

**MONTGOMERY COLLEGE**  
**PHYSICAL THERAPIST ASSISTANT**  
**PROGRAM**  
**TAKOMA PARK / SILVER SPRING CAMPUS**

**STUDENT HANDBOOK**  
**Fall 2017**

Health Sciences Center - 2nd Floor  
7977 Georgia Avenue  
Silver Spring, Md. 20910

## Acknowledgements

The faculty would like to thank the following individuals for their contribution to this handbook:

- ❖ Rose Ahele, M.Ed., Program Coordinator, Radiation Technology Program, Montgomery College
- ❖ Joan Cepeda, M.Ed. PT, Program Coordinator, PTA Program, Montgomery College (retired)
- ❖ Aaron O. Eaton, DPT, Clinical Education Coordinator (former), PTA Program, Montgomery College
- ❖ Barbara Nubile, Ph.D., RN, Nursing Program Director and Assistant Dean (retired), Montgomery College
- ❖ La'Verne Tuckson, M.Ed., PT Clinical Education Coordinator (former), PTA Program, Montgomery College

A Message from Dr. DeRionne Pollard, MC President

Over the course of seven decades, Montgomery College has grown into an institution where radical inclusion--that is, deeply rooted values of welcoming all individuals who seek higher education or continuing education--is an essential element of our identity. By intentionally cultivating our campuses as places where equal opportunity flourishes, we have advanced our own educational mission, contributed to the aspirations of Montgomery County, and added to the vision of our nation.

The College will continue to affirm the rights of all persons to study and pursue opportunity through education, free from fear and distraction. Our institution will continue to be a place where diversity thrives and where difference is celebrated.

As the College celebrates its 70th anniversary, we will continue to reflect upon the history of our institution and the progress we have made in expanding our notions of inclusivity. Our commitment to advancing education in ways that best empower our students has deepened. So has our promise to infuse 21st century education with the timeless tools of tolerance, civility, and respect.

*- from February 20, 2016 Statement to the Board of Trustees*

Physical therapy is a health care profession in which practitioners are free and obliged to make choices and decisions. For those choices and decisions, practitioners of physical therapy are held accountable by the publics they serve, by a legal jurisdiction, and by the profession. The acquisition of knowledge and skills are important in the preparation of a physical therapist assistant who will be a collaborator with the physical therapist in the delivery of physical therapy services. Of equal importance is the development of a strong value system to support caring, ethical, and legal behaviors in the delivery of services. The absence of an abiding value system shows a lack of commitment to the service of the publics who are in need of physical therapy.

The purpose of this program of study is to prepare its students for a valuable role in the future. The future is framed and influenced by current issues in the profession of physical therapy, in the healthcare delivery system, in legal or jurisdictional systems, of employers, and of patients, families and coworkers.

Johnson, GR, Bradford, BJ, Kreig, KH, & Wehner, PM. *Taxonomy of physical therapist assistant behaviors*. Baton Rouge, LA: Darbonne and Bartolett Publishers, LLC, 2007.

**A guaranteed path to student success.** Unfortunately academic success is not automatic. MC faculty and staff can't just unscrew the tops of your heads and pour in the knowledge and skills you need to graduate and enter the workforce. A large part of academic success depends on student motivation. In other words, you have to show up and do your part.

1. Go to class - every class and on time
2. Do your assignments on time
3. Talk to your professors
4. Read everything
5. Respect the teaching and learning environment
6. Use library and academic support centers and services

*From remarks to incoming students* from Dr. Brad Stewart, Vice President and Provost Takoma Park/Silver Spring Campus, 2015.

Dear Physical Therapist Assistant Student:

Welcome to the Physical Therapist Assistant Program at Montgomery College! You are about to embark on a curriculum filled with challenges. Your decision to become a physical therapist assistant (PTA) will require a high level of commitment to your education for the next two years. The faculty is dedicated to providing you with a complete and comprehensive learning experience in order to prepare you for your future role as a health care practitioner. We will continually monitor, evaluate, and modify your course of study and your learning experiences in order to facilitate your ability to attain the competencies required of a PTA. It is your responsibility, however, to achieve the objectives and complete the two-year program with distinction, as well as to pass the national licensure examination for the PTA.

*The Physical Therapist Assistant Program Student Handbook* has been created to inform you of the curriculum, policies, procedures, guidelines, and expectations for professional and academic behavior specific to this program. It is intended to serve as a quick reference and guide to the PTA educational experience. Please review and continue to refer to all sections of the handbook, particularly those which apply to your health and safety and required program documentation.

The handbook is not intended to replace Montgomery College's *Policies and Procedures Manual*, *The Student Code of Conduct*, the *College Catalog*, or other official college documents. All students of the PTA program are subject to the rules and regulations as outlined in the aforementioned documents which are available in print from the Admissions and Records Office or on line at [www.montgomerycollege.edu](http://www.montgomerycollege.edu)

During your orientation to the college and the program, we ask you to review all policies as set forth in the handbook. We wish you success during your course of study and we offer our commitment to assist you in attaining your goals.

Sincerely,

Nancy Greenawald, EdS, MBA, PT  
*PTA Program Coordinator and  
Professor*

Annet Glenn, MS, PTA  
*PTA Program Clinical Education  
Coordinator and Associate Professor*

## Contents

I.	Administrative Structure .....	3
A.	PTA Faculty and Staff.....	3
B.	LINKS to MC core documents.....	3
II.	Program Accreditation.....	3
A.	Accreditation Concerns.....	4
B.	Right to Due Process .....	4
III.	Mission, Philosophy and Goals of the Program .....	4
A.	Mission and Philosophy.....	4
B.	Program Goals .....	4
IV.	PTA Program Curriculum.....	4
A.	Educational Outcomes .....	4
B.	Plan of Study.....	7
C.	General Education Courses .....	9
D.	PTA Course Descriptions.....	9
V.	Physical Requirements/Technical Standards for the PTA .....	10
VI.	Resources .....	11
VII.	Program Policies and Procedures.....	13
A.	Admissions and Enrollment Policies.....	13
NON-DISCRIMINATION AND EQUAL OPPORTUNITY.....	13	
FEES, EXPENSES, AND FINANCIAL ASSISTANCE.....	13	
CHANGE OF ADDRESS.....	13	
ADVANCED PLACEMENT FOR TRANSFER STUDENTS .....	14	
REGISTRATION .....	14	
B.	Progression and Retention.....	14
READMISSION/RE-ENROLLMENT.....	15	
ACADEMIC RESTRICTIONS.....	15	
C.	Withdrawal and Dismissal .....	15
ACADEMIC DISHONESTY .....	16	
D.	Academic Policies and Procedures.....	16
ACADEMIC ADVISING.....	16	
CHAIN OF COMMAND .....	16	
GRADING SCALE .....	17	
PRACTICAL SKILLS EVALUATION .....	17	
ATTENDANCE .....	17	
COMMUNICATION WITH FACULTY .....	18	
CLASSROOM AND LAB EXPECTATIONS.....	18	
STUDENT SURVEYS .....	19	
CLASSROOM AND LAB DRESS CODE .....	19	
STUDENT MAILBOXES AND LOCKERS .....	19	
VIDEO OR AUDIO RECORDING .....	19	
SOCIAL MEDIA.....	19	
CYBERSECURITY .....	19	
TRANSPORTATION AND PARKING.....	20	
INCLEMENT WEATHER .....	20	
CAMPUS SAFETY .....	20	
CLASSROOM AND LAB SAFETY .....	20	
HEALTH AND MEDICAL CONDITIONS .....	20	
ACCIDENTS OR INJURIES WHILE ON CAMPUS .....	21	

REASONABLE ACCOMMODATIONS.....	21
PROFESSIONAL ACTIVITIES AND ORGANIZATIONS .....	21
STUDENT ELECTRONIC MAIL.....	22
PAY-FOR-PRINT AND OTHER GREEN INITIATIVES .....	22
E. Clinical Education Policies and Procedures.....	22
CLINICAL ASSIGNMENTS .....	22
ASSIGNMENT AT PLACE OF EMPLOYMENT .....	23
FINANCIAL COMPENSATION.....	23
CLINICAL PERFORMANCE ASSESSMENT.....	23
ATTENDANCE AND BEHAVIOR EXPECTATIONS .....	23
PERSONAL APPEARANCE AND UNIFORMS .....	25
CLINICAL SUPERVISION.....	25
CYBERSECURITY .....	25
STUDENT HEALTH AND SAFETY DURING INTERNSHIPS.....	25
IDENTIFICATION.....	26
CONFIDENTIALITY AND MEDICAL DOCUMENTATION .....	26
LEAVING THE PREMISES OR VISITING PATIENTS, FAMILY, or STAFF.....	27
PERSONAL PROPERTY.....	27
TELEPHONE CALLS, PHOTOCOPYING AND INTERNET USAGE.....	27
EATING AND SMOKING .....	27
TRANSPORTATION AND PARKING .....	27
STUDYING FOR NON-CLINICAL CLASSES.....	27
DISMISSAL FROM CLINICAL FACILITY .....	28
RIGHT TO DUE PROCESS .....	28
CLINICAL SKILLS ACCOUNTABILITY .....	28
REQUIRED PAPERWORK .....	28
VIII. DUE PROCESS .....	29
IX. GRADUATION.....	29
A. Annual Award Ceremony.....	29
B. Graduation .....	29
REQUIREMENTS FOR GRADUATION.....	29
APPLICATION FOR GRADUATION .....	30
GRADUATION CEREMONY PARTICIPATION .....	30
X. POST GRADUATION ACTIVITIES.....	30
A. Graduate Surveys .....	30
B. Professional Licensure .....	30
C. Job Search and Resume Preparation .....	31
D. Professional Organizations.....	31
E. Participation in PTA Program Activities .....	31
XI. A Final Salute .....	31
XII. MEMORANDUM OF AGREEMENT .....	31
XIII. APPENDIX DOCUMENTS .....	32

## I. Administrative Structure

President Montgomery College	Dr. DeRionne P. Pollard
Provost for Takoma Park Campus	Dr. Bradley J. Stewart
Dean, Health Sciences	Ms. Angela M. Pickwick, MS, RT(RM)
Chair, Health Sciences	Ms. Diane Barberesi, MS

### A. PTA Faculty and Staff

Nancy Greenawald, EdS, MB, PT Office: HC 239 Phone: 240-567-5523	PTA Program Coordinator, Professor E-mail: <a href="mailto:nancy.greenawald@montgomerycollege.edu">nancy.greenawald@montgomerycollege.edu</a>
Annet Glenn, MS, PTA Office: HC 240 Phone: 240-567-5524	Clinical Education Coordinator, Associate Professor E-mail: <a href="mailto:annet.glenn@montgomerycollege.edu">annet.glenn@montgomerycollege.edu</a>
Angela Venerable Joyner, MS, PT Office: HC 240 Phone: 240-567-5520	Part-Time Faculty E-mail: <a href="mailto:angela.venerablejoyner@montgomerycollege.edu">angela.venerablejoyner@montgomerycollege.edu</a>
Sherry Randolph, MS Office: HC 238 Phone: 240-567-5520	Administrative Aide II E-mail: <a href="mailto:sherry.randolph@montgomerycollege.edu">sherry.randolph@montgomerycollege.edu</a>

### B. LINKS to MC core documents

College catalog <http://catalog.montgomerycollege.edu/> Has links to all college academic programs and an overview of policies and procedures important to getting started in college life.

College policies and procedures <http://cms.montgomerycollege.edu/pnp/> As a public institution, all policies and procedures of the college are publicly available from this site.

Academic regulations – see **Appendix I** of the college policies and procedures specific to academic regulations.  
Student Code of Conduct – see **policy # 42001**. Can also be found in the First year experience documents.

First year experience - <http://cms.montgomerycollege.edu/fye/> Has general information and links to college policies and procedures for those new to college or new to Montgomery College

Academic calendar - <http://cms.montgomerycollege.edu/calendars/>

## II. Program Accreditation

The Physical Therapist Assistant Program at Montgomery College 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](mailto:accreditation@apta.org); website: <http://www.capteonline.org>. The program was initially accredited in 1996 and continues to be designated as a statewide program by the Maryland Higher Education Commission (MHEC). The last accreditation site visit occurred in September 2010 and the program was granted accreditation until December 31, 2020. Students may view the accreditation certificate posted in the program office, HC 238.

It is the policy of the PTA Program at MC to fully implement all CAPTE accreditation criteria for PTA programs and to fully participate in all accreditation activities.

### **A. Accreditation Concerns**

Maintaining accreditation by CAPTE stipulates that the program follows established standards. The CAPTE standards can be found on the American Physical Therapy Association (APTA) web site on the education page at [www.apta.org/education](http://www.apta.org/education) and are on file in the Program Coordinator's office.

The purpose of compliance with these standards is to maintain the high level of competence of a PTA program so as to protect the public receiving services from PTA students and to fully benefit the student. Benefits to the student include the organization and delivery of a high quality program of study and the eligibility to apply for the National Physical Therapy Examination (NPTE) for PTA upon graduation.

If the student has any concerns or questions about MC compliance with CAPTE standards or accreditation status, the student will:

1. Inform the Program Coordinator in writing of the concern with citation to the specific CAPTE standard in question and
2. Meet with the Program Coordinator within 10 days of submission of the concern to address and dialog about these issues.
3. The Program Coordinator will notify the Dean of Health Sciences of any student concerns and maintain a full file documenting the concern and any subsequent actions. The Program Coordinator may call upon the Dean of Health Sciences or any additional person(s) to assist with developing a response to the student.

### **B. Right to Due Process**

If the student's questions and/or concerns are not addressed to the student's satisfaction, the student may contact CAPTE directly and in writing at

Commission on Accreditation in Physical Therapy Education  
Attn: PTA Programs  
1111 North Fairfax Street  
Alexandria, VA 22314

## **III. Mission, Philosophy and Goals of the Program**

### **A. Mission and Philosophy**

The PTA program supports the mission of MC by positively changing the lives of our students, by enriching the community through our students' achievements; and by demonstrating educational excellence. The practice of physical therapy today operates within a society which is increasingly diverse. The college, as well as the program, is dedicated to providing a high quality, comprehensive educational program designed to meet the diverse and changing educational, social, economic, and cultural needs of the community.

The PTA Program has been developed under the premise that students are adult learners who are responsible for their own actions and who should be free to pursue their educational objectives in an environment that promotes learning, safe and professional practice, and assures the safety of other students, faculty, patients, and the community as a whole. The educational program is designed to assist students in developing an understanding and appreciation of the profession of physical therapy, their roles and responsibilities in the delivery of healthcare, as well as their roles and responsibilities in society.

### **B. Program Goals**

The PTA Program mission means that the program produces graduates who:

- demonstrate the entry-level knowledge, clinical skills, and professional abilities of a PTA;
- deliver competent patient care under the direction and supervision of a licensed physical therapist, in an ethical, legal, safe, and effective manner in a variety of health care settings; and
- manage an effective transition from the educational program to a career as a licensed PTA.

## **IV. PTA Program Curriculum**

### **A. Educational Outcomes**

The purpose of the PTA educational program is to enhance the student's ability to acquire the necessary knowledge, skills, and behaviors for providing competent PTA care under the supervision of a physical therapist in a



variety of health care settings. Numbers in parenthesis refer to the CAPTE criteria (revised 2016) for required content in the PTA curriculum (see Section 7D). Please note that the term “patient /client” has been shortened to “patient.”

