pre-PT advisor” within the Physical Therapy program. The PT admissions director acts as the pre-PT advisor and will meet with each student at least once a semester. At the initial meeting the advisor will provide a copy of the AU DPT prerequisite course and a sample 3-year course schedule. In addition, every semester the student will be given a course planning sheet on which they can identify the intended courses for the year or following semester. The student will bring this sheet to the advising session, during which the advisor will verify appropriateness of the courses and feasibility of the proposed schedule. The Pre-PT advisor is responsible for communicating with all pre-PT students regarding overall academic standing and any planned pre-PT activities.

3.16. DPT Faculty Advising Responsibilities
The Department of Physical Therapy faculty members may be assigned to provide academic advising services to graduate and/or undergraduate students.  

19 AU Working Policy 2:165
3.16.1. **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.

3.16.2. **Changing Advisors**
If a student wishes to change their academic advisor, a request may be submitted to the department chair.

3.16.3. **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.
4. Open Registration Central every semester for assigned advisees.

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 Physical Therapy Faculty Council. University policies and input from the dean of the School of Health Professions, 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.

3.17. **Postprofessional Program Advising**
All t-DPT/DScPT students are advised by the physical therapy Postprofessional program director or his/her designee. The program director will lay out the curriculum plan and provide the course schedule for each student. Questions related to the curriculum plan are to be directed to the program director.

3.18. **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.

3.18.1. 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 DPT program orientation and PTH415 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 department. Students also represent the DPT program, Andrews University and Christ outside the PT building and therefore are still held to the professional expectations policy, particularly #2 and #4-6. This also applies to social media communications like Facebook, Twitter, Snapchat, yik-yak, etc.

Students who do not meet these standards are notified in writing. If this behavior continues, 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 physical therapy program. If the remediation plan is not followed, the student will disqualify themselves from continuing in the DPT program. 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:\COMMON\Forms\Professional Behavior Contact Policy.pdf.

3.18.2. Department Core Values
The department core values shape the culture of the PT Department 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 SHP 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.  

3.19. Purpose of the 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. 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.

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20 See AU PT department vision, mission, core values, and philosophy in Section 1
3.20. Procedures for the PDP
Each student must complete a self-assessment form for each professional behavior, perform a peer assessment, and include an element of service as part of their PDP. Each 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. Artifacts that provide opportunities for growth within each of the goal areas 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 that time.

Students are required to meet with their academic advisors each semester to review their PDP, discuss recent achievements, evaluate goals, and develop strategies for further growth and progress. 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 and a reduction of the final grade by ½ letter for the course which the PDP is assigned. The student will then have the first two weeks of the new semester to successfully complete the previous semester’s PDP assignment. Failure to do so will prohibit the student from attending classes until the PDP is completed. Successful completion of portfolio assignment is indicated by the signature of the advisor on the Advisor Evaluation Form and turning the form in to the instructor of the course to which the PDP is assigned. Students will use their PDP to guide them as they develop into a Physical Therapist professional.

3.21. Preparation of Teaching Materials
The quality of course materials and their timely presentation can have a significant impact on student-teacher relations. Therefore, course materials should be both clear in presentation and format, and complete in content.

3.21.1. Typing
Instructors are expected to do their own typing. Limited grad assistant funds are available to all faculty to assist as needed and appropriate with tasks. The department chair approves all grad assistant requests.

3.21.2. Photocopying
Instructors will be given orientation to the photocopying equipment in the program workroom. Equipment available includes: a large copy machine, three-hole punch, paper cutter, staplers, and paper shredder for confidential material. Overhead transparencies, file folders and hanging files are also available.

Plan ahead to allow sufficient time for copying. It is preferred that larger jobs (5 pages or more) be sent to Lithotech for copying, therefore, give the materials to the operations assistant in time to meet the minimum five-day turn-around time. Even for the smaller jobs you do yourself, remember there is always the potential for equipment malfunction and that many other instructors also use the copier.

When making copies for class, one should be made for each student, one for yourself as the instructor, and one for the permanent file in the program office. Turn this copy in to the program office to be put into the curriculum file. A copy of everything given to the student in class must be kept in the curriculum file. It is the faculty member’s responsibility to ensure all materials are put into the curriculum file and the checklist marked and signed each semester. Also all materials given to the students to keep should be three-hole punched.
3.21.3. Fax Machine
There is a fax machine available in the program office for your teaching related use. The department fax number is (269) 471-2866. The program assistants can assist you if needed.

3.21.4. Textbook Selection and Ordering
Selection of the textbooks for a course should be approved by the department chair. Required textbooks are ordered for each student in the class. Recommended textbooks are usually ordered for approximately one third (or less) of the total class size.

Textbooks should be ordered a minimum of eight (8) weeks prior to the semester they are to be used. The bookstore maintains a list of publisher representatives and books available. They will be glad to assist in finding the right book. Some publishers will provide books for free previewing or on a thirty (30) day trial-review basis. Most publishers will also provide a free text to the instructor for books used as a textbook or recommended book in a course. The publisher or their local sales representative can be contacted for you by the operations assistant. A form for ordering textbooks is available through the operations assistant. She can also assist you if you have any questions regarding the number of books to order.

3.21.5. Course Syllabus
One of the most important responsibilities of a teacher is to give clear and accurate information to students at the beginning of each semester about the content and requirements for a course. This should take the form of a course syllabus made available to the students in iVue one week before classes begin. The teacher needs to make sure that the syllabus covers the course requirements, grading policy, and objectives of the course. The teacher should file a current syllabus for each course taught with the operations assistant. This must be done prior to the start of the course.

1. Course Syllabus Format: Please see Appendix A for the outline format which incorporates information required by the department, university, and accreditation bodies.
2. Course Syllabus Distribution: The students should have printed the course syllabus from iVue and have it with them on the first day of class. Review the document with the students at this time, clarifying and answering questions as necessary.

3.21.6. Course Outline/Handouts
The outline is a compilation of information that will be expounded upon during the course by the instructor. A course outline is not required, however, if lecture material is given at a speed greater than students can take notes, an outline is recommended. One copy of the outline and all handout materials must be turned in to the program office to be included in the curriculum files.

Content may include:
1. Primary or supplemental information in textual or outline format
2. Graphics
3. Articles for student review
4. Review sheets for exams
5. Sample test questions to facilitate student preparation for exams.
6. Detailed instructions regarding assignments

The following are guidelines for outline preparation:
1. The outline should be typed with page numbers and organized for easy reference.
2. A brief outline requires more extensive note taking on the part of the students. If you lecture fast or have an extensive volume of material to cover, a more in-depth will be needed.
When including assignments in the Course Syllabus or outline, avoid assigning busy work. Remember! Physical Therapy students carry a heavy academic load. Make assignments pertinent and directed towards critical thinking and problem solving whenever possible.

3.22. **Evaluation of Teaching**

3.22.1. **Course Evaluation by Students**
All faculty members will be evaluated by the “Student Opinion of Teaching” survey. This data will be collected every semester for each course that is taught. Approximately two weeks before the end of a semester, each faculty will be given an envelope of blank evaluation forms to be filled out by students anonymously. More specific instructions can be found on the front of the envelope in which the evaluation forms are delivered. On completion, the forms are to be returned to the DPT program office by a designated student for analysis.

While the faculty member may distribute the blank survey forms, a designated student should collect and return the envelope of completed surveys to the operations assistant. The survey is typically given the week before final exams, and should not be given the same class period as the final exam. See Appendix for sample Course Evaluation Form.

3.22.2. **Core Faculty Self-Evaluations**
Core faculty are expected to do a self-assessment of their courses after reviewing each semester’s course evaluations. Faculty should reflect on the mean scores for each question as well as the open-ended comments when considering the strengths of the course and the area for improvement. Typically comments that are repeated multiple times warrant serious consideration, while comments that are conflicting may not hold merit. In any event, faculty should feel free to seek additional feedback from the students where there are multiple conflicting or unclear statements. Faculty should keep a record of changes they make to their courses based on feedback and self-assessment for the purpose of the annual evaluation, for advancement, and for Curriculum Review. See Appendix for sample Core Faculty Self-Evaluation Form.

3.22.3. **Peer Evaluations**
A peer evaluation is performed annually on core faculty by the designated peer evaluator as assigned by the department chair. The evaluator is to sit in on enough lectures/labs to complete the assessment. The assessment includes evaluation of teaching and course objectives. See Appendix for sample Peer Evaluation Form.

3.22.4. **Associated Faculty Evaluations**
The track coordinator and/or department chair will sit in on one or two lectures and/or labs to evaluate teaching methods based on the Peer Evaluation Form. The track coordinator and/or department chair will schedule an appointment to review results of teaching evaluation with each associated faculty member. See Appendix for sample Peer Evaluation Form.
4. **INSTRUCTION**

4.1. Teaching Responsibilities of all Faculty Members

4.1.1. Integration of Faith and Learning
Andrews University is a faith-based institution founded and commissioned to carry out the worldwide mission of the Seventh-day Adventist Church. All faculty are expected to demonstrate in word and deed their harmony with the core tenets of the church. The university supports the values and lifestyles endorsed by the Seventh-day Adventist Church, as well as the integration of faith and learning in the curriculum. 21

4.1.2. Philosophical Foundation for Teaching
An effective teacher implements professional practices guided by a clear philosophy of Christian principles advancing the mission of the university and the Physical Therapy Department by:

4.1.3. Designs Credible Course Content
An effective teacher possesses the core knowledge and understanding in the discipline which is evident in the ability to develop rigorous course material and learning experiences.

4.1.4. Implements Effective Course Content
An effective teacher delivers well-organized course content which engages students in active pursuits of the discipline through various appropriate teaching approaches. See Appendix for resources of Bloom’s taxonomy, and writing course objectives.

4.1.5. Assesses Student Learning
An effective teacher assesses important student learning outcomes regularly in order to improve student learning and to provide data for decision-making and to improve the DPT program. See Appendix for sample grading rubrics.

4.1.6. Reflects on Practice and Refine Course Content
An effective teacher reflects on personal teaching practices and experiences to thoughtfully refine and revise course content.

4.1.7. Builds Relationships With Students
An effective teacher demonstrates a nurturing attitude towards students while building and maintaining appropriate relationships with a diverse student body.

4.1.8. Continues Professional Development
An effective teacher maintains contemporary content knowledge by remaining current in the discipline.

4.2. 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

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21 AU Working Policy 2:308:1:1
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.

4.3. Client/Patient Agreement Form
Incorporating lab subjects/clients into courses is encouraged as this brings “real-life” experiences to students prior to entering a clinical education experience. When lab subjects/clients agree to participate they must complete, sign and submit a Client/Patient Agreement to the instructor prior to participating. Forms should be filed in the course curriculum file for that course. A sample form is included in the appendix, and is available in G:\COMMON\Forms.

4.4. Instructional Technology
4.4.1. Audio-Visual Materials
There are ceiling-mounted projectors with DVD/VCR players in Classrooms A and B, and the Neuro Lab and a television with a DVD/VCR player in the Gym. Two portable TV carts with DVD/VCR players are available for other instruction areas. A portable cart with a projector and DVD/VCR player is also available for your use. Please contact the operations assistant ahead of time to reserve the portable TV or projector carts as they may be in use by other instructors.

You may choose to use an overhead projector which is available for your use. Materials to make your own transparencies are available in the program office. Transparencies can also be made quickly through the copier.

Supplies needed for the audio-visuals mentioned above are available through the operations assistant.

A more extensive or costly production of teaching materials must be approved, in advance, by the department chair. Audio-visual materials prepared at the university’s expense are the property of the university and should remain on file at the university for future use.

4.4.2. James White Library
The James White Library and its two branches hold print books, bound periodical volumes and multimedia materials totaling more than 1.6 million items. The 100,000 square-foot main library provides study and research facilities and the library faculty provide reference and consultation and a library instruction program, a library liaison program for collection development, and interlibrary loan services.  

The strongest collections are in religion, education, architecture and Adventist publications and resources. The library’s automated catalog, JeWeL, can be accessed through the campus computer network as well as globally through the Internet. Through the library website 155 major electronic databases can be accessed through the Internet and from any of the 70 public computer stations located in the main library and its branches. Linking software provides links from the database search results to the library’s over 44,000 print and electronic periodical titles.

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Through the Michigan Library Consortium, the library provides access to MeLCat, a statewide union catalog, patron-initiated interlibrary loan service and book delivery system. Students, faculty and staff can access over 7.8 million unique books and other materials through MeLCat.

The library also has access to the OCLC Online Computer Library Center for cataloging and interlibrary loan information based on data from 69,000 libraries in 112 countries representing over 470 languages and dialects.

4.4.3. Learning Hub
Learning Hub is the on-line learning management tool that is being implemented by Andrews University to complement and supplement your face-to-face courses. If you need assistance in developing and teaching your on-line courses, you may work with your track coordinator or contact the Digital Learning & Instructional Technology (DLiT) for personalized one-on-one assistance. The skills that you will acquire are (1) how to upload and maintain the course content page, (2) how to create and maintain the discussion board, (3) how to create and maintain the grade book, (4) how to deliver online quizzes and tests, (5) how to create and grade from the dropbox tool, (6) how to create and maintain the news section, and (7) how to create and maintain attendance records.

4.4.4. Photocopy Copyright Policy
The following guideline material comes from Questions and Answers on Copyright for the Campus Community, Copyright 1991, National Association of College Stores, Inc. and The Association of American Publishers.

4.4.4.1. Multiple Copies for Classroom use
Multiple Copies (not to exceed in any event more than one copy per pupil in a course) may be made by or for the teacher giving the course for classroom use or discussion provided that:
- The copying meets the tests of brevity and spontaneity as defined below; and,
- Meets the cumulative effect test as defined below; and
- Each copy includes a notice of copyright.

4.4.4.2. Definitions:
Brevity
Poetry: (a) A complete poem if less than 250 words and if printed on not more than two pages or (b) from a longer poem, an excerpt of not more than 250 words.

Prose: (a) Either a complete article, story or essay of less than 2500 words, or (b) an excerpt from any prose work of not more than 1,000 words or 10% of the work, whichever is less, but in any event a minimum of 500 words. (Each of the numerical limits stated above may be expanded to permit the completion of an unfinished line of a poem or of an unfinished prose paragraph).

Illustration: One chart, graph, diagram, drawing, cartoon, or picture per book or per periodical issue.

“Special” works: Certain works in poetry, prose, or in “Poetic prose” which often combine language with illustrations and which are intended sometimes for children and at other times for a more general audience fall short of 2,500 words in their entirety. Paragraph “Poetry” above notwithstanding such “special works” may not be reproduced in their entirety; however, an excerpt comprising not more than two of the published pages of such special work and containing not more than 10% of the words found in the text thereof may be reproduced.
Spontaneity
- The copying is at the instance and inspiration of the individual teacher; and
- The inspiration and decision to use the work and the moment of its use for maximum teaching effectiveness are so close in time that it would be unreasonable to expect a timely reply to a request for permission.

Cumulative Effect
- The copying of the material is for only one course in the school in which the copies are made.
- Not more than one short poem, article, story, essay or two excerpts may be copied from the same author, nor more than three from the same collective work or periodical volume during one class term.
- There shall not be more than nine instances of such multiple copying for one course during one class term. (The limitations above shall not apply to current news periodicals and newspapers and current news sections of other periodicals.)

4.4.4.3. Prohibitions:
Notwithstanding any of the above, the following shall be prohibited:
1. Copying shall not be used to create or to replace or substitute for anthologies, compilations, or collective works. Such replacement or substitution may occur whether copies of various works or excerpts therefrom are accumulated or are reproduced and used separately.
2. There shall be no copying of or from works intended to be "consumable" in the course of study or teaching. These include workbooks, exercises, standardized tests and test booklets and answer sheets and like consumable material.
3. Copying shall not:
   - Substitute for the purchase of books, publisher's reprints or periodicals;
   - Be directed by higher authority;
   - Be repeated with respect to the same item by the same teacher from term to term.
4. No charge shall be made to the student beyond the actual cost of photocopying.

4.5. Class Decorum
Remember teaching is a mentoring relationship. You will need to do your part in order to have the students do theirs. You cannot expect the students' undivided attention unless you are well prepared.

Try not to gain control in a threatening manner but act as a mentor or facilitator of information. You have a wealth of knowledge they have not had access to before your arrival.

In general, cell phones, laptops and other computer devices are not permitted in the classroom as they have been more disruptive than helpful. Students must specifically request instructor permission before using these devices.

