Preface

Students in the Doctor of Physical Therapy Program (DPT) are officially considered to be students at Rocky Mountain University of Health Professions (RMUoHP). Therefore, DPT students are expected to comply with the regulations and academic standards specified in the most current edition of the RMUoHP University Handbook. This handbook provides information regarding policies, procedures, and requirements specific to the RMUoHP DPT program. Students enrolled in the Program are expected to be familiar with the information in this handbook, the Clinical Education Handbook, and acknowledge such by signing the forms found in the appendix after having reviewed the material:

- Student Acknowledgment of DPT Program Policies and Procedures
- Student Informed Consent
- Health Insurance Statement
- Consent for Release of Information

RMUoHP reserves the right to change any provision or requirement, including fees, contained in this informational document at any time with or without notice.

Please read this handbook carefully. Questions related to the content of this manual should be directed to the Program Director:

**General University/ Program Contact Information:**  
Phone Number: 801.375.5125/ 866.780.4107 (toll free)  
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Welcome

Welcome to the Doctor of Physical Therapy (DPT) program and Rocky Mountain University of Health Professions (RMUoHP)! We are glad that you have chosen to pursue your education with RMUoHP. Your selection into the program reflects our acknowledgement of your past achievements and confidence in your future potential. The academic and clinical demands of this program require high standards of performance from you. We also have a strong commitment to you, the student, to help you in your education and development as a professional in the field of Physical Therapy.

One of our first responsibilities is to orient you to the Program and your role in the process. This Student Handbook is intended to assist with that process. Please read and become familiar with this handbook and keep it available as a reference. Please provide us with any feedback regarding the handbook or the program. Please let us know if you are having trouble in any course and need special tutoring or other help. We also encourage you to help one another, studying cooperatively, rather than competitively, while taking responsibility for your own work, knowledge and skill development. Our goal is for ALL of you to succeed.

The profession of physical therapy will challenge you to become the best you can, and we anticipate that your education will challenge you to develop, both academically, clinically, professionally, and personally. We invite you to set your goals high to excel and become a valued part of the physical therapy program and the physical therapy profession.

Description of the Profession of Physical Therapy

“Physical therapists provide services to patients/clients who have impairments, functional limitations, disabilities, or changes in physical function and health status resulting from injury, disease, or other causes; interact and practice in collaboration with a variety of professionals; address risk; provide prevention and promote health, wellness and fitness; consult, educate, engage in critical inquiry and administrate; and direct and supervise the physical therapy service, including support personnel.” 1

“Physical therapists assume leadership roles in rehabilitation: in prevention health maintenance, and programs that promote health wellness and fitness; and in professional and community organizations….The practice of physical therapy necessitates that the individual physical therapist engages in specific and complex cognitive, psychomotor and affective behaviors when providing services to patients/clients, families, or caregivers. Using their body of knowledge, physical therapists integrate five elements of care in a manner designed to maximize the patient’s outcome: examination, evaluation, diagnosis, prognosis and intervention.” 2

Physical Therapists’ practice in a broad range of inpatient, outpatient and community based settings 2 and treat age groups ranging from newborns to geriatric patients.

Institution Mission

The mission of Rocky Mountain University of Health Professions is to educate current and future healthcare professionals for outcomes-oriented, evidence-based practice. The University demonstrates its mission fulfillment through the quality of its education and success of its students in academic programs that develop leaders skilled in clinical inquiry and prepared to effect healthcare change.

Program Mission

The mission of the Doctor of Physical Therapy program is to provide a student-centered education that prepares graduates for socially responsible, outcomes-oriented, evidence-based, autonomous and collaborative practice.

Program Philosophy

Rocky Mountain University of Health Professions (RMUoHP) has established itself as an innovative center of higher learning that is dedicated to providing a student-centered, outcomes-oriented education that threads the concepts of evidence-based practice throughout all of its programs. The DPT program strives to attract a dynamic and diverse faculty who possess a common desire to shape the physical therapists of tomorrow by modeling both clinical and teaching excellence. By design, the DPT program is expanding upon the progressive model of the University by incorporating advances in technology and educational theory in the development and implementation of the program.

RMUoHP recognizes that even with the best technology and curriculum, the heart and soul of the program is the student. Our program will cater to highly motivated students who wish to be active participants in their education.

In keeping with both the University and Program Missions, RMUoHP graduates will be prepared to enter the physical therapy work force as skilled and ethical members of the health care community.

The DPT curriculum foundationally rests in the current literature on adult learning, including:

- Learning is enhanced in a learner-centered model of education, where students are actively involved in the teaching/learning process. This model of education recognizes multiple methods for effectively engaging students in their learning. Curricular methods include internet learning, lecture, skills laboratories, group discussions and inquiry, case-studies, student presentations, independent study, writing components, and clinical experience.

- As the program progresses, teacher-student collaboration in the educational process increasingly encourages the student to take responsibility for their own learning, discovery, and application of new knowledge and skills.

- Practical application and clinical education occur at appropriate intervals throughout the curriculum. This sequencing of learning recognizes the importance of active and clinically relevant learning for the adult.

- Student learning is enhanced when the faculty model and encourage critical reflection. In discussions of clinical cases, the faculty actively consider interpretations, develop hypotheses, and present intervention strategies that are integrated into existing or new
cognitive frameworks or schemes. A balance of open-mindedness and questioning is
demonstrated using varied teaching strategies and patient management approaches.

- Course content builds on the student’s existing knowledge base, progressing from simple
to complex conceptualization and advancing from concrete to abstract analysis.

- Program activities and curricular content are not focused solely on technical skills and
knowledge, but also facilitate the development of the student as a professional. Student
development of core values and skills is enhanced through appropriate faculty interaction
and modeling of professional behaviors and attitudes.

- Assessment of student learning and preparation for clinical practice is an intentional and
integrated component of student learning. Student assessment should evaluate
understanding, application, and synthesis, rather than rote memorization. A variety of
evaluation methods help provide a more comprehensive understanding of student
knowledge and skill, including ability-based assessment utilized to facilitate the use of
knowledge and psychomotor skills.

Goals and Expected Outcomes

Our educational goals flow out of the DPT program’s Mission Statement and the University’s
Core Values.

Program level goals include the following:

1. Create a learning environment which will inform and enhance student understanding and
application of professional and socially responsible attitudes and behaviors, both in school
and in clinical practice.

2. Facilitate student ability to practice autonomous, collaborative physical therapy and
provide service to health care consumers in a competent, caring, ethical, and legal
manner.

3. Develop and integrate critical thinking and clinical reasoning skills into evidence-based
Practice (EBP) learning activities.

4. Provide student-centered learning experiences in a variety of current and cutting-edge
methodologies containing content consistent with CAPTE accreditation expectations,
current learning theory, APTA policies and documents, and both contemporary and best
practice standards.

5. Utilize current technologies to enhance student learning, including opportunities for
electronic media instruction and communication.

6. The program will be recognized as a leader in the state of Utah and the professional
community in the provision of service and professional growth opportunities.

Program level outcomes related to these goals include:

1. Professional and socially responsible behaviors and attitudes are taught and assessed in
the DPT program (Goal 1 and 2)

2. The curriculum consistently incorporates Evidence-based Practice principles and/or
critical thinking skills (Goal 3)

3. The DPT curriculum incorporates innovative models, methodologies and delivery
methods. (Goal 4)
Courses incorporate current technologies in the delivery and assessment of teaching and learning. (Goal 5)

Provide service and opportunities for growth to the local and professional communities. (Goal 6)

The faculty goals of RMUoHP are derived from the University’s belief that all faculty members must facilitate active learning on the part of their students through modeling exemplary educational, clinical and leadership skills.

Therefore, the RMUoHP DPT faculty will:

1. Participate in scholarly activities that result in publication, presentations or other products or activities that promote or enhance the field of physical therapy;
2. Demonstrate service and leadership in the physical therapy profession;
3. Include a mix of professionals that strive for excellence in academic teaching and clinical expertise;
4. Model professional behaviors and attitudes such as lifelong learning and professional duty to students, colleagues, and the community.

Outcomes related to faculty goals include the following:

1. Faculty perform scholarly activities that enhance the field of physical therapy, including activities such as publishing in peer reviewed journals, contributing to text books, reviewing of professional journals, and developing new instructional techniques and technology. (Goal 1)
2. Faculty provide service and leadership in the profession by being active in professional and/or community organizations and by promoting physical therapy in the local community, instructing continuing education courses, acting as onsite reviewers for CAPTE, consulting with other PT and PTA programs or other such activities. (Goal 2)
3. Faculty credentials meet or exceed minimum levels for academic and clinical excellence established by the University and consistent with accreditation standards. (Goal 3)
4. Faculty incorporate current, appropriate methodologies into teaching that reflect a student-centered philosophy, while encouraging student responsibility for learning. (Goal 3)
5. Faculty improve their academic and/or clinical skills through professional development activities such as continuing education, specialty certification and clinical practice. (Goal 3)
6. Faculty model professional attitudes and behaviors. (Goal 4)

The Program goals for students and Expected Student Outcomes flow from our Mission Statement, philosophical base, and programmatic goals. They are a reflection of the practice management expectations found in the normative model of physical therapist professional education, version 2004, and the APTA Standards of Practice for Physical Therapy.
Goals:
Students graduating from the RMUoHP DPT program will:

1. Demonstrate a minimum of entry level skill in autonomous practice that includes: screening, examination, evaluation, diagnosis, prognosis, plan of care, intervention, referral, and outcomes assessment activities.

2. Provide effectively managed physical therapy services to health care consumers in a socially responsible manner that demonstrates altruistic principles balanced with fiscal/fiduciary awareness.

3. Adhere to ethical standards of practice and legal/regulatory policies.

4. Demonstrate a commitment to excellence, lifelong learning, critical inquiry, and clinical reasoning by skillfully incorporating current evidence into physical therapy practice.

5. Demonstrate abilities to continue professional development and leadership.

Expected student outcomes related to the above goals include the following:

Students graduating from the RMUoHP DPT program will:

1. Demonstrate a minimum of entry level skill on the CPI for all Professional Practice and Practice Management performance criteria by the end of their terminal clinical internship. (Goals 1-5)

2. Pass National Physical Therapy Examination (NPTE) (Goals 1-4)

3. Be employed in the field of physical therapy within 6 months of passing the licensure exam. (Goals 1-5)

4. Demonstrate leadership in the field of physical therapy by participating in appropriate community and professional organizations and activities. (Goal -5)

Accreditation

Rocky Mountain University of Health Professions is accredited by the Northwest Commission on Colleges and Universities (8060 165th Avenue NE Ste 100, Redmond, WA 98052-3981), an institutional accrediting body recognized by the Secretary of the US Department of Education.

The entry-level Doctor of Physical Therapy Program at Rocky Mountain University of Health Professions is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE; 1111 North Fairfax Street, Alexandria, VA, 22314; phone: 703-706-3245; email: accreditation@apta.org; website: www.capteonline.org).

DPT Full-Time Faculty

Kaiwi Chung-Hoon, PT, PhD
Miriam Cortez-Cooper, PT, PhD
Kevin Helgeson, PT, DHSc
Misti Timpson, PT, DPT, NCS
Jeffery D. Lau, PT, DPT, PhD, OCS, CMPT
Ann Hoffman, PT, DScPT, PCS
Paul Stoneman, PT, PhD, OCS, SCS
Michael Bartholomew, PT, DPT, CSCS
Steve Wilkinson, PT, PhD
Joel Tenbrink, PT, PhD, ATC

Mark Walker, PT, PhD
Hina Garg, PT, PhD
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Tamara Gravano, PT, EdD, GCS
Tim Stephenson, PT, DPT
Full-time faculty continued
David Paulson, PT, DPT, OCS
Coral Gubler, PT, PhD, ATC

Affiliated Faculty
Leslie Gilmer, PhD
Jessica Immonen, PhD
Kent Crosely, PhD
Gordon Laurie, PT, DPT
David Hunt, PT, DPT, OCS
Adam Stradling, PT, DPT
Diana Zirker, PT, DPT
Justin Carrier, PT, DPT, OCS

Full-time faculty continued
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Adam Stradling, PT, DPT
Diana Zirker, PT, DPT
Justin Carrier, PT, DPT, OCS

Core Performance Standards
Success in the DPT program at RMUoHP is most likely to be achieved when students come prepared to participate fully in the educational process. This preparation includes and assumes that students enter the program with a minimum level of ability in specific areas, termed “technical standards”, and will continue to develop those and additional skills and attitudes, called the Professional Behaviors. The combination of technical standards and professional behaviors is referred to as the Core Performance Standards. The Professional Behaviors in particular will be assessed periodically throughout the program. Inability to meet any of the Core Performance Standards may result in the need for remediation, probation, suspension or dismissal from the program. The Core Performance Standards are listed below.

Technical Standards for Admission, Promotion and Graduation
Physical therapy is an intellectually, physically, and psychologically demanding profession. Students acquire the foundation of knowledge, attitudes, skills and behaviors needed throughout a physical therapist’s career. Those abilities that physical therapists must possess to practice safely are reflected in the Technical Standards that follow.

For successful completion of degree requirements, students must be able to meet these minimum technical standards with or without reasonable accommodation.