## **Program Goal # 1: Demonstrate the entry-level knowledge, clinical skills and professional abilities of a physical therapist assistant**

### 1. in Patient/Client management activities

- Interviews patient, caregivers, and family to obtain current information related to prior and current level of function and general health status including fatigue, fever, malaise, unexpected weight change (7D15)
- Uses the ICF to describe a patient’s impairments, activity and participation limitations (7D16)

### 2. in Plan of Care (POC)

- Communicates an understanding of the POC developed by the PT to achieve short and long term goals and intended outcomes (7D17) and asks for clarification when needed
- Review health records for lab values, diagnostic tests, specialty reports, narrative, consults, and PT documentation prior to carrying out the PT POC (7D18)
- Monitors and adjusts interventions in the POC in response to patient status and clinical indications (7D19) and reports any changes in patient status or progress to the supervising PT (7D20)
- Determines when an intervention should not be performed due to clinical indications or when the intervention is beyond the scope of PTA (7D21)
- Contributes to the discontinuation of an episode of care planning and follow-up processes as directed by the supervising PT (7D22)

### 3. in the delivery of interventions

- Demonstrates competence in implementing selected components of interventions identified in the POC established by the PT (7D23) including:
  - Airway clearance techniques (breathing exercises, coughing techniques and secretion mobilization)
  - Application of devices and equipment (assistive/adaptive devices, prosthetic and orthotic devices)
  - Biophysical agents (biofeedback, electrotherapeutic agents, compression therapies, cryotherapy, hydrotherapy, superficial and deep thermal agents, traction and light therapy)
  - Functional training in self-care and in domestic, education, work, community, social and civic life
  - Manual therapy techniques (passive ROM and therapeutic massage)
  - Motor function training (balance, gait, etc.)
  - Patient / family education
  - Wound Management (isolation techniques, sterile technique, application and removal of dressing or agents and identification of precautions for dressing removal)

### 4. in the performance of tests and measures

- Demonstrates competence in performing components of data collection skills essential for carrying out the POC by administering appropriate tests and measures before, during, and after interventions (7D24) in the following areas
  - Aerobic capacity and endurance (vital signs, recognizes and monitors responses to positional changes and activities – eg. orthostatic hypotension and response to exercise)
  - Anthropometrical characteristics (height, weight, length, girth)
  - Mental functions (detect patient’s state of arousal, mentation, and cognition)
  - Assistive technology (identify individual and caregiver ability to care for the device, recognize changes in skin condition and safety factors while using the devices and equipment)
  - Gait, locomotion and balance (determines the safety, status, and progression of patient while engaged in gait, locomotion, balance, wheelchair management, and mobility training)
  - Integumentary integrity (detects absent or altered sensation; normal and abnormal changes; activities, positioning and postures that aggravate or relieve pain or altered sensations or that can produce associated skin trauma; recognizes viable versus non-viable tissue)
  - Joint integrity and mobility (detects normal and abnormal joint movement)
  - Muscle performance (measures muscle strength with MMT, observes the presence or absence of muscle mass, recognizes normal and abnormal muscle length, and changes in muscle tone)
  - Neuromotor development (detects gross motor milestones, fine motor milestones, and righting and equilibrium reactions)

- Pain (administers standardized questionnaires, graphs, behavioral scales, or VAS; recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations)
- Posture (determines normal and abnormal alignment of trunk and extremities at rest and during activities)
- ROM (measures function, active and passive ROM using an appropriate device)
- Self care and civic, community, domestic, education, social, and work life (inspects the physical environment and measures physical spaces; recognizes safety and barriers in the home, community and work environments; recognizes level of functional status; administers standardized questionnaires to patients and others)
- Ventilation, respiration, and circulation: detects signs and symptoms of respiratory distress, and activities that aggravate or relieves edema, pain, dyspnea, or other symptoms; describes thoraco-abdominal movements and breathing patterns with activity; describes cough and sputum characteristics)
- Completes accurate documentation that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies (7D25)
- Responds effectively to patient and environmental emergencies that commonly occur in the clinical setting (7D26)

5. while participating in the health care environment

- Contributes to efforts to increase patient and healthcare provider safety (7D27)
- Participates in the provision of patient-centered interprofessional collaborative care (7D28)
- Participates in performance improvement activities (7D29)

6. in all PT practice management environments

- Describes aspects of organizational planning and operation of the PT service (7D30)
- Describes accurate and timely information of billing and payment purposes (7D31)

**Program Goal # 2: Deliver competent patient care under the direction and supervision of a licensed physical therapist, in an ethical, legal, safe and effective manner in a variety of health care settings**

- Acts in a manner consistent with the *Standards of Ethical Conduct for the PTA* and *Standards of Practice of the PTA*, and Maryland practice act for Physical Therapy (7D1, 7D2, 7D3, 7D4)
  - Integrates behavioral expectations of altruism, caring and compassion, cultural competence, duty, integrity, PT/PTA collaboration, responsibility and social responsibility into professional practice
  - Reports to appropriate authorities suspected cases of abuse of vulnerable populations
  - Reports to appropriate authorities suspected cases of fraud and abuse related to the utilization of and payment for PT and other health care services
- Performs duties in a manner consistent with APTA's *Values Based Behaviors for the PTA* (7D5)
  - Places patient's needs above the PTA's own self interests
  - Exhibits compassion, caring, and empathy in providing services to patients
  - Demonstrates integrity in all interactions with patients, family members, caregivers, supervising PTs, coworkers, other consumers, employers, and payers
  - Promotes active involvement of the patient in his or her care
- Demonstrates behaviors, communication, attitudes, and values consistent with the roles, responsibilities, and tasks of the PTA (7D6, 7D7, 7D8)
  - Implements, in response to an ethical situation, a plan of action that demonstrates sound moral reasoning congruent with core professional ethics and values
  - Communicates effectively with all stakeholders, including patients, family members, caregivers, practitioners, inter-professional team members, consumers, payers, and policymakers
  - Identifies, respects, and acts with consideration for the patient's differences, values, preferences, and expressed needs in all work-related activities
- Applies current knowledge, theory, and clinical judgment while considering the patient perspective and the environment, based on the plan of care established by the PT (7D9)
- Reads and understands health care literature (7D10, 7D11)
  - Identifies basic concepts in professional literature including, but not limited to, validity, reliability and level of statistical significance

- Identifies and integrates appropriate evidence based resources to support clinical decision making for progression of the patient within the plan of care established by the PT
- Effectively educates others using teaching methods that are commensurate with the needs of the patient, caregiver, or healthcare personnel (7D12)
- Participates in professional and community organizations that provide opportunities for volunteerism, advocacy and leadership (7D13)

### **Program Goal # 3: Manage an effective transition from the educational program to a career as a licensed physical therapist assistant**

- Identifies career development and lifelong learning opportunities, including the role of the PTA in the clinical education of PTA students (7D14)
- Changes behavior in response to understanding the consequences (positive and negative) of the PTA's actions
- Qualifies for state licensure or registry and to take the National Board Examination (NPTE) for the PTA
  - meets all qualifications for graduation
  - investigates and applies for state licensure and NPTE
  - develops study plan for NPTE, successfully implements study plan for NPTE
- If successful in passing the NPTE, is able to apply for a job as a PTA
  - develops job seeking strategy
  - develops resume, cover letter, and professional portfolio
  - practices job interviews skills
  - understands continuing professional competence requirements of licensure jurisdiction

#### **Section References**

- APTA, 2003. *Guide to Physical Therapist Practice, 2nd Ed.* Alexandria, VA: American Physical Therapy Association; 2003.
- APTA, 2007. *A Normative Model of Physical Therapist Assistant Education: Version 2007.* Alexandria, VA: American Physical Therapy Association; 2007.
- APTA, 2011. *Values-Based Behaviors for the Physical Therapist Assistant.* Alexandria, VA: American Physical Therapy Association; 2011.
- CAPTE, 2016. *Commission on Accreditation in Physical Therapist Education Accreditation Handbook*, accessed online [www.apta.org/education](http://www.apta.org/education) July 21, 2016
- Johnson, GR, Bradford, BJ, Kreig, KH, & Wehner, PM. *Taxonomy of physical therapist assistant behaviors.* Baton Rouge, LA: Darbonne and Bartolett Publishers, LLC, 2007.

#### **B. Plan of Study**

Refer to the current MC Catalog for prerequisite, foundation, and distribution course descriptions and information. Additional requirements: current BLS Provider CPR with AED certification by **October 1** of the **first** Fall semester. Proof of health insurance, health physical, annual PPD, updated immunization record, toxicology, and criminal background check are due by **July 1** of First Summer Semester at the start of the **second** year in the program. **Please note: these requirements coupled with academic and professional achievement will allow students to access PHTH 223 and 224 the Clinical Practicum experiences.**

CAPTE requires that the PTA Program fit into a 2 year, associate's degree plan of study. The table below reflects this requirement. Students are reminded that the PTA Program courses must be taken in the identified sequence but the general education courses can be taken in any sequence, at any college or university. MC advisors routinely recommended that all general education courses are completed prior to the start of the professional courses. PTA Program requires that all general education courses are completed prior to the start of the final clinical internship PHTH 224.

Continuous enrollment in the PTA Program is based on staying enrolled and not withdrawing from the program, the successful completion of all semester requirements, including but not limited to attendance, performance of practical skills, written assessment grades, development of professional abilities, health physical requirements, immunization records, toxicology, and criminal background checks.

**-FIRST YEAR -**

		Cr	<b>Summer Session</b>		Cr
BIOL 150	Principles of Biology I	4	ENGL 101	Introduction to College Writing I ( <i>if required</i> )	3
PHTH 101	Introduction to Physical Therapy **	2	<i>Total Semester Hours</i>		9
CPR Requirement See note below***					
<b>First Semester - Fall</b>			<b>Second Semester - Spring</b>		
BIOL 212	Human Anatomy and Physiology I*	4	MATH	<i>Mathematics foundation</i> 110 or higher	3
ENGL 102 or ENGL 103	<i>Clinical Reading, Writing, and Research OR Clinical Reading, Writing and Research in the Workplace</i>	3	PSYC 102	General Psychology	3
PHTH 102	Basic Health Skills for the Physical Therapist Assistant	2	PHTH 103	Therapeutic Procedures I	3
PHTH 104	Surface Anatomy, Palpation, and Massage	2	PHTH 105	Kinesiology I	2
PHTH 112	Pathology for the Physical Therapist Assistant	2	PHTH 114	Seminar II	1
PHTH 113	Seminar I	1	PHTH 116	Measures and Interventions for Clinical Problems I	2
<i>Total Semester Hours</i>			14	<i>Total Semester Hours</i>	
<b>Summer Session I</b>					
## Health Physical Requirement - see note below			<i>Arts or humanities distribution</i>		3
PHTH 106	Kinesiology II	2	PHTH 201	Medical Reporting for the Physical Therapist Assistant	2
<i>Total Semester Hours</i>			<i>Total Semester Hours</i>		

**-SECOND YEAR -**

<b>Third Semester</b>		<b>Fourth Semester</b>			
PHTH 204	Neurophysiology and motor learning	2	PHTH 215	Seminar IV	1
PHTH 205	Seminar III	1	PHTH 216	Measures and Interventions for Clinical Problems III	2
PHTH 206	Measures and Interventions for Clinical Problems II	3	PHTH 220	Therapeutic Procedures II	2
PHTH 223	Clinical Practicum I	5	PHTH 224	Clinical Practicum II	7
<i>Total Semester Hours</i>			11	<i>Total Semester Hours</i>	
			<b>Total Curriculum credits</b>		
			<b>67</b>		
			<b>Total full time clinical education weeks</b>		
			<b>14</b>		

**NOTES**

\* Students are encouraged to complete BIOL 212 *prior* to enrolling in PTA courses; note that BIOL 212 has a prerequisite - BIOL 150 Principles of Biology I. BIOL 150 and BIOL 212 courses are admissions requirements.

\*\* PHTH 101 may be offered in Summer Session and Fall Semester. Students need only take and pass this course once.

\*\*\*CPR certification is required upon entry into PTA clinical courses and must be maintained during all clinical courses in the curriculum. The CPR certification course must be for First Responders or Healthcare Providers and provided by **American Red Cross**. These courses are provided in many community locations, such as workforce and continuing education, hospitals and ambulance stations. The HLTH 220 Emergency Medical Responder course offered at MC meets this requirement.

## Students must have a health physical, immunization record or titers, influenza vaccination, PPD (tuberculosis), criminal background check, and drug/alcohol screening on file with the PTA program by **JULY 1** of the first Summer Session following admission to the program.

### C. General Education Courses

Courses are listed here; see current College Catalog for full course descriptions for prerequisites and qualifications. Course substitutions may be possible. Please see PTA Program Coordinator for advice and required documentation.

BIOL 150: Principles of Biology I

BIOL 212: Human Anatomy and Physiology I

ENGL 101-102: Introduction to College Writing and Critical Reading, Writing, and Research

PSYC 102: General Psychology

*Mathematics foundation or higher*

*Art or Humanities Distribution – one course; see College Catalog.*

### D. PTA Course Descriptions

**PHTH 101: Introduction to Physical Therapy** Provides an introduction and orientation to the field of physical therapy. Course includes historical background, medical-professional ethics and conduct, the role of PTA as part of the health care team, and orientation to psychological and social needs of the ill and disabled. *2 hours lecture per week. 2 semester hours*

**PHTH 102: Basic Health Skills for the Physical Therapist** Instruction in basic health skills used in physical therapy, including anatomical and movement terminology, and chemical, mechanical, and physical principles relative to body function. Skills and practice in body mechanics, patient positioning and transfers, gait training, bandaging, vital signs, and medical asepsis also included. *1 lecture, 2 hours lab per week. 2 semester hours*

**PHTH 103: Therapeutic Procedures I** Presents therapeutic modalities used by PTAs, including therapeutic use of heat and cold, massage, and hydrotherapy. In addition, traction, intermittent pressure pumps, and use of electrical currents. Specific conditions requiring use of these treatment modalities will be presented, and contra-indications and special precautions for their use will be discussed. Procedures for documentation of patient care will be included. *1.5 lecture, 3 hours lab per week. 3 semester hours*

**PHTH 104 Surface Anatomy, Palpation, and Massage** In depth exploration of surface anatomy and palpation of structures essential for physical therapy practice. Students are introduced to joint movement terminology and performance. Massage techniques are presented along with tests and measures necessary for the safe application of range of motion and massage techniques. *1 lecture, 2 hours lab per week. 2 semester hours*

**PHTH 105: Kinesiology I** Two part course in the study of human muscular movement. This course provides an introduction to kinetics, mechanics, and movement science. Regional anatomy and kinesiology of the extremities is covered along with the skills of goniometry and MMT. *1 lecture, 2 hours lab per week. 2 semester hours*

**PHTH 106 Kinesiology II** The second part of the two part course in the study of human movement. Regional anatomy and kinesiology of the cervical, thoracic, lumbar spine and pelvis are discussed. Principles of kinesiology are applied to posture and gait. *1 lecture, 2 hours lab per week. 2 semester hours*

**PHTH 112: Pathology for the Physical Therapist Assistant** This course includes general pathology with emphasis on the study of diseases and disorders most commonly seen in physical therapy practice. Diseases of the musculoskeletal, nervous, and cardiopulmonary systems as well as metabolic disorders will be emphasized. *2 hours lecture per week. 2 semester hours*

**PHTH 113 Seminar I** First of four seminars dealing with themes of professional issues, core values, and the development of a comprehensive portfolio. These courses will challenge the student to apply professional theme content during standardized patient scenarios and patient simulations. Themes for Seminar I: Inter-personal and professional communication, duty, and integrity (ethical, legal, and safe clinical practice). *1 semester hour*

**PHTH 114 Seminar II** Second of four seminars dealing with themes of professional issues, core values, and the development of a comprehensive portfolio. These courses will challenge the student to apply professional theme content during standardized patient scenarios and patient simulations. Themes for Seminar II: altruism, caring, compassion, and cultural competence in health care settings. *1 semester hour*

**PHTH 116 Measures and Interventions for Clinical Problems I** First in the three course sequence integrates clinical tests and measures with clinical interventions for common problems encountered in physical therapy care. This course includes tests, measures, and interventions for problems of the integument and non-complex problems of the musculoskeletal system. *1 lecture, 2 hours lab per week. 2 semester hours*

**PHTH 201: Medical Reporting for Physical Therapist Assistant** Instructs the student in the principles of medical reporting, including the ability to abstract pertinent information from actual medical records. The writing of patient progress notes in standardized formats and medical terminology is emphasized. Evidence based practice, clinical research, and justifying interventions

based on clinical literature is integrated in the study of medical documentation. An introduction to quality assessment and improvement, fiscal and organizational management is provided. *2 hours lecture/discussion each week 2 semester hours*

**PHTH 204 Neurophysiology and Motor Learning** In depth review of neurological physiology, anatomy, and pathology. Introduction to motor control and motor learning throughout the lifespan. Course content will focus on developing sufficient foundational knowledge to work with neurological pathology encountered in physical therapy practice, and with geriatric and pediatric populations. *2 lecture hours per week 2 semester hours*

**PHTH 205 Seminar III** Third of four seminars dealing with themes of professional issues, core values, and the development of a comprehensive portfolio. These courses will challenge the student to apply professional theme content during standardized patient scenarios and patient simulations. Themes for Seminar III: fiscal responsibility, PT/PTA collaboration, and education of patients, families, and others. *1 semester hour*

**PHTH 206 Measures and Interventions for Clinical Problems II** Second in the three course sequence integrates clinical tests and measures with clinical interventions for common problems encountered in physical therapy care. This course includes tests, measures, and interventions for complex problems of the musculoskeletal system and the cardiopulmonary system. Posture awareness training, conditioning and reconditioning, skills training, and plyometrics are discussed. An introduction to post-surgical protocols and return to function and activity are discussed along with aerobic conditioning, changes in vital signs with exercise, breathing patterns, Chest PT, and pulmonary function rehabilitation. *1.5 lecture, 3 hours lab per week 3 semester hours*

**PHTH 215 Seminar IV** Capstone seminar dealing with professional issues, core values, and the development of a portfolio. The theme for Seminar IV is career development, continuing professional competence, and social responsibility. Activities completed include national board exam review preparation, job search strategies, resume development, and professional interview skills. *1 semester hour*