At the beginning of the class period, let the students know what you plan to accomplish that day. At the end of the class period review with them what they have learned. Try not to be threatened by student questions. Questions usually arise from a lack of understanding or confusion on the students' part. Physical Therapy students are encouraged through critical thinking to be inquisitive. Questions asked by students or the instructor can help the instructor assess the students' ability to grasp the information presented.
Challenge and coach the students. Use your experience to bring real-life illustrations into the lecture. These illustrations can bring your class to life as well as help the student make the connection between your topic and their chosen profession. Remember, acting as a mentor and affirming positive behaviors will help students reach their goal to be an effective physical therapist.

4.5.1. Responding to Students
1. Be a positive role model.
2. Avoid becoming defensive.
3. Do not take all comments or actions in class on the part of students, personally.
4. Maintain control. If a student continues to persist in disruptive questioning, or press an issue, ask them to see you after class.
5. Do not allow students to be disrespectful.
6. Students are very perceptive! Critically analyze their comments; they may be valid.
7. It is worth noting that many minor and even major problems that may arise regarding classroom control, can be avoided by an instructor that:
   • Is seen as a positive mentor
   • Is caring and consistent
   • Respects the students and treats them professionally
   • Is well prepared
   • Teaches a course in such a way that the student readily perceives the value of the course and the information presented as being pertinent to her/his development as a physical therapist.

4.5.2. Discipline
Physical therapy is a professional program. The attitude that is allowed in the classroom/lab will be the attitude that is perceived to be acceptable in the clinic.
1. If a student is acting or dressing in an inappropriate manner you may ask them to leave. That student can be made responsible for the information missed. (They can get notes from another student, read about it from a text, or meet with you at a time you specify.)
2. If a student has been disciplined, call that student into a private meeting with you later to discuss the inappropriate behavior and consequences.
3. Complete the Student Contact Form and submit to the administrative assistant. Report this student to the department chair immediately.

4.5.3. Accountability
1. You are accountable for the information you share with the students.
2. Give credit to appropriate resources.
3. If presenting controversial issues and/or including your professional opinion, be sure the students understand this.
4. Avoid undue criticism of other individuals or professional groups.
5. Avoid encouraging students to develop clinical practices that are not accepted within the standard practice of physical therapy.

4.6. Classroom Behavioral Policies and Procedures
4.6.1. Starting and Ending Class
1. Arrive early.
2. Most classes begin at thirty (30) minutes after the hour unless otherwise specified on the schedule.
3. Remember to turn off your cell phone prior to beginning class.
4. Alert the students and operations assistant of schedule changes or cancellations in advance.
5. Discuss your intentions regarding your starting time for class the first time you meet, and stick with it. Students must be encouraged to avoid tardiness. Ways to make your attendance policy meaningful include:
a. Design your course such that students feel that they need to be in attendance to gather pertinent information to become good, safe and qualified therapists, as well as prepared for tests and quizzes.
b. Regular, unannounced or timed quizzes (if stated in your course syllabus).
c. Giving quizzes with a documented policy that no late quizzes will be issued.
d. Take attendance; however, it is not recommended that students be given points toward their grade purely for attendance.

6. Talk confidentially and firmly with students who develop a pattern of tardiness. Let them know that entering class late disrupts the other students as well as the instructor.

7. If students know they are going to be absent, they should call the program office at the beginning of the day.

4.6.2. Breaks During Extended Lecture Periods
1. Breaks are usually given only when the lecture period lasts longer than one hour.
2. In general, a ten-minute break should be given after each lecture hour.
3. If you plan to schedule your breaks differently, bring this to the attention of the students at the beginning of the class period.
4. At the instructor’s discretion, the option of skipping the break and getting out ten minutes early may be given to the class but stick with your promise.
5. Please do not allow food consumption in classrooms or laboratories. An occasional special event may be celebrated with food at the beginning or end of class at the instructor’s discretion. Students are allowed to bring water bottles to class as they often have long sessions (and long days) in classes and laboratories.

4.7. Classroom Maintenance
At the completion of the lecture/lab, it is the responsibility of the instructor to make sure the classroom/lab is left neat and clean. One way to do this is to have the students return the room to its appropriate condition prior to leaving. If an instructor consistently finds their room in disarray, she/he should report this to the operations assistant.

4.8. Assumption of Risk / Day Trip Form
In the event students are required to travel off-site for labs, course related activities, or professional meetings the Assumption of Risk Hold Harmless Agreement must be completed, signed, and submitted to the instructor. Forms should be filed in the course curriculum file for that course. A sample form is included in the appendix, and is available in G:\COMMON\Forms.

4.9. 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.

4.10. Testing
It is the goal of the faculty and staff to prepare graduates who are primary healthcare providers ready for contemporary practice. They should also demonstrate ethical behavior, have compassion for their clients and communicate effectively. The testing procedures described here are directed toward accomplishing this goal. The specific testing method, whether quizzes, midterms, sectional exams, etc., is up to the instructor. A grade at the end of the semester, however, must be based on objective data for final grade determination. The final course grade must not be based on one exam only. Students have the right to know how they are progressing throughout the course. Are they grasping the knowledge expected of them? The methods listed below are strongly recommended to be used in addition to the final exam, for determining a grade.

Students must be made aware at the beginning of the course what method the instructor is going to use. The following suggestions are only examples as many other techniques are available. Remember that whichever technique is chosen, it must be written in the course syllabus.

4.10.1. Quizzes
1. May be given at instructor’s discretion.
2. May be subjective or objective.
3. May be unannounced.
4. Can count up to forty (40) percent of the final grade.
5. The lowest one may be dropped.
6. All should be fairly uniform in length. If students are allowed to drop their lowest score, quizzes must all be equal in percentage value.
7. May or may not be returned for study purposes and feedback.

4.10.2. Examinations
1. Sectionals/Midterms
   a. Given at approximately the middle of the semester or after a major section of the course is covered.
   b. Design may be subjective (essay, short answer) or objective (multiple choice).
   c. Midterm exams may count approximately one third to one half of the final grade.
   d. The weight of sectionals toward final grade is variable depending on the number of sectional exams given.
   e. May or may not be returned to the student.
2. Final Exam
   a. Given during finals week.
   b. Format must allow ample time for grading and compilation of final grades prior to the posted deadlines. If assistance is expected in the grading process the examinations should be objective and on computer graded forms (see Appendix).
   c. May count approximately one third to one half of the final grade depending if it is comprehensive.
   d. Final exams are not to be returned to the student.
   e. Final exam scores should not be given to students until all final exams are complete for that semester.

4.11. Test Development
The process is quite flexible.
1. Questions are taken from material covered in class, outside assignments, handouts, syllabus, and the text (if required) and should cover the course objectives.
2. When generating new questions, it is recommended that a colleague read them over and give input.
3. Test questions from previous instructors may be utilized. It is best if they have been validated from the previous use and that they are from tests not permanently returned to the student.
4. Be sure you go over all possible sources of test questions prior to exam.
5. The number of questions should be of sufficient quantity as to cover all aspects of the important material covered.

4.12. Test Procedures
4.12.1. Preparation
1. Have the quiz/exam (typed and copied, etc.) ahead of time.
2. Arrive early in order to set up and start on time.

4.12.2. Administering Exams/Quizzes
1. Each instructor proctors his/her own exam. This allows students who have questions to get answers from the appropriate person.
2. It is the instructor’s responsibility to discourage cheating if at all possible.
3. Have students put away all electronics, close books and study materials.
4. The instructor may ask students to place all books, etc. away from seating area if needed.
5. Students may be asked to sit in every other seat if possible. When there are space limitations, this should be carried out at least in the back few rows.
6. A time for collecting the exam should also be stated at the beginning.
7. Instructor or a designated student should have prayer before starting the exam.
8. The instructor should move around the room, showing a visible presence.
9. Students should use the restroom prior to the exam to prevent the need to leave the room during the exam.

4.12.3. Test Information
1. If the instructor chooses to answer questions about the exam, a time should be stated at the beginning of the test when this will take place during the test (i.e., 30, 60, or 90 minutes after the test begins or after the first three students have finished the exam, but before they leave the room, etc.).
2. All students should have access to the same information. Try to avoid answering individual questions during the exam.

PLEASE NOTE: Most exams are not returned to the students. If the student wishes to go over the exam, this may be permitted by utilizing a future class period, making an appointment to see it in the instructor’s office, or at a place/time designated by the instructor. A TBA session can be arranged for “Test Review” and the exam may be passed out, reviewed, and collected again. All individual student exams, quizzes, papers, assignments, etc., are kept for one year following the end of the semester. All grade books and records need to be kept for one year. They may be kept by the instructor or in the department archives.

4.13. 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.

4.14. 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.

4.14.1. 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.

4.14.2. 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. 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.

4.15. 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 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).

4.16. 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 takes seriously all acts of academic dishonesty. Such acts as described above are subject to incremental discipline for multiple offenses and severe penalties for some offenses. These acts are tracked in the office of the Provost. Repeated and/or flagrant offenses will be referred to the Committee on Academic Integrity for recommendations on further penalties. Consequences may include denial of admission, revocation of admission, warning from a teacher with or without formal documentation, warning from a chair or academic dean with formal documentation, receipt of a reduced or failing grade with or without notation of the reason on the transcript, suspension or dismissal from the course, suspension or dismissal from the program, expulsion from the university, or degree cancellation. Disciplinary action may be retroactive if academic dishonesty becomes apparent after the student leaves the course, program or university.

If you suspect a breach of academic integrity, please send an email to academicintegrity@andrews.edu indicating something along the lines of: “I have a potential academic integrity issue in my class” – no details should be included at this point. Include your phone number, and the Academic Integrity office will call you directly to discuss the concern and determine what steps to take, if any.

4.17. Recording of Lectures by Students

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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.

4.18. **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.

4.19. **Grading/Scoring of Exams**
Each instructor is encouraged to grade her/his own test. Faculty may submit completed Scantron exams, with answer key, to the operations assistant for grading.

4.19.1. **Grading Percentage Guidelines**

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<th>Percentage</th>
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<tr>
<td>A</td>
<td>93 - 100</td>
</tr>
<tr>
<td>A-</td>
<td>90 - 92</td>
</tr>
<tr>
<td>B+</td>
<td>87 - 89</td>
</tr>
<tr>
<td>B</td>
<td>83 - 86</td>
</tr>
<tr>
<td>B-</td>
<td>80 - 82</td>
</tr>
<tr>
<td>C+</td>
<td>77 – 79</td>
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<tr>
<td>Incomplete</td>
<td>0-76 (see Section 8.4)</td>
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</table>

Grade adjustments are the right of each individual instructor. Do not assign letter grades to individual tests, quizzes, or hand-in assignments. Wait until the grades for the semester are totaled to assign letter grades.

4.19.2. **Final Grade Calculation**

1. The Course Syllabus must contain the grading percentage guidelines and the calculation of the final grade.
2. Soft points (papers, class attendance, and other outside assignments) should not exceed twenty-five percent (25%) of the final grade.
3. Hard points (tests and quizzes) should encompass approximately seventy-five percent (75%) or more of the final grade.
4. Two examples:

<table>
<thead>
<tr>
<th></th>
<th>Term paper</th>
<th>Quiz</th>
<th>Midterm/sectional</th>
<th>Final</th>
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</thead>
<tbody>
<tr>
<td>Weight</td>
<td>15%</td>
<td>20%</td>
<td>30%</td>
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<tr>
<td>Weight Section</td>
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<td>Percentage</td>
<td>100%</td>
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3. Satisfactory/Unsatisfactory (S/U) courses: The minimum requirements for passing must be included in the Course Syllabus.

4. DG—Deferred Grade. A DG may be given in certain courses recognized to be of such a nature that all the requirements are not likely to be completed within one semester. It may be given for tours, field/clinical experiences, internships, projects, intensives, comprehensive exams, independent study courses, courses requiring research such as theses and dissertations, and undergraduate upper division courses where mastery learning is required. The Office of Academic Records records a DG for the above listed courses previously recommended by a department and approved by the dean of the appropriate school and/or graduate program committee. An instructor may designate a time limit for a given course or a specific situation for the DG to be changed to a letter grade. All DGs are required to be cleared before a student can graduate, unless they are DGs earned in another currently enrolled degree. An instructor may change the DG to a letter grade (A-F), S/U or DN (Deferred and Not Completable) as appropriate.

5. An Incomplete (“I”) indicates that the student’s work is incomplete because of illness or unavoidable circumstances and not because of negligence or inferior performance. Students will be charged an incomplete fee for each incomplete grade issued. An “I” may be given when the instructor and the student agree to terms stated in an Incomplete Contract. The “I” is given to a student when the major portion of the work for the course has been completed. Instructors are responsible for calculating their own final grades. Notify the department chair prior to submitting any incomplete or failing grades.

6. Instructors are responsible for calculating their own final grades.

7. Any other grading system/format must be cleared with the department chair prior to the beginning of the course.

8. Final grades are due no later than Wednesday after finals week.

4.20. Posting Scores or Grades

Student scores may be posted during the semester, at the discretion of the instructor, through an anonymous identification system. Except for the final grade, no letter grade shall be assigned. No final exam score or final grade for the semester shall be posted until after the last final exam for the class is given. Semester grades are not sent to students, as they are accessed on the AU web site. Grades may be sent to parents or sponsoring institutions if an address was provided in Registration Central.

4.20.1. 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 at the close of each semester and posted on the web within a week.

4.20.2. Grade Problems

Only the instructor or track coordinator is allowed to discuss grades with the student(s). Grades from courses taught by contract faculty/guest instructors may be obtained from the program office after the last final exam of the semester is given and verbal approval is received by the track coordinator or department chair. Any grades given to the student by means other than the official university postings on the Web are considered unofficial and are not binding.
4.21. Late Grades
4.21.1. 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.

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

4.22. Unsatisfactory Scholarship
The instructor must notify and meet with each student whose performance is unsatisfactory to ascertain what can be done 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. Use the Student Contact Form G:\COMMON\Forms. Complete and submit it to the administrative assistant who will distribute a copy to the appropriate individuals.

4.23. 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 will be given points equal to the semester credit for the course and an "Incomplete" (I) or a "Deferred Grade" (DG) for S/U courses/internships will appear on their official grade summary. 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.

4.24. Course Remediation Plan Policy
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. 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 continue on the student's record.

4.25. Bachelor of Health Science Scholastic 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 3.0 minimum semester GPA. The probationary semester is a one-time opportunity and may not be granted in the graduate course work (PT-3 thru PT-9).
4. No more than a cumulative total of five points earned on the grade-points scale throughout the physical therapy program.
5. A cumulative GPA of 2.50 or greater in all credits used to meet the Bachelor's degree requirements.
4.26. **Doctoral Admission Requirements**
Undergraduate DPT students entering the graduate phase of the program (PT-3) must have completed all requirements for their bachelor's degree, 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 3.18.

4.27. **Graduate Scholastic and Professional Requirements (Last 7 Semesters)**
All graduate course work (lectures and laboratories) 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-point 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 3.18.

4.28. **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.

4.29. **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 option of the Physical Therapy Faculty Council upon the recommendation of the respective instructor, track coordinator or the student's academic advisor. This plan must be implemented prior to the student returning to 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.
4.30. Program Withdrawal
If a student leaves the program for academic, personal or medical reasons, both the physical therapy department 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 department chair.

4.31. Readmission Policy
Readmission to the program after the remediation program is not automatic and requires the approval of the Physical Therapy Faculty Council. Students wishing readmission to the physical therapy program must submit a written petition to the Physical Therapy Faculty Council. This petition must be received during the semester following the 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 four or more semesters will require that the student reapply through the Admissions Office using the standard application process, including payment of a new confirmation deposit to the program. This new application will receive consideration by the Physical Therapy Faculty Council along with any and all other applicants who may be applying at that time.

4.32. Faculty Clinical Site Visits
In an effort to assist in maintaining contemporary expertise, all faculty who teach clinical courses are expected to accompany the DCE on at least one clinical site visit per year in their content area to get first-hand feedback from clinical instructors and CCCEs on student performance in that content area.

4.33. 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 3.18. 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.

4.33.1. Procedures for the PDP
Each student must complete a self-assessment form for each professional behavior, perform a peer assessment, and include an element of service as part of their PDP. Each 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. Artifacts that provide opportunities for growth within each of the goal areas 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 that time.