Observation skills
Observation requires the functional use of vision, hearing, somatic sensations, and the use of common sense. Candidates must have visual perception which includes depth and acuity. A student must be able to observe lectures, laboratory-dissected cadavers, and lecture and laboratory demonstrations. The student must be able to observe a patient accurately, observe digital and waveform readings and other graphic images to determine a patient’s condition. Candidates must be able to observe patients and be able to obtain an appropriate medical history directly from the patient or guardian. Examples in which these observational skills are required include: palpation of peripheral pulses, bony prominences and ligamentous structures; visual and tactile evaluation for areas of inflammation and visual and tactile assessment of the presence and degree of edema. A student must be able to observe a patient accurately at a distance and close at hand, noting nonverbal as well as verbal signals.
**Communication skills**

Communication includes speech, language, reading, writing and computer literacy. Students must be able to communicate effectively, sensitively, and convey a sense of compassion and empathy with patients to elicit information regarding mood and activities, as well as perceive non-verbal communications. Physical Therapy education presents exceptional challenges in the volume and breadth of required reading and the necessity to impart information to others. Students must be able to communicate quickly, effectively and efficiently in oral and written English with all members of the health care team. Students must be able to complete forms according to directions in a complete and timely fashion. Students must be able to use computer technology competently and in accordance with University standards (see University handbook).

**Motor/Psychomotor skills**

Students must possess sufficient motor function to elicit information from the patient examination, by palpation, auscultation, tapping and other evaluation maneuvers. Students must be able to execute movements required to provide general and therapeutic care, such as positioning large or immobile patients, gait training using therapeutic aids and orthotics, positioning, and performing manual mobilization techniques, performing non-surgical wound debridement, and placing electromyographic electrodes. Candidates must have the physical strength to perform cardiopulmonary resuscitation and emergency treatment to patients. These skills require coordination of both gross and fine muscular movement, equilibrium, and the integrated use of touch and vision.

**Intellectual – Conceptual Integrative and Quantitative Analysis Abilities**

To effectively solve problems, students must be able to measure, calculate, reason, analyze, integrate and synthesize information in a timely fashion. For example, the student must be able to synthesize knowledge and integrate the relevant aspects of a patient’s history, physical examination, and laboratory data, provide a reasoned explanation for likely therapy, recalling and retaining information in an efficient and timely manner. The ability to incorporate new information from peers, teachers, and the medical literature in formulating treatment and plans is essential. In addition, students must be able to comprehend three dimensional relationships and to understand spatial relationships of structures. Candidates must have the ability to use computers for searching, recording, storing, and retrieving information.

**Behavioral/Social Attributes and Professionalism**

A student must possess the psychological ability required for the full utilization of their intellectual abilities, for the exercise of good judgment, for the prompt completion of all responsibilities inherent to diagnosis and care of patients, and for the development of mature, sensitive, and effective relationships with patients. Students must be able to tolerate physically and mentally taxing workloads and function effectively under stress. They must be able to adapt to a changing environment, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of patients. As a component of their education, students must demonstrate ethical behavior.
Specifically, students must be able to:

1. Attend and participate in classes for 30 or more hours per week during each academic semester. Classes consist of a combination of lecture, discussion, laboratory, and clinical activities.

2. Use auditory, tactile, and visual senses to receive classroom instruction and to evaluate and treat patients.

3. Read, write, speak, and understand English at a level consistent with successful course completion and development of positive patient-therapist relationships.

4. Complete readings, assignments, and other activities outside of class hours.

5. Apply critical thinking processes to their work in the classroom and the clinic.

6. Exercise sound judgment in class and in the clinic.

7. Participate in Clinical Experiences which typically require students to be present 40 or more hours per week on a schedule that corresponds to the operating hours of the clinic.

8. Gather decision-making pieces of information during patient assessment activities in class or in the clinical setting without the use of an intermediary (classmate, aide, etc.).

9. Perform treatment activities in class or in the clinical setting by direct performance or by instruction and supervision of intermediaries.

10. Sit for two to 10 hours daily, stand for one to two hours daily, and walk or travel for two hours daily. In clinical situations, alternately sit, stand, and walk up to 10 hours daily.

11. Frequently lift weights less than 10 pounds and occasionally lift weights between 10 and 100 pounds.

12. Occasionally carry up to 25 pounds while walking up to 50 feet.

13. Frequently exert 75 pounds of push/pull forces to objects up to 50 feet and occasionally exert 150 pounds of push/pull forces for this distance.


15. Occasionally squat, crawl, climb stools, reach above shoulder level, and kneel.

16. Frequently move from place to place and position to position at a speed that permits safe handling of classmates and patients.

17. Frequently stand and walk while providing support to a classmate simulating a disability or while supporting a patient with a disability.

18. Occasionally climb stairs and negotiate uneven terrain.

19. Frequently use their hands repetitively with a simple grasp and frequently use a firm grasp and manual dexterity skills.

20. Frequently coordinate verbal and manual activities with gross motor activities.

If a student cannot demonstrate the skills and abilities outlined in this document, it is the responsibility of the student to request reasonable accommodation. Reasonable accommodation refers to ways in which the University can assist students with disabilities to accomplish these tasks (for example, providing extra time to complete an examination or enhancing the sound
system in a classroom). Reasonable accommodation does not mean that students with disabilities will be exempt from completing certain tasks; it does mean that the DPT Program will work with students with disabilities to determine whether there are ways that we can assist the student toward successful completion of the tasks.

Candidates for admission with a disability are not required to disclose the specifics of their disabilities, but prior to the start of DPT classes, they must indicate that they can complete these tasks, with or without reasonable accommodation. Students who cannot complete these tasks, even with accommodation, are ineligible for admission. Any previously made offer of admission will be withdrawn. An offer of admission may be withdrawn if it becomes apparent that the student cannot complete essential tasks even with accommodation, or that the accommodations needed are not reasonable and would cause undue hardship to the institution, or that fulfilling the functions would create a significant risk of harm to the health or safety of others. Candidates for admission who have questions about this document or who would like to discuss potential accommodations/program modifications should contact the Program Director of the Doctor of Physical Therapy Program. The specific process is outlined in the University Handbook.

Professional Behaviors

The program expects DPT students to develop and demonstrate 10 professional behaviors important to the practice of physical therapy. These are adopted from the work of Warren May, PT, and colleagues. “In addition to a core of cognitive knowledge and psychomotor skills, it has been recognized by educators and practicing professionals that a repertoire of behaviors is required for success in any given profession (Alverno College Faculty, Assessment at Alverno, 1979).” The identified repertoire of behaviors that constitute professional behavior reflect the values of any given profession and, at the same time, cross disciplinary lines (May et. al., 1991). Visualizing cognitive knowledge, psychomotor skills and a repertoire of behaviors as the legs of a three-legged stool serves to emphasize the importance of each. Remove one leg and the stool loses its stability and makes it very difficult to support professional growth, development, and ultimately, professional success. (May et. al., Opportunity Favors the Prepared: A Guide to Facilitating the Development of Professional Behavior, 2002)

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

- **Communication** The ability to communicate effectively (i.e. verbal, non-verbal, Written, etc…)

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

- **Interpersonal Skills** The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.
- **Responsibility**
  The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

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

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

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

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

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

References: Adapted from: Warren May, PT, MPH, Laurie Kontney PT, DPT, MS and Z. Annette Iglarsh, PT, PhD, MBA: Professional Behaviors for the 21st Century, 2009-2010

**Equal Access and Opportunity: Non-discrimination policies**

Administrators, faculty, and staff at RMUoHP are committed to providing equal access to education and employment opportunities to all regardless of age, race, religion, color, national and ethnic origin, gender, sexual orientation, disability, and military status. The University is also committed to providing equal access/opportunity in admissions, recruitment, course offerings, facilities, counseling, guidance, advising, and employment and retention of personnel and students. The administration is committed to implementing federal and state laws and regulations governing equal access/opportunity. It further extends its commitment to fulfilling the provisions of Title IX, Section 504 of the Rehabilitation Act, and the American with Disabilities Act (ADA). These non-discriminatory policies and practices are an integral part of the mission of the University, and the Diversity and Disabilities Advisory Committee helps ensure that equal access and opportunity policies are followed.

Additionally, the University complies with Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973. Inquiries regarding these policies, the filing of grievances or grievance procedures on these matters may be directed to the director of admissions. Inquiries regarding federal laws and regulations concerning nondiscrimination in education or RMUoHP compliance with those provisions may be directed to the Office of Civil Rights, U.S. Department of Education, 221 Main Street, Suite 1020, San Francisco, California 94105.
RMUoHP adheres to the principles of Section 504 of the Rehabilitation Act of 1973, which provides that no otherwise qualified student with a disability shall solely for reason of his or her disability be excluded from the participation in, be denied benefits of, or be subjected to discrimination in the program. RMUoHP does not exclude qualified persons with disabilities from any course of study, or any other part of the program (refer to skills section for further explanation of what essentials are necessary to function within a given health science discipline). RMUoHP’s students with disabilities must meet the requirements and levels of competency required of all students in the program. To assist students with disabilities in fulfilling these responsibilities of the program, every reasonable effort is made to accommodate special needs of such students. All applicants with disabilities are advised of this policy at the time of their application and/or acceptance to the University.

The RMUoHP campus has wheelchair access to all areas, including the student lounge, conference rooms, classrooms, laboratories, and main lobbies. Restrooms are equipped for individuals with mobility-challenges.

Students requiring special considerations during laboratory exercises will be required to pay for any extra expenses incurred by the University to meet these special needs. For example, if a female student’s religious beliefs require that she perform the laboratory exercise isolated from the male students and male faculty, the student will be responsible for paying the rent on the extra room, the female lab instructor and any other additional costs.

**Learning Disabilities/Physical Challenges**

RMUoHP adheres to the Americans with Disabilities Act of 1990 that provides comprehensive civil rights protection for "qualified individuals with disabilities.” Please refer to the University Handbook for additional information.

**Student Acknowledgement of Policies and Procedures**

DPT students are responsible for the contents of this DPT Student Handbook, the DPT Program Clinical Education Handbook and the RMUoHP University Handbook. Prior to admission, potential students will complete and sign the “Student Disclosure Form.” The “Student Acknowledgment of Program Policies and Procedures Form” is to be completed and signed upon matriculation into the program at the time of orientation. Individual course syllabi may include additional standards.
ACADEMICS

Academic standards specific to the Doctor of Physical Therapy Program are listed below. Refer to the University Handbook for institutional standards.

Academic Advisement

Academic advisement is an important part of the educational process in the DPT Program. Once a student is enrolled, he/she will be assigned to a DPT faculty member who will serve as the student’s advisor. All new first year students are to meet with their academic advisor within the first 8 weeks of the first semester and each semester throughout the program as needed.

Transfer of Credits

It is not anticipated that many students would have credits to transfer into the DPT program, except under unusual circumstances. In the event that this should be the case, students should refer to the University Handbook for institutional policy on the transfer of credits and consult with the program director. All potential program transfer credits for the DPT program must be submitted for approval prior to enrollment in the DPT program. See the University Handbook for further information.

Course Delivery

RMUoHP offers blended course delivery, which includes course delivery enhancement via the University’s learning management system, Canvas. Each course may include submission of course materials, document sharing, and threaded discussion forums, or live “chats” via the learning management system (LMS). Within each blended program model, some courses may also include content delivered entirely through Canvas. Each course syllabus clearly identifies to the student the expectations for both face-to-face and web-enhanced engagement. Additionally, DPT students will complete coursework at off-site facilities while on integrated and terminal clinical affiliations.

Course Types

The DPT program offers four types of courses:

- **Onsite**: Courses that are taught on the RMUoHP campus in a traditional face to face format. These courses may be enhanced through use of the learning management system (LMS), Canvas.

- **Online Course**: An online course is completed via the LMS (such as Canvas) and does not include much, if any, of the onsite, face-to-face component. An online course may have varying module timelines and components of independent study.

- **Limited Residency**: These courses include live session taught on campus mixed with content delivered via the LMS.

- **Clinical**: learning experiences completed in a clinical setting under the supervision of a clinical instructor and which include direct patient care. See the clinical education manual for complete information.
Curriculum

The program is a traditional campus-based program consisting of 8 semesters. Learning experiences will include classroom, laboratory, online, and off-site clinical education. There are a total of 133 credit hours required for successful completion of the program, including the credits earned for the 51 weeks of clinical education. By design, the DPT program relies on the progressive clinical and academic model demonstrated in current University programs. The DPT program incorporates technological and clinical advances as well as contemporary educational theory. RMUoHP, acknowledged for its excellence in faculty and educational programming, recognizes that even with the best technology and curriculum the heart and soul of the program is its students. The DPT program caters to highly motivated students who wish to be active participants in their education.

The DPT program is committed to the development of an individual who can:

- Demonstrate a minimum of entry-level skill in autonomous provision of services including screening, examination, evaluation, diagnosis, prognosis, plan of care, intervention, and outcomes assessment activities.

- Provide effectively managed physical therapy services to healthcare consumers in a caring manner that demonstrates altruistic principles balanced with fiscal/fiduciary awareness.

- Adhere to ethical standards of practice and legal/regulatory policies.

- Provide leadership in the field of physical therapy.

- Demonstrate a commitment to excellence, lifelong learning, critical inquiry, and clinical reasoning by skillfully incorporating current evidence into physical therapy practice.