**PHTH 216 Measures and Interventions for Clinical Problems III** Third in the three course sequence integrates clinical tests and measures with clinical interventions for common problems encountered in physical therapy care. This course includes tests, measures, and interventions for problems of the neuro-muscular systems. Measures of arousal, mentation, cognition, balance, and motor control are discussed along with the theories and practice of therapeutic exercise interventions for patients with neuro-muscular problems across the lifespan from pediatric to geriatric conditions. *1 lecture, 2 hours lab per week 2 semester hours*

**PHTH 220 Therapeutic Procedures II** Course includes orthotics and prosthetics, modifying intervention principles for unique populations such as women's health, work injury, elite sports, emerging clinical evidence, and non-traditional therapies. *1 lecture, 2 hours lab per week 2 semester hours*

**PHTH 223: Clinical Practicum I** Six full-time weeks of supervised clinical experience in a physical therapy setting. The student will practice skills learned on actual patients under the supervision and direction of a licensed physical therapist or a licensed PTA in a variety of local clinical facilities. **PREREQUISITES:** *All prior technical coursework and practical exams must be satisfactorily completed. This course consists of 240 hours in a clinical setting. 5 semester hours*

**PHTH 224 Clinical Practicum II** This capstone clinical course consists of 8 full-time weeks of supervised clinical experience in a physical therapy setting. The student will practice advanced skills learned in the PTA curriculum under the supervision and direction of a licensed physical therapist or supervision team of licensed physical therapist and PTA. The student will develop entry-level skills in the legal and ethical issues of clinical practice, the measures and interventions required of a clinical population, documentation and progression of patient care, and the comprehensive non-direct patient related skills necessary for the professional role and responsibilities of the entry level PTA. **PREREQUISITES:** *All prior coursework and practical exams must be satisfactorily completed. This course consists of 320 hours in a clinical setting. 7 semester hours*

## V. Physical Requirements/Technical Standards for the PTA

In the professional courses that are required in the PTA Program, as well as in the career, the student will need to have the ability to:

- lift and move patients, equipment, and accessories;
- manipulate treatment equipment and measuring instruments using fine motor skills
- hear audible cues and warnings from patients and equipment;
- utilize sense of touch in order to provide patient care, palpate anatomical landmarks, position patients, and administer treatments;
- utilize sense of vision in order to read instrument dials and computer printouts as well as to distinguish color gradients in the skin associated with touch and pressure;
- teach patients through use of voice, demonstration, and handouts;
- utilize interpersonal skills to handle patients with physical and/or emotional trauma and to interact with other people in the classroom, lab, or clinical setting in a professional manner

The Dictionary of Occupational Titles is a US Department of Labor publication that classifies all types of jobs by their demands and requirements. Below is the listing for the PTA reprinted from <http://www.occupationalinfo.org>. This information is provided to all students accepted into the PTA Program at MC and is intended to help the student prepare for physical, mental, and social aspects of this career. For additional information, students may also access descriptions of the field from the American Physical Therapy Association website [www.apta.org](http://www.apta.org). **Students are encouraged to access the Montgomery College Disability Support Services if documentation and recommendations for accommodations are needed.**

**CODE: 076.224-010 TITLE: PHYSICAL THERAPIST ASSISTANT**

- Administers physical therapy treatments to patients, working under direction of and as assistant to the PT.
- Administers active and passive manual therapeutic exercises, therapeutic massage, and heat, light, sound, water, and electrical modality treatments, such as ultrasound, electrical stimulation, ultraviolet, infrared, and hot and cold packs.
- Administers traction to relieve neck and back pain, using intermittent and static traction equipment. Instructs, motivates, and assists patients to learn and improve functional activities, such as pre-ambulation, transfer, ambulation, and daily-living activities.
- Observes patients during treatments and compiles and evaluates data on patients' responses to treatments and progress and reports orally or in writing to PT.
- Fits patients for, adjusts, and trains patients in use and care of orthopedic braces, prostheses, and supportive devices, such as crutches, canes, walkers, and wheelchairs.
- Confers with members of physical therapy staff and other health team members, individually and in conference, to exchange, discuss, and evaluate patient information for planning, modifying, and coordinating treatment programs.
- Gives orientation to new PTAs and directs and gives instructions to PHYSICAL THERAPY AIDES.
- Performs clerical duties, such as taking inventory, ordering supplies, answering telephone, taking messages, and filling out forms.
- May measure patient's range-of-joint motion, length and girth of body parts, and vital signs to determine effects of specific treatments or to assist PT to compile data for patient evaluations.
- May monitor treatments administered by PHYSICAL THERAPY AIDES.

**In summary, the US Department of Labor classifies the Physical Therapist Assistant as GOE: 10.02.02 STRENGTH: M GED: R4 M3 L4 SVP: 6 DLU: 87** This line is a quick reference code utilized by the US Department of Labor (DOL) to quickly identify characteristics of a job. The components of this code are described below as they relate to the PTA.

- **GOE: 10.02.02** This code describes *general occupational exploration* categories under which the PTA profession will fall.
- **Strength: M** This code describes the job as one which requires the ability to perform "Medium work" as defined by the US DOL. M-Medium Work - Exerting 20 to 50 pounds of force occasionally, and/or 10 to 25 pounds of force frequently, and/or greater than negligible up to 10 pounds of force constantly to move objects. Physical Demand requirements are in excess of those for Light Work.
- **GED: R4 M3 L4** This code describes the *general educational development* required of the profession. In the case of the PTA, a reasoning level of "4", a math level of "3", and a language skill level of "4" are required. The DOL definitions of these terms appear below.

**04 LEVEL REASONING DEVELOPMENT:** Apply principles of rational systems to solve practical problems and deal with a variety of concrete variables in situations where only limited standardization exists. Interpret a variety of instructions furnished in written, oral, diagrammatic, or schedule form.

**03 MATHEMATICAL DEVELOPMENT:** Compute discount, interest, profit and loss; commission, markup, and selling price; ratio and proportion; and percentage. Calculate surfaces, volumes, weights, and measures. Algebra: Calculate variables and formulas; monomials and polynomials; ratio and proportion variables; and square roots and radicals. Geometry: Calculate plane and solid figures; circumference, area, and volume. Understand kinds of angles and properties of pairs of angles.

**04 LANGUAGE DEVELOPMENT:** Reading: Read novels, poems, newspapers, periodicals, journals, manuals, dictionaries, thesauruses, and encyclopedias. Writing: Prepare business letters, expositions, summaries, and reports, using prescribed format and conforming to all rules of punctuation, grammar, diction, and style. Speaking: Participate in panel discussions, dramatizations, and debates. Speak extemporaneously on a variety of subjects.

- **SVP: 6** This code indicates that up to 2 years of *specific vocational preparation* are required for this field.
- **DLU: 87** This code indicates that the last time the DOL studied and updated PTA career information was 1987.

## VI. Resources

**Academic Calendar** <http://cms.montgomerycollege.edu/calendars/>

**ADA Information and Compliance** <http://cms.montgomerycollege.edu/compliance/>

College ADA Compliance and Title IX coordinator for questions or clarification on any issues involving disability support and campus Title IX compliance is Christopher Moy, who can be found on the college's web page

with an office on the Rockville Campus. The web page is Accessibility@MC or <http://cms.montgomerycollege.edu/edu/Department.aspx?id=53990>

**Alert Montgomey system** <https://cms.montgomerycollege.edu/edu/plain2.aspx?id=4106>

**Counseling and Advising** <http://cms.montgomerycollege.edu/edu/secondary1.aspx?urlid=4>

The College offers a comprehensive program of student services designed to complement other educational offerings and to assist students with the many issues confronting them as they enter and progress through College.

Counselors are located in the Student Services building. The counselors are available to assist students with academic information, educational planning (including plan of study and transfer information), career planning (including resume writing, the job search, interviewing), explanations of College policy, and identification of community resources.

Once in the Program, the Program Coordinator will provide academic advising. Documentation of counseling sessions are left to the discretion of the program faculty when situations arise within specific course requirements.

**Student Personal Counseling** Occasionally students require crisis intervention or assistance with personal issues affecting their academic success. MC Personal Counseling is available for short term assistance and referral to community resources in the Counseling and Advising Centers Counseling and Disability Support Services on all campuses.

**Disability Support Services** <http://cms.montgomerycollege.edu/dss/>

The College has many resources available to students with disabilities and students are encouraged to contact the appropriate personnel who might assist them in enhancing their ability to successfully complete a program of study. For further information on these services, please contact Cathy Wilson, Takoma Park DSS Counselor, Room 122 STP (240) 567 1475, TTY is (240) 567 7207. Refer to the MC catalog for DSS counselors on the other campuses.

**Financial Assistance** <http://www.montgomerycollege.edu/paying-for-college/financial-aid/index.html>

See the Office of Student Financial Assistance in the Student Services Building (ST), for applications for scholarships and grants. Notices of scholarships offered and jobs available are posted periodically on the bulletin boards or sent to student e-mails. In addition, students may check with local hospitals for special types of assistance, usually through tuition assistance programs. Past students have also contacted the county for assistance with childcare

The web site for the American Physical Therapy Association may also identify financial aid resources.

<http://www.apta.org/ProspectiveStudents/>

**Forms** <http://cms.montgomerycollege.edu/edu/department2.aspx?id=10072> Site for all student forms for issues such as graduation, involuntary withdrawals, change of major, course substitution or academic appeals forms

**Learning Centers and Academic Support Centers** <http://cms.montgomerycollege.edu/learningcenters/>

Assistance with study skills, time management, hints on how to take notes more effectively, liaison with other on campus or community resources support services and many more are offered through the Learning Skills Support Services. This resource is designed to provide assistance for academic success to students in career and technical programs. A wide variety of support services are offered.

**Learning Resource Center** Instructional media of various types are available in the Resource Center (RC). The Library is located on the east side of the campus, on the first floor of the Learning Resource Building. The Learning Laboratory is located on the lower level of the building and serves students from all disciplines, using audiovisual materials to aid learning.

**Math Center** Student tutors help individual students on a walk in basis with specific mathematical problems. On request, audio and video materials are supplied for reviewing or acquiring math skills.

**Science Learning Center** The Science Learning Center provides reinforcing activities for the physical and biological sciences. The activities incorporate the use plastic anatomical models, videotapes, handouts and computer-assisted instruction. Seminars are offered throughout the semester.

**Medical Learning Center** PTA courses frequently require a number of audiovisual aids to clarify and expand course content as part of the requirements for meeting the objectives of the course. The medical learning center is located in HC room 221. This center provides access to medical computer software with technical support, internet access, Microsoft Office, anatomical plastic models, ADAM anatomy software and VH Dissector anatomy software.



The Center staff is eager to assist those students not familiar with the equipment. The center is also used as a quiet testing environment and for those students needing extra time to complete exams. A WEPA pay-for-print kiosk is located here as well. Contact Mrs. Grace Gourdine at 240 567-5591 or Dr. Sarah Netzel-Arnett at 240 567-5592.

**Writing, Reading and Learning Centers** On the Takoma Park/Silver Spring campus, this center provides one on one and group tutoring sessions and specialized workshops. Watch college-wide announcements for a seminar called **So Much to Read** – designed to provide Health Sciences students with study skills. They are located in RC 105 and can be reached at 240 567 1484 or <http://cms.montgomerycollege.edu/EDU/Department.aspx?id=5293>

**Medical Careers Learning Support Services** For more information or to request assistance, speak with Dr. Deborah Johnson, located in HC 129 or call 240 567 5553. Her e-mail address is [deborah.johnson@montgomerycollege.edu](mailto:deborah.johnson@montgomerycollege.edu)

**Physical Therapy Skills Labs** On the second floor of the Health Science Center a variety of PT labs are available for students to practice skills learned in the formal classroom and lab. These labs are the “Practice and Evaluation Lab”, the “Activities of Daily Living Lab”, and the “Hydro-Therapy Lab”. Access to any of these labs and program equipment is permitted only when program faculty are on site.

The PTA faculty expects to see students attending open labs outside of regular scheduled class time for additional practice. These labs are open 9:00 a.m. – 6:00p.m. Monday through Thursday and 9:00 am - 2:00 pm on Friday. Supervision and feedback from program faculty is available upon request and students may also be referred by faculty for additional practice time if they are found deficient in a particular skill.

## VII. Program Policies and Procedures

### A. Admissions and Enrollment Policies

Any questions regarding this area should be addressed to the Admissions Office on the Takoma Park/Silver Spring Campus. Students interested in the Program, should obtain Health Sciences Admissions application available on line or from the admissions office. The application should be filed by March 1 in advance of the desired Fall start date. First time students will be required to take English and Math assessment tests, if not transferring college credit from another institution of higher education. The TEAS test is required of all applicants.

#### **NON-DISCRIMINATION AND EQUAL OPPORTUNITY**

Montgomery College endorses principles of non-discrimination and equal opportunity for all students. The PTA program has a selective admission process because the class size is limited to the availability of clinical education resources. The selection process ranks applicants based on merit and not on any criteria that reflects discrimination against any protected category of individuals and encourages equal opportunity to all applicants.

#### **FEES, EXPENSES, AND FINANCIAL ASSISTANCE**

Tuition charges are based on the student's residence status as of the first day of classes for any semester. In the past, the PTA program has been designated as training for statewide or regionally scarce health care professions. As such, the state of Maryland may offer in-county tuition to out-of-county residents. Availability of this program is decided in the state-wide budget, not the MC Financial Aid office. Qualified students must complete a form available from the PTA program administrative assistant at the start of *each* semester. Students are encouraged to check with the PTA Program office or the state web site at <http://www.montgomerycollege.edu/admissions/StudentForms/state.pdf>

Fees related to registration, tuition and other charges are payable in full immediately upon completion of registration, unless prior arrangements have been made with the student financial aid offices. Please reference the latest *Schedule of Classes* for current tuition information. Additional information regarding financial obligations, payment plans and policies can be found in the College *Catalog* and Credit Schedule.

All students are encouraged to file a FAFSA form with the Financial Aid office. This allows students to be notified for need-based and non-need based resources and federal, state, county or other sources of funds specific to MC.

#### **CHANGE OF ADDRESS**

Each student is responsible for providing MC and the program with information regarding change in addresses or phone numbers. This information is important in case of an emergency during the time the student is a part of the program.

**ADVANCED PLACEMENT FOR TRANSFER STUDENTS**

The College provides an opportunity for students to enroll in more advanced classes. Placement is generally determined by an examination and/or by an evaluation of a student's official transcript documenting experience and scholastic achievement in the military or in other civilian academic institutions. A higher level or different course that has been completed may be substituted for required general education course in the curriculum. Persons who feel that they are qualified for this type of substitution should contact the Admissions Office or PTA Program Coordinator.

Students transferring from another PTA program must have left their previous program in "good standing" and must have three letters of recommendation. Two recommendations must be from the previous program faculty. The third can be the choice of the student. In order to determine course equivalency, the student will be asked to provide catalog course descriptions, official transcripts, and course syllabi from the previous program. Decisions are reached by the Program Coordinator in cooperation with the Dean of Health Sciences and the Admissions Department. There will be a limited number of professional course credits that will be transferred into the MC PTA Program, in accordance with MC transfer credit policies.

Students admitted into the PTA Program may receive credit for previous course work in the military or another institution by applying for credit by examination. More detailed information is available in the current college catalog. Qualified students with military backgrounds as rehabilitation technicians or corpsmen may apply for credit by exam in PHTH 101, PHTH 102, and PHTH 103. Students earning B grade or better from Montgomery County Public Schools rehabilitation science track may apply for credit by exam in PHTH 101.

**REGISTRATION**

First time registration is managed during new student orientation. From that time forward, the student will be recognized as a PTA major – major code 300. This code allows the student to register for all future PTA Program classes on line. According to college policy, students must attempt to register for their classes on-line. The PTA Program expects that PTA students will follow college-wide procedures and deadlines for registration, add and drop periods, and payment for courses.

***B. Progression and Retention***

The student must complete all requirements of each course successfully in order to pass the course. All courses in each semester must be successfully completed in order for the student to advance to the next consecutive semester. All lecture and lab courses must be successfully completed in order for the student to advance to the clinical education courses in the curriculum.

Progression within the PTA Program requires the student to demonstrate satisfactory academic and professional development. Students must maintain a grade of "C" in all PTA courses and maintain an overall grade point average of 2.0 to be considered in good standing in the program and eligible to advance to the next semester.

Semester by semester progression within the PTA curriculum requires that the student is able to pass both the didactic and laboratory portions of each class. If a student does not satisfactorily meet the course objectives as outlined in the course syllabus, he/she will be unable to pass the course and thereby progress in the curriculum. Students who consistently demonstrate unprofessional, illegal, unethical, and or unsafe behaviors during lab practical examinations will not be permitted to pass the course. Course syllabi and practical exam scoring rubrics describe the expected levels of academic and professional development required in the class.

As described in each course syllabus, successful completion of the course means that the student earns a 75% or better average of all components of the course. Lab courses will have skills checks, practical exams, or competency exams. Students will be able to practice all skills during scheduled lab hours. Open lab hours are available for additional practice. Lab practical or competency exams must be completed successfully after no more than two attempts. If the student is not able to successfully complete the practical or competency exam on the second attempt, the student will be withdrawn from the course. The student may stay enrolled in all other co-requisite courses. but will not be able to advance to the next semester's work.