Students are required to meet with their academic advisors each semester to review their PDP, discuss recent achievements, evaluate goals, and develop strategies for further growth and progress. 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 and a reduction of the final grade by \( \frac{1}{2} \) letter for the course which the PDP is assigned. The student will then have the first two weeks of the new semester to successfully complete the previous semester’s PDP assignment. Failure to do so will prohibit the student from attending classes until the PDP is completed. Successful completion of portfolio assignment is indicated by the signature of the advisor on the Advisor Evaluation Form and turning the form in to the instructor of the course to which the PDP is assigned. Students will use their PDP to guide them as they develop into a Physical Therapist professional.

4.34. **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.

4.34.1. **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 I and II, Research Statistics, and Research Projects. Each research group will defend their project through both an oral and a poster presentation to their peers. 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.

4.34.2. **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. 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.

4.34.3. **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.

4.34.4. **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.

4.34.5. Capstone Completion
The capstone research project is not considered complete until the capstone chair 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.

4.34.6. 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 member 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 March 1 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\share\common_folder\research&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.

4.34.7. 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. 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.

4.34.8. 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.

4.35. **Practical Comprehensive Exams (OSCE)**
Each DPT student is required to successfully complete both a practical and written comprehensive examination prior to starting the clinical internships. 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.

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

4.35.2. **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

4.35.3. **Format**
The examination shall occur in multiple stations. One or more examiners shall supervise each station. Another student, faculty member, or person provided by the Department of Physical Therapy may serve as the patient simulator.

4.35.4. **Administration**
The practical comprehensive examination is developed and administered within the Department of Physical Therapy. The instructor(s)/examiner(s) giving the exam for the respective areas of the test are free to use materials from any source.

4.35.5. **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.

4.35.6. **Schedule**
The practical comprehensive examination is usually scheduled during the summer semester of the second year. The content and format of the examination will be announced prior to the examination week of the previous spring semester.
4.35.7. 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.

4.35.8. 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 of the exam.

4.35.9. Failure to pass the practical examination
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

If a student fails the second examination, the individual will be referred to the Physical Therapy Faculty Council to determine an appropriate action, which may include:
3. Further study of specific content and reexamination
4. Postponing of clinical internships until the student is deemed to have reached an appropriate level of knowledge/skill
5. Disqualification from the DPT program

4.36. Written Comprehensive Exams
Each DPT student is required to successfully complete the Written Comprehensive Examination prior to graduating from the program. The purpose for the Written Comprehensive Examination is to appraise the students’ overall grasp of contemporary physical therapy practice and to assess the students’ knowledge, comprehension and application in various areas of concentration as well as the integration of learning across the physical therapy profession.

4.36.1. Registration
Students must register for the Written Comprehensive Examination given during Spring Semester of their third year (PT-8).

4.36.2. Format
The Written Comprehensive Examination is administered by the Physical Therapy Department. The format of the Written Comprehensive Examination is similar to a National Physical Therapy Exam. It is a timed, computer-based mock board exam of multiple-choice questions. It is usually given on the first day of the semester.

4.36.3. Grading and Remediation
The minimum score for successfully completing the exam is set by the PT Faculty Council and is based on the overall pass rate of candidates taking the exam at that time. Students who do not successfully pass the exam will be notified, and a second and different computer-based exam will be scheduled and completed by February 20 at the student's cost, and will be proctored by the PT Department.
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 there is only 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 Internship III, 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 30. Students who fail to pass the exam on the third attempt will be referred to the Physical Therapy Faculty Council to determine appropriate action which may include:
   a. Further study of specific content
   b. Postponing of clinical internships until student is declared to have reached an appropriate level of knowledge/skill
   c. Disqualification from the DPT program

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

4.37. Clinical Education
   Clinical education, comprising classroom preparation and clinical rotations, 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 internships and practicum.

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

4.37.2. 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.

4.37.3. 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 Clinical Education Handbook, which will be reviewed with them during the educational sessions. Clinical Education Handbook

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.

4.37.4. 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.

4.37.5. Clinical Practicum
One four-week practicum experience is assigned to integrate into actual patient care the knowledge and skills learned by the student in the preceding course work.

4.37.6. Clinical Internships
Clinical internships 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 internship, 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 internship.

4.37.7. Clinical Education Agreement
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 on an individual basis 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.

4.37.8. 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 PT department. 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 CCCE's as adjunct faculty to optimize student success in the clinic.

4.37.9. 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 (or a signed waiver) 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), flu vaccines or other medical screenings and treatments, criminal background checks, drug testing (urine or blood), finger printing, character references, 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.

4.37.10. 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, gauchos, 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 finger nail 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.

4.37.11. 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.

4.38. Graduation
4.38.1. Baccalaureate (BHS Degree)
Satisfactory completion of all required course work and a minimum GPA of 2.50 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.
4.38.2. 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 the clinical rotation 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 Department of Physical Therapy. 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 Physical Therapy Department 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 online during the Spring Semester (PT-8).

8. **Collegiate Cap & 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.

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

4.39.1. **Course/Teacher Evaluations**
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.
4.39.2. Graduate Exit Survey
As 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.

4.39.3. 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 and return them as quickly as possible.
5. STUDENT EXPERIENCE

5.1. 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.

5.1.1. Campus Cafeteria 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 http://www.andrews.edu/services/dining/meal-plans/index.html to explore the meal plan choices.

The Gazebo is located on the main floor of the Campus Center. 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.

5.1.2. 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.

5.1.3. 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.

5.1.4. 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.

5.1.5. 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 diskettes 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 physical therapy department also maintains a small computer lab for use by physical therapy students and faculty only. The physical therapy department also maintains a small computer lab for use by physical therapy students and faculty only.

5.1.6. 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.

5.1.7. **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 5:00 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.

5.1.8. **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 or University Manor apartments. The housing office (ext.6979) also maintains a list of non-campus rentals.

5.1.9. **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.

5.1.10. **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.

5.1.11. **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.

5.1.12. **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.

5.1.13. **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.

5.1.14. **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.
5.1.15. 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.

5.1.16. Notary Services (ext. 6490)
Free Notary services are provided free of charge to all DPT students, faculty, and staff by Jillian Panigot, the PT department admissions director. Notary services are also provided for a small fee through the university accounting department on the second floor of the Administration Building.

5.2. 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.

5.3. 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.

5.3.1. 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:

5.3.2. 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. He/She is also involved with graduation weekend activities.

5.3.3. Vice President
Qualities similar to the president. Able to assist the president by following through on given responsibilities. He/She represents the class at faculty council every-other week as well as assisting with graduation weekend activities.

5.3.4. 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.

5.3.5. Secretary
An individual who can take accurate minutes of class meetings and make arrangements for class functions.

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

5.3.7. 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.
5.3.8. **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.

5.3.9. **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.

5.3.10. **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.

5.3.11. **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.

5.3.12. **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.

5.3.13. **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 2016</th>
<th>Sozina Katuli</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class of 2017</td>
<td>Bill Scott</td>
</tr>
<tr>
<td>Class of 2018</td>
<td>Ryan Orrison</td>
</tr>
</tbody>
</table>
5.3.14. Student Club Participation in PT Faculty Council

5.3.14.1. 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.

5.3.14.2. 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.

5.3.15. 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, and faculty sponsor. The department chair may sign in the absence of the faculty sponsor.

5.4. Departmental Assemblies
Departmental assemblies are normally scheduled each semester. One is geared toward the physical therapy students in the program. The others are planned for pre-physical therapy students on the Andrews University campus. These assemblies are normally scheduled to meet at the Physical Therapy Building. Changes in location will be posted.

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

5.5. PT 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.

5.5.1. 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. 26

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; however, athletic shorts are appropriate only for sporting activities.

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 and two-piece bathing suits. Modest shorts are acceptable; however, athletic shorts are appropriate only for sporting activities.

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.

Modest walking shorts are considered appropriate campus wear. Cut-offs, short shorts and bicycle shorts are appropriate only for appropriate labs and athletic activities. Shorts are not permitted in Pioneer Memorial Church at any time.

**Sabbath Dress:** When dressing for Sabbath, attention should be carefully given to neatness and appropriateness. Shorts are not permitted in the cafeteria during Sabbath hours.

### 5.5.2. 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.

### 5.5.3. PT Lab Attire

While in the Physical Therapy Building, laboratory attire is required, which includes loose shorts and T-shirts for women and men. Some labs will require women to have a halter top 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 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.

5.5.4. **Clinical Attire**
Clinical education attire is outlined in the Clinical Education Handbook.

5.6. **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.

5.7. **Prospective Students**
Information regarding the physical therapy programs will be available to all students in several forms. The AUPH 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/shp/pt/entry-level/](https://www.andrews.edu/shp/pt/entry-level/)
2. Entry-level admissions
   [https://www.andrews.edu/shp/pt/entry-level/admission_dpt.html](https://www.andrews.edu/shp/pt/entry-level/admission_dpt.html)
3. PT student resources and PT Student Handbook
   [https://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html](https://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html)

5.8. **Accepted and Enrolled Students**
Students who are accepted into one of the Physical Therapy department programs receive access to the policies and procedures and appropriate student handbooks online. During orientation all Physical Therapy students will be given a copy and web address of the appropriate PT 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 PT Student Handbook.

1. PT Student Handbook
   [https://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html](https://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html)
2. AU Student Handbook

5.9. **Student Handbooks**
Policies and procedures relevant to the AU student will be identified in the DPT or PPPT 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/shp/pt/entry-level/dpt_resources_studen.html](https://www.andrews.edu/shp/pt/entry-level/dpt_resources_studen.html)
2. AU Student Handbook
3. Postprofessional Student Handbook

5.10. **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.
5.10.1. 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 opposite the entrance to Classroom C.

5.10.2. 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.

5.10.3. 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.**

5.11. 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.

5.11.1. 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 (courses outside the DPT program are not included in the block)
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 outlines in the University Bulletin

Student expenses covered by the professional education fee include:
1. Annual basic physical examinations as required for clinical internships (additional tests required by some facilities are at the student's expense)
2. Annual CPR course expenses as required for clinical internships
3. The NPTE review course during PT-8
4. Annual student memberships to the American Physical Therapy Association
5. DCE travel expenses related to clinical visits
6. Physical therapy related equipment for laboratories and research
7. Travel reimbursement of up to $500.00 annually for the class APTA representative to attend the APTA Student Conclave
8. Anatomy laboratory materials and other supplies
9. General course syllabus material that is 100 pages or less and not copyright protected
10. Use and maintenance of the Physical Therapy Computer Lab including the computers and the prepaid printing plan
11. The Graduate Class banquet for the student and a significant other
12. Professional head-shot photographs for internships and cohort composite

5.11.2. Medical Insurance
Physical therapy 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.

5.11.3. Student Internship Expenses
The Department of Physical Therapy will pay for the scheduled standard yearly physical provided by University Medical Specialties, Inc. that includes a TB skin test. The department, if deemed necessary by a physician or clinical site, will pay for one x-ray for those who have a positive TB skin test. It is suggested that if a student is known to have a positive TB skin test, they not go to the expense of the TB skin test but opt for the x-ray only.

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 practicum or internships are the responsibility of the student.

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

5.11.4. 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 at the end of each semester.

5.11.5. 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.

5.12. Professional Organizations
5.12.1. APTA
The APTA is the professional association for physical therapists, representing 68,000 physical therapists and physical therapist assistants 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](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.

5.12.2. Michigan Chapter or MPTA
The Michigan Physical Therapy Association represents more than 7,000 therapists in the State of Michigan. The chapter office mailing address is Michigan Physical Therapy Association, Inc., PO Box 21236, Lansing, MI 48909 (800/242-8131). The chapter home page can be accessed at http://www.mpta.com. The chapter office can be reached via email at mpta@mpta.com.

5.12.3. 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.

5.12.4. 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.

5.12.5. 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.

5.12.6. 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.
5.12.7. Michigan Chapter 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.

5.12.8. 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.

5.12.9. 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.
# 2016 DPT Curriculum Track

## Department of Physical Therapy
### 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>
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<tbody>
<tr>
<td>Ryan Orrison, Coordinator</td>
<td>Caryn Pierce, Coordinator</td>
<td>Betty Oakley, Coordinator</td>
<td>Greg Almeter Coordinator</td>
<td>Lee Olson, Coordinator</td>
<td>David Village, Coordinator</td>
<td>Sozina Katuli, Coordinator</td>
<td>Bill Scott Coordinator</td>
</tr>
<tr>
<td>Anatomy Anatomy Lab Pathokinesiology Pathokinesiology Lab</td>
<td>Behavioral Sciences</td>
<td>Clinical Sciences</td>
<td>Orthopedic Sciences</td>
<td>Neurologic Sciences</td>
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<td>Anatomy Lab Pathophysiology I Pathophysiology II Written Comps</td>
<td>Behavioral Sciences</td>
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## DPT Curriculum Outline for the Class of 2018

**116 Semester Credits**

### FIRST YEAR

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<td>18 credits (DPT)</td>
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<td>PTH415 PT Assessment Skills</td>
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<td>PTH425 PT Assessment Skills Lab</td>
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<td>PTH416 Pathokinesiology</td>
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<td>PTH426 Pathokinesiology Lab</td>
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<td>PTH501 Clinical Internship I (8 weeks)</td>
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<td>PTH661 Orthopedics I</td>
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<td>PTH617 Scholarly Inquiry &amp; Dissemination II</td>
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<td>PTH622 Research Statistics</td>
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<td>PTH627 Orthotics &amp; Prosthetics</td>
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<td>PTH647 Differential Diagnosis</td>
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<td>PTH652 Neurology II</td>
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<tr>
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### SECOND YEAR

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<td>PT-2, Spring (17 weeks)</td>
<td>18 credits (DPT)</td>
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<td>PTH418 General Medicine</td>
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<td>PTH420 Therapeutic Interventions</td>
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<td>PTH430 Therapeutic Interventions Lab</td>
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<tr>
<td>PTH440 Pathophysiology I</td>
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<tr>
<td>PTH445 Neuroscience</td>
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<td>PTH455 Neuroscience Lab</td>
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<td>PTH450 Neurology of Motor Control</td>
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<td>PTH457 Orthopedic Medicine</td>
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<td>PTH460 Comparative Religion</td>
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<td>PTH502 Orthopedics II</td>
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<td>Jasheway</td>
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<td>PTH512 Orthopedics II Lab</td>
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<td>PTH525 Cardiopulmonary</td>
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<td>Forrester/Mihalik</td>
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<td>PTH540 Pediatrics</td>
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<td>PTH550 Pediatrics Lab</td>
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<td>PTH560 PT Administration</td>
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<td>Fortune/Nolte</td>
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<td>PTH565 Integration of Spirituality in Healthcare</td>
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<tr>
<td>PTH599 Research Project (Topic)</td>
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<td>PTH711 Clinical Reasoning I</td>
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<td>PTH721 Clinical Reasoning I Lab</td>
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<td>PTH726 Geriatrics</td>
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<td>PTH743 Teaching, Learning &amp; Leadership in PT</td>
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<td>PTH770 Practical Comprehensive Exam</td>
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<td>PTH799 Research Project (Topic)</td>
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<td>PTH780 Clinical Practicum</td>
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<td>PTH880 Clinical Internship IV (10 weeks)</td>
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<td>PTH882 Clinical Internship II (8 weeks)</td>
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### Core Faculty

- Scott
- Katuli
- Almeter
- Pawielski
- PTH883 Clinical Internship III (9 weeks) | 5 | Scott | |

### Supporting Faculty

- Forrester/Mihalik
- Jasheway
- Russell

### Associated Faculty

- Gonzalez
- Greene
- Pawielski
- Russell
- Katuli

**Total Credits = 116**
Completion of Faculty Orientation

________________________
(Date)

(Faculty Name)
has completed the PT Department Faculty Orientation, as documented by the attached Faculty New Hire Checklist.

________________________
PT Operations Assistant signature

________________________
PT Department Chair and Program Director

Note: This form, along with the completed Faculty New Hire Checklist, should be filed in the new Faculty’s Personnel Folder located in the department chair’s office.
Curriculum Vitae
(All CVs must be submitted in this format)

Name
Andrews University Department of Physical Therapy
Berrien Springs, MI 49104
Home:
Work:

EDUCATION: post high school, from most recent to earliest
Degree
Institution
Major
Date awarded (month/year) or anticipated to be awarded

LICENSURE INFORMATION/REGISTRATION NUMBER:
State and Registration Number:

CERTIFICATIONS:
EGS. ABPTS

EMPLOYMENT AND POSITIONS HELD:
from most recent to earliest
Title/position
Faculty rank, if applicable
Tenure status or other institutional status, if applicable
Institution
City and State
Duration (from – to -)

PEER REVIEWED PUBLICATIONS: from the most recent to the earliest (include those accepted for publication but not yet published, but indicate as such). Include papers in journals, A-V materials published, monographs, chapters in books, and books; provide full bibliographic citation.