- Demonstrate abilities to continue professional development, including self- and peer evaluation.
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<tr>
<th>Yr 1, Sem 1</th>
<th>Number</th>
<th>Course Title</th>
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<tr>
<td>(Sum 2020)</td>
<td>PT 700</td>
<td>Professionalism 1: Physical Therapy and the Profession</td>
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<td>PT 701</td>
<td>Foundational Sciences 1: Human Anatomy</td>
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<td>PT 704</td>
<td>Physical Therapy Procedures</td>
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<td>Foundations of Research</td>
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<td>PT 714</td>
<td>Physical Agents</td>
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<td>PT 721</td>
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<td>Therapeutic Exercise</td>
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<td>Evidence-based Practice</td>
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<td>PT 734</td>
<td>Musculoskeletal Physical Therapy 1</td>
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<td>PT 741</td>
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<td>Physical Therapy Experience (6 weeks)</td>
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<td>Professionalism 3: Ethics and Physical Therapy Practice</td>
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<td>Prosthetics, Orthotics, and Amputee Training</td>
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<td>Lifespan 1: Pediatric Physical Therapy</td>
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<td>PT 730</td>
<td>Introduction to Health Promotion and Wellness</td>
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<td>PT 788</td>
<td>Clinical Internship 1 (12 Weeks)</td>
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<td>PT 799</td>
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Year 1, Semester 1

(16 credits)

PT 700  Physical Therapy and Professionalism  (3 credits)
An overview of the healthcare delivery system and of the professional roles of doctorally-prepared physical therapists is presented. Students evaluate the interdisciplinary roles of medical and rehabilitation co-professionals and extenders, including, among others, medical doctors, nurses, physical, occupational and speech therapists, chiropractors, social workers, and physical therapist assistants. The history and development of modern-day physical therapy in the United States is examined in depth and includes the study of the collaborative nature of twenty first century healthcare practice. (Lecture 3)

PT 701  Foundational Sciences 1: Human Anatomy  (5 credits)
The study of human anatomical structures as they relate to movement and the physiological demands of activity and exercise. A regional approach to the study of structures is aided by specimens, models, and multimedia. The course is projected to have a strong interactive, online component. (Lecture 4/Lab 2)

PT 704  Intervention 1: Physical Therapy Procedures  (2 credits)
The first in a series of clinical skill courses; this introductory course focuses on basic principles and the development of psychomotor skills related to palpation, infection control, vital signs, clinical emergencies, body mechanics, positioning and draping, therapeutic massage, basic wheelchair prescription, transfers, bed mobility, and gait training of patients and clients. (Lecture 1/Lab 2)

PT 705  Critical Inquiry 1: Introduction to Research Methods  (2 credits)
This course will present an introduction to general research principles and research ethics. The student will be introduced to the following topics in the research process: question formulation, principles of measurement, basic research design and methodological features, issues of reliability and validity, and fundamentals of conducting a literature review. This course will also serve as an introduction to evidence-based practice. (Lecture 2)

PT 711  Foundational Sciences 2: Kinesiology/Pathomechanics 1  (4 credits)
This course will examine the study of human movement including selected anatomical, structural, and functional properties of human connective tissues, muscular tissues, nervous tissues, and skeletal structures. Focus will be on the lower quarter. Emphasis will be placed on mechanical, neuroregulatory, and muscular influences upon normal and pathological motion. (Lecture 3/Lab 2)
PT 700  Professionalism 1: Physical Therapy and the Profession  
PT 700 is an overview of the healthcare delivery system and of the professional roles of practicing physical therapists. Students evaluate the interdisciplinary roles of medical and rehabilitation co-professionals and extenders, including, among others, medical doctors, nurses, physical, occupational and speech therapists, chiropractors, social workers, and physical therapist assistants. The history and development of modern-day physical therapy in the United States is examined in depth and includes the study of the collaborative nature of twenty-first century healthcare practice. General principles of human interaction, communication, and relationships are presented, including self, professional-patient, and interdisciplinary strategies for understanding adaptations to disease and disability. Students will be introduced to cultural competence and the importance it plays in physical therapy practice. (Lecture 3)

PT 701  Foundational Sciences 1: Human Anatomy  
The study of human anatomical structures as they relate to movement and the physiological demands of activity and exercise. A regional approach to the study of structures is aided by specimens, models, and multimedia. The course is projected to have a strong interactive, online component. (Lecture 4/Lab 2)

PT 704  Physical Therapy Procedures  
This introductory course focuses on basic principles and the development of psychomotor skills related to palpation, infection control, vital signs, lines and equipment, body mechanics, positioning and draping, therapeutic massage, soft tissue mobilization, basic wheelchair prescription, transfers, bed mobility, and gait training of patients and clients. In addition, it introduces the student to the American Physical Therapy Association’s Guide approach to physical therapy practice and documentation. (Lecture 2/Lab 2)

PT 705  Foundations of Research  
This course will present an introduction to general research principles, research ethics, evidence-based practice and biostatistics. Specific topics to research include the formulation of a research question, principles of measurement, basic research design and methodological, types of reliability and validity, and fundamentals in conducting a literature review. Quantitative article critiques will be conducted in class and outside of class. Specific topics to biostatistics include descriptive statistics, measures of central tendency, basic probability concepts, sampling distributions, confidence intervals, hypothesis testing, one and two-sample t-tests, correlations and Anova’s (Lecture 3)

PT 711  Foundational Sciences 2: Kinesiology  
This course will examine the study of human movement including selected anatomical, structural, and functional properties of human connective tissues, muscular tissues, nervous tissues, and skeletal structures. Focus will be on the lower quarter. Emphasis will be placed on mechanical, neuroregulatory, and muscular influences upon normal and pathological motion. (Lecture 3/Lab 2)
PT 707  Professionalism 2: Patient Management  (3 credits)
This course will focus on developing professional thinking and clinical skills. The course covers the elements of patient/client management with a focus on the components of the examination and the development of the evaluation/diagnosis/ prognosis process. Laboratory sessions emphasize examination skills with refinement of psychomotor skills learned during the first semester. Professional behaviors of that demonstrate Compassion & Caring, Integrity and Professional Duty are included within the laboratory sessions and patient discussions. The evaluative process will utilize the International Classification of Functioning and Disability (ICF) as the primary process for evaluating the examination findings, making a diagnosis and developing the prognosis/ plan of care. The course also includes: an introduction to documentation and billing, examination of patients in different clinical settings, and the basic principles of medical imaging. (Lecture 2/Lab 2)

PT 714  Physical Agents  (2 credits)
This course focuses on the theory and physiological effects of selected physical agents/modalities, including indications and contraindications relevant to specific conditions. Biophysical Technologies include heat, cold, electrical current, light, sound, and other electromagnetic spectrum modalities, as well as intermittent compression and traction. (Lecture 1/Lab 2)

PT 721  Foundational Sciences 3: Applied Physiology  (5 credits)
This course is a foundational science course and serves as a core building block for the understanding of physiology in preparation for physical therapy primary care practice. All the major organ systems will be studied individually and progressively integrated throughout the course. The goal of the course is to develop a more complete picture of how the human body maintains homeostasis and responds and adapts to exercise, growth & aging, and environmental challenges. The impact of nutrition on health and performance will also be introduced. Lecture and labs will be used to meet the course objectives, incorporate experiential learning, and develop critical thinking skills.(Lecture 4/Lab 2)

PT 724  Therapeutic Exercise  (4 credits)
This course is designed to provide students with an overview of basic principles related to exercise, including acute and chronic physiologic adaptation to aerobic and anaerobic exercise. The impact various disease states have on exercise capacity will also be explored. In addition, the application of therapeutic exercise prescription and medical documentation will be emphasized as relates to pathologic conditions commonly seen in physical therapy practice. (Lecture 2/Lab 4)

PT 731  Foundational Sciences 4: Kinesiology 2  (4 credits)
This course is a continuation of Kinesiology 1, and includes the study of human movement, including selected anatomical, structural, and functional properties of human connective tissues, muscular tissues, nervous tissues, and skeletal structures. Focus is on the upper quarter and spine. Emphasis will be placed on mechanical, neuroregulatory, and muscular influences upon normal and pathological motion. (Lecture 3/Lab 2)

Year 1, Semester 3, Winter 2021
(18 credits)

PT 716  Pharmacotherapy  (2 credits)
This course will introduce basic pharmacological concepts such as pharmaco-therapeutics, dynamics, and kinetics and their application to physical therapy practice. The impact of prescribed and over the counter (OTC) drugs on the outcome of therapy interventions will be explored. The course also emphasizes current evidence regarding medication/drugs and their relation to physical therapy practice. (Lecture 1)

**PT 725 Evidence-based Practice** (3 credits)
This course provides students with the foundational knowledge and skills necessary to conscientiously, explicitly, and judiciously apply principles of evidence based-practice in the healthcare environment, patient/client management, and in making clinical decisions. The course focuses on the primary components of evidence-based practice: formulating answerable clinical questions, finding best available evidence, performing critical appraisals of evidence, integrating evidence for making clinical decisions, and evaluation of outcomes. (Lecture 3)

**PT 733 Cardiovascular and Pulmonary Physical Therapy** (4 credits)
This course will prepare the student to effectively manage patients with cardiovascular and/or pulmonary impairments and disability. Emphasis is placed on the elements of patient/client management in physical therapy practice, including screening, examination, evaluation, diagnosis, prognosis, development of a plan of care, intervention, and outcomes assessment and evaluation. Concepts of exercise physiology and practical application in physical therapy are addressed. (Lecture 2/Lab 4)

**PT 734 Musculoskeletal Physical Therapy 1** (5 credits)
The first of two courses in this series, this course prepares the student to practice entry-level physical therapy relative to the management of musculoskeletal conditions. Information related to common orthopaedic conditions and diagnoses is presented. This course will concentrate on the lower extremities and the spine. Information regarding evidence-based approaches in critical thinking and application of psychomotor skills related to examination, evaluation, diagnosis, prognosis, intervention, and outcomes assessment is emphasized. A primer on differential diagnosis and evaluation tools is presented to help students recognize problems that are beyond the physical therapy scope of practice and when/how to refer appropriately within the healthcare community. (Lecture 4/Lab 2)

**PT 741 Foundational Sciences 5: Neuroscience** (4 credits)
This course includes the study of human neuroanatomy and neurophysiology, with emphasis on the relationship between structure, function, and control of the human nervous system in normal and diseased states. (Lecture 4)

**Year 2, Semester 1, Summer 2021** (18 credits)

**PT 717 Professionalism 3: Ethics and Physical Therapy** (3 credits)
This course provides a comprehensive overview of physical therapy ethics and legal practice issues. Students explore and analyze the APTA’s Code of Ethics and the Guide for Professional Conduct. Students define, describe, and evaluate moral, ethical, and legal issues pertaining to physical therapy practice in a variety of practice settings. APTA’s
professional standards, third party payer standards, and licensing board's ethical requirements are reviewed in depth to facilitate student assessment, comparing and contrasting, and analysis of these important documents. Students will explore various sociocultural topics and explore the patient/client perspective. The development of skills to prepare students to be culturally competent in physical therapy practice is emphasized. Teaching and learning methods, informatics, and abuse of vulnerable populations will also be discussed. (Lecture 3)

PT 729  Lifespan 1: Pediatric Physical Therapy  (3 credits)
This class is the first of the Life Span series focused on developmental sequence and treatment across the lifetime of our patients. It will include entry level material intended to allow all students to treat patients with age-appropriate activities and comprehend functional skills for pediatric patients. Students will progress through stages of normal development including reflexes and gross motor skill acquisition in addition to standardized assessments used with children. It is imperative to embrace the entire family system in treating young patients and understand underlying legislation to provide care for children at various ages. In addition to introduction to common pediatric diagnoses, students will be introduced to the role of Health promotion and safety within this specialty area. Students will apply the elements of patient/client management in physical therapy practice, including, screening, examination, evaluation, diagnosis, prognosis, plan of care, intervention, and outcomes assessment to the patient with neuromuscular dysfunction. (Lecture 2/ Lab 2)

PT 736  Prosthetics, Orthotics, and Amputee Training  (2 credits)
This course focuses on care of the patient who has had an amputation or condition that requires external support, including care related to underlying conditions and comorbidities. Topics such as care of residual limb, prosthetics and orthotics, and associated care and training will be discussed. (Lecture 2)

PT 738  Physical Therapy Experience (6 weeks)  (5 credits)
The first of four clinical education courses, this course is designed to facilitate socialization of DPT students to the clinical environment and to apply knowledge and basic skills developed up to this point in the curriculum in a real world setting. Students will participate in direct patient care while being instructed and supervised by clinical faculty members. Student activities may include, but are not limited to, patient examination, patient treatment, patient and family education, article presentations, and aspects of patient care. (Clinical Experience)

PT 742  Pathophysiology  (2 credits)
This course expands on concepts introduced in anatomy and physiology and focuses on pathophysiology and disease frequently seen in physical therapy practice. (Lecture 2)

PT 754  Neuromuscular Physical Therapy 1  (3 credits)
The first of two courses in this series, this course prepares the future physical therapist to effectively manage patients with neuromuscular dysfunction. Students will apply the elements of patient/client management in physical therapy practice, including, screening, examination, evaluation, diagnosis, prognosis, plan of care, intervention, and outcomes assessment to the patient with neuromuscular dysfunction. The
emphasis in this first course will be on an introduction of neuromuscular topics, including current motor control theories and evidence-based application of motor learning principles. (Lecture 3)

Year 2, Semester 2, Fall 2021
(17 credits)

PT 723  Professionalism 4: Specialty Practice  (3 credits)
This course focuses on specialty practice areas in physical therapy. Topics include pelvic health, vestibular rehab, ENMG, imaging, and the integumentary system. Current practice and technology, emerging issues, and future opportunities in Physical Therapy will be explored in relation to these specialty practice areas. (Lecture 3)

PT 730  Introduction to Health Promotion and Wellness  (2 credits)
This course will provide an overview of the concepts of health promotion, health education, public health, primary prevention, lifestyle, behavior, and wellness and, based on evidence, their relationships to each other and to secondary and tertiary care. The historical relevance of and evidence for focusing on individual and social determinants of health will be explored and an ecological model combining both approaches will be introduced. Typical intervention sites for effective health promotion programs will be discussed as well as a framework for implementing programs. (Lecture 2)

PT 739  Lifespan 2: Geriatric Physical Therapy  (2 credits)
This class is the second of the Life Span series focused on developmental sequence and treatment across the lifetime of our patients. The focus of this course is the biopsychosocial aspects of aging in order to understand the complexities of geriatric care. Integration of the physical aging process, appropriate, evidence-based evaluation techniques, outcome measures, as well as the design of effective treatment plans are discussed. (Lecture 2)