Progression into the clinical education classes within the curriculum occurs only under the conditions listed below. The student must successfully:

- ✓ complete all technical PTA courses in the semester prior to and running concurrently with the clinical practicum course with the exception of PHTH 215 which is completed during the week of graduation.
- ✓ demonstrate acceptable levels of personal and professional comportment as seen in the consistent demonstration of legal, ethical and safe behavior, and sound clinical reasoning.
- ✓ complete all health physical, immunization, CPR, insurance coverage, criminal background checks and drug and alcohol testing. Incomplete, “red flag,” or missing information will result in the student NOT progressing to either of the clinical internship experiences (PHTH 223 or PHTH 224).
- ✓ complete BIOL 212 Human Anatomy and Physiology I with a C grade or better prior to entering PHTH 223 Clinical Practicum I.
- ✓ complete all general education, technical education courses (with the exception of PHTH 215), and PHTH 223 prior to entering PHTH 224 Clinical Practicum II.

#### **READMISSION/RE-ENROLLMENT**

A student whose academic work has been interrupted for one or more semesters must submit a formal request for re-enrollment to the Program Coordinator. The student must also make an appointment with the Program Coordinator to discuss any modifications to the plan of study. In general, if the student has been absent from the PTA Program for longer than 3 years, it is recommended that the student reapply for admission.

The returning student will be asked to develop an independent study plan with the assistance of a designated PTA faculty member. The student will register for PHTH 202 Independent Study for 1, 2, or 3 credits, depending on the study plan. The study plan will include a written and practical skills review of all coursework in PTA completed successfully *prior* to the student’s break in enrollment. Failure to pass the written or practical work will result in further recommendations as determined by the PTA faculty and actions such as administrative withdrawal from the program or delayed scheduling of the student into clinical internship rotations.

Students who earn two failing grades in technical PTA courses will not be re-admitted to the program. Students earning grade point averages below 2.0 will not be considered for re-entry. In addition, PTA clinical courses may be repeated only once according to Academic Regulation 9.62, Section D. If a student does not successfully complete either a technical or clinical course on the second attempt, he/she will not be re-enrolled to the PTA Program.

Students who do not qualify for re-enrollment may opt to reapply for admission following the instructions available in the Admission section in this Handbook, or as found in the Catalog and on the PTA web page. If accepted under these conditions, the student may be required to repeat all technical and clinical courses. What is considered is the time between initial enrollment and ultimate graduation on the plan of study should be less than 7 years total.

#### **ACADEMIC RESTRICTIONS**

Students are placed on academic alert, restriction or suspension when their cumulative quality point average falls under a certain GPA according to the number of credits hours attempted. This can be further reviewed in the college Catalog under the *Academic Standards* section.

To summarize, this college-wide policy limits the number of credits a student may attempt until his/her cumulative GPA is above the threshold value. Because of the nature of the PTA curriculum, academic restrictions may jeopardize the student’s continuous enrollment in the PTA Program. It is the student’s responsibility to notify the Program Coordinator of any alerts, restrictions, or suspensions so that the consequences on the student’s plan of study may be reviewed, discussed, and clarified.

#### **C. *Withdrawal and Dismissal***

A student who wishes to withdraw from the PTA Program should schedule an exit interview with the Program Coordinator. It is recommended that the student attempt to withdraw from the program on good terms as this may facilitate readmission at a future time.

If a student wishes to withdraw from a specific course, the student must abide by the dates given for that particular semester printed in the *Schedule of Classes* or academic calendar relating to the add/drop period. The student is directed to the catalog for procedures to petition withdrawal after the add/drop period.

Students are cautioned that PTA courses are only offered in the semesters identified in the plan of study. If a student withdraws from a PTA course, the student may complete the remaining courses in that semester with the exception of any clinical courses. Due to the nature of the program, the student will not be allowed to advance to the next semester in the plan of study. The student can request re-enrollment into the PTA Program when the course is offered again. See the previous section on RE-ENROLLMENT for further details.

A student may be dismissed from the PTA Program due to unsatisfactory professional or academic progress. Unsatisfactory professional progress is assessed during classroom, lab, or clinical activities. The student is referred to the Appendix documents for the APTA's *Standards of Ethical Conduct for the PTA* and *Values Based Behaviors* for professional comportment guidelines. Faculty will provide verbal and written feedback in the event of unsatisfactory professional progress. Unsatisfactory academic progress occurs when the individual course grade average falls below 75%, when course work is incomplete, or when the student demonstrates academic dishonesty.

#### **ACADEMIC DISHONESTY**

Copying answers to an examination from another student's paper or from a hidden source is considered to be cheating. Accessing information from a hidden source during an examination is considered to be cheating. This includes but is not limited to hidden notes or internet sources accessed from electronic devices of any kind. Discussing the specific content of a written or practical exam with peers who have not taken the exam is also cheating. Using another student's written work without permission or attribution is both cheating and plagiarism. Submitting assignments using references that are not thoroughly attributed is considered plagiarism. Removing any MC, PTA Program, or clinical facility property, or the possessions of another person without permission is stealing.

Any type of plagiarism, cheating, or stealing is a serious offense and has appropriately serious consequences to the student. These are described in the *Student Code of Conduct* found on the MC website or in the college *Catalog*. Students need to be aware that the PTA Program faculty will not hesitate to investigate suspicions or allegations of plagiarism, cheating, or stealing.

Faculty endeavor to protect the test banks that they develop for each course. In order to do this, individual faculty may NOT return completed tests or quizzes. These may be placed in the Medical Learning Center for the students to review. Students may not copy, transcribe, or photograph their tests or quizzes or the answer keys. Ms. Gourdine or Dr. Netzel-Arnett will monitor student access and alert PTA Program faculty of any concerns.

Disclosing exam questions from the NPTE for PTA is considered cheating. If discovered, the Federation of State Boards of Physical Therapy (FSBPT) will investigate. In the past, students found guilty have been barred from taking the licensure exam and their licenses rescinded.

### **D. Academic Policies and Procedures**

#### **ACADEMIC ADVISING**

The PTA Program faculty serve as academic advisors for all students enrolled in the PTA program. Non-enrolled students may access any member of the PTA faculty at scheduled program Open House/Information Sessions, via e-mail, or by appointment during faculty office hours.

#### **CHAIN OF COMMAND**

It is expected that students will engage in professional behavior when working out problems. It is expected that students will first seek out the direct source of the problem in any conflict resolution effort. Before seeking out additional assistance for resolution, this first step must be taken. If a student has a problem with a fellow student, faculty member, etc., that student must first address this person before soliciting the assistance of another individual such as the Dean, Program Coordinator, or more assertive classmate.

Inappropriate escalation of conflicts to individuals not directly involved in the problem is interpreted by the PTA faculty as both immature and unprofessional. Such behavior will not be tolerated and may result in the student receiving a written request for counseling. This policy is intended to introduce the student to appropriate, mature, and professional behavior when engaging in problem resolution. It is not intended to deny the student of his/her right to due process as described in this *Handbook* and available in other MC documents or to circumvent student protections offered under DSS or Title IX.

**GRADING SCALE**

Since physical therapy is a profession in which less than adequate performance may cause patients to suffer real harm, high standards of education, performance and behavior must be maintained to insure the effectiveness and competency of our graduates. Accordingly, the Program grading system is different than other MC courses. The number and letter grading system is as follows:

Number Grade	Letter Grade
90 to 100	A
80 to 89	B
75 to 79	C
Below 75	F

**PRACTICAL SKILLS EVALUATION**

Courses which contain instruction in practical skills will also have evaluations of the student's performance. Practical skills evaluation may take the form of skills checks, practical or competency exams. Skills checks are generally completed with peer and faculty feedback and involve a single lab skill, focusing on application procedure and psychomotor performance. Practical exams are faculty feedback on skills in a graded and scheduled exam, which could include an OSCE – Objective Structured Clinical Exams. Competency exams involve a full patient scenario and request student to perform a range of skills from professional introduction, performance of a skill, and documentation.

Student performance is evaluated in comparison to stated criteria for safe, ethical, legal and professional practice. Evaluation rubrics are provided to the student in advance and reviewed during lab sessions. Both scheduled and open lab time provide students with ample opportunity for guidance and assistance to support student skill development and mastery. When requested, students can get performance feedback from faculty during posted office hours or at other mutually convenient times.

All students are provided with a list of the skills to be mastered in each lab course. The skills have been divided into necessary components needed for competency and safety as described in various PTA textbooks and laboratory manuals. The skills are described in lectures, demonstrated by faculty, and practiced in structured and open lab sessions.

Skills are assessed during scheduled laboratory practical or competency exams. Performance may be video recorded at the discretion of the faculty for the purpose of accurate grading and to support student learning. The student will receive a grade of Pass (P) or Fail (F) after attempting to demonstrate the skills or techniques to the course instructor.

In the event that student performance is not sufficient to earn a passing grade, the student will be allowed to retake the practical exam only one time. The repeat practical exam will be video recorded. If the student does not pass the practical examination after the second attempt, the student fails the course and is no longer able to advance to clinical courses or to continue on to subsequent semesters' coursework.

**ATTENDANCE**

It is the policy of the PTA program that students are expected to attend all scheduled classes, laboratory sessions, off campus field trips, and clinical internships on time. If a student is ill, or must be absent for other legitimate reasons, the student must notify the instructor within one hour of the scheduled arrival time or as soon as safely possible. Children are not allowed to attend classes with parents or their caregivers.

Faculty will identify on the course syllabus that a pattern or absences or late arrivals will decrease the student's final course grade. Three late arrivals will equal one absence and three or more absences will result in a decrease in the final course grade. If a test or practical exam was scheduled for the class in which the student was absent, the student will receive a grade of "0" or "Fail" and will only be allowed to make up the test or practical exam at the discretion of the faculty.

An absence may be excused if the student can adequately document an emergency. For example, an illness requiring urgent care can be documented with a note from the health care provider on the provider's stationery. Other types of absences or offered documentation will be judged on a case by case basis by the individual faculty member.

If the student should become injured, pregnant, or require medical care which will cause a period of absence, this needs to be discussed with the Program Coordinator as soon as it is possible. While concern for the student's wellbeing is paramount, the impact on the student's plan of study will be determined on an individual basis depending on the course(s), amount of time missed relative to the semester schedule, and the student's academic performance and abilities and balanced with the student's rights under Title IX. The faculty will work with the student, the Dean, and the student's health care provider to assure the student's safety and follow any participation restrictions.

### **COMMUNICATION WITH FACULTY**

Faculty are available in their offices during posted office hours and during other times by appointment. Faculty e-mails and office telephone numbers are provided on course syllabi and in this *Handbook*. The college requires that full time faculty be available to get back to students within 24 hours or one business day of their telephone or e-mail message. Part-time faculty are available only on the days that they are scheduled to be on campus. Any availability outside of scheduled office hours will be specified by the individual part-time faculty member in the course syllabus.

Faculty will contact students via their assigned MC electronic mail. Students are then responsible for checking this account for official PTA Program notices and communication. This is the e-mail address linked to the Blackboard learning system.

### **CLASSROOM AND LAB EXPECTATIONS**

Students are expected to behave in ways which promote a positive teaching and learning atmosphere. Students have the right to learn; however, they do not have the right interfere with the freedom of the faculty to teach or the rights of other students to learn by introducing to the classroom elements of violence, intimidation, and harassment. Please refer the MC *Student Code of Conduct* for the general expectations of student behavior in the classroom. Title IX compliance on bullying and harassment extends to classroom, clinical and lab expectations. It must be noted that students in all of the health sciences programs must also demonstrate behaviors – called professionalism - that will be expected and appreciated in the clinical health care setting.

All class discussions will be carried out in a way that keeps the classroom environment respectful of the rights of others. This means that, for example, students should not interrupt someone else who is talking regardless of whether that person is the instructor or another student. Monopolizing the classroom with disruptive behaviors such as talking while others are speaking, using cellular telephones or text messaging, arriving late or leaving early, argumentative approaches in dialogue, framing questions in a manner which hinders the learning process of others, and any other behavior that is deemed inappropriate, unprofessional, or negative will have consequences.

Program faculty will model appropriate, professional behavior and will provide consistent feedback to improve student behavior in the learning environment. Continued noncompliance with these standards may lead to the dismissal from class for the day or from the program if the behavior is not modified.

Attendance and punctuality are expected for all learning experiences. Food or drink in the classroom may not be permitted by some program faculty. Food is NOT permitted in any of the laboratories, and liquids are allowed only in covered containers. Students will not be permitted to have food or open beverages when using classroom or resource center computers. During clinical internships and during field trips, students will be allowed food or beverages only in designated areas.

All book bags and personal items and electronic devices, are stored away from student's access during exams and during laboratory sessions. Students will not be allowed to leave the room once a written exam has begun. Doing so may result in the student's exam work graded only up to the time at which the student exited the room.

Students are expected to practice laboratory skills on one another during lab activities and during open lab hours. See the section below on "Classroom and Laboratory Safety" for a description of the student's right to refuse to work with a classmate or to have a skill practiced on him/ herself. Clinical education expectations appear in the next section of this document and students need to understand that they will be working with licensed PTs and PTAs, clinic staff, and actual patients.

### **STUDENT SURVEYS**

The faculty views student participation in semester student surveys and graduate surveys as a professional responsibility. Students provide feedback to the PTA Program that will be used by the faculty to improve the educational processes and outcomes of the program.

### **CLASSROOM AND LAB DRESS CODE**

Students are encouraged to dress comfortably and appropriately for classroom activities. On occasion, students may be asked to wear clinical attire to the classroom due to the presence of a special visitor or guest lecturer. Faculty reserves the right to ask a student to leave the classroom if inappropriately attired.

Specific laboratory attire is identified in the course syllabus. Because lab sessions are essential to student learning, students are encouraged to be prepared and to always have lab clothes available. In general, lab clothes are a T-shirt and shorts or athletic slacks, with women adding bathing suit tops or sports bras.

Faculty reserve the right to ask a student to don a patient gown or disposable shorts if the student's own lab clothing is inappropriate for the lab activity. Frequent problems with lab or classroom attire may result in reduction of a course grade – refer to the individual course syllabus for details.

### **STUDENT MAILBOXES AND LOCKERS**

Special notices of professional or campus events, classroom notes, unique job openings and other memos are communicated to students via mailboxes located in the rear of the classroom HC 229. Students who are absent from class may find class notes in their mailboxes. Faculty may return graded quizzes, homework assignments, or tests into the student's mailbox. Every attempt will be made to keep the grade confidential by placing the item into an envelope or turning the page(s) upside down. A student may request in writing that graded materials be returned only face to face.

Lockers are assigned once a year in the Fall semester. The student will provide his/her own lock. All locker assignments expire at the end of the Summer Session I for the first year students and at the end of Spring Semester for the second year students. The PTA Program is not responsible for personal items placed in the lockers. As the expiration date approaches, a reminder notice will be e-mailed to students' MC e-mail accounts. Students are asked to clear all personal items from their assigned lockers. Any lockers not cleaned out will have the locks removed and any items discarded.

### **VIDEO OR AUDIO RECORDING**

PTA students are routinely video recorded during repeat practical examinations or other times in the classroom or learning lab for instructional purposes only. Video recordings will be archived then destroyed according to the college's records destruction policies. Students may video or audio record classroom lectures and or portions of laboratory demonstrations. Students should request permission to record. Recording lecture or lab is no substitute for attendance. In addition, a student may be asked to stop recording if he/she is interfering with the learning of others or disrupting the classroom or lab.

Students have the right to refuse to be video- or audio-recorded for any purpose of a non-instructional nature. The College utilizes an informed consent form for students appearing in promotional, informational, or advertising materials.

### **SOCIAL MEDIA**

Students are cautioned that their private or open access social media participation may be reviewed by prospective clinical instructors or employers. Posting audio or video recorded lectures or lab sessions onto open access social media will be considered a violation of student and faculty privacy (FERPA) and represents a hostile learning environment. Posting details of any kind of clinical experience on open access social media will be considered a violation of confidentiality (HIPAA) and may result in student dismissal from clinical education. Students will not request friend status of patients or clinical instructors.

### **CYBERSECURITY**

Students are reminded to protect their passwords to MC records. Students are not permitted to share any individual passwords or attempt to discover other person's passwords. Violations of data access security will vary based on the severity of the offense and may include dismissal from the College. See also cybersecurity in clinical settings.

### **TRANSPORTATION AND PARKING**

PTA students are responsible for providing their own transportation to all facilities used for their educational experiences, including field trips or clinical affiliation sites. The Health Sciences building is located mid-way between the Takoma Park and Silver Spring stops on the Metro's Red Line. In addition, Ride On, metro busses, and shuttles serve both the east and west campus. Ample parking is available in surface and raised structures on the west campus. Students must apply for a vehicle parking hang tag on line in order to be allowed to park in student spaces.