Academic Professional Books Published

Major Book Revisions Published

Books/Volumes Edited

Translated Works of Another Author

Refereed Journal Articles

Professional Journal Periodical Articles (accepted not yet published)

Chapters Contributed to Book/Volume

Monographs/Manuals/Academic Essays/Treatises

Book Reviews in Academic Publications
PEER REVIEWED SCIENTIFIC and PROFESSIONAL PRESENTATIONS:
From the most recent to the earliest
  Presenter(s)
  Title
  Occasion
  Date

Platform Presentations

Poster Presentations

Scientific/Scholarly Abstracts

FUNDED/IN REVIEW GRANT ACTIVITY:
  Authorship/participation
  Amount of funding awarded
  Nature of project
  Date and source

CURRENT/ACTIVE RESEARCH ACTIVITY
  Authorship
  Nature
  Funding (external, grant, internal)

Capstone Committees:

Current Research Activity:

MEMBERSHIP IN SCIENTIFIC/PROFESSIONAL ORGANIZATIONS:
  Organization
  Duration (from – to -)
  Position, if applicable

CONSULTATIVE and ADVISORY POSITIONS HELD:
  Title or nature
  Agency
  Duration (from – to -)

Dissertation committees:

Academic Journals Edited/Reviewed

Editorial Referee Activities

Professional Consultations

SERVICE:
  Title or nature
  Agency
  Duration (from – to --)

Non-peer Reviewed Presentations

Non-peer Reviewed Publications

Continuing Education Workshops Conducted/Organized:

Community Service:

Service to the University/School/Department/Councils/Commissions:
Dates
Memberships & chairmanships, if applicable

University:
School:
Physical Therapy Department:

Capstone Committees:

Honors and Awards:
Title or nature
Awarding agency
Date

Continuing Education Attended: (within last 5 years specific to responsibilities in DPT program)
IF YOU ARE USING THIS SECTION TO SHOW CONTEMPORARY EXPERTISE THEN YOU NEED TO BE SURE TO LIST EACH LECTURE (OR AT LEAST SERIES ATTENDED) FOR THE CONFERENCES

TEACHING:

Current Teaching Responsibilities in the Entry-level Physical Therapist Program:
(in sequence, by term; do NOT include courses taught at other institutions!)

Fall Semester
Spring Semester
Summer Semester
Sample Abbreviated Resume and Teaching Confirmation

Andrews University Department of Physical Therapy
(269) 471-6033 ✉ Fax (269) 471-2866
ABBREVIATED RESUME and TEACHING CONFIRMATION
(for associated faculty teaching less than 50% of a course)

Please fill out/update and return in the envelope provided

| NAME | Highest Degree | « |
| HOME ADDRESS | |
| PHONE # | Work: | Home: |
| SS # | |
| EMAIL ADDRESS | |
| CURRENT TEACHING RESPONSIBILITIES | Guest Instructor for «CourseNumber» «CourseName» |

| SOURCES OF CONTEMPORARY EXPERTISE RELATED TO TEACHING ASSIGNMENT |
| Teaching Assignment (content area) | RELATED Employment, Clinical Practice, Con Ed, Formal Courses, Publications or Presentations, etc. | Length / Dates | RELATED Degree, Credentials, Certifications |
| Sample 1: Wound/Burn care | • Multiple Peer reviewed journals and professional presentations. • Wound/burn care coordinator | • N/A • 3 years | PT |
| Sample 2: Reimbursement | • CEO, ACME Billing service, LTD • PT clinic manager | • 2 years • 4 years | MBA |
| Sample 3: Spine Rehabilitation | • 3 orthopedic spine con ed courses • clinical practice | • 2001-2005 • 15 years | PT, OCS |

I hereby agree to provide the services as arranged for «CourseNumber» «CourseName» during «QuarterModule» Semester «Year».

Signature

Date
Writing Behavioral Objectives
University of Utah Department of Physical Therapy
(Adapted with permission from Erikson, N at Eastern Washington University)

COMPONENTS of a Behavioral Objective:

A. AUDIENCE / WHO: audience for whom the objective is intended: “The physical therapist student will...”

B. BEHAVIOR / WHAT: specific observable actions/behaviors the student is to perform or exhibit. Use the taxonomy to identify a verb that distinguishes the level of the behavior.

C. CONDITIONS / “GIVENS:” relevant factors affecting the actual performance.
   1. in the classroom, lab or clinical setting...
   2. upon completion of the assignment or learning task...
   3. after reviewing instruction...
   4. following a lecture, demonstration or discussion...
   5. with(out) the use of notes, text, lab manuals...
   6. when provided with certain materials or equipment...
   7. given a case study, diagram, clinical problem...
   8. on a model, classmate, patient...

D. DEGREE / CRITERION FOR SUCCESS: level of achievement indicating acceptable performance.
   1. to a degree of accuracy, e.g. 90% or + or - 1 s.d.
   2. to a stated proportion, e.g. within 2 mm of mercury
   3. within a given time period
   4. within a given number of trials
   5. to a standard of clinical acceptability
   6. to be verified by an external agency, panel, person
   7. according to criteria set forth in a lab manual, standard operating policy, skill analysis, or other document
   8. to the satisfaction of the instructor

E. Goals should also be “S.M.A.R.T.”
   1. S: Specific – a specific behavior/activity/task
   2. M: Measurable – units of measurement
   3. A: Attainable – achievable and appropriate
   4. R: Relevant – realistic and focused on results
   5. T: Time-based – within a specific time frame

F. Examples:
   1. Following demonstration and practice with the clinical instructor, the student will be able to transfer a patient post stroke from the bed to the wheelchair safely with minimal cuing from the CI.
   2. By midterm, the student will be able to accurately document a daily note according to facility guidelines without CI input.
LEVELS OF OBJECTIVES ACCORDING TO BLOOM’s TAXONOMY

LEVEL ONE OBJECTIVES
Domain: Cognitive - knowledge: The remembering of previously learned material.
Domain: Affective - receiving: getting, holding, and directing the student’s or patient’s attention.
Domain: Psychomotor - perception: using sense organs to obtain cues that guide motor activity.

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<th>Affective Receiving</th>
<th>Psychomotor Perception</th>
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<tbody>
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<td>identify</td>
<td></td>
</tr>
<tr>
<td>itemize</td>
<td>name</td>
<td>name</td>
</tr>
<tr>
<td></td>
<td>reply</td>
<td>reply</td>
</tr>
<tr>
<td></td>
<td>request</td>
<td>request</td>
</tr>
</tbody>
</table>

LEVEL TWO OBJECTIVES
Domain: Cognitive - comprehension: grasping the meaning of the material
Domain: Affective - responding: active participation and reaction by the student
Domain: Psychomotor - set: mental, physical, and emotional readiness to act.

<table>
<thead>
<tr>
<th>Cognitive Comprehension</th>
<th>Affective Responding</th>
<th>Psychomotor Set</th>
</tr>
</thead>
<tbody>
<tr>
<td>classify</td>
<td>answer</td>
<td>label perform</td>
</tr>
<tr>
<td>collect</td>
<td>assist</td>
<td>perform</td>
</tr>
<tr>
<td>compile</td>
<td>collect</td>
<td>present</td>
</tr>
<tr>
<td>convert</td>
<td>comply</td>
<td>repeat</td>
</tr>
<tr>
<td>defend</td>
<td>conform</td>
<td>report</td>
</tr>
<tr>
<td>document</td>
<td>discuss</td>
<td>respond</td>
</tr>
<tr>
<td>estimate</td>
<td>examine</td>
<td>restate</td>
</tr>
<tr>
<td></td>
<td>inspect</td>
<td>show</td>
</tr>
<tr>
<td></td>
<td></td>
<td>start</td>
</tr>
</tbody>
</table>
LEVEL THREE OBJECTIVES
Domain: Cognitive - application: using learned material in new and concrete situations.
Domain: Affective - valuing: displaying consistent behavior which makes a student's values clearly identifiable.

<table>
<thead>
<tr>
<th>Cognitive Application</th>
<th>Affective Valuing</th>
<th>Psychomotor Guided Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>adjust</td>
<td>advise</td>
<td>formulate</td>
</tr>
<tr>
<td>administer</td>
<td>apply</td>
<td>implement</td>
</tr>
<tr>
<td>apply</td>
<td>check</td>
<td>initiate</td>
</tr>
<tr>
<td>arrange</td>
<td>choose</td>
<td>institute</td>
</tr>
<tr>
<td>change</td>
<td>clarify</td>
<td>investigate</td>
</tr>
<tr>
<td>check</td>
<td>complete</td>
<td>specify</td>
</tr>
<tr>
<td>clarify</td>
<td>derive</td>
<td>transfer</td>
</tr>
<tr>
<td>complete</td>
<td>describe</td>
<td>justify</td>
</tr>
<tr>
<td>compute</td>
<td>designate</td>
<td>mobilize</td>
</tr>
<tr>
<td>demonstrate</td>
<td>determine</td>
<td>participate</td>
</tr>
<tr>
<td>discover</td>
<td>differentiate</td>
<td>propose</td>
</tr>
<tr>
<td>examine</td>
<td>distinguish</td>
<td>quantify</td>
</tr>
<tr>
<td>experiment</td>
<td>draw</td>
<td>rate</td>
</tr>
<tr>
<td>handle</td>
<td>evaluate</td>
<td>recommend</td>
</tr>
<tr>
<td>implement</td>
<td>explain</td>
<td>record</td>
</tr>
<tr>
<td>investigate</td>
<td>extract</td>
<td>refer</td>
</tr>
</tbody>
</table>

LEVEL FOUR OBJECTIVES
Domain: Cognitive - analysis: breaking down material into its component parts.
Domain: Affective - organization: comparing, relating, and synthesizing values.
Domain: Psychomotor - mechanism: performance acts where the learned response is habitual and the movements can be performed with proficiency.

<table>
<thead>
<tr>
<th>Cognitive Analysis</th>
<th>Affective Organization</th>
<th>Psychomotor Mechanism</th>
</tr>
</thead>
<tbody>
<tr>
<td>analyze</td>
<td>illustrate</td>
<td>bandage</td>
</tr>
<tr>
<td>assess</td>
<td>manage</td>
<td>handle</td>
</tr>
<tr>
<td>assign</td>
<td>negotiate</td>
<td>investigate</td>
</tr>
<tr>
<td>choose</td>
<td>outline</td>
<td>specify</td>
</tr>
<tr>
<td>diagram</td>
<td>rank</td>
<td>transfer</td>
</tr>
<tr>
<td>derive</td>
<td>rate</td>
<td>turn</td>
</tr>
<tr>
<td>determine</td>
<td>relate</td>
<td></td>
</tr>
<tr>
<td>designate</td>
<td>select</td>
<td></td>
</tr>
<tr>
<td>differentiate</td>
<td>separate</td>
<td></td>
</tr>
<tr>
<td>discuss</td>
<td>simplify</td>
<td></td>
</tr>
<tr>
<td>distinguish</td>
<td>specify</td>
<td></td>
</tr>
<tr>
<td>draw (conclusions)</td>
<td>terminate</td>
<td></td>
</tr>
<tr>
<td>evaluate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### LEVEL FIVE OBJECTIVES

**Domain: Cognitive** - synthesis: putting parts together to form a new whole.

**Domain: Affective** - characterization by a value: behavior is typical or characteristic of that person.


<table>
<thead>
<tr>
<th>Cognitive Synthesis</th>
<th>Affective Characterization</th>
<th>Psychomotor Complex Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>advise</td>
<td>act</td>
<td>adjust</td>
</tr>
<tr>
<td>articulate</td>
<td>communicate</td>
<td>administer</td>
</tr>
<tr>
<td>categorize</td>
<td>direct</td>
<td>apply</td>
</tr>
<tr>
<td>combine</td>
<td>discriminate</td>
<td>bandage</td>
</tr>
<tr>
<td>communicate</td>
<td>display</td>
<td>handle</td>
</tr>
<tr>
<td>compose</td>
<td>instruct</td>
<td>investigate</td>
</tr>
<tr>
<td>consult</td>
<td>practice</td>
<td>speak</td>
</tr>
<tr>
<td>coordinate</td>
<td>propose</td>
<td>specify</td>
</tr>
<tr>
<td>correlate</td>
<td>question</td>
<td>test</td>
</tr>
<tr>
<td>create</td>
<td>revise</td>
<td>transfer</td>
</tr>
<tr>
<td>design</td>
<td>serve</td>
<td>turn</td>
</tr>
<tr>
<td>develop</td>
<td>rearrange</td>
<td></td>
</tr>
<tr>
<td>devise</td>
<td>recommend</td>
<td></td>
</tr>
<tr>
<td>establish</td>
<td>revise</td>
<td></td>
</tr>
<tr>
<td>extrapolate</td>
<td>summarize</td>
<td></td>
</tr>
<tr>
<td>formulate</td>
<td>supervise</td>
<td></td>
</tr>
<tr>
<td>generate</td>
<td>teach</td>
<td></td>
</tr>
<tr>
<td>instruct</td>
<td>write</td>
<td></td>
</tr>
</tbody>
</table>

### LEVEL SIX OBJECTIVES

**Domain: Cognitive** - evaluation: judging the value of material for a given purpose.

**Domain: Psychomotor** - adaptation: modifying well-developed skills to fit a certain requirement of to meet a problem situation.

<table>
<thead>
<tr>
<th>Cognitive Evaluation</th>
<th>Psychomotor Adaptation</th>
</tr>
</thead>
<tbody>
<tr>
<td>appraise</td>
<td>adapt</td>
</tr>
<tr>
<td>compare</td>
<td>alter</td>
</tr>
<tr>
<td>conclude</td>
<td>change</td>
</tr>
<tr>
<td>consult</td>
<td>develop</td>
</tr>
<tr>
<td>contrast</td>
<td>massage</td>
</tr>
<tr>
<td>criticize</td>
<td>mobilize</td>
</tr>
<tr>
<td>direct</td>
<td>position</td>
</tr>
<tr>
<td>discriminate</td>
<td>rearrange</td>
</tr>
<tr>
<td>interpret</td>
<td>reorganize</td>
</tr>
<tr>
<td>justify</td>
<td>revise</td>
</tr>
<tr>
<td>support</td>
<td>schedule</td>
</tr>
</tbody>
</table>
LEVEL SEVEN OBJECTIVES
Domain: Psychomotor - origination: creation of new movement patterns to fit a particular situation or problem.