PT 744  Musculoskeletal Physical Therapy 2  (5 credits)
The second of two courses in this series, this course prepares the student to practice entry-level physical therapy relative to the management of the musculoskeletal conditions. This course will concentrate on the upper extremities, trunk and the cervical spine. Information related to common orthopaedic conditions and diagnoses is presented. Information regarding an evidence-based approach in critical thinking and application of psychomotor skills related to examination, evaluation, diagnosis, prognosis, intervention, and outcomes assessment is emphasized. A primer on differential diagnosis and evaluation tools is presented to help students recognize problems that are beyond the physical therapy scope of practice and how/when to refer appropriately within the healthcare community. (Lecture 4/Lab 2)

PT 764  Neuromuscular Physical Therapy 2  (5 credits)
The second of two courses in this series, this course prepares the future physical therapist to effectively manage patients with neuromuscular dysfunction. Students will incorporate and build upon concepts and skills developed in the first course. Students will learn to effectively manage adult patients with specific neurological diagnoses. Emphasis will be placed on using an evidence-based approach to developing knowledge and skills in managing a variety of
common conditions, including spinal cord injury, cerebrovascular accident, vestibular dysfunction, traumatic brain injury, and multi-system neurologic conditions. The effects of aging and Geriatric neurological conditions will also be considered. (Lecture 4/Lab 2)

Year 2, Semester 3, Winter 2022
(16 credits)

**PT 740  Professionalism 5: Financial Principles in Physical Therapy** (1 credit)
This course examines current issues and trends in physical therapy clinical management. Specific topics include: (1) health care malpractice and business, contract, criminal, and education law concepts and case, statutory and regulatory law; (2) informed consent; (3) organizational theory, behavior, and culture; (4) leadership and management principles; (5) human resource management issues; (6) healthcare finance; (7) marketing of PT professional services; and (8) information, quality, and risk management. (Lecture 1)

**PT 746  Differential Diagnosis** (2 credits)
This course focuses on screening for referral by the physical therapist and building upon the knowledge and skills of examination, screening, and evaluation from prior clinical management courses. Review of pathology of the major body system will be covered with current evidence for how differential diagnosis and screening is applied to each body system. Screening for emergent situations and preparations to respond to these situations will be discussed. Competencies gained through the course are intended to help prepare the practitioner to function as an autonomous provider capable of making accurate diagnostic and screening decisions according to the best available evidence. (Lecture 2)

**PT 770  Clinical Integrations** (2 credits)
This course is strategically placed in semester 6 at the conclusion of the didactic portion of the Doctor of Physical Therapy program just before student therapists go out on extended clinical rotations. It is designed to aid students in assimilating content from all clinical management courses. Students are asked to analyze complex case scenarios, utilize evaluation skills, and design interventions including patient/family education and home exercise programs. Students work in teams to plan and rehearse each element of patient management to address case-based problems or patient simulations with consultation from faculty. Components of clinical practice that are integrated in this course include: interpersonal communication, utilization of evidence-based practice, examination, evaluation, plan of care establishment, intervention execution and modification, documentation, billing, and self and peer review. This course is designed to prepare students to make the transition from the classroom to the clinic. (Lecture 1, LAB 2)

**PT 788  Clinical Internship 1 (12 weeks)** (11 credits)
The second of four clinical education courses, this course is designed to incorporate knowledge and skills obtained and enhanced during the first short term clinical experience and synthesize information and skills developed in the final didactic portion of the curriculum. Students will participate in direct patient care while being instructed and supervised by clinical faculty members. Student activities may include, but are not limited to, patient examination, patient treatment, patient and family education, article presentations, and all aspects of patient care and most aspects of patient/client management. It is anticipated that the student PT should be able to carry a caseload and work independently (with appropriate supervision) with
most simple and many complex patient types by the end of this clinical experience. (Clinical Experience)

**Year 3, Semester 1, Summer 2022**
(11 credits)

**PT 798  Clinical Internship 2 (12 weeks)**  
The third of four clinical education courses, this course is designed to incorporate knowledge and skills obtained and enhanced during the first two clinical experiences and synthesize/appraise information and skills developed in the final didactic portion of the curriculum. Students will participate in direct patient care while being instructed and supervised by clinical faculty members. Student activities may include, but are not limited to, patient examination, patient treatment, patient and family education, article presentations, and all aspects of the patient/client management model appropriate to the setting. It is anticipated that the student PT will be able to demonstrate entry-level performance by the end of this clinical experience, for many of the criteria. (Clinical Experience)

**Year 3, Semester 2, Fall 2022**
(13 credits)

**PT 755  Capstone**  
This is a limited residency course that includes distance and online coursework while students are on their final clinical internship, as well as on-campus presentation and evaluation activities. In this course, student finalize preparations for entering the profession of physical therapy, including demonstration of entry-level skills in physical therapy clinical practice through development, presentation, and defense of an evidence-based capstone project; participating in activities for success on the national licensure examination; and completion of other professional development activities. (Lecture 2)

**PT 799  Clinical Internship 3 (12 weeks)**  
This final clinical education course is designed to incorporate knowledge and skills obtained and enhanced during the first three clinical experiences and synthesize/appraise information and skills developed in the final didactic portion of the curriculum. Students will participate in direct patient care while being instructed and supervised by clinical faculty members. Student activities may include, but are not limited to, patient examination, patient treatment, patient and family education, article presentations, and all aspects of the patient/client management model appropriate to the setting. It is anticipated that the student PT will be able to demonstrate entry-level performance by the end of this clinical experience. (Clinical Experience)
Grading Policies

When all requirements are fulfilled for each course in which the student is officially registered, students receive a course grade. This grade is the faculty's evaluation of the student's understanding and performance as related to the stated objectives of the class. The faculty has the discretion whether to round up the numeric score to the nearest whole number in determining both assignment and final letter grades. Final letter grades are entered on a student's official academic record and numeric values are used to compute the student's grade point average (GPA). Only grades earned at RMUoHP are used to determine GPA.

Table 2. Grading Scale

<table>
<thead>
<tr>
<th>Letter</th>
<th>Percentage</th>
<th>Grade Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>100-93</td>
<td>4.00</td>
</tr>
<tr>
<td>A-</td>
<td>92-90</td>
<td>3.70</td>
</tr>
<tr>
<td>B+</td>
<td>89-87</td>
<td>3.30</td>
</tr>
<tr>
<td>B</td>
<td>86-83</td>
<td>3.00</td>
</tr>
<tr>
<td>B-</td>
<td>82-80</td>
<td>2.70</td>
</tr>
<tr>
<td>C+</td>
<td>79-77§</td>
<td>2.30</td>
</tr>
<tr>
<td>C</td>
<td>76-73§</td>
<td>2.00</td>
</tr>
<tr>
<td>F</td>
<td>72- &amp; below§</td>
<td>0.00</td>
</tr>
<tr>
<td>P</td>
<td>Pass</td>
<td>***</td>
</tr>
<tr>
<td>I</td>
<td>Incomplete</td>
<td>***</td>
</tr>
<tr>
<td>IP</td>
<td>In Progress</td>
<td>***</td>
</tr>
<tr>
<td>AE</td>
<td>Academic Extension</td>
<td>***</td>
</tr>
<tr>
<td>W</td>
<td>Withdrawal</td>
<td>***</td>
</tr>
<tr>
<td>TC</td>
<td>Transfer Credit</td>
<td>***</td>
</tr>
<tr>
<td>NS</td>
<td>Grade Not Submitted</td>
<td>***</td>
</tr>
<tr>
<td>R</td>
<td>Repeat Course</td>
<td>***</td>
</tr>
<tr>
<td>AC</td>
<td>Audit Course</td>
<td>***</td>
</tr>
<tr>
<td>AW</td>
<td>Administrative Withdrawal</td>
<td>0.00</td>
</tr>
<tr>
<td>AF</td>
<td>Administrative Failure</td>
<td>0.00</td>
</tr>
</tbody>
</table>

***No numeric value computed in GPA.
§ Indicate non-passing grades

Course Grade Designations

AW (Administrative Withdrawal)
An “AW” grade is assigned when a student unexplainably discontinues a class, does not attend class, or fails to meet the requirements of an Incomplete contract as outlined. An AW affects the GPA, but may be replaced by repeating the course successfully. No fee refund occurs. A student may not carry more than two “AW” grades in the MSHS, CScD-SLP, tDPT or post-professional OTD programs, three “AW” grades in the DNP/FNP program, or four “AW” grades in the DSc and PhD programs at any given time.

AF (Administrative Failure)
An “AF” grade is assigned when a student is dismissed from the University (refer to Dismissal Policy). An AF affects the GPA adversely. No fee refunds occur for work in progress.

I (Incomplete)
An “I” grade is allowed only when extenuating non-academic circumstances, i.e. serious illness or other unavoidable circumstances, prevent the student from completing the course requirements by the agreed-upon deadline within the regular timeframe of the course. If the faculty member concurs with the student that extenuating circumstances are present, the student shall fill out an Incomplete Grade Contract that is signed by the faculty member and PD. The Incomplete Grade Contract indicates the course requirements that must be completed and their due dates. The time for completion of incomplete assignments is determined by the faculty member and may not exceed the end date of the subsequent semester. The contract is not official until the student, faculty member, and the PD have given signed approval. This contract will remain in the student’s University file. The Incomplete Grade Contract may be obtained from the Registrar for a $50 fee, which covers the administrative costs and required additional support from the faculty and PD. This fee must be paid before the “I” is posted on the student’s transcript. If due to legitimate extenuating circumstances the faculty member, PD, and VP/AD approve a second extension, a student may file a second incomplete contract form/fee for the same course to receive one additional semester to complete the coursework. The extensions may not exceed the maximum time for degree completion.

When all course requirements are completed as contracted, the faculty member will notify the Registrar of the grade, and the Registrar will complete the Incomplete Grade Contract to indicate the final grade earned.

Should the student fail to meet the requirements of the contract, the grade the student receives in the course will automatically change from an incomplete to an administrative withdrawal.

A student may not carry more than two “I” grades in the MSHS, CScD-SLP, tDPT or post-professional OTD programs, three “I” grades in the DNP program, or four “I” grades in the DSc and PhD programs at any given time.

IP (In Progress)
An “IP” grade is assigned when a student completes all required coursework but, upon direction of the faculty, needs to remediate that work in order to pass the course. An “IP” must be removed by the end date of the subsequent semester or the course grade will be calculated from the previously graded work. An IP grade contract must be completed by the faculty member and signed by the student and PD. This contract will remain in the student’s University file. The student will be required to pay a $250 fee, which covers the administrative costs and required additional support from the faculty and PD. This fee must be paid before the “IP” is posted on the student’s transcript.

When all course requirements are completed as contracted, the faculty member will notify the Registrar of the grade, and the Registrar will complete the In-Progress Grade Contract to indicate the final grade earned. The final grade will be determined by the faculty based upon multiple factors including, but not limited to, the degree of improvement in the work, the extra time allowed for work completion, and the level of effort involved.

Should the student fail to meet the requirements of the contract, the grade the student receives in the course will automatically change to the failing grade that would have been assessed prior to the remediation. A student may not carry more than two “IP” grades in the MSHS, CScD-SLP, tDPT or post-professional OTD programs, three “IP” grades in the DNP program, or four “IP” grades in the DSc and PhD programs at any given time.

AE (Academic Extension)
An “AE” grade is assigned when the due date for coursework in a given course extends beyond the end of the semester. This extension is university-initiated and applies to the entire class. Thus, no form, fee or penalty is associated with this grade designation.

W (Withdrawal)
A “W” grade is assigned when a student withdraws from a course. Students must formally request withdrawals and must have been passing the course before such a request is made. The “W” grade does not affect the GPA. Any course for which a “W” is assigned must be repeated if the student wishes to continue in the program. The withdrawal process includes the following steps:
The student submits a letter (hard copy or email) to the PD and Registrar stating the desire to withdraw, the official date of the withdrawal, and the course(s) the withdrawal affects. After review (with the VP/AD and/or Provost input), the PD rules on the request. The student is notified of the decision within four weeks of the official request. If approved, the student receives a “W” grade for the course. A “W” grade has no effect on the student’s GPA.
Failure to follow this procedure will result in an “AW” grade for the course. Students may be eligible for tuition refunds in accordance with the University refund policy as described in the student’s ‘Tuition and Fee Information’ form provided at the time of enrollment.

TC (Transfer Credit)
A “TC” grade is assigned when the student receives transfer credit allowance from an external institution. A “TC” grade has no effect on the GPA. The policy on transfer credit is located on the University website.

NS (Not Submitted)
An “NS” grade is assigned when the student has submitted all required coursework and the final grade is pending from the faculty member. This has no effect on the GPA.

R (Repeat of Course)
An “R” grade is assigned when the student has repeated a course for graded credit. Official enrollment in the course is required with payment of appropriate tuition and fees. Upon successful completion of the course, the previous grade will be changed to an “R,” which does not affect the student’s GPA for academic purposes; it will be included for determination of Satisfactory Academic Progress (SAP; see Satisfactory Academic Progress section). Only the “new grade” posted as the final grade will be used to compute the GPA as presented on the student’s transcript. A course can only be repeated once. Students in the entry-level DPT program must follow program requirements regarding readmission to repeat a course.

AC (Audit Course)
An “AC” grade is assigned when the student takes the course for ungraded credit. An “AC” has no effect on the GPA. This is an official classification, but the student does not receive a grade or credit and does not submit coursework.