Street and metered parking is available in the Silver Spring and Takoma Park neighborhoods. However, the student is urged to check posted signs for parking restrictions and fees. Any violations will be the responsibility of the student. The parking facilities and regulations will vary at clinical internship facilities. The student is responsible for becoming familiar with and adhering to the individual institution's guidelines.

### **INCLEMENT WEATHER**

If MC closes due to snow, ice or other weather emergencies, an announcement will be made as early as possible on the radio and television stations in the metro area. If an announcement concerning closure is not made before the student must leave for the College, then the student must use good judgment in making a decision as to whether or not to attend. MONTGOMERY COLLEGE (MC) announcements will be listed separately from Montgomery County Public Schools (MCPS). When the college is closed, clinical or off-site educational activities are NOT necessarily cancelled, as weather and traffic conditions vary widely throughout the metropolitan area.

### **CAMPUS SAFETY**

Students are encouraged to sign up for "MC ALERTS" – [www.montgomerycollege.edu/emergency](http://www.montgomerycollege.edu/emergency) This is a free service sponsored by the county which provides real time text messages to student cell telephones in the event of emergencies, inclement weather, power outages, traffic conditions, and campus closures. In addition, emergency notices are also posted on the college webpage at [www.montgomerycollege.edu](http://www.montgomerycollege.edu) or are available as an audio recording on 240-567-5000.

### **CLASSROOM AND LAB SAFETY**

All physical space and equipment is maintained in optimal condition. Electrical equipment is inspected every two years for safety and electrical compliance. Students are instructed in equipment and lab surface cleansing, along with other practices that keep both patients and practitioners safe.

Federal law requires that all individuals must be informed about potentially hazardous chemicals present in the workplace. Proper procedures for the use and storage of chemicals, such as equipment and sanitizing agents, are observed. Material safety data sheets (MSDS) are posted in the whirlpool lab and are also available in the Program Coordinator's office.

It is the program's policy that students have the right to refuse to work with a classmate if the student has objections such as religious convictions, prior injury to the area, pregnancy, other health condition, or unease due to fear or sexual harassment. The student will discuss his/her concerns confidentially with the faculty, in order that they may collaborate in making sure the student's concerns are respected while ensuring that essential skills are practiced. The student may also discuss his/her concerns with MC Title XI coordinator, Mr. Christopher Moy. This policy is intended to introduce the student to appropriate, mature, culturally sensitive, and professional behavior. It is not intended to excuse a student from practicing essential skills or from experiencing clinical interventions in the lab.

Campus lockdown procedures may be initiated in the event of an active shooter or other threat to campus safety. Students will follow faculty and security directions. More information is available to students from the Office of Public Safety and Emergency Management.

### **HEALTH AND MEDICAL CONDITIONS**

It is the policy of the PTA Program that timely disclosure of health and medical conditions is essential for ensuring student safety during laboratory and clinical studies. Students may fall ill, experience a disability, or become pregnant during the course of the PTA Program. The faculty needs to know what health or medical condition the student is experiencing in order to be able to counsel the student, respond to any health emergency, and to work



collaboratively with the student in planning for program completion, optimum safety and follow any participation restrictions.

The student's privacy and confidentiality will be maintained. However, disclosure of the student's health status to program faculty or clinical instructors may be necessary to assure the student's health and safety. If the student chooses to continue in the program, the student will be advised about safety precautions and this discussion will be documented and signed by the faculty and student. Supporting documentation from the student's health care professional may also be required to optimize safety and participation restrictions in the classroom, learning lab and clinical environment. If the student elects to take a leave of absence due to his / her medical condition, the student must follow all re-enrollment policies outlined earlier.

**Disclosure of a pregnancy is protected by federal Title IX regulations. Please see the Appendix for the MC Pregnancy Disclosure Procedure.** If a student becomes pregnant, she has the right to disclose this information when and to whom she feels comfortable. The student's privacy will be respected; however, a dialogue about clinical interventions, situations, and environmental conditions that pose a potential hazard to either mother or baby will be initiated with the Program Coordinator. The intent of this policy is to promote open communication between student and faculty, and by extension the student's health care professionals.

If the student chooses to take a leave of absence from the PTA Program, she will be subject to the re-enrollment policies outlined earlier. Students will not be penalized for absences from class and clinical internships due to medical appointments and or lactation, as protected under Title IX. However, the student is reminded that she will be held accountable for classroom, laboratory, and clinical learning and all relevant performance standards.

#### **ACCIDENTS OR INJURIES WHILE ON CAMPUS**

Should an accident or injury happen on campus, the student will be attended to by campus security staff who have basic first aid training. An ambulance will be called, if necessary, for transport to an emergency care facility. College policy permits only campus security personnel to administer first aid. Refer to the next section for policies and procedures pertaining to accidents or injuries occurring while the student is off-campus or at clinical education facilities.

#### **REASONABLE ACCOMMODATIONS**

The PTA Program affirms the importance of the Americans with Disabilities Act; provides reasonable accommodations to students with documented disabilities; and assists the college and community to understand the effects of disabilities; and works to eliminate the physical, technical, and attitudinal barriers that limit the range of opportunities for students with disabilities.

In order to identify accommodations for the PTA Program, students must consult with the campus Disability Support Services (DSS) counselor(s). The counselor will notify the student of the necessary academic adjustments and or accommodations needed. The student is responsible for the cost of obtaining further professional verification and documentation, if needed.

The student is required to inform the faculty at the *beginning of each course or clinical experience* of the need for and the nature of the accommodations. If the identified need is related to test taking, the student may take exams in a situation appropriate for his/her individual learning as noted in the letter from DSS, such as test taking in a quiet room or one permitting additional time for completion of the exam. Student needs will be balanced with the instructor's schedule, and if necessary, the exam will be taken in advance of the scheduled exam and under supervision.

Accommodations are not retro-active to the start of a semester; they are only in effect from the time the faculty is notified. It should also be noted that accommodations may only be applied to written and oral coursework, written exams, or presentations. **Accommodations are not always practical or safe in the simulated clinical environment, during skills labs, or during clinical internships.** For example, an accommodation for extra time on written exams will not be applied to practical exams during which the delayed emergency response or the slow application of guarding techniques will or could cause harm to classmates, faculty, or future patients.

#### **PROFESSIONAL ACTIVITIES AND ORGANIZATIONS**

The PTA faculty encourages student participation in professional activities and organizations. These extra-curricular activities enhance learning experiences. In light of this, it is recommended that each student support the

professional society membership in APTA. Student membership applications are available at new student orientation and from the faculty. In addition, each semester's syllabi list the state and national professional meeting dates and locations.

The program faculty support student engagement in professional activities. Beginning in Fall 2016, a PTA Student Organization will assist with for student participation in professional activities. This may include actions such as the Maryland PT Fall meeting, Maryland Student Conclave, or Day in Annapolis.

#### **STUDENT ELECTRONIC MAIL**

The PTA faculty will use only the student's college-issued electronic mail for the purposes of communication and formal announcements. Students are asked to frequently check their MC email accounts for job notices, course information, and announcements.

When contacting the faculty, students are encouraged to identify the reason for the e-mail in the subject line in order to receive prompt attention. For example, a student with a question about a course assignment would write the following in the subject line: **Student with question on PHTH 102.**

Faculty request that students get into the habit of framing e-mail communication in professional terms. It is expected that students address faculty appropriately, use professional terms, and grammatical and language choices worthy of a college-educated individual.

#### **PAY-FOR-PRINT AND OTHER GREEN INITIATIVES**

Printers on campus are disabled from printing free copies. If a student needs print copies to supplement class materials, the student will access the WEPA system to pay for printed materials. Students are directed to the web page [www.montgomerycollege.edu/printing](http://www.montgomerycollege.edu/printing) for additional information and to sign up for the service. Our nearest print kiosks are in the Medical Learning Center, on the first floor of the Health Sciences building, and the Art Library in the Cafritz Building.

Whenever possible, materials will be posted on class web pages on Blackboard. Students will be encouraged to electronically submit assignments and will receive electronic feedback. Printed class or lab handouts and exams will use 2-sided copy and 11 point fonts. If a student requires larger type on documents, he/she will address this request to the faculty.

### ***E. Clinical Education Policies and Procedures***

The clinical education component of the curriculum is different from the traditional classroom instruction to which the student has been accustomed. Clinical education experiences involve the care of real patients and the use of equipment and professional interventions, which could be dangerous if used improperly. Since many factors together constitute a very different situation than a classroom education, a much more structured set of rules and regulations are necessary to assure student success.

#### **CLINICAL ASSIGNMENTS**

Students enrolled in the PTA program will be assigned to two clinical rotations during the final academic year of the program. If the student has an interest in a particular facility for a future rotation, the sooner that the student identifies that clinical site to the Clinical Coordinator the better. This will allow faculty to make contact and begin the contractual process. Students are assigned to clinical facilities based on available facilities and student learning needs.

Clinical rotations are an integral part of the health science programs. Students must have experiences within approved clinical facilities in order to successfully complete their program of study. Clinical assignments are non-negotiable and faculty will not allow students to exchange site assignments with their classmates. While the faculty recognizes that students may be assigned to sites that are distant from their jobs or homes, students must be prepared to make adjustments to get to their assigned sites on time and for the entire period of the clinical practicum. The clinical faculty may allow schedule adjustments; however, all assigned clinical hours must be completed within the assigned semester.

In order for an experience to be considered as “full time”, the student is required to be at the clinic for a total of eight (8) hours per day, for the number of days per week stated in each course syllabus, but for no more than 40 hours in any one week. Isolated half-day experiences or one-day field trips are considered “part-time.”

Students must meet the requirements of the clinical facility in order to be placed. MC has partnered with clinical facilities holding the highest standards in each of the health sciences disciplines. Our clinical partners are an integral part of each of our health sciences programs and required to sustain our programs. Clinical facility eligibility requirements will include, at the minimum, successful completion of the semester’s course requirements and complete and current required paperwork on file with the PTA Program. See the next section for paperwork requirements.

The facility has the right to add to the list of eligibility requirements and has the right to bar the student from working with the facility’s patients. Please see the next section on dismissal or withdrawal from the clinic. Students who are asked to leave a clinical site by the facility or to separate from the clinical site for some other reason cannot be guaranteed placement to another site within the same semester. This may result in the student having to delay progress in the program of study for up to one academic year or until a new clinical facility can be assigned.

Any student having interpersonal difficulty with a Clinical Instructor, Supervisor, or other professional may ask for a conference, and the Clinical Coordinator will be informed. A conference date may then be arranged with the student, Clinical Coordinator, and/or appropriate clinical personnel.

#### **ASSIGNMENT AT PLACE OF EMPLOYMENT**

**Students are not allowed to work as PTAs prior to graduation.** A student employed in any capacity at a health care facility used for clinical internship must inform the Clinical Coordinator and request clinical placement at a different facility. This provides a broader learning experience for the student and prevents role conflict with facility staff.

#### **FINANCIAL COMPENSATION**

**Under no circumstances are students paid during the clinical practicum experiences.** Monetary gifts from grateful patients or families cannot be accepted. Students will discuss the situation with their clinical instructors if the need arises. Students are not permitted to work in any capacity in the same facility to which he/she has been assigned as a student. Serious liability issues will result and the student may be dismissed from the internship.

#### **CLINICAL PERFORMANCE ASSESSMENT**

Clinical courses are scheduled with the clinical faculty at the clinical affiliation site, based on availability. Evaluation of the student's clinical performance is based upon specified levels of technical and profession competence and in comparison with stated criteria in the Trajecys Clinical Performance Instrument.

All evaluations are discussed with the Clinical Instructor (CI) and signed by both student and CI. The student will receive a letter grade for clinical courses determined by the PTA program Clinical Coordinator in consultation with the clinical faculty who worked with the student during the affiliation. If a student requires additional clinical education time to successfully complete clinical course objectives, this may be granted if the student demonstrates an appropriate professional affect and progress. Additional clinical education time will not exceed two weeks.

If a student does not satisfactorily meet the clinical course objectives, he/she will be unable to progress in the curriculum. PTA clinical courses may be repeated only once according Academic Regulation 9.62, Sec. D. If a student does not successfully complete the course after a second attempt, he/she will not be allowed to continue in the program.

#### **ATTENDANCE AND BEHAVIOR EXPECTATIONS**

Attendance is recorded at each clinical affiliation and verified by the Trajecys system. Students are required to behave in a manner that will reflect credit on themselves, the school and the profession which they are being prepared to enter. The MC *Catalog*, *Student Code of Conduct*, PTA program policies and procedures found in this *Handbook*, and professional guidelines, such as the *APTA Code of Ethics*, and *Standards of Ethical Conduct for the Physical Therapist Assistant* and *Values-based Behaviors for the Physical Therapist Assistant* contain the standards of professional behavior to which the student is held. The student should become familiar with the expectations listed below.

- If a student is not present at assigned area, then the student is considered absent for the day.

- All lost time must be made up. Exceptions to this rule will be made only for the most serious of reasons, on a case by case basis, and at the discretion of the Clinical Coordinator.
- Emergency or serious situations happen, but the time must be made up. The following situations are considered emergency or serious: personal illness, court appearances, death in the immediate family (e.g., parents, grandparents, or siblings).
- Proof of the reason for an absence may be required by the internship facility. For example, a facility may require a physician's return to work release if the student was absent for more than 2 days.
- Any time missed due to medical or dental appointments must be made up. Note that CIs and program faculty take a negative view of time missed due to appointments which could and should have been scheduled outside of clinical internship hours.
- Any lost clinical time must be communicated—**in advance**, whenever possible—with **both** the Clinical Coordinator and the student's CI.
- Students work the same hours and schedule as their CI. This includes holidays, evenings, and or weekends. If college classes are cancelled for any reason, the student is expected to attend scheduled clinical hours unless told not to.
- It is expected that students will be on time and prepared for their clinical duties and responsibilities. Habitual tardiness, absenteeism, and being unprepared will result in a reduction in the final grade and possible administrative withdrawal from the clinical practicum course.
- Students may be allowed thirty (30) minutes for lunch. This is left to the discretion of each CI at each institution. It is preferred that students do not go off facility premises for lunch but this may be left to the CI to decide as well. If the student goes off the premises, he/she is still expected to return to the clinical site by the appropriate time to resume responsibilities.
- Clinical paperwork requirements may change at any time and with little advance notice. If a student is required to, for example, complete a second drug screen or medical test, it is expected that the student will make every effort to complete the new requirement as soon as possible. Delays due to student procrastination may have a negative effect on the outcome of the experience.
- Clinical schedules which conflict with religious observances must be discussed with both the CI and Clinical Coordinator. Clinical time missed due to religious observances must be made up.
- All students are required to attend the clinical affiliation at the regularly scheduled time as identified in the published *Schedule of Classes*. If a need arises to request a minor change in scheduled time, the student must notify the Clinical Coordinator in writing of the requested change and its justification. Rules for adjustments to clinical hours are listed below:
  - The requested change must not interfere with student's education. The request must not interfere with the normal operation of the clinical facility or the PTA educational program. All clinical hours must be completed within the scheduled semester.
  - Reduction of commute time, unreliable personal transportation, or child care is not generally considered undue hardship. Requests for adjustments to clinical hours for these reasons will be denied.
  - Scheduled dates and work times may vary due to clinical site or clinical instructor avail-ability. Students will be notified of any changes to their assignments as soon as this is known by the Clinical Coordinator.

Each clinical facility reserves the right to terminate a student's educational internship at the site for reasons interpreted as unprofessional behavior. Students are warned that frequent absence, tardiness, or behaviors that indicate disinterest or lack of preparation will invariably be interpreted as unprofessional. The program and clinical faculty expect that students will orient themselves to and abide by the clinical facility's policies on conduct. A student will be subject to disciplinary action if violations of any kind occur.

The clinical facility may request that the student be removed from the clinic. Upon this request, the student will leave and then inform the Clinical Coordinator. The student will not be reassigned to a clinical site until the behaviors leading to the dismissal are understood and addressed. An individualized plan to address student behavior will be developed, implemented, and assessed by the Clinical Coordinator before the student is allowed to continue. The Program Coordinator, clinical instructor, student, and or Dean of Health Sciences may assist in the development, implementation, and or assessment.

**PERSONAL APPEARANCE AND UNIFORMS**

The personal appearance of PTA students reflects the standards of the profession, the college, and the program. As such, personal appearance is seen as indicative of the students' interest and pride in their chosen profession. Any student reporting to the clinical site in improper uniform or in soiled or untidy clothes will be sent home. The student's CI will be the judge of student appearance and this judgment is not subject to appeal.

Clinical facilities may have a dress code and if so, the student will follow it. If the facility does not have a dress code, the following guidelines are provided as suggestions appropriate to many clinical settings.