Psychomotor
Origination
arrange
combine
communicate
compose
construct
design
instruct
manage
originate
teach
Bloom's Taxonomy Comparison

1956

Evaluation
Synthesis
Analysis
Application
Comprehension
Knowledge

Noun

to Verb Form

2001

Create
Evaluate
Analyze
Apply
Understand
Remember
Bloom's Taxonomy (Current)

- **Remembering**: Can the student recall or remember the information?
  - define, duplicate, list, memorize, recall, repeat, state

- **Understanding**: Can the student explain ideas or concepts?
  - classify, describe, discuss, explain, identify, locate, recognize, report, select, translate, paraphrase

- **Applying**: Can the student use information in a new way?
  - choose, demonstrate, dramatize, employ, illustrate, interpret, operate, schedule, sketch, solve, use, write

- **Analyzing**: Can the student distinguish between different parts?
  - appraise, compare, contrast, criticize, differentiate, discriminate, distinguish, examine, experiment, question, test

- **Evaluating**: Can the student justify a stand or decision?
  - appraise, argue, defend, judge, select, support, value, evaluate

- **Creating**: Can the student create a new product or point of view?
  - assemble, construct, create, design, develop, formulate, write
## Sample Grading Rubric: Geriatric Exercise Project

<table>
<thead>
<tr>
<th>Draft 1</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>(5/29)</td>
<td>Turned in on time</td>
<td>Some format concerns</td>
<td>Unformatted</td>
</tr>
<tr>
<td>25 Points</td>
<td>Proper format</td>
<td>Lacking thoroughness</td>
<td>Scanty</td>
</tr>
<tr>
<td></td>
<td>Thorough</td>
<td>Lacking thoroughness</td>
<td>Unorganized</td>
</tr>
<tr>
<td></td>
<td>Well –organized</td>
<td>Somewhat unorganized</td>
<td>Not prioritized</td>
</tr>
<tr>
<td></td>
<td>Prioritization indicated</td>
<td>Prioritization unclear</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Draft 2</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6/5)</td>
<td>Turned in on time</td>
<td>Timeliness</td>
<td>Timeliness</td>
</tr>
<tr>
<td>25 Points</td>
<td>Proper format</td>
<td>Some format concerns</td>
<td>Spelling/grammar issues</td>
</tr>
<tr>
<td></td>
<td>Well-written (grammar, flow, concise, power, etc.)</td>
<td>Some writing concerns</td>
<td>Poorly written</td>
</tr>
<tr>
<td></td>
<td>Evidence cited</td>
<td>Lacking depth/breadth</td>
<td>Some requirements missing</td>
</tr>
<tr>
<td></td>
<td>Sources cited (AMA format)</td>
<td>Insufficient evidence</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Final Paper</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6/16)</td>
<td>Introduction of Topic</td>
<td>Timeliness</td>
<td>Timeliness</td>
</tr>
<tr>
<td>100 Points</td>
<td>Body of paper (rationale for exercise, purpose of the exercise, each exercise listed with proper performance described, precautions/contraindications,</td>
<td>A section missing</td>
<td>Multiple areas of paper less than adequate.</td>
</tr>
<tr>
<td></td>
<td>Evidence (5+ sources including 3 peer-reviewed journal articles)</td>
<td>Some format concerns</td>
<td>Less than expected participation with partner on the project.</td>
</tr>
<tr>
<td></td>
<td>Conclusion</td>
<td>Some writing concerns</td>
<td>Less than 3 pages not including images.</td>
</tr>
<tr>
<td></td>
<td>4 pages double-spaced, not including images</td>
<td>Lacking depth/breadth</td>
<td>Exercises amounting to less than 10 minutes.</td>
</tr>
<tr>
<td></td>
<td>Exercises (sufficient number for 15 minutes of performance, appropriate for older adult and topic, sufficient variety, modified for the older adult)</td>
<td>Insufficient evidence</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Presentation</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6/22 or 25)</td>
<td>Content – contains needed information</td>
<td>Content – lacking sufficient depth</td>
<td>Content – Not DPT level</td>
</tr>
<tr>
<td></td>
<td>Packaging – Delivery displays good preparation. 15 minutes.</td>
<td>Packaging – Not well-prepared. +/- 2 min (15)</td>
<td>Packaging – Poorly prepared; +/- 4 min.</td>
</tr>
<tr>
<td></td>
<td>Human Element – Confident, enthusiastic, voice (heard without shouting, good pace), good leadership; equal contribution by partners.</td>
<td>Human Element – Lacking confidence/enthusiasm, voice (difficult to hear/understand at times); avg. leadership; disproportionate contribution</td>
<td>Human Element – Unsure, appeared bored; poor voice; poor leadership; did not work well with partner; minimal contribution to presentation</td>
</tr>
</tbody>
</table>
### Sample Grading Rubric: for EBP Criteria

<table>
<thead>
<tr>
<th></th>
<th>4 points</th>
<th>3 points</th>
<th>2 points</th>
<th>1 point</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Literature Search</strong></td>
<td>Search process clearly outlined</td>
<td>Search process identified</td>
<td>Search process identified</td>
<td>Search process unclear</td>
</tr>
<tr>
<td></td>
<td>Secondary searches listed if needed</td>
<td>Secondary search should have been done but was not</td>
<td>Some articles selected are relevant and appropriate to topic</td>
<td>Articles selected are not related</td>
</tr>
<tr>
<td></td>
<td>Articles selected are relevant to topic</td>
<td>Some articles selected are relevant and appropriate to topic</td>
<td>No rationale provided for selection of articles</td>
<td>Articles are not appropriate</td>
</tr>
<tr>
<td></td>
<td>Articles selected are appropriate</td>
<td>Rationale provided for selection of articles</td>
<td></td>
<td>No rationale provided</td>
</tr>
<tr>
<td></td>
<td>Rationale provided for selection of articles</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Literature Review</strong></td>
<td>Purpose of study identified</td>
<td>Purpose and results, lacked detail and/or one is missing.</td>
<td>Purpose not clearly identified</td>
<td>Purpose of study not identified</td>
</tr>
<tr>
<td></td>
<td>Number of subjects and groups identified</td>
<td>Important detail missing in 1-2 of the following: Number of subjects, grouping, variables, interventions.</td>
<td>Results were vague or unclear</td>
<td>Results were vague, unclear or not identified</td>
</tr>
<tr>
<td></td>
<td>Variables and how they were measured identified</td>
<td></td>
<td>Important detail missing in 3 of the following: Number of subjects, grouping, variables, interventions.</td>
<td>No strengths/weaknesses identified</td>
</tr>
<tr>
<td></td>
<td>Interventions used</td>
<td></td>
<td></td>
<td>Important detail missing in 3 &gt; of the following: Number of subjects, grouping, variables, interventions.</td>
</tr>
<tr>
<td></td>
<td>Results clearly communicated</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Reasoning</strong></td>
<td>Strengths and weakness of study identified</td>
<td>Strengths/weaknesses of study specifically identified, but implied</td>
<td>Strength/weaknesses of study missing</td>
<td>There is a disconnect between the articles selected and the topic</td>
</tr>
<tr>
<td></td>
<td>Links the articles selected to support the topic</td>
<td>Links some of the articles to the topic</td>
<td>Articles selected are not linked to topic</td>
<td>No ideas or feelings are expressed</td>
</tr>
<tr>
<td></td>
<td>Ideas and feelings are expressed and supported by sound rationale</td>
<td>Some ideas and feelings are expressed and supported by sound rationale</td>
<td>Ideas and feelings are expressed but there is no supporting rationale</td>
<td>No supporting rationale</td>
</tr>
<tr>
<td><strong>Writing Style</strong></td>
<td>Links common ideas/thoughts (the writing flows naturally),</td>
<td>Groups common ideas/thoughts with a little rambling and/or randomness of thought; thoughts/summaries are implied</td>
<td>Only a few ideas are grouped with some rambling and/or randomness of thought; thoughts/summaries are vague</td>
<td>Shows little grouping of common ideas expressing random ideas with little organization</td>
</tr>
<tr>
<td></td>
<td>Thoughts/summaries are clearly expressed</td>
<td>a couple of sentences are incomplete and/or awkward</td>
<td>several sentences are incomplete</td>
<td>Difficulty understanding the purpose or meaning of sentence</td>
</tr>
<tr>
<td></td>
<td>sentences are complete</td>
<td>only a couple of grammar or spelling errors</td>
<td>several grammar or spelling errors</td>
<td>The number of errors detract from the meaning of the sentence and overall paper</td>
</tr>
<tr>
<td></td>
<td>no grammar or spelling errors</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Sample Scoring Rubric: Lab Report

**BIOL 464 Systems Physiology**

25 points)

<table>
<thead>
<tr>
<th>Excellent (5 pts)</th>
<th>Good (4 pts)</th>
<th>Adequate (3 pts)</th>
<th>Needs work (2 pts)</th>
<th>Poor (1 pt)</th>
<th>Absent (0 pts)</th>
<th>Lab score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introduction</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Provides a clear &amp; understandable background, including all necessary literature citations</td>
<td>One of the “excellent” conditions is missing or is poorly written</td>
<td>Two of the “excellent” conditions are missing or are poorly written</td>
<td>Three of the “excellent” conditions are missing or are poorly written</td>
<td>Four of the “excellent” conditions are missing or are poorly written</td>
<td>All “excellent” conditions are missing or are poorly written</td>
<td></td>
</tr>
<tr>
<td>2. Provides a clear statement of the experiment’s significance or importance</td>
<td>Most methods are included, but 1-2 steps are vague or unclear</td>
<td>Most methods are included, but 2-3 steps are vague or unclear</td>
<td>Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted.</td>
<td>Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted.</td>
<td>Methods are completely missing</td>
<td></td>
</tr>
<tr>
<td>3. Provides a clear statement of the hypothesis and research question being asked</td>
<td>One of the “excellent” conditions is missing or is poorly written</td>
<td>Two of the “excellent” conditions are missing or are poorly written</td>
<td>Three of the “excellent” conditions are missing or are poorly written</td>
<td>Four of the “excellent” conditions are missing or are poorly written</td>
<td>All “excellent” conditions are missing or are poorly written</td>
<td></td>
</tr>
<tr>
<td>4. Provides a clear statement of the experiment’s goal</td>
<td>Most methods are included, but 1-2 steps are vague or unclear</td>
<td>Most methods are included, but 3+ steps are vague or unclear</td>
<td>Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted.</td>
<td>Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted.</td>
<td>Methods are completely missing</td>
<td></td>
</tr>
<tr>
<td>5. Provides a clear overview of research methods and why those methods were used</td>
<td>One of the “excellent” conditions is missing or is poorly written</td>
<td>Two of the “excellent” conditions are missing or are poorly written</td>
<td>Three of the “excellent” conditions are missing or are poorly written</td>
<td>Four of the “excellent” conditions are missing or are poorly written</td>
<td>All “excellent” conditions are missing or are poorly written</td>
<td></td>
</tr>
</tbody>
</table>

| **Methods** |              |                  |                    |             |               |           |
| 1. Provides a clear, step-by-step overview of methods | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 2. Written in narrative format, not a list or recipe | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 3. Methods are explained well enough for another scientist to replicate the experiment | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 4. Visual aids are included where necessary, or where they could be helpful for illustrative purposes | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| **Results** |              |                  |                    |             |               |           |
| 1. Results are clearly recorded and organized so that it is easy for the reader to see trends. | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 2. All appropriate tables and graphs are included, with titles and legends | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 3. All tables and graphs are explained in the text | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 4. Statistical analysis is included where appropriate and explained | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 5. If multiple experiments were performed, they are clearly distinguished in separate paragraphs | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |

| **Discussion** |              |                  |                    |             |               |           |
| 1. Results are reiterated in the context of the research goals | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four or more of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 2. Results are interpreted and the conclusions follow the data (not wild guesses or leaps of logic) | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 3. Hypothesis is rejected or accepted based on the data. | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 4. Applications or real world connections are discussed | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 5. Potential modifications to the experiment are discussed | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 6. Appropriate literature citations are included | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |

| **Abstract, Literature Cited, Format & Style** |              |                  |                    |             |               |           |
| 1. Abstract is clearly written | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 2. All formatting guidelines are followed: | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| a. Margins are not less than ½ inch | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| b. Line spacing: 1.5-2.0 | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| c. 12 point font | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |
| 3. In-text citations and Literature Cited sections follow CSE guidelines | Most methods are included, but 1-2 steps are vague or unclear | Most methods are included, but 2-3 steps are vague or unclear | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are so vague that the experiment would be difficult to repeat. The reader must guess at how the data was gathered or how the experiment was conducted. | Methods are completely missing |
| 4. At least 3 literature citations are included | One of the “excellent” conditions is missing or is poorly written | Two of the “excellent” conditions are missing or are poorly written | Three of the “excellent” conditions are missing or are poorly written | Four of the “excellent” conditions are missing or are poorly written | All “excellent” conditions are missing or are poorly written |

**Total Score:**

PLEASE NOTE: Plagiarism of ANY kind (including but not limited to copying from literature sources or other students, past or present) will automatically result in a score of 0.
<table>
<thead>
<tr>
<th>Sample Patient Education Teaching Session</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A (5--4)</strong></td>
</tr>
<tr>
<td><strong>Need to Know</strong></td>
</tr>
<tr>
<td><strong>Learning Theories</strong></td>
</tr>
<tr>
<td><strong>Simplicity</strong></td>
</tr>
<tr>
<td><strong>Reinforcement</strong></td>
</tr>
<tr>
<td><strong>Written instructions</strong></td>
</tr>
</tbody>
</table>
Sample Lab Practical Exam: Physical Agents

Name: ____________________________ Date: __________________

Procedure: _______________________________________________________________________________________________________________

1. Therapist obtains informed consent of patient: (5 pts)
   b. Explains the procedure to the patient.
   d. Uses non-medical language.
   e. Checks understanding of patient.

2. Therapist prepares area for treatment. (2 pts)
   a. Has all needed supplies (gel, towels, electrodes, etc.)
   b. Insures that all amplitude controls are at zero.

3. Positions Patient. (3 pts)
   a. Placed in a well-supported, comfortable position.
   b. Exposes area to be treated
   c. Drapes patient appropriately.

4. *Inspects area to be treated (2 pt)
   a. Checks for sensation and skin integrity.

5. *Therapist applies physical agent safely and correctly (5 pts)
   a. Therapist chooses the correct physical agent
   b. Therapist chooses the correct parameters for the condition
   c. Therapist sets up the equipment appropriately
   d. Therapist follows the correct procedure for application
   e. Therapist asks feedback from patient

6. *Therapist Assessment (5 pts)
   a. Therapist knows appropriate and inappropriate responses to treatment
   b. Therapist knows what physiological effects will be produced by chosen physical agent.
   c. Therapist can choose appropriate post treatment measures to evaluate effectiveness.
   d. Therapist knows how to modify treatment.

* Points lost in these categories can result in an automatic failure of the practical exam as these have to do with patient safety concerns.

Comments: ________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________

G:\ADMISSION & MARKETING\Handbooks\2016 PnP 9.0.docx
119
Name:_____________

Briefly answer the following questions based on your selected case scenario, keep track of your time as you only have 10 mins to write and set-up. You may begin setting up as soon as you are done writing.

1. What is your physiological/treatment goal for this patient?

2. List the relevant contraindications for this physical agent.

3. List the treatment parameters with a brief rationale.
REQUIRED DPT Course Syllabus: 10-weeks

ANDREWS UNIVERSITY
SCHOOL OF HEALTH PROFESSIONS
DEPARTMENT OF PHYSICAL THERAPY

COURSE SYLLABUS

Number and Title:
Course Description:
Successful completion of previous DPT coursework and concurrent enrollment in XYZ – this would be lecture and lab eg. PTH400 and PTH410.

Course Prerequisites:

Semester and Year:
Department Offering Course:
Physical Therapy

Credit Hours:
Course Clock Hours and Schedule Per Semester (lecture / lab hours): (Please adjust the highlighted areas accordingly for the amount of credits and remove the highlight and this note before publishing)

1 lecture credit = 15-16 clock hours of classroom instruction
1 laboratory credit = 30-45 clock hours in the lab

Estimation of Time Use for Completing Assignments for this Course (FYI teachers- For LECTURE CLASSES ONLY THAT OCCUR IN LESS THAN 15 WEEK SEMESTERS LAB Classes do not need the breakdown below just the "1 laboratory credit = 30-45 clock hours in the lab" statement above. The formula is #credits * 60 hours. This is based upon 1hour face-face per credit and 3 hours outside of class per credit= 4 hours per credit * 15 weeks. Please remove the FYI and the formula before publishing syllabus)

A professional graduate-level (X) credit course requires a total of (X*60) hours for course lectures, reading requirements, service-learning project, and written assignments. For this course, the instructor estimates that this total of 60 hours will be distributed in the following activities:

- Class Lectures: 15 hours
- Reading: 30 hours
- Written Assignments: 10 hours
- Service-learning Project: 5 hours

Course schedule will be provided at the start of the course.

Instructor(s):
Office Location:
Telephone No.:

Description of Teaching Methods and Learning Experiences:
Professional Expectations: In keeping with the “Professional Expectations” guidelines in your DPT Student Handbook and the professional behavior that all members of a health care team uphold, each student enrolled in this course is expected to act in a respectful and professional manner. This includes, but is not limited to, being punctual and prepared for every class session; respecting one’s classmates and the instructor during class discussions; working independently of classmates when asked to do so; working in a positive and productive manner with classmates on group projects; respecting oneself by presenting one’s own ideas and opinions in a positive and thoughtful manner that demands the attention and respect of classmates; being committed to a positive learning experience.

Cell phones, personal laptops and other portable electronic or recording devices should be turned off before entering the classroom. Picture taking during class is not allowed. Recording devices are allowed only if pre-approved by the instructor and, if approved, recordings are not to be posted on a public venue.

Academic Integrity: 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 (see the University Bulletin).

Disability Accommodation: If you qualify for disability accommodation under the Americans With Disability Act, please contact the Student Success Office in Nethery Hall by telephone 269-471-6096 or email disabilities@andrews.edu.