For information on different designations for University student status, please see the University Handbook.
Progression in the DPT Program:

Each course within the DPT curriculum is graded with letter grades [A-F] with the exception of Clinical Education courses, which are graded as Pass or Fail. For all courses within the PT curriculum, a grade of C+ or better (or Pass in the case of Clinical Education courses) must be achieved for progression in the program. Additional criteria for progression include: individual semester and cumulative program GPA of at least 3.00 out of 4.00; compliance with technical standards; and appropriate performance in Professional Behaviors. Students who fail to meet established grading criteria will be dismissed. Those who fail to comply with technical standards or professional behaviors may be dismissed or be offered the opportunity to withdraw from the program based on a plan approved by the faculty.

At the completion of each academic term, the RMUoHP personnel will review each student’s performance to determine if academic and clinical standards are met to allow progression or graduation. The faculty reserves the right to examine extenuating circumstances in each case of non-acceptable academic and/or clinical performance. The student may be required to provide documentation to support any extenuating circumstances. The student who passes all of her/his academic and clinical coursework satisfactorily, and meets technical standards and professional behavior expectations, will progress in the Program and graduate. Required academic standards for progression are as follows:

1. **Academic Course Grade Requirement**:
   - Students in the DPT Program are required to maintain a 77% average or above and earn a final grade of “C+” or higher in any required course. If a student fails to receive a grade of “C+” or better in any DPT course in a semester, he/she will not be allowed to progress, or take courses that follow in the next semester, and will be dismissed from the program, except where remediation is allowed (see remediation section).
   - Students are only allowed one grade of C+ in any given semester, which would result in the student being placed on academic probation (AP).
   - Students receiving a grade of C+ or below in two or more courses in any given semester will not be allowed to progress and will be dismissed from the program.

2. **Semester/Cumulative Grade Point Average (GPA) Requirement**
   - A *minimum* semester GPA of 3.00 must be achieved. If the student does not achieve this requirement for any given semester, the student will be placed on academic probation as defined in the University Handbook.
   - A *minimum* cumulative GPA of 3.00 must be maintained. If the student does not maintain this requirement, the student will be placed on academic probation as defined in the University Handbook.

3. **Clinical Education Course Grade Requirement**: Each clinical education course must be passed with a grade of P (pass). Students should refer to the Clinical Education Handbook for specific information on clinical education course requirements.

4. **Professional Behaviors and Technical Standards**: Students in the DPT Program must demonstrate appropriate behaviors according to the DPT Program Professional Behaviors and technical standards documents. Because these standards reflect behaviors necessary for success as a physical therapist in the clinical environment, failure to demonstrate appropriate behaviors can result in actions addressing the specific deficiencies in professional behaviors that may include:
   - A need for additional coursework,
   - Additional clinical time,
A delay in progression or dismissal from the program.

**Probation Status**

A student will be placed on Academic Probation as a result of:

- A cumulative GPA below 3.00
- A semester GPA below 3.00
- A single DPT course grade of C+ in a semester

Also, disciplinary action which could lead to penalty or dismissal may also be taken against a student for the following:

- Violation of the DPT Program’s professional behavior, attendance or other policies
- Violation of the University honor code or code of conduct
- Not meeting all program requirements

A student placed on probation or who has a disciplinary action will meet with his/her faculty advisor to develop a remediation plan in conjunction with the student progression committee that details requirements to remove the disciplinary status. Students on probation will be monitored by the faculty advisor and student progression committee and assessed to ascertain if the requirements have been met. Depending on the nature and severity of other violations that lead to a disciplinary action, a student may be allowed to continue in the program with the development of a remediation plan by the student’s advisor in conjunction with the student progression committee.

To remove an academic probation status, the student is required to:

- Have all final course grades of B- or better in the next semester
- Achieve a semester GPA of at least 3.00 for the next semester
- Raise the cumulative GPA to a minimum of 3.00.

Students under any other disciplinary action must meet the requirements of the remediation plan.

The student is not allowed to be on academic probation for more than two semesters in an academic career. Failure to remove the academic probation status after the second semester of probation will result in dismissal from the program. If the student does not meet the conditions of other disciplinary action remediation plans by the designated time, he/she may be dismissed from the program by the Academic Dean upon recommendation from the Program Director, as noted in the section on conduct and behavior in the University Handbook. An official letter will be sent from the Registrar notifying the student of this action.
Dismissal from DPT Program

In addition to those conditions listed in the University Handbook, a student may be dismissed from the program for a variety of reasons, including but not limited to:

1. Inability to be removed from probation in the appropriate time frame.
2. A grade below C+ in any course.
3. Unsatisfactory performance (i.e. C+ or below) in two or more courses in any given semester.
4. Repeated tardiness and/or abuse of the stated attendance policy in any given course.
5. Failure to maintain a cumulative minimum GPA of 3.00 according to guidelines noted in the progression section of the DPT Student Handbook.
7. Inability to meet the Professional Behavior or Technical standards of the DPT Program.
8. Evidence of academic dishonesty or violation of other appropriate conduct policies as noted in this handbook or the University Handbook, including non-fraternization, harassment, alcohol, tobacco, and drug free environment policies/guidelines for conduct.
9. Any determination by the DPT Faculty or the student progression committee that the student is unfit for practice as a physical therapist or is not meeting the requirements of the academic program or University.

Each individual case is discussed by the DPT faculty and/or student progression committee with a recommendation to the program director. The student may be requested to provide input to the faculty. The student is allowed to appeal any decision by following the appeal procedure. See the University Handbook for additional information on progression, university status, dismissal or appeals procedures. **Purpose:** To outline the process by which students may advance in the program while failing more than one practical exam.

Practical Exam Competency:

The department faculty is responsible for assuring student competency in clinical skills, clinical reasoning, and safety with patients before clinical education experiences and graduation. Practical exams within individual courses are one method by which faculty assesses student competency. Practical exams often assess skills/knowledge attained in previous semesters; therefore, students are expected to demonstrate competence in all content from previous semesters on all practical exams. A score of 80% with no safety violations is considered minimal competency for all practical exams in courses. Therefore, the passing grade for any practical exam (initial or retake) will be 80% in all courses.

Some specific elements of a practical exam will be designated by the course coordinator as compulsory elements that must be demonstrated without any error. Safety of the patient and student will always be a compulsory element. Failure to perform a compulsory element satisfactorily will result in failure of the practical exam. Students must pass all practical exams in a course to pass the course.
A student who fails a practical exam will be given one opportunity to retake the practical exam following appropriate remediation of the skills in deficit, assuming the student has not surpassed the limits stated below.

1. There must be at least 24 hours for remediation prior to a retake attempt.
2. An exam retake must be observed and graded by two examiners when available and/or video recorded. When possible, a separate proctor from the same course should be used for the retake.
3. The student must score ≥ 80% and perform compulsory elements satisfactorily to pass the retake practical exam.

If a student passes the retake practical exam with a score of ≥80%, a maximum grade of 80% or “pass” will be recorded for that practical exam in the course grade. A score of < 80% on the retake will result in a referral to the student progression committee for further action.

Failure of Practical Exams in a DPT Course

When a student requires a retake on a practical exam the following procedure should be followed:

1. the examiner will notify the faculty advisor and department chair by using the advisor alert system.
2. the primary instructor will coordinate the retake to ensure the second attempt occurs a minimum of 24-hour after the first attempt.
3. The number of cumulative failures should be identified, and the flow chart below should be followed.

If the retake is unsuccessful, or the flow chart below indicates a referral, the primary instructor should formally refer the student to the student progression committee. This committee will subsequently determine any additional action that may be warranted. This action may include but is not limited to:

1. A 3rd attempt at a practical exam following review of concerns during the practical exam attempt(s) should it be determined there were extenuating circumstances on either the 1st or 2nd attempt.
2. Completion of a comprehensive practical exam (over several courses) before clinical education experiences,
3. Academic probation following a third successful attempt
4. Postponement of clinical education experiences
5. Failure of the course

Repeating Multiple Practical Exams throughout the program-

Students are allowed a total of two (2) failed practical exams with successful retakes during the first two semesters, and a total of four (4) total failed exams with successful retakes during the
entire program. After 4 practical exams are failed, the student will be referred to the student progression committee for evaluation of appropriateness of the student in the program.

After the second semester, when a student requires a retake on unsuccessful subsequent practical exam, the student will be referred to the student progression committee. The committee will determine appropriate action which may include remediation with a retake, completion of a comprehensive practical exam (over several courses), and/or postponement of clinical education experiences.

If a student fails a fifth practical exam during the program, the student will receive a course grade of F and will be dismissed from the program.

This process should follow the flowchart found below:
Competency Prior to Clinical Education Participation

All students must demonstrate readiness to engage in clinical education based upon the following criteria:

- Completion of all previous academic/didactic coursework with a minimum grade of C+ and cumulative GPA of 3.0.
- Completion of all Laboratory Practicum/Practical exam components with a minimum of 80% grading with no safety concerns.
- Satisfactory demonstration of Professional Behaviors and technical standards with no concerns from Core faculty prior to clinical placement.

See Clinical Education Handbook for additional information.

Remediation of Non-Acceptable Student Performance:

Non-acceptable performance may be either academic (including clinical) or professional. Consequences of non-acceptable academic work may be: 1) remedial work, 2) repeating a course/term, or 3) dismissal from the program.

Remediation of Non-acceptable Academic Performance

1. Remedial work may be allowed when academic performance is not acceptable in an academic course or a single clinical placement if it is recommended by the faculty member and approved by the student progression committee. Such might be the case if performance on a single assessment was unacceptable due to an extenuating circumstance. In general, remediation of a course for which the majority of assessments of a student’s performance were unacceptable would not be allowed.

2. Remedial work for unacceptable academic or clinical performance (see remediation of clinical performance section below) is assigned by the individual faculty member in accordance with guidelines established by the student progression committee. Generally, an “IP” grade would be assigned, and the student would be on academic probation for the remainder of the semester in which the remediation activities take place. Remediation activities would be expected to be completed at a specified level of performance, within a specified time frame. The student progression committee, in consultation with faculty, reserves the right to require the student to repeat the entire course the next time it is offered. Depending on the situation the student may or may not be required to apply for readmission and an academic plan would be required for the student’s return. The main situation in which a student may not have to reapply is in the case of poor performance in a clinical course due to extenuating circumstances. (See remediation of clinical performance section below)

3. Remedial work may be assigned only if remediation is needed in a single course in a given semester. Such would be the case if a student earned a grade below C+ in one course with all other grades at B- or better in that semester (or Pass for clinical courses).

4. It is expected that the remediation would be completed in the subsequent semester (typically no longer than 30 days after the end of the semester in which the unsatisfactory grade was assigned), and that the scope of the remediation would be appropriate to demonstrate competency to the minimum 77% level (or 80% in the case of lab practical skills) in that time frame.

5. A student will be allowed to formally remediate unsatisfactory performance in only one DPT course per academic career. A remediated course grade can only be raised to a grade of C+ (or Pass in the case of clinical education courses).
6. A student may continue to progress in the academic portion of the DPT program while course remediation is in progress, with the understanding that if remediation is unsatisfactory, the student will be dismissed from the program. Permission to take courses in the next semester for which the “IP” course is a pre-requisite would be required from the program director. It is required that students demonstrate minimum levels of competence prior to full time clinicals during the 4th term and will not be allowed to participate in these affiliations until remediation is completed successfully. If the faculty requires the student to repeat the entire course the next time it is offered, the student would not be allowed to progress.

Remediation of Non-Acceptable Clinical Performance

The consequences of non-acceptable clinical performance may be: repeating the clinical experience, remediation, or dismissal from the program. Generally, if a student fails a clinical course, they are dismissed from the program and are subject to readmission requirements.

However, repeating a clinical course or remediation of unacceptable clinical performance may be allowed if the consensus of the clinical education faculty, in conjunction with the student progression committee and program director, is that the student has demonstrated significant progress toward acceptable performance or if there are other extenuating circumstances that would justify repetition or remediation. This applies only to the final year of clinical courses and not to integrated clinical courses prior to the final year. The clinical education faculty and/or the student progression committee reserve the right to deny a student the opportunity to remediate or repeat a course without being dismissed.

1. Repeating Clinical Courses: Following unacceptable performance in any of the clinical courses, the DPT faculty may allow the student to repeat a clinical experience without being dismissed, if there is sufficient evidence to believe the student would be successful and should repeat the entire course to fully demonstrate the required level of performance. Students would be assigned an “F” grade and be required to re-enroll in another section of that particular course, and would be required to pay tuition and associated fees. The student would be on academic probation until they met the terms for removing that status, including any stipulations put in place by the student progression committee or clinical instructors.

2. Remediation of Clinical Performance: If the consensus is that the unsatisfactory clinical performance may be improved to the required level by a remedial clinical experience that could be completed in a time frame no longer than 55% of the original length (typically a maximum of 8 weeks), a grade of IP (in progress) will be assigned and a remedial clinical placement will be arranged. The student would be placed on academic probation throughout the courses during that semester. The IP grade will be changed after completion of the make-up experience to a P or F grade. If the student’s performance in the make-up experience is still unsatisfactory, a grade of F will be assigned, and the student will be dismissed from the program.

Remediation of Non-Acceptable Professional Behavior/Performance

Any student demonstrating behaviors inconsistent with appropriate professional standards will be notified, and if the problem continues, may be subject to discipline or dismissal. Remediation of such behaviors is possible as determined by the student’s academic advisor and student progression committee. The student is expected to improve her/his performance in professional behaviors areas evaluated as being unacceptable according to a written plan or agreement. Failure to achieve a satisfactory rating in an outlined remediation plan may result in a need for
additional coursework, additional clinical time, delay in progression in the program, or program dismissal.

**Repeating a Course/Semester**

Repeating a course/semester may be necessary when academic performance is not acceptable.