**Uniform clothing:** Polo shirts and khaki ankle length slacks are generally acceptable. Women may wear a white lab coat or lab jacket. Skirts, capri-length slacks, jeans, leggings, or shorts may be prohibited. Men may wear white lab coats or lab jackets. Pants or khaki slacks should be worn with a conservative belt. Jeans may be prohibited. Men may be required to wear neckties. If so, these will be appropriately tied and secured. Color coded scrub tops over color coded scrub pants with or without lab jackets is an acceptable variation for either men or women in the clinical setting. It is expected that all clothing is clean, in good repair, and without excessive wrinkles.

**Hair:** Neatly combed and clean hair of any style is acceptable on men and women as long as hair does not fall into the face, onto the patient, or onto equipment. Neatly trimmed and groomed facial hair is acceptable for men.

**Shoes:** Low heeled and closed toe shoes with skid proof soles are appropriate for all clinical settings. Shoes must be clean and in good repair. Check with the individual facility whether athletic shoes or sneakers (trainers) are allowed. If they are permitted, they must be clean, in good repair, and securely tied.

**Accessories:** The use of cosmetics should be discrete and kept to a minimum. Odors from per-fumes, cosmetics, or other toiletries may be offensive or irritating to patients with respiratory conditions. Fingernails should be kept short, clean, and neatly trimmed. Note that some clinical facilities do not allow nail polish or nail extensions due to infection control issues. Students on internships are expected to adhere to the facility's guidelines. Watches, wedding, and or engagement rings, school rings or pins, and small earrings are generally acceptable. Students are reminded that large, sharp, and or pointy jewelry or belt buckles can scratch or tear fragile skin and that necklaces, bracelets, or dangly earrings can get caught in clinical equipment or pulled on by confused, agitated patients.

**Personal Hygiene:** High standards of personal hygiene are expected of all health care workers. Strong body or breath odors, colognes, perfumes, or cooking smells which cling to hair or clothing may be offensive or irritating to patients and co-workers. Students may expect feedback on their personal hygiene and should be prepared to deal with this in a constructive and professional manner.

**Identification:** Unless otherwise indicated by the clinical facility, the student must wear their student identification badge at all times. Students must be clearly identified and introduced as *students*.

**Piercings and tattoos:** Some clinical facilities will require the removal of or otherwise limit jewelry in body piercings while the student is on site. Students may also be required to cover tattoos or other body markings. Students may expect feedback on their personal choices from faculty and clinical instructors and should be prepared to deal with this in a constructive and professional manner.

**CLINICAL SUPERVISION**

Students are NOT ALLOWED in the clinical area without the supervision of a CI, facility super-visor, clinical faculty member, or designated physical therapist. Students are not under any circumstances permitted to treat a patient without the clinical supervision of a physical therapist in accordance with the Maryland practice act for physical therapy and APTA standards of ethical conduct for the PTA. Students are permitted to access only those areas of the clinical facility that support direct patient care of only those patients on the student's schedule.

**CYBERSECURITY**

Most clinical facilities utilize an electronic medical record (EMR). While students are on internship assignments, they may be given access to the EMR for the purpose of patient care. Access may involve passwords or other protections. Access to records of individuals not being treated by physical therapy constitutes a violation of HIPAA. Students who compromise the integrity of the clinical facility's EMR may be dismissed from the internship. Violation of HIPAA may result in the student earning a failing grade for the clinical experience.

**STUDENT HEALTH AND SAFETY DURING INTERNSHIPS**

During student experiences in the clinical setting, the student may come in contact with diseases, equipment, and treatments that could be hazardous to the student or an unborn baby. It is expected that the student will utilize common sense and sound patient care procedures endorsed by OSHA, and taught by the PTA Program related to pathogens, environmental hazards, and infectious diseases. Related health and safety policies are discussed in prior

sections of this *Handbook*. It is expected that the student will be familiar with all health and safety guidelines. Students are reminded that their personal health also impacts the health of their patients and fellow health care workers.

According to the clinical education affiliation agreement (see section below), both the college and the clinical sites agree that students are responsible for payment of any charges for health care associated with their clinical education. This includes, but is not limited to, health physical examinations, PPD tests, current immunization records, and health care services for accidental injury or required following exposure to biohazard materials.

As part of the required paperwork (see section below), the student is required to complete a health physical examination. This documentation provides an immunization record, PPD test (or acceptable alternatives), and certifies that the student is free of communicable diseases and able to perform the duties and responsibilities of a PTA student as outlined in the Technical Standards. All immunizations and communicable disease testing are based upon the most recent OSHA regulations for health care workers and will be updated as needed.

Students with known latex sensitivity or allergy should be aware that the College cannot guarantee that he/she will not be exposed to latex during clinical experience. Students with latex sensitivity should make this information known to the Program Coordinator, Clinical Coordinator, and any of their clinical instructors so that appropriate protection and or supplies can be arranged.

Students with known communicable diseases will need to follow the clinical facility's protocols for managing their conditions during patient care. The College has no jurisdiction over these protocols and cannot intervene on the student's behalf.

A student may also be exposed to a communicable disease while on a clinical rotation. In these instances, the facility's protocols may, for example, require that the student leave all patient care areas until incubation periods have expired. In cases of exposure to certain diseases or conditions, the student may require medications, inoculations, or special tests. Costs are the student's responsibility. In addition, any missed clinical education time must be made up.

Unprotected contact with blood, blood products, or other body fluids may occur from needle sticks, urine splashes, or exposure to patients prior to the initiation of isolation procedures. The student is required to follow the clinical facility's protocols and exposure control policies and procedures. It is the student's responsibility to follow these measures and to be responsible for any fees related to these services. Any lost clinical education time must be made up.

If a student comes into contact with communicable diseases outside of the internship, is injured, or contacts a disease which in turn may be hazardous to classmates, patients with compromised immune systems, family members, young children, or other health care workers, it must be reported to the Program Coordinator immediately. The Program Coordinator, in consultation with the individual student, Dean of Health Sciences, MC personal counseling, and the student's own health care provider, will develop an individualized action plan for managing the issue. Depending on circumstances, the student may have temporary or permanent limitations which may in turn affect his/her continued participation in the program.

### **IDENTIFICATION**

Students will use their identification badges and name tags as part of the required equipment for clinical practicum courses. Unless otherwise instructed, the student must wear this identification badge at all times during their clinical practicum, or at any other time that they are representing the college or PTA program in an off-campus activity.

Students are required to introduce themselves to patients and their family members, facility staff, and other health care workers as "STUDENT." It is both unethical and illegal for a student to fail to accurately identify himself/herself during a clinical education experience. Failure to do so is a violation of informed consent. Students are reminded that patients, their family members, or other caregivers are permitted to refuse treatment from a student PTA.

### **CONFIDENTIALITY AND MEDICAL DOCUMENTATION**

Prior to participating in clinical education experiences, students are oriented to HIPAA regulations and the professional, ethical, and legal requirements along with their corresponding penalties for patient confidentiality. All

facility and patient records are confidential. Requests for information concerning a patient from any source should be referred to the student's clinical instructor.

Documentation examples extracted from the medical record for educational purposes must have all identifying information removed, including facility name, patient identification numbers, birthdates, provider names, and dates of service. Students sign a Memorandum of Agreement which includes affirmation of patient confidentiality at new student orientation and are expected to uphold this agreement throughout their time in the PTA program.

Students will follow all facility requirements for the format and process of medical record documentation. Unless otherwise required by the facility, students will sign any entry made in the patient's medical record with their full first and last names followed by the letters "SPTA." All student entries into the medical record must be co-signed by the clinical instructor.

#### **LEAVING THE PREMISES OR VISITING PATIENTS, FAMILY, or STAFF**

Students shall not leave their assigned clinical area without the permission of the CI or immediate person in charge. Any student doing so will have to make up the time lost. Students are not allowed to visit patients or other persons to whom they are not assigned, unless approved by the clinical instructor. The student will follow the visiting hours designated by the clinical institution if they wish to visit persons who are not assigned to the physical therapy service.

#### **PERSONAL PROPERTY**

Students are asked not to bring personal property of value, such as credit cards, excess cash, and personal electronics to clinical facilities. The student is solely responsible for their possessions. The clinical facility cannot be responsible for lost or missing personal property. Consult with your CI to inquire whether the facility has arrangements for securing student belongings.

#### **TELEPHONE CALLS, PHOTOCOPYING AND INTERNET USAGE**

Personal telephone calls or text messages are not allowed during clinical education hours. Cell phones or personal communication devices should be turned off or set to vibrate or privacy setting while the student is participating in clinical education. CIs and patients will consider answering personal telephone calls or responding to personal text messages as unprofessional behavior. As stated earlier, unprofessional behavior in the clinical setting may result in dismissal. In the event of an emergency call or message, the student will notify his/her CI, will ensure that the patient is safe, and will seek a private location in which to respond. Any other actions are not professional.

Photocopying materials for personal use is not allowed. Photocopying proprietary documents may be considered a copyright violation for which the student may be held accountable. Students are not allowed to access the facility's internet or intranet for personal uses or any non-clinical data gathering. Accessing patient information or PHI of patients not on the physical therapy service is a violation of confidentiality and will be dealt with as such.

#### **EATING AND SMOKING**

Students shall not eat, drink, or smoke while on duty except in designated areas and during designated times. Each clinical site will have designated areas as required by OSHA and Maryland Occupational Safety and Health regulations. Please note that many health care organizations are "Smoke Free," meaning that smoking will not be allowed on their property or within sight of public access areas. This includes e-cigarettes or vapor tobacco products.

#### **TRANSPORTATION AND PARKING**

PTA students are responsible for providing their own transportation to all facilities used for education experiences. At the clinical sites, the parking facilities and regulations will vary. The student is responsible for becoming familiar with the institution's guidelines and is responsible for any fees or fines.

#### **STUDYING FOR NON-CLINICAL CLASSES**

Clinical education classes are time intensive. Even when there are no patient care assignments to be completed, students are encouraged to practice clinical skills, ask questions, read professional literature, or access material in the professional library with the permission of the clinical instructor. Students are expected to participate in the routine stocking, cleaning, and organizing in the clinic.

**DISMISSAL FROM CLINICAL FACILITY**

The faculty believes that the physical and emotional welfare of patients and their families has the highest priority during clinical educational experiences. A student who demonstrates clinically unsafe practice or a pattern of behavior which jeopardizes patient safety may be dismissed from the clinical facility for a specified amount of time.

Unsafe clinical practice is defined as any behavior determined by the student's CI to be actually or potentially detrimental to the patient, their families, or to the health care facility. This behavior may be related to many factors; e.g., physical or mental health problems, knowledge deficits, problem solving skills deficits, anxiety, drug abuse, etc. In addition, including patients, their families, facility staff or clinical instructors on social media posts, friend requests or "likes" will be considered inappropriate and may result in dismissal from the clinical facility. The clinical facility, therefore, maintains the right to refuse a student from working with the patients and staff.

The CI will identify and document unsafe behaviors. This will be provided to the program Clinical Coordinator. The decision about whether to permit the student to continue in the clinical practicum and under what conditions this will be permitted is reached by the program Clinical Coordinator in consultation with the student and clinical instructor. The Program Coordinator and Dean may assist in this process, if needed.

**RIGHT TO DUE PROCESS**

The student has the opportunity to respond to the circumstances resulting in suspension or dismissal by submitting any relevant data pertaining to the incident(s) and seeking appropriate recourse through channels described in the *Student Code of Conduct* and those described in the DUE PROCESS section of this *Handbook*. However, if asked to leave the clinical facility, the student will do so and then begin the academic grievance procedures.

**CLINICAL SKILLS ACCOUNTABILITY**

Students are held accountable for all skills previously learned in all prior courses in the curriculum. All skills will be needed in the clinical practice environment. PTA skills labs are open at specified hours or by appointment throughout each semester and during the summer months. A faculty member must be available on site to provide students practicing in the lab with guidance and supervision.

**REQUIRED PAPERWORK**

Further information on all of these documents is available from the Program faculty. All health physical documents uploaded by the student and are kept on file on the CastleBranch website. Failure to file health physical documents and to keep these documents current will result in an administrative withdrawal from the program. Please note that health and physical requirements change and that clinical facilities may require additional information or testing. Those documents marked with an asterisk (\*) are the student's responsibility.

**The Clinical Education Affiliation Agreement:** MC has a uniform written agreement in effect with all of the affiliated hospitals and clinical sites, and close cooperation between the College and clinical coordinators is vital to the success of the program. Clinical facilities will have different regulations. Facilities require students to have complete health physicals, immunization records, records of annual flu shots and PPD test results, criminal background checks, drug and alcohol tests, and proof of insurance.

Copies of executed written agreements are on file in the PTA Program office and can be reviewed upon request to the Clinical Coordinator. The student's part in ensuring the effectiveness of the clinical portion of the program is to have a good understanding of the educational philosophy of "hands on" clinical training, a thorough knowledge of the pertinent rules, and the will to cooperate with them.

**\* Health Physicals:** After students are accepted and by **July** of the first year in the program, a complete physical must be performed by a physician. The health physical form provided to you in the Spring Semester includes all recommendations for health care workers.

**\* The TB (Mantoux or PPD) test and Immunization:** A record of all immunizations and/or titers for MMR (measles, mumps, and rubella), rubeola, and varicella are required.

**\* The Hepatitis-B** vaccine series is required since exposure to this virus is more common in health care settings than HIV exposure. A decline statement must be on file if the student does not wish to have the Hepatitis-B vaccine.

**\*D-TAP or TDAP:** (Polio), tetanus, acellular pertussis is recommended and we anticipate that the CDC may require the D-TAP vaccine or booster in the future.



**\* Annual Influenza Vaccinations:** The majority of the health care facilities with which MC affiliates require annual influenza (flu) vaccinations. Any exceptions must be documented. Acceptable reasons for not taking the influenza vaccination are physician-documented sensitivity, allergies, or diagnosis of Guillain-Barre syndrome. Religious reasons for declining must have documentation by the clergy or religious leader.

**\* Drug and Alcohol Screening:** All students must complete drug and alcohol screening (toxicology) before July 1 in the first summer session. Additional testing may be required based on facility requirements. Students are notified of these requirements *prior* to their assignment to the facility. Students have the right to refuse placement at sites requesting drug and alcohol screening, but must be aware that other facilities may not be available during the same timeframes.

**\* CPR Requirement:** Health care provider or Basic Life Provider (first responder) CPR cards are renewed every 2 years. Students are required to maintain current certification in CPR, with a copy of the CPR card on file and uploaded in the medical document manager by October 1. Certification through the American Red Cross is recommended and the certification level must be for Basic Life Support (BLS) for health care providers acting as first responders and must include automated electric defibrillator (AED) training.

**\* Criminal Background Checks:** All enrolled PTA students must complete a criminal background check by July 1 of the first summer session. This process is reviewed during new student orientation.

**\* Health Insurance Coverage:** Students are required to have health insurance. Your health insurance card (back and front) will be uploaded to your medical document manager. The student will be responsible for his/her treatment if injured while at the clinical facilities.

**Liability (malpractice) Insurance Coverage:** The student is covered by liability insurance through MC at no cost during clinical hours published in the *Schedule of Classes*. This covers incidents involving possible negligence in patient care.

**\* Additional requirements:** Clinical educational requirements are continuously evolving. Students must be prepared to meet any requirements as soon as Program faculty is aware of them. Students must be able to verify compliance with any and all requirements.

## VIII. DUE PROCESS

The student has the right to due process in all decisions made by the faculty concerning his/her education at MC. This most often takes the form of appeals regarding an exam grade, a course grade, or dismissals from clinical education, classroom, or laboratory settings. The faculty supports the student's right to due process and feels that problem identification and resolution ought to begin at the lowest levels before escalating to higher levels as described in the Chain of Command section in this *Handbook*.

When in doubt about what to do in a particular situation, the student is advised to speak directly to a PTA faculty member or to a member of the college's counseling staff. Students are also directed to the *Code of Conduct* and *Academic Regulations* found on the MC web page as well as in all college publications.

## IX. GRADUATION

### A. Annual Award Ceremony

The PTA Program MAY present up to two awards, for academic and/or clinical achievement, during the spring semester of the sophomore year at the Phi Theta Kappa Induction Ceremony. The PTA faculty selects the student(s) who will receive these awards. The awards use the following criteria:

- The Outstanding Academic Achievement Award will be given to the PTA student who maintained the highest grade point average in the program; and
- The Outstanding Clinical Achievement Award will be given to the PTA student who has consistently embodied the professional abilities and the core professional values of the physical therapy profession.

### B. Graduation

#### REQUIREMENTS FOR GRADUATION

To qualify as a candidate for the degree of Associate of Applied Science PTA, a student must have earned the following:

1. The minimum number of semester hours of academic credit which must include all courses required in the curriculum elected by the student or such alternative courses as are specifically required by the College or university to which the student will transfer.

2. A minimum grade of "C" (2.0) in all PTA courses.
3. Settle all financial obligations to MC. The general obligations of the candidate are published in the *Academic Regulations*.
4. If the course work of the PTA program is not completed until August of the graduating year, students will not graduate or receive their diplomas until the Fall graduation in December.