Emergency Protocols: Andrews University takes the safety of its students seriously. Signs identifying emergency protocols are posted throughout buildings. Instructors will provide guidance and direction to students in the classroom in the event of an emergency affecting that specific location. It is important that you follow these instructions and stay with your instructor during any evacuation or shelter emergency.

Course Procedures: **FYI - This section includes methods of student evaluation/grading – ie tests, quizzes assignments**This FYI is not to be included in your syllabus please remove before saving**

Additional Course Requirements (if any):

Grading Policy:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>93 - 100%</td>
</tr>
<tr>
<td>A-</td>
<td>90 - 92%</td>
</tr>
<tr>
<td>B+</td>
<td>87 - 89%</td>
</tr>
<tr>
<td>B</td>
<td>83 - 86%</td>
</tr>
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<td>B-</td>
<td>80 - 82%</td>
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Method of Student Evaluation:

<table>
<thead>
<tr>
<th>Method</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Exams (2)</td>
<td>50%</td>
</tr>
<tr>
<td>Practical Exam</td>
<td>20%</td>
</tr>
<tr>
<td>Quizzes</td>
<td>20%</td>
</tr>
<tr>
<td>Participation</td>
<td>10%</td>
</tr>
<tr>
<td>Grade</td>
<td>Percentage</td>
</tr>
<tr>
<td>-------</td>
<td>------------</td>
</tr>
<tr>
<td>C+</td>
<td>77 - 79 %</td>
</tr>
<tr>
<td>Incomplete</td>
<td>0 – 76%</td>
</tr>
</tbody>
</table>

(see Academic Policies in DPT Student Handbook)

**Required Textbook & Recommended Readings:**
- Required: (include ISBN #)
- Recommended: (if any)
- For price information, please see the listing at the Bookstore www.andrews.edu/bookstore.

**Course Objectives with Related Student Learning Outcomes (SLO)**

The following is added to help guide you in completing the Course Objectives above and does not need to be included with your syllabus – Please remove this statement if you are going to include the goals.

**DPT Student Goals (Expected Student Outcomes)**

In accordance with the Physical Therapy Department 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.
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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.
REQUIRED DPT Course Syllabus: 15-17-weeks

ANDREWS UNIVERSITY
SCHOOL OF HEALTH PROFESSIONS
DEPARTMENT OF PHYSICAL THERAPY

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<td>20%</td>
</tr>
<tr>
<td>Participation</td>
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</tr>
</tbody>
</table>

*(please remove this note and highlights before publishing)*

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Required: (include ISBN #)
Recommended: (if any)

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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.
Sample DPT New Hire Checklist

Physical Therapy Department
Faculty New Hire Checklist

<table>
<thead>
<tr>
<th>INITIAL WHEN COMPLETE</th>
<th>ACTIVITY</th>
<th>RESPONSIBLE PARTY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>New hire paperwork&lt;br&gt;(list various forms/steps)</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Prior to arrival on campus:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Computer services set-up</td>
<td>James</td>
</tr>
<tr>
<td></td>
<td>Campus Safety for Parking permit / AU ALERT</td>
<td>Program Office</td>
</tr>
<tr>
<td></td>
<td>Assign a Faculty “mentor”</td>
<td>Department Chair</td>
</tr>
<tr>
<td></td>
<td>Add University’s “New Employee Orientation” to new hire’s calendar</td>
<td>Admin Assistant</td>
</tr>
<tr>
<td></td>
<td>Add University’s “New Faculty Orientation” to new hire’s calendar (in August)</td>
<td>Admin Assistant</td>
</tr>
<tr>
<td></td>
<td>View Department presentation G:\COMMON\Forms\Physical Therapy Presentation and SHP departments and programs (link)</td>
<td>Self</td>
</tr>
<tr>
<td></td>
<td>Complete the online “Preventing Workplace Harassment” module with HR</td>
<td>Self</td>
</tr>
<tr>
<td></td>
<td>Complete the online “FERPA” module with HR/Records and submit certificate to department chair</td>
<td>Self – certificate</td>
</tr>
<tr>
<td></td>
<td>Schedule appt to review Student Handbook and Policies and Procedures Handbook with Department Chair</td>
<td>Admin Assist</td>
</tr>
<tr>
<td></td>
<td><strong>After arrival on campus:</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Building tour plus copy of building floor plan</td>
<td>Faculty Mentor</td>
</tr>
<tr>
<td></td>
<td>Operations Assistant orientation (see next page)</td>
<td>Ops Assistant</td>
</tr>
<tr>
<td></td>
<td>Lab equipment orientation, as needed</td>
<td>Faculty Assistant</td>
</tr>
<tr>
<td></td>
<td>General Campus tour</td>
<td>Faculty Mentor</td>
</tr>
<tr>
<td></td>
<td>Review Policy and Procedures Handbook</td>
<td>Department Chair</td>
</tr>
<tr>
<td></td>
<td>Review Student Handbook</td>
<td>Department Chair</td>
</tr>
<tr>
<td></td>
<td>Review of Job Description and Workload</td>
<td>Department Chair</td>
</tr>
<tr>
<td></td>
<td>Vacation Scheduling</td>
<td>Department Chair</td>
</tr>
<tr>
<td></td>
<td>Department computer services orientation: set-up and checkout</td>
<td>James / Penny</td>
</tr>
<tr>
<td></td>
<td>Budget overview and Expense Reports</td>
<td>Admin Assistant</td>
</tr>
<tr>
<td></td>
<td>Travel Request Form &amp; Hold Harmless Form</td>
<td>Admin Assistant</td>
</tr>
<tr>
<td></td>
<td>Client / Patient Agreement</td>
<td>Admin Assistant</td>
</tr>
<tr>
<td></td>
<td>Print out, sign, and submit to Chair the &quot;Acknowledgement of Completion of Faculty Orientation&quot; form</td>
<td>Admin Assistant</td>
</tr>
</tbody>
</table>
### Physical Therapy Department
### Operations Assistant Faculty New Hire Checklist

<table>
<thead>
<tr>
<th>INITIAL WHEN COMPLETE</th>
<th>ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>New hire paperwork (list various forms/steps)</td>
</tr>
<tr>
<td></td>
<td>Complete for new hire:</td>
</tr>
<tr>
<td></td>
<td>List serves</td>
</tr>
<tr>
<td></td>
<td>Name plate on door</td>
</tr>
<tr>
<td></td>
<td>Notify Todd re ID card building entrance</td>
</tr>
<tr>
<td></td>
<td>Office supplies</td>
</tr>
<tr>
<td></td>
<td>PAC code</td>
</tr>
<tr>
<td></td>
<td>Schedule Library orientation (if desired)</td>
</tr>
<tr>
<td></td>
<td>Telephone and long-distance code set-up</td>
</tr>
<tr>
<td></td>
<td>Complete with new hire:</td>
</tr>
<tr>
<td></td>
<td>Additional office supplies</td>
</tr>
<tr>
<td></td>
<td>Birthday</td>
</tr>
<tr>
<td></td>
<td>Building lock-up procedures / anatomy lab access</td>
</tr>
<tr>
<td></td>
<td>Building safety</td>
</tr>
<tr>
<td></td>
<td>Business cards</td>
</tr>
<tr>
<td></td>
<td>Copier orientation</td>
</tr>
<tr>
<td></td>
<td>Copy of building floor plan (when available)</td>
</tr>
<tr>
<td></td>
<td>Department computer services orientation: put laptop reservations in calendar / check out and classroom set-up</td>
</tr>
<tr>
<td></td>
<td>Department telephone orientation</td>
</tr>
<tr>
<td></td>
<td>Faculty computer workroom</td>
</tr>
<tr>
<td></td>
<td>Hopkins Studio</td>
</tr>
<tr>
<td></td>
<td>Information Directory – the campus phone book – explain the sections and voice mail</td>
</tr>
<tr>
<td></td>
<td>Keys</td>
</tr>
<tr>
<td></td>
<td>Name tag</td>
</tr>
<tr>
<td></td>
<td>Phone / PT phone list</td>
</tr>
<tr>
<td></td>
<td>Supply Rooms</td>
</tr>
</tbody>
</table>
## Physical Therapy Department

### Faculty Semester Checklist

<table>
<thead>
<tr>
<th>INITIAL WHEN COMPLETE</th>
<th>ACTIVITY</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Prior to start of semester:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Work with Operations Assistant:</td>
<td></td>
</tr>
<tr>
<td>a. To order samples of textbooks or teacher's desk copies</td>
<td></td>
</tr>
<tr>
<td>b. To develop number of lecture/lab hours required to cover your content.</td>
<td></td>
</tr>
<tr>
<td>c. To develop semester schedule within deadlines</td>
<td></td>
</tr>
<tr>
<td>d. To include day/time for any guest lecturers in the schedule</td>
<td></td>
</tr>
<tr>
<td>e. To plan for any day/time/room changes for unique content, i.e. extending lab times or cancelling classes</td>
<td></td>
</tr>
<tr>
<td>2. Work with Administration Assistant:</td>
<td></td>
</tr>
<tr>
<td>a. To arrange for hiring of guest lecturers</td>
<td></td>
</tr>
<tr>
<td>b. To develop abbreviated resume of guest lecturers</td>
<td></td>
</tr>
<tr>
<td>c. To ensure payment of guest lecturers</td>
<td></td>
</tr>
<tr>
<td>3. Order student textbooks for purchase at AU Bookstore</td>
<td></td>
</tr>
<tr>
<td>4. Create/update syllabi using PT department format:</td>
<td></td>
</tr>
<tr>
<td>• 10-week semester (&quot;short&quot; for 3rd-year courses)</td>
<td></td>
</tr>
<tr>
<td>• 15-17 week semester</td>
<td></td>
</tr>
<tr>
<td>5. Upload updated syllabi into iVue and PT O:drive before semester begins</td>
<td></td>
</tr>
<tr>
<td>6. Schedule Peer Eval observation with your assigned evaluate (assignment list with Admin Assistant)</td>
<td></td>
</tr>
<tr>
<td>7. Post Office Hours when you will be available to students.</td>
<td></td>
</tr>
<tr>
<td><strong>Beginning of semester:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Place a copy of updated syllabi into the Curriculum Drawer in Program Office</td>
<td></td>
</tr>
<tr>
<td>2. EQUIPMENT such as dept laptops must be reserved and checked out with Ops Assistant</td>
<td></td>
</tr>
<tr>
<td>3. SCHEDULE/ROOM CHANGES must be arranged by the Ops Assistant</td>
<td></td>
</tr>
<tr>
<td>4. If a student is struggling at any time during the semester, make an appointment to meet with them individually to tutor or coach them. Complete and submit Student Contact Form.</td>
<td></td>
</tr>
<tr>
<td><strong>Mid-term exams:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Meet with any student who is struggling, and complete and submit a Student Contact Form.</td>
<td></td>
</tr>
<tr>
<td>2. Submit mid-term grades online in Banner by due date (applies during PT-1 and PT-2)</td>
<td></td>
</tr>
<tr>
<td>3. Be prepared for Grade Preview during PT Faculty Council</td>
<td></td>
</tr>
<tr>
<td><strong>End of semester:</strong></td>
<td></td>
</tr>
<tr>
<td>1. Be prepared for PT Faculty Council Grade Preview the Tuesday prior to Finals Week.</td>
<td></td>
</tr>
<tr>
<td>2. Be prepared for PT Faculty Council Grade Review the Tuesday following Finals Week</td>
<td></td>
</tr>
<tr>
<td>3. Submit grades online in Banner by due date</td>
<td></td>
</tr>
<tr>
<td>4. Place documents into the Curriculum Drawer:</td>
<td></td>
</tr>
<tr>
<td>a. final grades</td>
<td></td>
</tr>
<tr>
<td>b. any handouts</td>
<td></td>
</tr>
<tr>
<td>c. originals of tests and exams</td>
<td></td>
</tr>
<tr>
<td>d. samples of assignments</td>
<td></td>
</tr>
<tr>
<td>e. sign-off the checklist in Program Office</td>
<td></td>
</tr>
<tr>
<td><strong>Grade change practices:</strong></td>
<td></td>
</tr>
<tr>
<td>1. DG (Deferred Grade) changed online</td>
<td></td>
</tr>
<tr>
<td>2. INC (incomplete Grade) changed online</td>
<td></td>
</tr>
<tr>
<td>3. Letter Grade change – complete form, meet with Chair</td>
<td></td>
</tr>
</tbody>
</table>
Sample SHP Travel Authorization

Andrews University
School of Health Professions

Travel Authorization

Name: ____________________________ ID#: __________________

Destination: ____________________________ Dates: __________________

I propose to travel by: □ Car □ Plane □ Train □ Other ____________________________

This Travel □ will not impact my classes □ impacts my classes. Satisfactory arrangements have been made.

Expense □ is budgeted □ not budgeted (needs Dean’s approval)

Purpose of travel:
□ Convention Name of convention: ____________________________
  □ Active Participant □ Presenting Paper □ Other ____________________________

□ Student Recruitment
□ Professional Development
□ Other ____________________________

Participant Signature: ____________________________ Date: __________

*Chair/Dean Approval: ____________________________ Date: __________

*For faculty travel – Chair signature is required.
For Chair travel and non-budgeted requests – Dean signature is required.

Budgetary Provision

Department(s) to be charged: ____________________________

Account(s) to be charged: ____________________________

Expenses will be covered by requesting organization: ____________________________
Sample Client/Patient Agreement Form

ANDREWS UNIVERSITY DEPARTMENT OF PHYSICAL THERAPY

Doctor of Physical Therapy Program

Client/Patient Agreement

By signing below, I signify my understanding and agreement that the primary goal of the Physical Therapy Education Program of Andrews University is to graduate students who have acquired both the knowledge and skill needed to treat clients competently and safely. I understand that this knowledge and these skills are developed and refined through a variety of learning experiences. I further understand that I will be participating as a practice patient/client for physical therapy students and agree that any benefit I receive is secondary to the educational experience for the student. I agree to hold harmless Andrews University, its trustees, officers, employees, students, insurers and agents from any liability, injury or damages I may suffer as a result of my voluntary participation in this educational experience. I understand that I will not be asked to pay for any physical therapist services received during the course.

Date: ____________________________________________________________

Client’s Signature

______________________________________________________________

Witness

Client’s Printed Name
Sample Assumption of Risk and Hold Harmless Agreement

ASSUMPTION OF RISK AND HOLD HARMLESS AGREEMENT

DAY TRIP

By signing my name below, I indicate that I choose to participate in ,
a day trip scheduled to take place on 2015 (hereafter, the “Trip”). On the Trip, students will

[brief description of student activities]

The “Trip Sponsor” is . The “Trip Organizers” are Andrews University, its trustees, officers, employees, agents, volunteers, and assigns.

I understand and agree that there are risks involved in the Trip and I hereby accept any and all risks, including but not limited to property damage and/or loss, transportation accidents, physical exertion, injury, illness and disease, inadequate access to medical treatment, disability, and death. To the fullest extent permitted by law, I agree to indemnify, defend and hold harmless the Trip Organizers from and against any and all claims arising out of or resulting from my participation in the Trip. A “claim,” as used in this agreement, means any claim, suit, action, damage, financial loss, or expense, including, but not limited to attorney’s fees, resulting from my participation in the Trip. In addition, I voluntarily hold harmless the Trip Organizers from any and all claims, both present and future, that may be made by me or my family, estate, heirs or assigns. I hereby expressly agree to indemnify, defend and hold harmless the University for any claim arising out of or incident to my participation in the Trip, except for claims arising out of the sole gross negligence or willful misconduct of Andrews University, its officers or full-time employees. I understand and agree that this agreement is intended to be as broad and inclusive as permitted by law and that if any portion is held to be invalid, I agree that the remaining portion of this agreement shall continue in full force and effect.

I affirm that I have current medical insurance coverage and that such coverage is adequate to cover any injuries I might experience as a result of my participation in the Trip.

I understand that views expressed in venues associated with the Trip do not necessarily reflect the views of the Trip Organizers.

NOTE: This is a legal document that affects your legal rights. Your signature below signifies that you have read the document carefully, that you understand it, and that you agree with its terms as a prerequisite to any participation in the Trip.

I agree to the terms and conditions of this Assumption of Risk and Hold Harmless Agreement.

Signature – Legal Name

Date

Printed Legal Name

Emergency contact & phone number

If the student is under the age of 18, a parent/legal guardian must sign below.

On behalf of my child/charge, I agree to the terms and conditions of this Assumption of Risk and Hold Harmless Agreement.