1. **Course Sequencing:** DPT courses are offered only once a year per cohort. Therefore, to repeat the course/term in proper sequence, the student would be unable to take these courses until the following year unless they join the following cohort. If students must retake one or more courses the next time they are offered, they must apply for readmission to the DPT program in order to progress. The only exception is related to a final year clinical course when approved by the student progression committee as noted in the remediation section.

2. **Permission:** Permission of the Student progression committee, program director and Academic Dean is needed to re-enter the program. The student progression committee reserves the right to examine extenuating circumstances in each case of non-acceptable academic and/or clinical performance, before granting permission.

3. **Plan:** A plan to re-enter the program for the purpose of repeating a term will be developed by the DPT faculty. This plan may include, but is not limited to, repeating or auditing additional courses and/or demonstrating competency in clinical skills prior to continuing with clinical education courses.

4. **Grading:** The remedial grade will be used by the registrar’s office in recalculating the student’s overall grade point. The original course grade will be recorded as an “R” (repeat) on the student’s transcript.

**Requirements for Graduation**

In order to graduate the student must:

1. Satisfy all financial obligations to RMUoHP.
2. Meet satisfactory academic progress standards according to the institutional policies stated in the University Handbook.
3. Satisfactorily complete all required academic and clinical course work
4. Obtain a cumulative GPA of at least 3.00.
5. Complete all required graduation paperwork including application for graduation.
6. Pay graduation fees.
Withdrawal Policy

**Students should be aware that dropping or withdrawing from any required DPT course will automatically withdraw the student from the Program.** Due to the sequencing of the courses, the student must re-enter the program at the beginning of a semester. Due to the limited availability of openings for enrollment, there is no guarantee of reinstatement or readmission for a student who withdraws from the DPT Program.

In a case of extenuating circumstances, a student may be eligible to temporarily withdraw or take a medical leave of absence from the program with the recommendation/approval of the program director and student progression committee. More regarding the specifics of this can be found in the University handbook under “University Student Status”. A plan would have to be negotiated and agreed upon by all parties to allow for a student to resume their course of study with another cohort, and all stipulations met.

Readmission

Students who have been dismissed or had a University Withdrawal may apply for readmission to RMUoHP during the following semester, to begin or resume a course of study after two full semesters of inactivity and after satisfying any criteria for consideration for re-admittance. For example, if a student is dismissed at the end of the fall semester, they could reapply for admission during the next semester (winter) and begin when the course is offered again in the fall semester.

Those students who must apply for readmission are not guaranteed acceptance. Application for remittance is made directly to the University/program and does not include the PTCAS system. An application for readmission can be obtained through the registrar’s office.

Students readmitted following academic dismissal are returned to a status of academic probation for a period of at least one semester. All readmitted students must continue to meet any stipulations imposed by the program and must bring their CGPA to or above 3.0 by the end of the first academic semester after readmission to avoid being academically dismissed without the possibility of future re-admittance. If it is mathematically impossible (or highly improbable) for a student to achieve a 3.0 GPA after the first academic semester following re-admittance, the student will not be readmitted. The following guidelines must be followed:

1. The student will be given only one opportunity for readmission.
2. Readmission generally must occur the following year after withdrawal or dismissal. Extenuating circumstances may be considered for an extension but would generally result in a student being required to start over from the beginning of the curriculum.
3. Readmission decisions will be made by the program director in conjunction with the student progression committee. The student will be notified of the decision within 30 days of the submission of the application for readmission. The student must re-enter at the beginning of the semester offering the DPT courses that the student needs to complete in order to fulfill graduation requirements.
4. If applicable, the student may be required to take a re-entry exam and practical exam to evaluate competencies required for DPT Program courses completed prior to withdrawing from the Program. Other stipulations may also apply depending on the circumstance.
5. The student should communicate intent to seek readmission at the time of withdrawal or dismissal.
6. If applicable, all other stipulations agreed upon at the time of withdrawal, dismissal and/or probation must be met.

University Honor Code

The University is committed to maintaining an intellectual and ethical environment based on the principles of academic integrity. In this endeavor, academic integrity is essential to the success of the University and its community. Violations of academic honesty threaten the integrity of learning and scholarship and constitute serious offenses toward the entire academic community.

Students are expected to adhere both to their professional Code of Ethics and to the University’s ideals and values of truth, integrity, and personal authenticity. It is the responsibility of the student to refrain from infractions of academic integrity, conduct that may lead to suspicion of such infractions, and conduct that aids others in such infractions. It is the responsibility of the faculty, administration, and students to establish and maintain an environment that supports academic integrity.

Every student has an obligation to act with honesty and integrity, and to respect the rights of the University, its students, faculty and staff in completing all academic assignments. Academic dishonesty includes cheating, plagiarism, and facilitating infractions with respect to examinations, the proctor process, course assignments, alteration of records, computer fraud, or illegal possession of examinations. Academic dishonesty also includes being aware of another student’s dishonesty and failing to report awareness of the dishonest student’s behavior.

Definitions

*Cheating*
Cheating includes using or attempting to use in any academic exercise materials, information, study aids, or electronic data that the student knows or should know is unauthorized.

*Plagiarism*
Plagiarism is representing the words or ideas of another as one’s own. Honesty requires that any ideas or materials taken from another source for either written or oral use be fully acknowledged. The language or ideas taken from another may include but are not limited to isolated formulas, sentences, or paragraphs to entire articles copied from books, periodicals, speeches, or the writings of other students. The offering of materials assembled or collected by others in the form of projects or collections without acknowledgement also is considered plagiarism. Any student who fails to give credit for ideas or materials taken from another source, including anything downloaded from an online source without permission, is guilty of plagiarism.

*Facilitating Infractions of Academic Integrity*
Facilitating is helping or attempting to help another to commit an infraction of academic integrity, where one knows or should know that through one’s acts or omissions such an infraction may occur.

Specifically:
A student may be found to have violated the University’s Honor Code if, during or in connection with any academic project, performance, or evaluation, he or she:
- Practices any form of academic deceit;
- Refers to materials or sources or employs devices (e.g. audio records, crib sheets, books, software, web sites, other) not authorized by the faculty member for use during the academic performance assessment process;
c. Possesses, buys, sells, obtains, or uses, without appropriate authorization, a copy of any materials intended to be used as an instrument of academic performance evaluation in advance of its administration;

d. Acts as a substitute for another person in any academic performance evaluation process;

e. Uses a substitute in any academic assessment process;

f. Depends on the aid of others to the extent that the work is not representative of the student’s abilities, knowing or having good reason to believe that this aid is not authorized by the faculty member;

g. Provides inappropriate aid to another person, knowing or having good reason to believe that the aid is not authorized by the faculty member;

h. Engages in plagiarism, as defined above;

i. Permits work to be submitted by another person without the faculty members’ authorization;

j. Attempts to influence or change any academic evaluation or record for reasons having no relevance to class performance; or violates the proctor agreement.

\footnote{Definitions were adapted from a model code of academic integrity found in School Law Journal; Vol. 55, Number 8, 1978.}

**Conduct and Behavior**

RMUoHP strictly adheres to its established policies of conduct and behavior of students, faculty, and administration. These policies were established to maintain an atmosphere conducive to the effective education of students. It is recognized that administrators, PDs, faculty, proctors, research mentors, practicum mentors, and students must function as a partnership to be an effective community of scholars. In that the student body of this institution represents professionals already committed to the highest codes of behavior and ethics, it is anticipated that few problems will arise.

To clarify what constitutes high standards of behavior and conduct, it should be understood that the following types of misconduct are subject to disciplinary action including but not limited to:

- Engaging in violent, abusive, indecent, profane, or otherwise disorderly conduct.
- Engaging in abusive, profane, or otherwise foul language.
- Engaging in harassment or unlawful discriminatory activities or violating University rules governing harassment or discrimination.
- Violation of the University’s alcohol, tobacco, gun and drug-free environment policy.
- Violation of local, state, and/or federal laws on University premises or at University functions on or off campus.
- Violating the terms of any disciplinary sanction imposed for an earlier violation of this code or other board or University rules.
- Any act of behavior that interferes with, or disrupts any instruction, research, clinical activity, administration, or authorized University activity. This includes use of cellular phones, texting, or inappropriate online activities (such as shopping, chatting, or general “surfing”) during class periods.
- Placing continued, persistent, or unreasonable demands on a University official in performance of duties that impedes normal departmental functions.
- Leading or inciting others to disrupt scheduled or normal activities of the University.
- Behavior involving abuse, threats, intimidation, harassment, menacing, stalking, or coercion which puts at risk the health and safety of any person.
- Causing reasonable apprehension of harm or engaging in conduct or communications that a reasonable person would interpret as a serious expression of intent to harm.
• Interfering with any University investigation, including but not limited to tampering with physical evidence or inducing a witness to testify falsely or to withhold testimony.
• Denying a board member, administrator, employee, student, or guest freedom of movement or legitimate use of the facility, disrupting a person’s performance of institutional duties or other educational activities, or occupying any University building or property after due and legal notice to depart has been given.
• Fraternization (sexual or other inappropriate relationships) of students with faculty or department employees, as well as clinical instructors.

Administrators, faculty, employees, and students are responsible for maintaining the highest of professional standards. Consequently, questions of a disciplinary nature will be handled directly by the VP/AD, or in the case of the eDPT program, by the Graduate Program Director and Student Progression Committee (SPC) in conjunction with the VP/AD, as outlined in the eDPT program student handbook. It is understood that all individuals shall be afforded the right of due process before any type of disciplinary action can be taken against them.

Definitions

Discrimination is the act of treating others differently on a basis other than individual merit, or affording differential treatment on the basis of race, ethnicity, ancestry, national origin, religion, veteran status, gender, sexual orientation, age, or physical or mental disability, where such differential treatment is prohibited by law.

Harassment is the treatment of or behavior toward an individual or group that is abusive, hostile, intimidating, or has the intent to affect the individual’s educational performance or working environment.

Sexual harassment includes, but is not limited to, unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:
• Submission to such conduct is made either explicitly or implicitly a term or condition of an individual’s education.
• Submission to or rejection of such conduct by an individual is used as the basis for educational decisions affecting such individual.
• Such conduct has the purpose or effect of unreasonably interfering with an individual’s educational performance or creating a pervasively intimidating, hostile, or offensive environment.

Violations of Academic Integrity and Code of Conduct

The University reserves the right to terminate any student for any violations of the RMUoHP code of academic integrity and code of conduct to include the following reasons:
• cheating, plagiarism, or any form of academic dishonesty
• Unlawful possession, use, or distribution of drugs or the use of alcohol on University property or during any University activity. The University will terminate and refer for prosecution any student involved in these activities.
• any unauthorized access to, copying of, or use of confidential or proprietary information or material of the University or the University’s employees or students
• Computer fraud.
• Destroying, damaging, or taking any property of the University. The student will also be liable for the repair and/or replacement of the damaged property.
• sexual harassment and hate crimes
• insubordination
• unauthorized use of University equipment, facilities or any other property
• falsification of any document

Students have been given notice of the University’s expectations regarding academic integrity and appropriate conduct by virtue of its publication. On admission, each student signs on admission that he or she has read the University Handbook and is charged with knowledge thereof. Students are not excused from academic dishonesty or honor code violations due to ignorance. Any member of the University community may bring to the attention of a faculty member, PD, or University administrator evidence in support of an allegation that a student has demonstrated academic dishonesty, honor code violation, or code of conduct violation. The student will be afforded an opportunity to respond. If the University representative believes the student guilty of academic dishonesty or code violation, he/she will assess a penalty immediately and shall promptly report the case in writing to his or her immediate supervisor (PD for a faculty member, VP/AD for PD, and Provost for VP/AD). The penalty will be in accordance with the policy contained in this handbook and will remain as a written record in the student’s file. Each student is afforded his or her due rights and process when a complaint has been filed. No penalty will be enforced until the student has been informed of the charge, of the evidence upon which it is based, and been given an opportunity to present a defense. In general, the penalty for any act of academic dishonesty will be a failing grade in the course and the maximum penalty will be academic dismissal. With PD approval, the faculty member may recommend lesser penalties as deemed warranted.

Netiquette Guidelines

(Adapted from St. Louis University Netiquette Policy)

Netiquette is a term derived from the words "Internet Etiquette" or “Network Etiquette" which describes the use of proper manners when communicating online. Internet etiquette should be used in all areas of electronic communication including electronic mail, chatting, blogging, forums, message boards, and so on. Be courteous and respectful and always remember the “Golden Rule”. The following are Netiquette Guidelines that RMUoHP suggest be used for online communication.

1. Maintain a scholarly voice. All academic communication (including emails) should be well written, thoughtful, and checked for errors (spelling, punctuation, etc.). Be aware that some faculty will require Forum postings in APA or AMA format.

2. Think of your comments as printed in the newspaper. Your online comments will be seen, heard and remembered by others, therefore think before you post. Before you make an emotional, outrageous, or sarcastic remark online, think about whether or not you would care if it was seen in your local newspaper.

3. Be polite and professional. When communicating online, it can be difficult to gauge a writer’s emotion. Unless a web camera or microphone is used, the writer’s expression or emotion is difficult to determine. Use positive language and ask others to clarify messages for better understanding when needed. Avoid the use of CAPITAL LETTERS, excessive exclamation points (!!!), acronyms, and emoticons (;D) in your academic communications.

4. Avoid negativity. You can challenge ideas and the course content, but avoid becoming negative online. When you choose to disagree, disagree politely. When you disagree politely, you stimulate and encourage great discussion. You also maintain positive relationships with others with whom you may disagree on a certain point.
5. Don't disrupt. Online dialogue is like conversation. If there is a dialogue or train of thought going on, join in, add to it, but, if you have something entirely different to bring up, wait or post it in another thread.