### **APPLICATION FOR GRADUATION**

At the start of the Fall semester in the second year of the PTA program, students apply for graduation. They will complete a graduation checklist and will submit this to the Admissions and Records Office, usually by November 1. The student's academic record is reviewed to ensure that all requirements for graduation have been completed. A graduation checklist is included in the Appendix for advising purposes.

Students are responsible to complete all records and pay all applicable fees for graduation. Course substitutions for coursework at prior institutions must be completed *prior* to the Spring semester of the year the student wishes to graduate.

### **GRADUATION CEREMONY PARTICIPATION**

Students who have completed all PTA curriculum courses except for PHTH 224: Clinical Practicum II and PHTH 215 Seminar IV will be allowed to participate in the May graduation ceremony. The cap and gown for the graduation ceremony can be obtained through College bookstores, look for notices on MyMC in early March.

Graduation and commencement ceremonies are held at the Rockville campus. Students are encouraged to review all graduation information available on the college main web page. Final details are generally available after Spring break.

## **X. POST GRADUATION ACTIVITIES**

### **A. Graduate Surveys**

Prior to graduation or immediately after, each student will be asked to complete a survey evaluation of the program which seeks information concerning students' feedback about their achievement of the program objectives and the major strengths and weaknesses of the program as well as recommendations for program improvement. This input is essential to the continual process of program improvement embraced by the PTA Program faculty.

### **B. Professional Licensure**

The steps for obtaining the initial licensure, along with the development of an individualized study plan for the NPTE, are completed during PHTH 215 Seminar 4. Professional licensure involves the following steps:

- 1) Faculty authorize list of graduating students to the Federation of State Boards.
- 2) Application to the jurisdiction in which the successful PTA program graduate wishes to practice
- 3) Follow all instructions for the **new graduate from a US institution** for initial licensure
- 4) Submit all documents required by the jurisdiction to apply for the licensure exam
- 5) Once approved by the jurisdiction, get permission to access the licensure board examination (aka: "Authorization to Test")
- 6) In some jurisdictions, the applicant for licensure must also take and pass a jurisprudence exam which tests the applicant's knowledge about the practice of physical therapy in that jurisdiction.
  - a) In Maryland, the jurisprudence exam is on paper and open note, open book.
  - b) In District of Columbia, the jurisprudence exam is administered by the Federation of State Boards of Physical Therapy (FSBPT).
- 7) Apply to take the examination within the time specified by the Board - may be done simultaneously as applying to the state for initial license.
- 8) Pass the examination and successfully complete all requirements of the state Board for initial licensure.

Beginning in 2012, the FSBPT instituted fixed date testing. Four dates will be available – one date in January, April, July and October. Graduates wishing to apply to be licensed in Maryland or any other US jurisdiction can access the Board of Physical Therapy from links on the FSBPT web page at [www.fsbpt.org](http://www.fsbpt.org) to obtain applications, instruction for new graduates, and copies of the jurisdiction's practice act governing the practice of physical therapy.

When the jurisdiction verifies that the graduate is eligible to apply to take the national licensure board examination (NPTE) for PTAs, he/she then contacts the FSBPT. FSBPT creates and administers the standardized exam nationwide in conjunction with the Prometric testing centers. For more information on the test, to access practice exams, and to review the student guide to the NPTE, see the FSBPT website at [www.fsbpt.org](http://www.fsbpt.org). This site has current information on the exam as well as helpful links to all US physical therapy board jurisdictions.

Program faculty are available to assist students with application procedures in all jurisdictions, with study plans, or to obtain testing accommodations.

### **C. Job Search and Resume Preparation**

MC Counseling and Advising services provide student assistance with job search skills and resume preparation. We will work with them during PHTH 215 Seminar IV in the final semester.

The program faculty has connections and ties to the professional community. As such, they can assist graduates with job search, coaching on interviews, or resume preparation. The College also provides job search and resume preparation in the Student Services office on each campus.

### **D. Professional Organizations**

Program graduates are encouraged to maintain their APTA memberships following graduation. Graduates are directed to the APTA web site for “starter memberships” and member benefits at [www.apta.org](http://www.apta.org). Graduates are also encouraged to participate in state, local, and national professional meetings and conferences.

### **E. Participation in PTA Program Activities**

Following graduation, all MC alumni are encouraged to continue their relationship with the PTA Program. Alumni can participate in any of ongoing PTA program activities listed below.

PTA Program Advisory Board	Teaching or lab assistant positions
Mentoring with current students	Participation at new student orientation
Tutoring with current students	Guest Speaker at PTA club events
Guest Lecturer	Student Clinical Instructor for PTA students

## **XI. A Final Salute**

The PTA Program faculty salutes the achievements of its graduates and looks forward to long, positive, and ongoing professional relationship in the form of continuing professional education, advisory board participation, and current student mentoring or tutoring. Our hope is that your wisdom and experience can be a beneficial influence on future PTA students during future clinical education affiliations at local clinical facilities.

## **XII. MEMORANDUM OF AGREEMENT**

The memorandum of agreement is between the student, MC, and the PTA program. Two copies of this agreement appear in the following pages. The student is expected to thoroughly read the entire agreement. The student’s signature on both copies signifies the students understand and agreement to adhere to all of these statements. One signed copy is returned to the Program, and the remaining copy is for the student’s own records.

There are three distinct parts to the Memorandum of Agreement. Part 1 pertains to the classroom and laboratory portions of the Program. Part 2 pertains to the clinical education portion of the Program. The final part of the agreement spells out the confidentiality expectations of the program applicable to all aspects of the curriculum.

### **XIII. APPENDIX DOCUMENTS**

## Helpful web sites

### Montgomery College

Public web site: <http://www.montgomerycollege.edu>

Contains links to publicly available information including academic calendar, events, student life activities, financial aid, academic regulations and the code of conduct. The college catalog can be accessed from this site.

Student web site: select MyMC from the public web page

Access to the student web site is password controlled and will allow students to link to their own personal information, schedule, registration, application for graduation, and financial aid.

### American Physical Therapy Association <http://www.apta.org>

Public pages include many interesting facts about the profession. As a student member, you will have access to further information including Hooked on Evidence, the APTA's search engine for evidence based practice.

### Federation of State Boards of Physical Therapy <http://www.fsbpt.org>

Links to the various jurisdictions that control physical therapist practice in the US. Also includes information on the national board examination for the PTA.

Check the following web sites for chapter and section meetings

<a href="http://www.apta.org">www.apta.org</a>	Open Membership and Leadership page, select Chapters and Sections
<a href="http://www.aptamd.org">www.aptamd.org</a>	APTA of Maryland, select Meetings
<a href="http://www.dcpta.com">www.dcpta.com</a>	APTA of Washington DC, select Meetings

## American Hospital Association

# A Patient's Bill of Rights

***A Patient's Bill of Rights was first adopted by the American Hospital Association in 1973.***

*This revision was approved by the AHA Board of Trustees on October 21, 1992.*

## Introduction

Effective health care requires collaboration between patients and physicians and other health care professionals. Open and honest communication, respect for personal and professional values, and sensitivity to differences are integral to optimal patient care. As the setting for the provision of health services, hospitals must provide a foundation for understanding and respecting the rights and responsibilities of patients, their families, physicians, and other caregivers. Hospitals must ensure a health care ethic that respects the role of patients in decision making about treatment choices and other aspects of their care. Hospitals must be sensitive to cultural, racial, linguistic, religious, age, gender, and other differences as well as the needs of persons with disabilities.

The American Hospital Association presents A Patient's Bill of Rights with the expectation that it will contribute to more effective patient care and be supported by the hospital on behalf of the institution, its medical staff, employees, and patients. The American Hospital Association encourages health care institutions to tailor this bill of rights to their patient community by translating and/or simplifying the language of this bill of rights as may be necessary to ensure that patients and their families understand their rights and responsibilities.

## Bill of Rights

These rights can be exercised on the patient's behalf by a designated surrogate or proxy decision maker if the patient lacks decision-making capacity, is legally incompetent, or is a minor.

1. The patient has the right to considerate and respectful care.
2. The patient has the right to and is encouraged to obtain from physicians and other direct caregivers relevant, current, and understandable information concerning diagnosis, treatment, and prognosis.

Except in emergencies when the patient lacks decision-making capacity and the need for treatment is urgent, the patient is entitled to the opportunity to discuss and request information related to the specific procedures and/or treatments, the risks involved, the possible length of recuperation, and the medically reasonable alternatives and their accompanying risks and benefits.

Patients have the right to know the identity of physicians, nurses, and others involved in their care, as well as when those involved are students, residents, or other trainees. The

patient also has the right to know the immediate and long-term financial implications of treatment choices, insofar as they are known.

3. The patient has the right to make decisions about the plan of care prior to and during the course of treatment and to refuse a recommended treatment or plan of care to the extent permitted by law and hospital policy and to be informed of the medical consequences of this action. In case of such refusal, the patient is entitled to other appropriate care and services that the hospital provides or transfer to another hospital. The hospital should notify patients of any policy that might affect patient choice within the institution.

4. The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that the hospital will honor the intent of that directive to the extent permitted by law and hospital policy.

Health care institutions must advise patients of their rights under state law and hospital policy to make informed medical choices, ask if the patient has an advance directive, and include that information in patient records. The patient has the right to timely information about hospital policy that may limit its ability to implement fully a legally valid advance directive.

5. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted so as to protect each patient's privacy.

6. The patient has the right to expect that all communications and records pertaining to his/her care will be treated as confidential by the hospital, except in cases such as suspected abuse and public health hazards when reporting is permitted or required by law. The patient has the right to expect that the hospital will emphasize the confidentiality of this information when it releases it to any other parties entitled to review information in these records.

7. The patient has the right to review the records pertaining to his/her medical care and to have the information explained or interpreted as necessary, except when restricted by law.

8. The patient has the right to expect that, within its capacity and policies, a hospital will make reasonable response to the request of a patient for appropriate and medically indicated care and services. The hospital must provide evaluation, service, and/or referral as indicated by the urgency of the case. When medically appropriate and legally permissible, or when a patient has so requested, a patient may be transferred to another facility. The institution to which the patient is to be transferred must first have accepted the patient for transfer. The patient must also have the benefit of complete information and explanation concerning the need for, risks, benefits, and alternatives to such a transfer.

9. The patient has the right to ask and be informed of the existence of business relationships among the hospital, educational institutions, other health care providers, or payers that may influence the patient's treatment and care.

10. The patient has the right to consent to or decline to participate in proposed research studies or human experimentation affecting care and treatment or requiring direct patient involvement, and to have those studies fully explained prior to consent. A patient who

declines to participate in research or experimentation is entitled to the most effective care that the hospital can otherwise provide.

11. The patient has the right to expect reasonable continuity of care when appropriate and to be informed by physicians and other caregivers of available and realistic patient care options when hospital care is no longer appropriate.

12. The patient has the right to be informed of hospital policies and practices that relate to patient care, treatment, and responsibilities. The patient has the right to be informed of available resources for resolving disputes, grievances, and conflicts, such as ethics committees, patient representatives, or other mechanisms available in the institution. The patient has the right to be informed of the hospital's charges for services and available payment methods.

The collaborative nature of health care requires that patients, or their families/surrogates, participate in their care. The effectiveness of care and patient satisfaction with the course of treatment depend, in part, on the patient fulfilling certain responsibilities. Patients are responsible for providing information about past illnesses, hospitalizations, medications, and other matters related to health status. To participate effectively in decision making, patients must be encouraged to take responsibility for requesting additional information or clarification about their health status or treatment when they do not fully understand information and instructions. Patients are also responsible for ensuring that the health care institution has a copy of their written advance directive if they have one. Patients are responsible for informing their physicians and other caregivers if they anticipate problems in following prescribed treatment.

Patients should also be aware of the hospital's obligation to be reasonably efficient and equitable in providing care to other patients and the community. The hospital's rules and regulations are designed to help the hospital meet this obligation. Patients and their families are responsible for making reasonable accommodations to the needs of the hospital, other patients, medical staff, and hospital employees. Patients are responsible for providing necessary information for insurance claims and for working with the hospital to make payment arrangements, when necessary.

A person's health depends on much more than health care services. Patients are responsible for recognizing the impact of their life-style on their personal health.

## **Conclusion**

Hospitals have many functions to perform, including the enhancement of health status, health promotion, and the prevention and treatment of injury and disease; the immediate and ongoing care and rehabilitation of patients; the education of health professionals, patients, and the community; and research. All these activities must be conducted with an overriding concern for the values and dignity of patients.

*© 1992 by the American Hospital Association, One North Franklin Street, Chicago, IL 60606.  
Printed in the U.S.A. All rights reserved. Catalog no. 157759.*

Copyright 1998, American Hospital Association



## **Standards of Ethical Conduct for the Standards of Ethical Conduct for the Physical Therapist Assistant**

**HOD S06-09-20-18 [Amended HOD S06-00-13-24; HOD 06-91-06-07; Initial HOD 06-82-04-08] [Standard]**

### **Preamble**

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

### **Standards**

#### **Standard #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.**

1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapy services.

#### **Standard #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.**

2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.

2B. Physical therapist assistants shall provide physical therapy interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.

2C. Physical therapist assistants shall provide patients/clients with information regarding the interventions they provide.

2D. Physical therapist assistants shall protect confidential patient/ client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

#### **Standard #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.**

3A. Physical therapist assistants shall make objective decisions in the patient's/client's best interest in all practice settings.

3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapy interventions.

3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.

3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.

3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.

**Standard #4: Physical therapist assistants shall demonstrate integrity in their relationships with patients/ clients, families, colleagues, students, other health care providers, employers, payers, and the public.**

4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.

4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients/clients, students, supervisees, research participants, or employees).

4C. Physical therapist assistants shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the supervising physical therapist and the appropriate authority, subject to law.

4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.

4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.

**Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.**

5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.

5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient/client safety.

5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.

5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.

5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

**Standard #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.**

6A. Physical therapist assistants shall achieve and maintain clinical competence.

6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.

6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

**Standard #7: Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.**

7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.

7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.

7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.

7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.

7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients/clients

**Standard #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.**

8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.

8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapy services.

8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.

## VALUES-BASED BEHAVIORS FOR THE PHYSICAL THERAPIST ASSISTANT SELF-ASSESSMENT TOOL

The Values-Based Behaviors is a concise document that describes those values that most significantly influence PTAs providing patient/client care as a member of the physical therapy team. The Values-Based Behaviors were developed in 2010 by the Advisory Panel of PTAs, reviewed and adapted by numerous stakeholder groups, and approved by APTA's Board of Directors in January 2011. A complete history on the development and approval of this document is included in the introduction section of the Values-Based Behaviors document.

This self-assessment tool accompanies the Values-Based Behaviors and is intended to increase the physical therapist assistant's (PTA's) *awareness* of the Values-Based Behaviors for the PTA and to *self-assess* the frequency with which he or she demonstrates the eight values listed and defined in the first column. The second column provides sample indicators or examples of actions that a PTA who has adopted the Values-Based Behaviors would choose to take in a variety of situations. And the third column is for scoring the frequency with which one chooses to demonstrate the described behavior or action.

### Complete the Self-Assessment

Review each sample indicator and rate the frequency with which you display that behavior on a daily basis. It is not expected that one will rate himself or herself as 5 (always) or 1 (never) on every item. Be candid in your response as this is a self-assessment process with an opportunity for identification of areas of strength and opportunities for growth.

### Analyze the Completed Self-Assessment

Once you have completed the Self-Assessment, you may want to reflect as an individual or group on the following questions:

- On what sample indicators did you or the group consistently score yourself/themselves on the scale at the 4 (frequent) or 5 (always) levels?
- Why did you or the group rate yourself/themselves higher in frequency for demonstrating these sample behaviors?
- On what sample indicators did you or the group score yourself/themselves on the scale at level 3 or below?
- Why did you or the group rate yourself/themselves lower in frequency for demonstrating these sample behaviors?
- Identify, develop, and implement approaches to strengthening the integration of the values-based behaviors within your clinical environment. Seek out mentoring in this area from your supervising physical therapist or other experienced clinicians.
- Establish personal goals for increasing the frequency with which you demonstrate specific sample behaviors with specific values-based behaviors.
- Conduct periodic re-assessment of your values-based behaviors to determine the degree to which your performance has changed in your growth personally and as a PTA.

Questions about the self assessment tool or the Values-Based Behaviors should be directed to APTA's PTA Services Department at [pta@apta.org](mailto:pta@apta.org).