Signature of Parent/Legal Guardian

Date

Printed Name of Parent/Legal Guardian
Sample Student Contact Form

Student Contact Form

The purpose of this form is to document a conversation between a faculty member and a DPT student, in order to facilitate that student’s academic and professional development. This record is also used to assess the student’s progress in relation to the Professional Behaviors policy.

1. Core, adjunct, or associated faculty may initiate and complete the form.
2. The reason for, details of the meeting, and any required course of action are documented.
3. Any documentation will be copied to the student and their academic advisor.
4. The faculty member will confer with the department chair if performance of behavior is clearly below the expectations of policy.
5. The faculty member forwards the completed form to the administrative assistant.

Commitment to Learning / Use of Feedback
The ability to self-assess, self-correct and self-direct; identify needs and sources of learning; continually seek new knowledge and understanding. The ability to identify sources of and seek out feedback; to effectively use and provide feedback for improving interpersonal interaction.

Interpersonal Skills / Communication Skills
The ability to interact effectively with patients, families, colleagues, other healthcare professionals and the community; deal effectively with cultural or ethnic diversity issues. The ability to communicate effectively (speaking, body language, reading, writing, listening) for varied audiences and purposes.

Effective use of Time and Resources / Stress Management
The ability to obtain the maximum benefit from a minimum investment of time and resources. The ability to identify sources of stress and to develop effective coping behaviors.

Problem-Solving / Critical Thinking
The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes. The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, illusions, assumptions; distinguish the relevant from the irrelevant.

Professionalism / Responsibility
The ability to exhibit appropriate professional conduct and to represent the profession effectively (attitude, demeanor, and appearance appropriate for health care setting). The ability to fulfill commitments and be accountable for actions and outcomes.

PT Department 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

Effective: 2016
# Student Contact Form

<table>
<thead>
<tr>
<th>Student name</th>
<th>[ ] Commitment to Learning / Use of Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of occurrence</td>
<td>[ ] Interpersonal Skills / Communication Skills</td>
</tr>
<tr>
<td>Meeting date</td>
<td>[ ] Effective use of Time &amp; Resources / Stress Management</td>
</tr>
<tr>
<td>Academic advisor name</td>
<td>[ ] Problem Solving / Critical Thinking</td>
</tr>
<tr>
<td>Faculty name</td>
<td>[ ] Professionalism / Responsibility</td>
</tr>
<tr>
<td>(Use electronic signature)</td>
<td>[ ] Core Values</td>
</tr>
<tr>
<td>Semester of program</td>
<td>[ ] Class Attendance</td>
</tr>
<tr>
<td>Course number/name</td>
<td>[ ] Absent from Examinations</td>
</tr>
<tr>
<td>[ ] Professional</td>
<td></td>
</tr>
<tr>
<td>[ ] Academic</td>
<td></td>
</tr>
<tr>
<td>[ ] Professional</td>
<td></td>
</tr>
<tr>
<td>[ ] Academic</td>
<td></td>
</tr>
<tr>
<td>Meeting details</td>
<td>[ ] Low Scores on Examinations</td>
</tr>
<tr>
<td></td>
<td>[ ] Missing Assignments</td>
</tr>
<tr>
<td></td>
<td>[ ] Late / Incomplete Assignments</td>
</tr>
<tr>
<td></td>
<td>[ ] Low Scores on Assignments</td>
</tr>
<tr>
<td></td>
<td>[ ] Other</td>
</tr>
<tr>
<td>STUDENT</td>
<td>[ ] Meet with instructor by (date)</td>
</tr>
<tr>
<td>Planned course of action/follow-up</td>
<td>[ ] Meet with academic advisor by (date)</td>
</tr>
<tr>
<td>[ ] Meet with department chair by (date)</td>
<td>[ ] No action required</td>
</tr>
<tr>
<td>FACULTY</td>
<td>[ ] Other</td>
</tr>
<tr>
<td>Planned course of action/follow-up</td>
<td></td>
</tr>
<tr>
<td>Distribution</td>
<td>Student</td>
</tr>
<tr>
<td>Office Use Only</td>
<td>Academic advisor</td>
</tr>
<tr>
<td></td>
<td>Course instructor</td>
</tr>
<tr>
<td></td>
<td>Department chair</td>
</tr>
</tbody>
</table>
## Applicant Funnel for Entry Level DPT Program

PTCAS opens July 1, closes October 15

<table>
<thead>
<tr>
<th>Date</th>
<th>Accept (awaiting deposits or confirmed)</th>
<th>MINIMUM GPA (Science &amp; Core)</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 1 – September 30</td>
<td>Up to 30 students</td>
<td>Freshman Acceptance GPA or above</td>
</tr>
<tr>
<td>3 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>October 1 – November 31</td>
<td>Up to 35 students</td>
<td>3.4 GPA or above</td>
</tr>
<tr>
<td>2 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(includes Summer grades)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>December 1 – February 28</td>
<td>Up to 40 students</td>
<td>3.4 GPA or above</td>
</tr>
<tr>
<td>3 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(includes Fall grades)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>March 1 – May 31</td>
<td>Up to 45 students</td>
<td>3.3 GPA or above</td>
</tr>
<tr>
<td>3 months</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(includes Spring grades)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>June 1 – 1st day of class</td>
<td>Up to 40 students to begin cohort with 40</td>
<td>3.2 GPA or above</td>
</tr>
<tr>
<td>3 months</td>
<td>Deny below 3.2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Deny all except Alternate List</td>
<td></td>
</tr>
</tbody>
</table>

Revised: May 2016
Sample Student Course Evaluation with Lab

DRAFT

<table>
<thead>
<tr>
<th>Class Climate</th>
<th>Course Evaluation</th>
</tr>
</thead>
</table>

Andrews University

Mark as shown: ☐ ☐ ☐ ☐ Please use a ball point pen or a thin felt tip. This form will be processed automatically.
Correction: ☐ ☐ ☐ ☐ Please follow the examples shown on the left hand side to help optimize the reading results.

1. The Course

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 This course helped me to express my ideas more clearly.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2 The learning objectives or goals for this course were clearly stated.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3 The grading system of this course was appropriate for the objectives of the course.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4 Methods of evaluation were fair and accurate measures of my learning.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.5 This course helped me to critically evaluate different sources and/or points of view.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. The Instructor

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 The instructor was well prepared and organized.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2 The instructor made the subject clear and understandable.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3 The instructor stimulated my interest in the subject.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.4 The instructor kept me involved in the learning process.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.5 The instructor motivated me to do my best work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.6 The instructor was sensitive to and respectful of all people.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.7 The instructor was available to provide help when needed.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.8 The instructor helped me to understand the course content from a Christian perspective.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.9 Timely, thoughtful, and helpful feedback was provided on tests and other work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please go to the next page.
3. The Laboratory

<table>
<thead>
<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1</td>
<td>Personnel were competent, helpful &amp; available during each laboratory session.</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>3.2</td>
<td>Equipment was adequate to perform the laboratory procedures.</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>3.3</td>
<td>Explanations of procedures were clear and appropriate to the level of the laboratory.</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>3.4</td>
<td>Experience clarified and supported material covered in lecture.</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>3.5</td>
<td>Activities were allocated adequate time to complete the required in-lab and reporting activities.</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
</tbody>
</table>

4. Overall Rating

<table>
<thead>
<tr>
<th></th>
<th>Poor</th>
<th>Fair</th>
<th>Good</th>
<th>Very Good</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1</td>
<td>How would you describe your level of learning in this course?</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>4.2</td>
<td>Independent of the instructor, my overall rating of this course is:</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
<tr>
<td>4.3</td>
<td>Independent of the course, my overall rating of this instructor's teaching effectiveness is:</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
<td>☐ ☐ ☐ ☐ ☐</td>
</tr>
</tbody>
</table>

Please go to the next page.
5. Open-ended items

5.1 Comments regarding the laboratory:

5.2 Comments regarding the instructor:

5.3 Comments regarding instructor 2 or the lab assistant:

5.4 What was done particularly well in this course?

5.5 What could be done to improve this course?
## Sample Peer Evaluation Form

### Andrews University
Department of Physical Therapy

**FACULTY PEER EVALUATION**

<table>
<thead>
<tr>
<th>Faculty Member Being Evaluated:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Course # &amp; Title:</strong></td>
<td>Lecture</td>
</tr>
<tr>
<td>Peer Evaluator:</td>
<td></td>
</tr>
</tbody>
</table>

**DIRECTIONS:** Visits must continue to be made until the evaluator has appropriately assessed each item on this form. The evaluator and the evaluatee will then meet to review and summarize the visit(s).

<table>
<thead>
<tr>
<th>Instructional Set</th>
<th>Detracted from Instruction</th>
<th>Neutral</th>
<th>Enhanced Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Introduced session content</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. Established mood and climate</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. Motivated students to learn</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4. Related utility of skill</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5. Established a knowledge base</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6. Stated class/lab period objectives clearly</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**Learning Techniques**

| 7. Clarified terminology | 1 | 2 | 3 | 4 | 5 |
| 8. Presented major & supporting concepts | 1 | 2 | 3 | 4 | 5 |
| 9. Used visuals, examples, illustrations | 1 | 2 | 3 | 4 | 5 |
| 10. Used emphasis techniques | 1 | 2 | 3 | 4 | 5 |
| 11. Used notes but allowed for eye contact | 1 | 2 | 3 | 4 | 5 |
| 12. Responded to student feedback | 1 | 2 | 3 | 4 | 5 |
| 13. Evaluated student understanding | 1 | 2 | 3 | 4 | 5 |

**Classroom Presentation**

| 14. Was organized | 1 | 2 | 3 | 4 | 5 |
| 15. Showed good quality of delivery | 1 | 2 | 3 | 4 | 5 |
| 16. Encouraged attentiveness of students | 1 | 2 | 3 | 4 | 5 |
| 17. Encouraged students to think | 1 | 2 | 3 | 4 | 5 |
| 18. Allowed time for class discussion | 1 | 2 | 3 | 4 | 5 |
| 19. Made effective use of class time | 1 | 2 | 3 | 4 | 5 |

**Instructor Tactics**

| 21. Showed an appropriate level of enthusiasm | 1 | 2 | 3 | 4 | 5 |
| 22. Knew if the students were bored or confused | 1 | 2 | 3 | 4 | 5 |
| 23. Was aware of student needs | 1 | 2 | 3 | 4 | 5 |
| 24. Gave opportunity for questions | 1 | 2 | 3 | 4 | 5 |
| 25. Gave appropriate responses to questions | 1 | 2 | 3 | 4 | 5 |
| 26. Related course material to real-life situations where appropriate | 1 | 2 | 3 | 4 | 5 |
| 27. Demonstrated Christian behavior | 1 | 2 | 3 | 4 | 5 |
**DIRECTIONS:** Visits must continue to be made until the evaluator has appropriately assessed each item on this form. The evaluator and the evaluation will then meet to review and summarize the visit(s).

<table>
<thead>
<tr>
<th>Detracted from Instruction</th>
<th>Neutral</th>
<th>Enhanced Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Closure</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Introduced no new material</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>29. Summarized major points</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>30. Provided sense of achievement</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>31. Related to class/lab period objectives for cohesion</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

32. Overall feelings about the teaching session (GESTALT)

<table>
<thead>
<tr>
<th>Worst Possible</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>Best Possible</th>
</tr>
</thead>
</table>

33. Strengths of Sessions

34. Suggestions for Improvement

---

Signature acknowledges peer review and summarization of visit between evaluator & evaluatee.

Evaluator Signature  Date  Evaluatee Signature  Date
Sample Core Faculty Self Evaluation Form

Andrews University
Department of Physical Therapy
FACULTY SELF-EVAL

Name & Rank: __________________________ Date: January 20__

<table>
<thead>
<tr>
<th>TEACHING:</th>
<th>Needs Improvement</th>
<th>Consistency meets required standards</th>
<th>Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I carry “normal” teaching load.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. I begin and end class on time, and missed class periods are made up.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. I assess courses annually/biannually.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4. I keep regular office hours</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>• Full-time 6-8 hrs/wk</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>• Part-time 3-4 hrs/wk</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5. I provide timely feedback to students – generally returning papers/tests within a week.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>6. I advise/counsel students.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Quality:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. I integrate the AU and Department mission statements into teaching practice</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>My teaching quality is assessed as satisfactory based on:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. • Student evaluations and anecdotal evidence (letters, etc)</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>9. • Peer evaluation</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>10. • Self-evaluation using discipline-appropriate standards</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>11. My course materials are updated regularly</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>12. Where appropriate and doable, there were a variety of teaching methodologies explored and used in my class</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>13. I demonstrate enthusiasm for the discipline</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>14. I am available to advisees</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>15. I attend one or more continuing education course(s) related to pedagogy or my teaching area at least every other year.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>16. I apply specific scholarly research or clinical practice to improve teaching and instruction</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>17. I am willing to participate in some cross-disciplinary teaching or other activities. *</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>18. I mentor students in teaching. **</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

* For satisfactory rating, cross-disciplinary activity expected only in one of: Teaching or Research.
** For satisfactory rating, mentoring expected in only one of: Teaching, Research, or Service.

Comments: Please comment on all 1’s and 5’s given above.
# Research & Scholarly Activity

<table>
<thead>
<tr>
<th>Quantity:</th>
<th>Needs Improvement</th>
<th>Consistently meets required standards</th>
<th>Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Minimum criteria: I have at least one peer-reviewed research presentation or publication every other year or five within the past ten years.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. I attend one or more professional conventions/year.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. I present a scholarly peer-reviewed paper every 1 or 2 years at local, regional or national professional conference.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4. I publish a refereed article every 2 or 3 years.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5. I have a terminal degree in discipline – usually a doctorate.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**Quantity:**

<table>
<thead>
<tr>
<th>Quality:</th>
<th>Needs Improvement</th>
<th>Consistently meets required standards</th>
<th>Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. I pursue specialized research either related to teaching area or to contribute to the scholarly community/knowledge of discipline.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>7. I nurture professional and scholarly connections.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>8. I take part in cross-disciplinary research *</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>9. I mentor: **</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

* Assoc Prof - students in research and scholarly activity.
** Professor - students and colleagues in research & scholarly activity.

* For satisfactory rating, cross-disciplinary activity expected only in one of: Teaching or Research.
** For satisfactory rating, mentoring expected in only one of: Teaching, Research, or Service.

Comments: Please comment on all 1's and 5's given above.
## SERVICE TO AU, CHURCH, AND COMMUNITY

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Needs Improvement</th>
<th>Consistently meets required standards</th>
<th>Superior</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I regularly attend department faculty meetings.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. I regularly attend school and university general faculty meetings, unless on special assignment, sabbatical or research semester.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>3. I contribute service to the department by serving on 2-3 department projects/special committees.</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>4. I contribute on 1-2 committees in (an) other School/University level(s).</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>5. I contribute service in one of the following areas:</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>• University levels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ii. University-wide</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Church levels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Local – serve/assist in some capacity (e.g. SS teacher, deacon/ness)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ii. Area/union</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>iii. Division or larger.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Community</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. Serve in some volunteer capacity (e.g. help with blood drive, United Way, Speaker’s Bureau, etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Quality:**

| 5. I am collegial with my department colleagues (camaraderie). | 1 | 2 | 3 | 4 | 5 |
| 7. Am faithful in committee attendance and other commitments. | 1 | 2 | 3 | 4 | 5 |
| 8. I show quality by saving anecdotal and/or other evidence. | 1 | 2 | 3 | 4 | 5 |
| 9. I mentor students in service activities. ** | 1 | 2 | 3 | 4 | 5 |

* For satisfactory rating, cross-disciplinary activity expected only in one of: Teaching or Research.
** For satisfactory rating, mentoring expected in only one of: Teaching, Research, or Service.

**Comments:** Please comment on all 1’s and 5’s given above.

---

**Signature**

**Date**
DPT Course Descriptions

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

PTH400
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: PTH410.

PTH410
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: PTH400.

PTH415
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: PTH425.

PTH416
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: PTH400 and 410. Co requisite: PTH426.

PTH418
General Medicine
Clinical techniques applied to the examination, evaluation, treatment, and discharge planning of patients in general medical and acute-care. Emphasis on physical therapy intervention with relevant factors, management of pain and physical complications during medical treatment, and examination and treatment of special populations including wound and burn care. Co requisite: PTH428.

PTH420
Therapeutic Interventions
Basic principles, physiologic effects, indications and contraindications, application and usage of equipment, and intervention rationale for hydrotherapy, thermal agents, wound care, massage, electrotherapy and mechanotherapy (traction) and other therapeutic interventions. Co requisite: PTH430.