6. Obey copyright laws. Do not steal other people’s work, ideas, or arguments. Include references, avoid sweeping generalizations, and support your statements/discussion with the literature.

7. Help Internet Newbies. Be patient and helpful with others during online communication. Remember everyone was a novice user at one time or another.

See the University Handbook for additional information regarding the honor code, conduct and behavior.

APTA Code of Ethics
It is also expected that RMUoHP DPT students and faculty will comply with the ethical standards of the profession. These are as follows:

Code of Ethics for the Physical Therapist
HOD S06-09-07-12 [Amended HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24] [Standard]

Preamble
The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.
2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive, nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.
This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal).

Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

**Principles**

**Principle #1:** Physical therapists shall respect the inherent dignity and rights of all individuals.  
*(Core Values: Compassion, Integrity)*

1A. Physical therapists 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 therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

**Principle #2:** Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.  
*(Core Values: Altruism, Compassion, Professional Duty)*

2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.

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

2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.

2D. Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.

2E. Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

**Principle #3:** Physical therapists shall be accountable for making sound professional judgments.  
*(Core Values: Excellence, Integrity)*

3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.

3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.
3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.

3D. Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.

3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

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

*(Core Value: Integrity)*

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

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

4C. Physical therapists shall discourage misconduct by healthcare professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D. Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.

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

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

**Principle #5:** Physical therapists shall fulfill their legal and professional obligations.

*(Core Values: Professional Duty, Accountability)*

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

5B. Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.

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

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

5E. Physical therapists 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.

5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.
**Principle #6**: Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors.

*Core Value: Excellence*

6A. Physical therapists shall achieve and maintain professional competence.

6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, health care delivery, and technology.

6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.

6D. Physical therapists shall cultivate practice environments that support professional development, lifelong learning, and excellence.

**Principle #7**: Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society.

*Core Values: Integrity, Accountability*

7A. Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.

7B. Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.

7C. Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.

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

7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.

7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/clients.

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

*Core Value: Social Responsibility*

8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.

8C. Physical therapists shall be responsible stewards of healthcare resources and shall avoid overutilization or underutilization of physical therapy services.

8D. Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.
Additional DPT Program Policies

Attendance

The purpose of the DPT Department Attendance Policy is to employ a curriculum that develops professional physical therapists. It is expected that students approach attending class in the same manner as arriving to a clinical setting with a patient caseload. One would not show up late or miss a day of work without notice because of the burden it would place on the clinic, colleagues, and patients with which one works. Therefore, on-time attendance is required at all class sessions and labs unless it has been explicitly stated otherwise in the course syllabus.

Learning experiences in the curriculum are arranged sequentially to ensure that new information, knowledge, and skills are integrated with previously introduced material. In addition, the PT curriculum includes significant opportunities for collaborative learning, where interaction between and among students and faculty are critical components of the students’ learning. Therefore, these learning experiences cannot be repeated, and student attendance is a professional responsibility.

Classroom Absence

In the event of an absence, or where an absence is anticipated, it is the STUDENT’S responsibility to notify and explain the absence to the department directly or indirectly prior to the scheduled class or as soon as possible. Methods of communication include (in order of preference) emailing dptprogram@rm.edu, phoning the department administrative assistants, texting the program director and course instructor, or communicating with a classmate to relay the information to the course instructor prior to the class start time (least desirable). If the department is not contacted regarding the absence, the absence will be considered unexcused.

1. A student may be excused from class for illness, emergencies, a death of an immediate family member, marriage of an immediate family member, birth of the student’s child, or military or civic service requirements. Students will not be granted more than two consecutive days off for any reason other than illness or required service. All other absences are unexcused unless permission from each professor and from the program director has been obtained.
   a. Students will not be excused for the following reasons: Family vacations/reunions, continuing education courses, the wedding of the student, or job interviews. It is expected that students plan vacations and personal weddings during scheduled semester breaks.

2. An unexcused absence is defined by not seeking instructor’s permission or an unknown absence. Unexcused absences are not allowed and will result in a referral to the student progression committee to recommend decisions on student status and ability to progress. If an absence in question is verified as unexcused, the student will be placed on probation for unprofessional behavior. A second unexcused absence will be reviewed by the student progression committee and may result in an additional warning, additional probation, or dismissal from the program. Any student with a third unexcused absence will be dismissed from the program.
3. **Lecture/Lab/Exam Make-up**: Upon return from an excused absence, the STUDENT must check with the course director/teacher to make sure the absence was recorded as excused, and to make-up any testing, lecture, or lab missed. The student is responsible for all information presented in each class, whether present or not. Individual instructors determine whether make-up work is allowed. Refer to the individual course syllabus for specific information on making up points or time missed.

4. Online courses require appropriate engagement in addition to any assignments or assessments. Students are responsible to know and adhere to the expectations regarding engagement for each course. Please refer to the individual course syllabus for all course requirements and expectations.

5. Please be aware that some courses are taught over 2-3 days for 8 hours each day. An unexcused absence during a course such as this may cause a student to miss a significant portion of the course, making remediation unlikely. The professor(s) will refer the matter to the student progression committee to recommend decisions on student status and ability to progress. The individual instructor reserves the right to require a student to repeat the course the next time it is offered.

**Punctuality for Class**

1. Students are expected to arrive to class on-time and prepared. It is the student's responsibility to adjust their travel time to suit anticipated weather conditions, train or bus schedules, etc., to ensure that the student arrives at school on time for class.

2. Leaving class or lab early and not returning is considered an unexcused absence.

3. Three (3) unexcused tardies is considered equal to an unexcused absence.

**Clinical Education Absence**

If you find that you will be late or cannot attend a clinical education experience, due to an EMERGENCY OR ILLNESS, you are responsible for contacting the clinical instructor/faculty (Cl) **AND the Director of Clinical Education (DCE)** prior to the start time for the clinical experience (even if it is at an hour that may be viewed as too early or too late in the day).

It is expected that ALL absences and ANY time missed due to tardiness or other reasons be made up at the discretion of the DCE. It is the student's responsibility to make arrangements with the clinical instructor/faculty to make up the time missed; the DCE will assist in those arrangements, if necessary. Students should refer to the Clinical Education Handbook for additional detail on attendance policies specific to clinical education experiences.
Appearance and Attire

Students are expected to demonstrate professional behaviors, attitudes and appearance at all times. Students are required to wear attire which conforms to the image of the professional physical therapist. The DPT Program is a setting where students, faculty, guests, patients, other professionals, and the general public form an impression of us, based on our appearance and conduct. Casual, extreme, or “faddish” clothing, hairstyles, manner, or appearance are not permitted in the classroom, library, laboratories and/or clinical facilities.

Students should be well groomed. Dress and appearance should reflect modesty and cleanliness. Students are not permitted to wear shorts, t-shirts, flip-flops/open toe, or similar styles of unprofessional footwear, jeans, sweat shirts, sleeveless shirts, short skirts, low rise pants that expose flank skin, or warm-up pants at any time during normal working hours with the exception of laboratory clothing for lab activities only. See the section on laboratory policies for specifics.

In general the following professional attire is expected:

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dress shirt or polo shirt (tie optional) (no T-shirts)</td>
<td>Modest blouse/shirt long enough to tuck in (no T-shirts and no low-cut necklines)</td>
</tr>
<tr>
<td>Dress pants (no jeans)</td>
<td>Dress slacks (no jeans, yoga pants, leggings etc..)</td>
</tr>
<tr>
<td>Dress shoes (no sneakers, boots or sandals)</td>
<td>Enclosed low-heeled shoes (no sneakers, boots, sandals)</td>
</tr>
</tbody>
</table>

Hair must be clean and neat and must be fashioned as to not fall forward or over the sides of the face when working with patients/clients or otherwise interfere with patient care. If worn, beards and mustaches must be clean and neatly trimmed. Nails will be kept short and trimmed in order to enable easy cleaning, prevent puncture of gloves, and prevent injury to the patient/client. Wearing of fake nails is not allowed. Students should not wear excessive fragrance, makeup, or jewelry. Neat personal grooming and hygiene are expected.

Any tattoos or clothing that may be considered obscene, vulgar, or offensive must be covered or changed. Tattoos and/or piercings should not be offensive or impede the ability of the student to effectively function in a clinical setting. Gages of any size are not considered professional dress and are not allowed. Each clinical site has the support of the school to request a student remove any piercing or cover the area of the tattoo per their site regulations. If the clinical setting has different dress requirements than the Department, the student should follow the clinical setting guidelines (i.e., no white laboratory coats in a pediatric setting). Classroom attire (live or virtual) when there is a guest faculty or patient present is the same as in the clinical facility (professional attire).

Faculty, and ultimately the program director, have final say on the determination of whether a student is compliant with this policy.

Corrective Action in Regard to Student Attire

Students in violation of the dress requirements will first receive a verbal warning with corrective instruction. If the same student breaks the dress code a second time, regardless of the type infraction, he/she will be required by the program director to meet with the student progression committee to receive a second warning and/or to have an opportunity to defend the infraction. A
third violation will result in the student being sent back to the student progression committee to discuss appropriate action related to professional behaviors.

**Cell Phone Policy**

Students are not allowed to use cellular phones, beepers, or text messaging in any manner that interferes with the education process. In general, all such items should not be used during lecture or lab sessions and will not be allowed during exams or other assessments. Any use of such technology to facilitate the education experience is allowed solely according to instructor discretion.

**Class Cancellation**

In the event a faculty member must cancel a class session it is the faculty member’s responsibility to notify the Program Director and/or the Academic Dean. The Program Administrator or Academic Dean will post a class cancellation notification for students outside the scheduled classroom. The Program Director will also notify the class via e-mail if there is sufficient time. If the class session is to be made up, it is the responsibility of the faculty member to schedule the make-up session in communication with those involved (students, room scheduler, etc.).

**Class Representatives**

Each admitted cohort of DPT students elects a class Representative. New elections are held each year, within the first Semester. Sample duties of the class representatives may include:

1. Serve as a liaison between the DPT Program Administrator and faculty and your classmates. You can provide students with a way to give feedback to the faculty anonymously if desired. This may involve attendance at DPT faculty meetings to provide a brief report on the student feedback, if needed.

2. Solicit feedback from the class for items to be discussed by DPT Program Advisory Committee. The Advisory Committee functions include curriculum review, textbook review, advising the program on trends in the physical therapy profession, and advising the faculty on issues as needed.

3. Oversee organization of class events such as review sessions, service projects, or social events.

4. Potential service on the Graduate Student Council.

5. Serve as a representative to the Utah Physical Therapy Association.

**Clinical Education Policies**

Clinical rotations and internships are an integral part of the curriculum and may require that a student temporarily relocate. **Students may, and most likely will, have to leave the local area, or the State, for any OR ALL clinical affiliations.** Students are responsible for the cost of the travel and other related expenses. Students will be required to meet all requirements outlined in the Clinical Education Handbook on “Immunizations, Certifications, and Related Requirements” by the conclusion of their second semester. Failure to comply with these requirements can lead to dismissal from the program. Students are responsible to read and abide by the policies, procedures and standards in the Clinical Education Handbook. This information is available on the website.
Criminal Background Investigation/Drug Screening

Many states require that individuals working in health care facilities must consent to and be cleared through a criminal background investigation and/or a drug screening. This may also be a policy of a corporate entity or individual facility depending on the practice setting. Usually state agencies conduct these investigations and oftentimes a list of problematic offenses is available. Many state professional licensing agencies require reporting of misdemeanor and felony charges.

All students participating in clinical education at RMUoHP in the DPT program must undergo a criminal background check prior admission to the program. This will be at the student’s expense. More than one may be required for participation in clinical affiliations, depending on the individual facility’s policies. Students should be aware that a history of criminal offenses will likely impact the ability of a student to participate in clinical education and/or obtain employment in the healthcare field. If a student is unable to complete clinical education, they will be dismissed from the program.

Students may be required to undergo drug screening prior to clinical education depending on individual facility policy. This would be at the student’s expense. Should a student test positive for an illicit or illegal substance, the student would not be allowed to participate in clinical education and would be referred to the program director and school administration for possible disciplinary action.

Employment while enrolled in School

Due to the exacting requirements of physical therapy course of study, it is unwise for students to expect to meet their expenses by outside work. Most semesters in the DPT program include between 15 and 18 credit hours, requiring approximately 50 or more hours per week of learning activities (including class, lab, and time for studying/assignments). RMUoHP does not specifically forbid such additional duties but does definitely discourage them. The Program, furthermore, reserves the right to indicate that such work be discontinued, if in opinion of the faculty, it interferes with the satisfactory completion of prescribed academic activities.

Employment Opportunities Following Graduation

Currently, physical therapists are commonly employed by nursing homes, hospitals, home health agencies, rehabilitation centers, outpatient facilities, private physical therapy offices, fitness centers, public or nonpublic schools, academic institutions and industrial settings, and demand is high. The Program will post current listings that are sent to the school. There is no guarantee by RMUoHP of employment, implied or otherwise.

Health Insurance

DPT Program students are responsible for all of their own health care costs during their education at RMUoHP. DPT program students are required to carry and maintain personal health insurance during their entire tenure at RMUoHP. Students are required to submit a Health Insurance Statement and sign a waiver assuming all financial responsibility for any illness or medical bills that occur while enrolled (found in Appendix) and are responsible for updating this information regularly.

Health Testing
DPT students are required to sign a health statement certifying that they are in good health and can participate in all required activities related to their education, including performing all activities delineated by the technical standards throughout their time enrolled in the DPT program. It is recommended, although not required, that they obtain a yearly physical exam from a physician.