## VALUES-BASED BEHAVIORS FOR THE PHYSICAL THERAPIST ASSISTANT (PTA)

For each values-based behavior listed, a definition is provided and a set of sample indicators that describe what one would see if the PTA were demonstrating that behavior in his/her daily work. For each of the sample indicators listed, check the box that best represents the frequency with which you demonstrate the behavior where:

**1 = Never; 2 = Rarely; 3 = Occasionally; 4 = Frequently; and 5 = Always.**

Values-Based Behavior with Definition	Sample Indicators	Self-Assessment Rating
<p><b>Altruism</b></p> <p>is the primary regard for or devotion to the interest of patients/clients, thus assuming the fiduciary responsibility of placing the needs of the patient/client ahead of the PTA's self-interest.</p>	1. Providing patient/client-centered interventions.	1 2 3 4 5
	2. Readily offering to assist the physical therapist in providing patient/client interventions.	1 2 3 4 5
	3. Generously providing the necessary time and effort to meet patient/client needs.	1 2 3 4 5
	4. Placing the patient/client's needs ahead of one's own, as evidenced by willingness to alter one's schedule, delay other projects or tasks, etc.	1 2 3 4 5
	5. Contributing, as able, to the provision of physical therapy services to underserved and underrepresented populations.	1 2 3 4 5
<p><b>Caring and Compassion</b></p> <p>Compassion is the desire to identify with or sense something of another's experience; a precursor of caring.</p> <p>Caring is the concern, empathy, and consideration for the needs and values of others.</p>	1. Actively listening to the patient/client and considering the patient/client's needs and preferences.	1 2 3 4 5
	2. Exhibiting compassion, caring, and empathy in providing services to patients/clients.	1 2 3 4 5
	3. Demonstrating respect for others and considering others as unique and of value.	1 2 3 4 5
	4. Considering social, emotional, cultural, psychological, environmental, and economic influences of the patient/client (eg, learning styles, language abilities, cognitive abilities and adapting approach accordingly).	1 2 3 4 5
	5. Recognizing and refraining from acting on one's social, cultural, gender, and sexual biases; i.e. demonstrate a nonjudgmental attitude.	1 2 3 4 5
<p><b>Continuing Competence</b></p> <p>is the lifelong process of maintaining and documenting competence through ongoing self-assessment, development, and implementation of a personal learning plan, and subsequent reassessment.</p>	1. Identifying strengths and limitations in knowledge, skills, and behaviors through self-assessment and feedback from physical therapists and others, and developing and implementing strategies to address the limitations.	1 2 3 4 5
	2. Maintaining continuing competence using a variety of lifelong learning strategies (eg, continuing education, reflective journals, journal clubs, and working with a mentor).	1 2 3 4 5
	3. Seeking further education in the use and delivery of interventions based on new evidence as it becomes available.	1 2 3 4 5
	4. Developing and implementing a career advancement plan based on interests, opportunities, and career aspirations.	1 2 3 4 5

<b>Duty</b>  is the commitment to meeting one's obligations to provide effective physical therapy services to individual patients/clients, to serve the profession, and to positively influence the health of society.	1. Demonstrating behaviors, conduct, actions, attitudes, and values consistent with the roles, responsibilities, and tasks of the PTA.	1	2	3	4	5
	2. Facilitating each patient/client's achievement of goals for function, health, and wellness, as directed in the plan of care.	1	2	3	4	5
	3. Preserving the safety, security, and confidentiality of individuals in all patient/client contexts.	1	2	3	4	5
	4. Participating in quality assurance/quality improvement activities in physical therapy care.	1	2	3	4	5
	5. Promoting the profession of physical therapy.	1	2	3	4	5
	6. Providing student instruction and mentoring other PTAs.	1	2	3	4	5
<b>Integrity</b>  is the steadfast adherence to high ethical principles or standards; truthfulness, fairness, doing what you say you will do, and "speaking forth" about why you do what you do.	1. Adhering to applicable laws regarding scope of work, payment policies and guidelines, institutional policies and procedures, and APTA policies, positions, and guidelines to ensure optimal patient/client care and fiscal management.	1	2	3	4	5
	2. Adhering to the highest standards of the profession for the PTA, including the Standards of Ethical Conduct for the Physical Therapist Assistant, Guide for Conduct of the Physical Therapist Assistant, state practice acts, and payment requirements.	1	2	3	4	5
	3. Demonstrating the ideals of the values-based behaviors of the PTA.	1	2	3	4	5
	4. Demonstrating honesty and trustworthiness in all interactions and relationships.	1	2	3	4	5
	5. Choosing employment situations that are congruent with ethical principles and work standards.	1	2	3	4	5
	6. Identifying ethical and legal concerns and initiating actions to address the concern, when appropriate.	1	2	3	4	5
<b>PT/PTA Collaboration</b>  The PT/PTA team works together, within each partner's respective role, to achieve optimal patient/client care and to enhance the overall delivery of physical therapy services.	1. Educating the PT as needed about the roles, responsibilities, and appropriate utilization of the PTA in the PT/PTA team using available resources (eg, state licensure/practice rules and regulations, PTA clinical problem-solving algorithm, PTA direction and supervision algorithms, Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level).	1	2	3	4	5
	2. Promoting a positive working relationship within the PT/PTA team.	1	2	3	4	5
	3. Demonstrating respect for the roles and contributions of both the PT and PTA in achieving optimal patient/client care, including the PT's responsibility for the PTA's performance in patient/client interventions.	1	2	3	4	5
	4. Seeking out opportunities to collaborate with the PT to improve outcomes in patient/client care.	1	2	3	4	5
	5. Working with the PT in educating consumers and other health care providers about physical therapy.	1	2	3	4	5

<b>Responsibility</b> is the active acceptance of roles, obligations, and actions of the PTA, including behaviors that positively influence patient / client outcomes, the profession, and health needs of society.	1. Identifying strengths and limitations in knowledge and skill, and working within limitations of personal ability.	1	2	3	4	5
	2. Completing patient/client care and other tasks in a timely and efficient manner.	1	2	3	4	5
	3. Identifying, acknowledging, and accepting responsibility for actions and, when errors occur, following error reporting processes.	1	2	3	4	5
	4. Communicating in a timely manner with others (eg, PTs, patients/clients, and others).	1	2	3	4	5
<b>Social Responsibility</b>  Social responsibility is the promotion of a mutual trust between the PTA, as a member of the profession, and the larger public that necessitates responding to societal needs for health and wellness.	1. Advocating for patient/client needs in the clinical setting.	1	2	3	4	5
	2. Demonstrating behaviors that positively represent the profession to the public.	1	2	3	4	5
	3. Promoting a healthy lifestyle, wellness, and injury prevention strategies in the community.	1	2	3	4	5
	4. Serving the profession and the community, including activities occurring in conjunction with work or outside of work (eg, community health fairs, National Physical Therapy Month events, APTA service).	1	2	3	4	5
	5. Advocating for changes in laws, regulations, standards, and guidelines that positively affect physical therapy and patient/client services.	1	2	3	4	5

**Date Completed:**

**Comments:**

### References/Related Reading

1. Albanese, M. Students are *not* customers: A better model for education. *Acad Med.* 1999; 74(11):1172-1186.
2. American Physical Therapy Association. *A Normative Model of Physical Therapist Assistant Education: Version 2007.* American Physical Therapy Association, Alexandria, VA; 2007.
3. American Physical Therapy Association. Professionalism in Physical Therapy: Core Values. American Physical Therapy Association, Alexandria, VA; August 2003 ([www.apta.org/documents/public/education/professionalism.pdf](http://www.apta.org/documents/public/education/professionalism.pdf)).
4. American Physical Therapy Association. Values-Based Behaviors of the Physical Therapist Assistant. American Physical Therapy Association, Alexandria, VA: January 2011.
5. Arnold, L. Assessing professional behavior: Yesterday, today and tomorrow. *Acad Med.* 2002; 77(6):502-512.
6. Cary, JR, Ness, KK. Erosion of professional behaviors in physical therapist students. *Journal of Physical Therapy Education.* 2001; 15(3):20-24.
7. Cohen, CB, Wheeler, SE, Scott, DA and the Anglican Working Group in Bioethics. Walking a fine line: Physician inquiries into patient's religious and spiritual beliefs. *Hastings Center Report* 31. 2001; 5:29-39.
8. Coles, R. The moral education of medical students. *Acad Med.* 1998; 73(1):55-57.
9. Covey, SR. *The Seven Habits of Highly Effective People: Powerful Lessons in Personal Change.* Simon & Schuster Adult Publishing Group, New York, NY: August 1990.
10. Covey, SR, Merrill RA, Merrill RR. *First Things First: To Live, To Love, To Learn, To Leave a Legacy.* Simon & Schuster Trade Paperbacks, New York, NY: May 1995.
11. Covey, SR, Reynolds. *Principled-Centered Leadership: Strategies for Personal and Professional Effectiveness.* Simon & Schuster Adult Publishing Group, New York, NY: September 1992.
12. DeRosa, C. Innovation in physical therapy practice. *PT Magazine.* February 2000:40-46.
13. Epstein, RM. Mindful practice. *JAMA.* 1999; 282(9):833-839.
14. Fox, RC. Time to heal medical education? *Acad Med.* 1999; 74(10):1072-1075.
15. Ginsburg, S, Regehr, G, Stern, D, Lingard, L. The anatomy of the professional lapse: Bridging the gap between traditional frameworks and students' perceptions. *Acad Med.* 2002; 77(6):

16. Greenlick, MR. Educating physicians for the twenty-first century. *Acad Med.* 1995; 70(3):179-185.
17. Hayward, LM, Noonan, AC, Shain, D. Qualitative case study of physical therapist students' attitudes, motivations, and affective behaviors. *J Allied Health.* 1999; 28: 155-164.
18. Hensel, WA, Dickey, NW. Teaching professionalism: Passing the torch. *Acad Med.* 1998; 73(8):865-870.
19. Kirschenbaum H. Values clarification to character education: A personal journey. *Journal of Humanistic Counseling, Education, and Development.* 2000; 39(1):4.
20. Kopelman, LM. Values and virtues: How should they be taught? *Acad Med.* 1999; 74(12):1307-1310.
21. Ludmerer, KM. Instilling professionalism in medical education. *JAMA.* 1999; 282(9):881-882.
22. MacDonald, CA, Cox, PD, Bartlett, DJ, Houghton, PE. Consensus on methods to foster physical therapy professional behaviors. *Journal of Physical Therapy Education.* 2002; 16(1):27-35.
23. Markakis, KM, Beckman, HB, Suchman, AL, Frankel, RM. The path to professionalism: Cultivating humanistic values and attitudes in residency training. *Acad Med.* 2000; 75(2): 141-150.
24. Mathews, Jane. *Practice Issues in Physical Therapy: Current Patterns and Future Directions.* Thorofare, NJ: Slack, 1989.
25. May WW, Morgan BJ, Lemke JC, Karst GM, et al. Development of a model for ability-based assessment in physical therapy education: One program's experience. *Journal of Physical Therapy Education,* 1995, 9 (1):3-6.
26. Pellegrino, ED. Toward a virtue-based normative ethics for the health professions. *Kennedy Institute of Ethics Journal.* 1995;5(3): 253-277.
27. Perry, J. Professionalism in physical therapy. *Phys Ther.* 1964; 44(6):429-434.
28. Robins, LS, Braddock III, CH, Fryer-Edwards, KA. Using the American board of internal medicine's "elements of professionalism" for undergraduate ethics education. *Acad Med.* 2002; 77(6):
29. Sullivan, WM. What is left of professionalism after managed care? *Hastings Center Report* 29. 1999; 2:7-13.
30. Swick, HM., Szenas, P, Danoff, D, Whitcomb, ME. Teaching professionalism in undergraduate medical education. *JAMA.* 1999; 282(9):830-832.
31. Triezenberg, HL. Teaching ethics in physical therapy education: A Delphi study. *Journal of Physical Therapy Education.* 1997; 11(2):16-22.
32. Triezenberg, HL, McGrath, JH. The use of narrative in an applied ethics course for physical therapist students. *Journal of Physical Therapy Education.* 2001; 15(3): 49-56.
33. Weidman, JC, Twale, DJ, Elizabeth LS. *Socialization of Graduate and Professional Students in Higher Education: A Perilous Passage?* ASHE-ERIC Higher Education Report Volume 28, Number 3. San Francisco, CA: Jossey-Bass; 2001.

**[Contact: [pta@apta.org](mailto:pta@apta.org) | Updated: 5/17/12]**



Montgomery College Health Sciences Program  
Pregnancy Disclosure Procedure

***I. Procedure Statement:***

A student who is, or becomes, pregnant is strongly encouraged to notify her course instructors or the Title IX Coordinator as soon as possible. By doing so, the student and instructors and the Title IX Coordinator can collaborate and develop an appropriate plan for the continuation of the student's education in light of the unique nature of the College's nursing and health sciences programs and their clinical requirements, as well as particular challenges the student may face while pregnant or when recovering from childbirth (e.g., missed classes, make-up work, etc.). However, the choice to declare a pregnancy is voluntary, and a student is not required to disclose this information to the College.

***II. GENERAL INFORMATION:***

**Options After Disclosure**

Once a student has voluntarily decided to disclose a pregnancy to the College, the student will have several options, as described below. The instructor will set up an interactive meeting with the student and the Title IX Coordinator.

**1. Continue in the program**

- If a student decides to continue in the program and desires to have any adjustments to her academic program due to the pregnancy, the student should contact the instructor. Then the instructor and the Title IX Coordinator will meet with the student to discuss any reasonable adjustments that may be necessary to continue in the program. Such adjustments, if any, will be documented on the form in Addendum A which will be signed by both the student and the instructor.

**2. Request a leave of absence**

- A leave of absence due to pregnancy may be for various amounts of time depending on a student's particular circumstances. Such a leave may be extended if deemed medically necessary by the student's physician.
- Due to the structure of the College's nursing and health sciences programs, the timing and/or length of a student's leave of absence may result in the student being required to re-take or finish course(s) in a future term.
- If a student chooses to temporarily leave the program, every effort will be made to assure a successful return to the program. As always, return into the program after a break is dependent on clinical space availability and student may be asked to remediate clinically or didactically as part of her return.
- If taking a leave of absence due to a pregnancy, the Education Plan in Addendum B will be discussed with student and instructor and the Title IX Coordinator.

**3. Withdraw from the College**

- The student may, in her sole discretion, determine that she must withdraw from the College for an indefinite period of time or permanently due to her pregnancy. Normal College withdrawal procedures, and readmission procedures (if applicable), apply.

**Questions or Concerns**

A student who has questions about this procedure or who is concerned about its implementation should contact Christopher Moy, Director of ADA and Title IX Compliance; [Christopher.moy@montgomerycollege.edu](mailto:Christopher.moy@montgomerycollege.edu), 240-567-5412, 900 Hungerford Dr., Rockville, MD 20850, Mannakee Building, Rm # 150.

## Addendum A

### Continuation in Program after Disclosing Pregnancy

I. Acknowledgements

By signing this form,

(“Student”) acknowledges the following:

- She has voluntarily disclosed her pregnancy to Montgomery College (the “College”) and intends to continue pursuing her degree in the College’s program.
- She understands there are other options available, including taking a leave of absence.
- She understands there are potential risks to her and/or her fetus by continuing in the program. The College has advised Student to consult with her doctor to discuss these potential risks.
- She assumes all responsibility related to these risks and any resulting losses or costs, including medical treatment and costs thereof.

II. Adjustments to Program

[In this section, describe any adjustments that have been discussed and will be implemented based on the student’s pregnancy. Note if there have been no adjustments implemented at the time of signature.]

A.

B.

C. The student may request additional modifications at any time by contacting the instructor and another interactive meeting will occur.

**The College and Student do hereby agree to the above.**

\_\_\_\_\_  
[INSERT NAME], Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
[INSERT NAME], [INSERT POSITION TITLE],

\_\_\_\_\_  
Date

## Addendum B

### Education Plan for Pregnancy Leave

Montgomery College (the “College”) and \_\_\_\_\_ (“Student”) have agreed to the following conditions related to the Student’s leave of absence related to her pregnancy. Student’s leave of absence is scheduled to begin on \_\_\_\_\_

she is anticipating a return to school\_\_\_\_\_. Student and the College acknowledge that Student may take a longer leave if it is deemed medically necessary by her doctor, and the parties agree to meet and discuss this Education Plan if that occurs.

I. Academics

[In this section, discuss where Student currently stands academically, what adjustments to her courses/degree track will be necessary because of the leave of absence, what classes she will be enrolled in upon return, etc.]

A.

B.

C.

II. Financial Aid/Scholarships

[In this section, discuss current financial aid/scholarship/funding situation and any implications from taking leave.] A.

B.

C.

III. Additional Matters

[In this section, discuss any additional matters that are relevant to a particular situation. Among other things, consider including if a student must meet any specific requirements to be readmitted (e.g., Upon expiration of Student’s leave of absence her readmission is guaranteed, provided she ... [insert specific reasonable requirements, as appropriate]).

- A. Student agrees to contact \_\_\_\_\_ [days/weeks/months] in advance of return in order to ensure a smooth transition back to her school.

B. Student will not be required to pay any application or readmission fees related to her readmission to the institution.

C.

**The College and Student do hereby agree to the above.**

\_\_\_\_\_  
[INSERT NAME], Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
[INSERT NAME], [INSERT POSITION TITLE],  
Montgomery College

\_\_\_\_\_  
Date