PTH425
PT Assessment Skills Laboratory
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, limb girth and volumetric measurement will be practiced. Clinical application in basic physical therapy care procedures will be introduced. Co requisite: PTH415.

PTH426
Pathokinesiology Laboratory
Biomechanical and observational analysis of normal and abnormal human movement. Integration of basic examination skills with gait and movement analysis. Prerequisites: PTH400 and 410. Co requisites: PTH416.
PTH428
General Medicine Laboratory
Practice in assessment modified for the acute-care environment. Applications include home-and workplace evaluation for architectural barriers, functional evaluation tools, casting, and modification of treatment for acute care including goal setting and professional note writing. Co requisite: PTH418.

PTH430
Therapeutic Interventions Lab
Supervised practicum includes patient positioning and application of the therapy to obtain desired physiological response. Techniques of hydrotherapy, thermal agents, wound care, and massage, as well as specific electrotherapy and mechanotherapy treatments and assessment of physiological responses to those treatments. Co requisite: PTH420.

PTH440
Pathophysiology I
Sequence studying disease processes affecting major body systems and the resulting anatomical and pathophysiological changes. Clinical presentations and pharmacological treatment of patients with those disease processes are presented, as well as diagnostic tests and laboratory values used to identify pathological conditions. Prerequisites: PTH400 and 410.

PTH445
Neuroscience
Basic anatomy and functions of the central and peripheral nervous systems and their related structures. Pathways of the central and peripheral nervous systems are examined along with a detailed study of each of the 12 pairs of cranial nerves. Prerequisites: PTH400 and 410.
Co requisite: PTH445.

PTH450
Neurology of Motor Control
An introduction to the function and interaction of the primary areas of the nervous system involved in controlling human movement, including the cortex, spinal cord, peripheral receptor system, basal ganglia, cerebellum, and the vestibular systems. Students are introduced to terminology and concepts associated with both normal function and pathology in these areas.

PTH455
Neuroscience Laboratory
Study of the prospected central and peripheral nervous tissues, models, and charts. Imaging will be used to compare normal to abnormal CNS presentation. Prerequisites: PTH400 and 410.
Co requisite: PTH445.

PTH457
Orthopedic Medicine
Medical lectures covering selected topics in orthopedics, including common orthopedic diseases and the use of diagnostic testing and imaging in the orthopedic field.

PTH460
Topics in Comparative Religion
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.

PTH540
Pathophysiology II
Sequence studying disease processes affecting major body systems and the resulting anatomical and pathophysiological changes. Clinical presentations and pharmacological treatment of patients with those disease processes considered, as well as diagnostic tests and laboratory values used to identify pathological conditions. Prerequisites: PTH400 and 410.
PTH601
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 prior to tests is covered, 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
Orthopedics II
Jasheway
A continuation of the presentation of information regarding orthopedic pathology of the spine with emphasis on treatment techniques for the different pathologies from a physician and physical therapist's perspective. A decision making model focusing on a differential diagnosis is incorporated throughout the course. Co requisite: PTH612.

PTH610
Therapeutic Exercise
Pierce
Examines the systemic responses to exercise as related to both an acute nature and in response to training. Specific pathological conditions are discussed in relation to exercise testing and prescription, and a clinical decision making process is presented for working with additional pathological conditions. Co requisite: PTH620.

PTH611
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. Co requisite: PTH601.

PTH612
Orthopedics II Laboratory
Jasheway
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.

PTH616
Scholarly Inquiry and Dissemination
Katuli
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
Katuli
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.

PTH620
Therapeutic Exercise Laboratory
Pierce
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 PT Guide to Practice are highlighted. Co requisite: PTH610.

PTH622
Research Statistics
Katuli
Fundamental procedures in collecting, summarizing, presenting, analyzing, and interpreting statistical data. Statistical tests applied to medical specialties. Prerequisite: Co requisite: PTH632.
Lectures covering selected topics in cardiopulmonary medicine, focusing on clinical presentation, diagnostic tests, and medical and physical therapy interventions. Co requisite: PTH635.


Practice in the computation of statistical data using appropriate formulas. Practical applications of techniques in research and statistical computations including probability, normal distribution, Chi Square, correlations, and linear regressions. Co requisite: PTH622.

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.

Practice of the physical therapy techniques required in the application of orthotic and prosthetic devices. Special attention given to gait and function. Selected topics such as wheelchair modifications, miscellaneous ortho-rehab apparatus, and other assistive/adaptive devices included. Co requisite: PTH627.

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.

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.

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.

Analysis of the 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
Pediatrics Lab
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
Neurology I
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
Neurology II
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
Neurology I Laboratory
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
Neurology II Laboratory
Clinical application, rehabilitation practice, and techniques applied to basic physiological and neurophysiological mechanisms specific to nervous system dysfunction. Focus on techniques appropriate for use with neurologic patients and evaluation of patient response to treatment. Prerequisite: PTH662. Co requisite: PTH652.

PTH680
Clinical Practicum
Practice of the knowledge and skills developed in the classroom and laboratory in a patient-care setting. This practicum consists of 4 weeks full-time physical therapy experience in clinical facilities affiliated with the university. Repeatable.

PTH711
Clinical Reasoning I
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

PTH721
Clinical Reasoning I Laboratory
A continuation of PTH721 Clinical Reasoning I. Labs are designed to reinforce specific skills (evaluative or therapeutic) applicable to each lecture topic. Corequisite: PTH711

PTH712
Clinical Reasoning II
A continuation of PTH711 Clinical Reasoning I. Prerequisite: PTH711 Corequisite: PTH722

PTH722
Clinical Reasoning II
A continuation of PTH712 Clinical Reasoning I Laboratory. Prerequisite: PTH712 Corequisite: PTH721
PTH726
Geriatrics  (2)
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.

PTH728
Christian Finance Seminar  (1)
This course emphasizes the principles of Christian stewardship in everyday life. It addresses stewardship not only as it relates to finances but also to other human resources such as time, and talent. It will also address the elements of personal and family budgeting and investing.

PTH736
Psychosocial Issues in Healthcare  (3)
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.

PTH743
Teaching, Learning and Leadership in Physical Therapy  (3)
An exploration of the role of the physical therapist in teaching, learning and leadership in the classroom, clinical setting and community. Examination and application of education theory and skills. Analysis and application of prevention, health promotion, wellness and fitness for individuals, groups and communities. Identification of personal strengths and preferred leadership styles, and applications of personal and interpersonal principles of leadership. Synthesis of the role of Physical Therapist's in teaching, learning and leadership through design and integration of a community assessment and prevention of disability service project.

PTH765
Ethical & Legal Issues in Healthcare  (1)
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  (1)
Summarization of previous or added learning experiences relative to contemporary issues in physical therapy. An overview of the new graduate’s role and responsibility to his/her patients and their families, employer, and community in the expanding physical therapy profession.

PTH770
Oral Comprehensive Examination  (0)

PTH799
Research Project (topic)  (1,1,1)
Provides students with guidelines and supervision for data collection, analysis, thesis preparation and oral presentation. To be repeated to 3 credits.

PTH870
Written Comprehensive Examination  (0)

PTH880
PT Seminar  (1)
Preparation of a personal portfolio, assessment of the clinical experiences and preparation for professional licensure.
Clinical Internship I, II, III, IV

Advanced full-time clinical experience (8-10 weeks each) in a variety of professional practice settings. One of the internships must be in outpatient orthopedics, inpatient, and a neurology setting. Thirty-six to forty hours per week. May be repeated.
<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Absence, Excused</td>
<td>59</td>
</tr>
<tr>
<td>Absence, Unexcused</td>
<td>59</td>
</tr>
<tr>
<td>Academic Freedom</td>
<td>26</td>
</tr>
<tr>
<td>Academic Integrity</td>
<td>60</td>
</tr>
<tr>
<td>Academic Terms</td>
<td>43</td>
</tr>
<tr>
<td>Access to Personnel Files</td>
<td>22</td>
</tr>
<tr>
<td>Accreditation Standards</td>
<td>43</td>
</tr>
<tr>
<td>Admissions</td>
<td>17</td>
</tr>
<tr>
<td>Assistant, Administrative</td>
<td>15</td>
</tr>
<tr>
<td>Assistant, Clinical Education</td>
<td>17</td>
</tr>
<tr>
<td>Assistant, Operations</td>
<td>16</td>
</tr>
<tr>
<td>Assumption of Risk / Day Trip Form</td>
<td>56</td>
</tr>
<tr>
<td>Attendance</td>
<td>56</td>
</tr>
<tr>
<td>AU Alert</td>
<td>59</td>
</tr>
<tr>
<td>Bulletin Boards</td>
<td>37</td>
</tr>
<tr>
<td>Campus Services</td>
<td>77</td>
</tr>
<tr>
<td>Capstone</td>
<td>66</td>
</tr>
<tr>
<td>Class Absences</td>
<td>59</td>
</tr>
<tr>
<td>Class Calendar</td>
<td>43</td>
</tr>
<tr>
<td>Class Cancellation</td>
<td>59</td>
</tr>
<tr>
<td>Class Clubs</td>
<td>79</td>
</tr>
<tr>
<td>Class Decorum</td>
<td>54</td>
</tr>
<tr>
<td>Class Schedule</td>
<td>43</td>
</tr>
<tr>
<td>Classroom Behavioral Policies and Procedures</td>
<td>55</td>
</tr>
<tr>
<td>Classroom Maintenance</td>
<td>56</td>
</tr>
<tr>
<td>Client/Patient Agreement Form</td>
<td>52</td>
</tr>
<tr>
<td>Clinical Assignments</td>
<td>71</td>
</tr>
<tr>
<td>Clinical Education</td>
<td>70</td>
</tr>
<tr>
<td>Clinical Internships</td>
<td>71</td>
</tr>
<tr>
<td>Clinical Practicum</td>
<td>71</td>
</tr>
<tr>
<td>Clinical Site Visits, DCE</td>
<td>71</td>
</tr>
<tr>
<td>Clinical Site Visits, Faculty</td>
<td>65</td>
</tr>
<tr>
<td>Complaint Procedure</td>
<td>26</td>
</tr>
<tr>
<td>Computers</td>
<td>32</td>
</tr>
<tr>
<td>Core Faculty Assessment</td>
<td>23</td>
</tr>
<tr>
<td>Core Values</td>
<td>5, 47</td>
</tr>
<tr>
<td>Course Description Outline</td>
<td>43</td>
</tr>
<tr>
<td>Course Outline/Handouts</td>
<td>49</td>
</tr>
<tr>
<td>Course Remediation Plan Policy</td>
<td>63</td>
</tr>
<tr>
<td>Course Syllabus</td>
<td>49</td>
</tr>
<tr>
<td>Curriculum Outline</td>
<td>43</td>
</tr>
<tr>
<td>Curriculum Review Committee</td>
<td>41</td>
</tr>
<tr>
<td>Degree Requirements, Bachelor of Health Science</td>
<td>63</td>
</tr>
<tr>
<td>Degree Requirements, Doctor of Physical Therapy</td>
<td>64</td>
</tr>
<tr>
<td>Departmental Assemblies</td>
<td>81</td>
</tr>
<tr>
<td>Discrimination and Harassment</td>
<td>30</td>
</tr>
<tr>
<td>Doctoral Admission Requirements</td>
<td>64</td>
</tr>
<tr>
<td>DPT Faculty Advising Responsibilities</td>
<td>44</td>
</tr>
<tr>
<td>Dress Code</td>
<td>81</td>
</tr>
<tr>
<td>Dropping Out</td>
<td>28</td>
</tr>
<tr>
<td>Drug-Free Workplace</td>
<td>31</td>
</tr>
<tr>
<td>Equal Rights for Hired Personnel</td>
<td>22</td>
</tr>
<tr>
<td>Equipment Inventory</td>
<td>33</td>
</tr>
<tr>
<td>Equipment Loans</td>
<td>33</td>
</tr>
<tr>
<td>Equipment Maintenance</td>
<td>33</td>
</tr>
<tr>
<td>Equipment Purchase</td>
<td>33</td>
</tr>
<tr>
<td>Evacuation procedure for emergency exit</td>
<td>38</td>
</tr>
<tr>
<td>Evaluation of Teaching</td>
<td>50</td>
</tr>
<tr>
<td>Evaluation, DCE</td>
<td>24</td>
</tr>
<tr>
<td>Evaluation, Department Chair</td>
<td>25</td>
</tr>
<tr>
<td>Evaluation, Faculty Annual Review</td>
<td>25</td>
</tr>
<tr>
<td>Evaluation, Faculty Check Sheet</td>
<td>23</td>
</tr>
<tr>
<td>Evaluation, Research Track Coordinator</td>
<td>25</td>
</tr>
<tr>
<td>Facility Access</td>
<td>34</td>
</tr>
<tr>
<td>Facility Extracurricular Use</td>
<td>34</td>
</tr>
<tr>
<td>Facility Maintenance</td>
<td>34</td>
</tr>
<tr>
<td>Facility, Student Access</td>
<td>36</td>
</tr>
<tr>
<td>Facility, Student Lockers</td>
<td>37</td>
</tr>
<tr>
<td>Facility, Student Use</td>
<td>34</td>
</tr>
<tr>
<td>Faculty &amp; Staff</td>
<td>11</td>
</tr>
<tr>
<td>Faculty Annual Review</td>
<td>25</td>
</tr>
<tr>
<td>Faculty Committee Membership</td>
<td>20</td>
</tr>
<tr>
<td>Faculty Council</td>
<td>41</td>
</tr>
<tr>
<td>Faculty Liability</td>
<td>31</td>
</tr>
<tr>
<td>Faculty Mentor</td>
<td>20</td>
</tr>
<tr>
<td>Faculty Orientation</td>
<td>20</td>
</tr>
<tr>
<td>Faculty Workload</td>
<td>21</td>
</tr>
<tr>
<td>Faculty, Clinical</td>
<td>19</td>
</tr>
<tr>
<td>Faculty, Core</td>
<td>18</td>
</tr>
<tr>
<td>Fire</td>
<td>38</td>
</tr>
<tr>
<td>First-Aid</td>
<td>39</td>
</tr>
<tr>
<td>Goals, Faculty</td>
<td>7</td>
</tr>
<tr>
<td>Goals, Program</td>
<td>7</td>
</tr>
<tr>
<td>Goals, Student</td>
<td>7</td>
</tr>
<tr>
<td>Grade Points Scale (not GPA)</td>
<td>63</td>
</tr>
<tr>
<td>Grading, Final Calculation</td>
<td>61</td>
</tr>
<tr>
<td>Grading, Percentage Guidelines</td>
<td>61</td>
</tr>
<tr>
<td>Grading, Posting Scores or Grades</td>
<td>62</td>
</tr>
<tr>
<td>Grading, Scoring of Exams</td>
<td>61</td>
</tr>
<tr>
<td>Grading, System</td>
<td>61</td>
</tr>
<tr>
<td>Graduation</td>
<td>73</td>
</tr>
<tr>
<td>Grievance Procedures</td>
<td>26</td>
</tr>
<tr>
<td>Guest Lecturers</td>
<td>19</td>
</tr>
<tr>
<td>Hazardous Materials</td>
<td>33</td>
</tr>
<tr>
<td>History, Andrews</td>
<td>1</td>
</tr>
<tr>
<td>History, PT Dept</td>
<td>3</td>
</tr>
<tr>
<td>Human Subjects</td>
<td>30</td>
</tr>
<tr>
<td>Individual Rights and Safety</td>
<td>26</td>
</tr>
<tr>
<td>Informed Consent</td>
<td>28</td>
</tr>
<tr>
<td>Injuries</td>
<td>31</td>
</tr>
<tr>
<td>Institutional Review Board (IRB)</td>
<td>66</td>
</tr>
<tr>
<td>Instructional Technology</td>
<td>52</td>
</tr>
<tr>
<td>Lab Instructor/Assistant</td>
<td>19</td>
</tr>
<tr>
<td>Late Grades</td>
<td>63</td>
</tr>
<tr>
<td>Learning Hub</td>
<td>53</td>
</tr>
<tr>
<td>Licensure</td>
<td>64</td>
</tr>
<tr>
<td>Mail Service</td>
<td>37</td>
</tr>
<tr>
<td>Make-Up Exams or Quizzes</td>
<td>58</td>
</tr>
<tr>
<td>Manuals &amp; Handbooks</td>
<td>12</td>
</tr>
<tr>
<td>Mission, AU</td>
<td>5</td>
</tr>
</tbody>
</table>