In addition, students are required to be CPR certified (health care provider level) and have completed certain other health testing and immunizations (such as MMR, TB, Hepatitis B etc…) prior to the first day of clinical experiences, with some being required before entering into the program. A current list and deadlines is available from the department. Documentation of immunizations is kept by the program. Refer to the DPT Program Clinical Education Handbook for further information is these requirements relate to clinical education experiences.

**Potential Health Risks of Students**

**Student Safety/Injury**

During the DPT program, students are subject to known and unknown health risks. These may include exposure to people with infectious and communicable diseases, chronic and degenerative diseases, mental illness, and risks attendant to the work environment. The Program makes every effort to protect the safety and interests of the student. Basic instruction in prevention procedures and in the application of reasonable and prudent personal habits is provided, which can serve to limit unnecessary exposure and constitute a measure of safety for students. Ultimately, it is the student’s responsibility to apply these procedures and to take appropriate steps to protect their fellow students and themselves.

As a condition of enrollment in the Program, students are required by the University to show proof of health insurance and completion and submission of immunizations and laboratory testing. Further, students are expected to abide by the University’s policies regarding risk exposure management.

During PT clinical experiences, in the event of an accident resulting in student injury, the student should immediately notify the clinical instructor of the accident and follow the policies of the facility including completing the appropriate incident report/documentation. Expenses related to student illnesses or injuries occurring during a clinical rotation are covered by the student’s personal health insurance, which must be maintained throughout the clinical program.

**Laboratory Policies and Procedures**

The DPT laboratory facilities provide an environment suitable to demonstrate, learn, and practice physical therapy examination, evaluation, and treatment procedures and techniques in a setting that simulates a clinical patient care setting. As such, it is expected that students will maintain the laboratory and display professional behaviors.

**Laboratory Attendance Policy**

Your instructors spend a great deal of time preparing each laboratory lesson for you. Make sure you attend every session. The experiences you will gain are often difficult to make up later and can never be duplicated by borrowing someone else’s notes. Labs will begin on time. See specific policies regarding attendance and tardiness.
We expect you to attend every class. Please do not, however, expose fellow students and program faculty or potential clients to illness. If you are ill or legitimately unable to attend a lab, contact your instructor in advance so that other arrangements can be made.

**Lab Participation Policy**

All of us expect our personal health care practitioners to be very skilled and to give us the best care possible. Your patients and clients will expect the same of you. Take advantage of every opportunity to practice and develop the skills you will need to become a valuable health care worker.

Some skills are not easily learned and will require additional practice. Please arrange extra lab time with your instructor to ensure that you develop those skills. Certain skills and use of equipment may require supervision by a faculty member. Labs are available only with faculty supervision and/or approval. “Open lab” hours, times other than your normal lab sessions, will be made available for all laboratory courses as needed. These open laboratory sessions are planned each term, as deemed necessary, to provide additional laboratory practice, demonstration, and remediation opportunities for students. The times for each open laboratory period will be announced at the beginning of the semester. In addition, special open laboratory sessions may be held prior to practical examinations to provide review of material that will be tested. Open laboratory hours may be subject to change.

It is both necessary and customary that physical therapy students participate as both healthcare worker and as subject or patient simulator. Common laboratory activities may include observation, and palpation (touching) of various parts of the body, exercise, application of various physical agents and manual techniques. It is anticipated that every student will participate as both a physical therapist simulator and patient simulator and will work both with same sex and opposite sex partners. Details of the clinical activities that you will be asked to participate in may be obtained from course instructors and course syllabi. It is the student’s responsibility to become familiar with the clinical procedures and laboratory activities for each course and to resolve any concerns you may have about those procedures with your instructor. Any concerns regarding this must be discussed with the instructor, student advisor and program director for any consideration of exceptions to this policy. Prior to participation in lab activities, all students must sign and return the following forms found in the Appendix at the end of this manual to the program. Make sure that you read each form carefully and that you are prepared to participate fully in your laboratory experiences while at RMUoHP:

- Health Insurance Statement
- Student Release, Informed Consent and Waiver
- Multimedia release form

**Personal Health Requirements for Lab Participation**

All physical therapist students should maintain proper hygiene and good health habits. This means that students should not smoke, take illegal drugs or abuse medications and must adhere to a high standard of good grooming and personal cleanliness.

If a student has a history of a serious communicable disease, it should be reported to the instructor at the beginning of the lab course, if it has not already been reported. It is the desire of each instructor and the Program Director to ensure the safety of all program students and it is therefore vital that they be made aware of any and all potential health risks.
Students must notify instructors of any health or physical issues that would affect their own or other student’s learning and/or safety. Students with special personal health needs or Americans with Disabilities Act concerns must inform their instructor and the Program Director in writing at the beginning of this lab course. Additional documentation may be required at the discretion of the instructor and program director.

**Dress and Grooming Standards for Lab Participation**

Laboratory dress standards vary between courses and you will be instructed accordingly in individual course syllabi. Typically, shorts and tank tops are commonly required for lab sessions. Dress should be modest; however, students must be able to expose areas for observation and palpation applicable to the specific laboratory experience.

Loose fitting gym shorts with appropriate undergarments are required for all students. Females shall wear sports bra when upper quarter or trunk laboratories are held. **One set of laboratory attire should be available on campus at all times.** Students shall remain in the laboratory or in transit from the restroom or dressing room while in laboratory attire. Students should not roam around the building in lab attire.

Hair must be clean and neat and must be fashioned as to not fall forward or over the sides of the face when working with patients/clients or otherwise interfere with patient care. If worn, beards and mustaches must be clean and neatly trimmed. Nails will be kept short and trimmed in order to enable easy cleaning, prevent puncture of gloves, and prevent injury to the patient/client. Wearing of fake nails is not allowed. Students should not wear excessive fragrance, makeup, or jewelry. Tattoos, piercings, and jewelry should not be offensive and must not interfere with participation in activities, both in class and in lab. Any tattoos or clothing that may be considered obscene, vulgar, or offensive must be covered or changed. Gages of any size are not considered professional dress and are not allowed.

**General Lab Policies**

RMUoHP is dedicated to providing you with a clean, professional and safe laboratory experience. All faculty, staff and students must work together to maintain our laboratories. Please read and comply with the following rules:

1. No food or drink is allowed in any lab at any time.
2. Maintain a professional attitude and conduct yourself as you will in the clinic.
3. Cell phones are not allowed to be turned on in labs. Phones distract others and may interfere with electronic equipment.
4. Store your personal items in a safe place such as in a locker while in lab.
5. All waste materials must be promptly placed in an appropriate waste receptacle.
6. Maintain safety precautions at all times.
7. The laboratory will be open during all scheduled course laboratory periods.
8. Properly clean and store all equipment after each session.
9. No student will be allowed to use any modality or electrical equipment without prior training and supervision by a faculty member. Students found using any equipment in the laboratory without supervision will be subject to immediate disciplinary action.
10. Other activities in the laboratory such as skills practice, meetings, or general study are allowed so long as the room has not been scheduled/reserved by the university. If the
University needs to use the room for other purposes, even if not scheduled, student should relocate to other areas for study.

11. It is the Program’s expectation that the lab will be maintained in a safe, clean, and orderly manner. Out of respect and as a professional responsibility to all who use the labs, everyone must: 1) replace equipment in its proper location; 2) fold and put away linens and pillows; and 3) put refuse in receptacles available. By taking a few minutes to do the above, the learning environment of the labs will be enhanced for all users.

Guests in RMUoHP Laboratories

Outside guests can be a valuable resource to the learning experience in our lab classes, both as guest lecturers and as volunteer subjects. However, no guests are allowed without the specific consent and supervision of your instructor. Students are NOT physical therapists and may not treat any person without direct supervision from a licensed physical therapist. Such activity would be considered practicing without a license and is illegal. If a student engages in illegal practice, they will be subject to discipline. In addition, by offering treatments in non-lab and outside of classroom activities, the student is subjecting themselves and the university to liability issues. Students are allowed to practice skills on each other that they have taught by faculty in class/lab, although, as noted above, some practice of skills requires supervision of a faculty member, particularly with certain types of modality equipment.

Make sure all guests are warmly received and are treated with respect while at RMUoHP. Guests who are to participate in clinical activities must sign the Guest Participant Informed Consent Form. If the guest will be photographed or electronically recorded during their participation, they must also sign the Multimedia Consent/release Form. Both forms are located in the Appendices.

Use of Chemicals and Lab Substances

Liquids and substances used in laboratory exercises must be used with caution, safely stored and properly marked. Each chemical or substance in the lab has a Material Safety Data Sheet (MSDS) on file at a location identified by your instructor. MSDSs provide specific information pertaining to each hazardous chemical. You should familiarize yourself with the properties, precautions and risks of these substances. Universal precaution standards are to be followed at all times, including the use of gloves when appropriate. * Please comply with the following:

a. Follow all directions for use of substances exactly as prescribed.
b. Be aware of all precautions and contraindications for use before opening any container.
c. Tightly close all containers immediately after use.
d. Return substances to their properly labeled storage location after each use.
e. Inform the instructor of supplies that need replenishing.

Note: A small number of people develop an allergic reaction to latex gloves. You may read about latex sensitivity in the MSDS file. If you suspect latex sensitivity, inform your instructor.

Use of Human Subjects and Informed Consent

Individuals who serve as demonstration or practice subjects for any component of the DPT Program will acknowledge their voluntary participation after being briefed regarding the contraindications, risks and benefits of the physical therapy procedure to be performed. Written informed consent will be obtained from any person, student, or patient volunteer who participates in a demonstration or practice session on the University Campus (forms located in the Appendices
of this handbook). Informed consent will be obtained from patients/clients in the clinical setting appropriate to facility policy. All patients have the risk-free right to not participate in clinical education.

**Liability Insurance**

RMUoHP provides liability insurance (as a part of tuition and fees) on each full-time student for incidents which occur during program education related activities, including clinical education. See the Clinical Education Handbook for more details.

**Licensure**

It is the goal of the RMUoHP DPT program to assist students in every way to prepare to be able to practice as physical therapists upon graduation. A part of this is preparation to become licensed as a physical therapy professional.

Licensure or registration is not required for student clinical education experiences. However, following graduation, licensure of physical therapists is required by every state. Complete information on practice acts and regulations may be obtained from the individual state licensing boards. Candidates should contact the licensing organization in the respective state to determine work requirements. Graduates of the RMUoHP DPT Program will be encouraged to take state and nationally recognized licensing examinations as soon after graduation as possible. Further information regarding the national physical therapy examination (NPTE) can be obtained at www.fsbpt.com.

**Medical Conditions, including Pregnancy**

Immediately upon medical confirmation, any medical condition that may impact the ability of a student to safely and fully participate in the educational experience should be reported to the student’s advisor, DCE, and/or Program Administrator. This will allow planning of a learning experience that will ensure maximum safety to all concerned.

**Professional Organization Membership**

All RMUoHP DPT program students are required to become members of the American Physical Therapy Association (APTA) and maintain membership throughout their education at RMUoHP, AND provide documentation to the program. This is at the student’s own expense. Failure to meet this or any other program requirements may result in dismissal from the program.

The APTA is the national organization dedicated to serving the physical therapy profession. By becoming a member, students gain access to a large number of benefits and professional opportunities. Various courses within the program require access to and use of “members only” resources. One significant benefit is access to the Physical Therapy Journal (which will be needed for many course assignments) and online access to research resources with many full text articles which may not be available through the University databases. The student will gain automatic membership in the Student Assembly which functions as a forum for future Physical Therapists and Physical Therapist Assistants. The National Student Conclave also provides the student with access to the latest trends and issues in the profession. Information about how to apply for membership will be provided to each student at the beginning of the DPT Program. Information may also be found on the Internet at http://www.APTA.org.
Students are also encouraged to become active in the Utah State Chapter of the APTA. The chapter typically sponsors two conferences, one in the spring and one in the fall, and offers other opportunities for professional service, networking, skill development and promotion of the profession. This is a very useful way for the student to become more acquainted with the physical therapy profession. There are often opportunities specific to students to get involved in these state conferences.
University and Other Policies/Information

University level policies, procedures, and standards can be found in the University Handbook. Please refer to the University Handbook for clarification on any of the following topics.

Alcohol and Drug Awareness

RMUoHP abides by the Drug-Free Schools and Communities Act of 1989 (Public Law 101-226). The University is committed to the promotion of healthy behaviors. Therefore, tobacco use in any form is not permitted inside any University building. There is a smoking area available on the western side of the building. Students and employees are expected to follow all smoking laws as dictated by the State of Utah.

The University supports the Drug-Free Schools and Communities Act and Drug-Free Schools and Campuses Regulations in preventing the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees. Alcoholic beverages and illegal drugs are not permitted anywhere on the University campus, including the grounds and parking lots. Alcohol use is not permitted by students or faculty while attending class-related activities associated with the University (i.e., clinical settings, research data collection, etc.).

This policy pertains to both academic and clinical education. Any students in violation of this policy may be terminated from their clinical education experience and suspended from the DPT Program. At the request of the clinical facility, students may have to participate in voluntary drug testing.

Campus Security and Student Safety

At the time of orientation students are informed of emergency procedures at RMUoHP. Emergency exits are reviewed as well as posted next to the door in each classroom. As per title II of Public Law 101-542 “The Crime Awareness and Campus Security Act of 1990,” crime statistics on RMUoHP Campus are published periodically for student body review.

In the case of an emergency, the instructor should first be informed followed by the receptionist at the front desk. At that time, the Emergency Medical System (911) will be activated, and the appropriate University administrator notified.

Students should follow the safety guidelines in the University Handbook and follow all outlined policies and procedures. In general students should adhere to the following guidelines:

Emergency Evacuation Instructions:

If it becomes necessary to evacuate the building due to a power failure, threat of fire, smoke or other dangerous situations, do the following:

1. Refer to the evacuation map(s) located in each lab and classroom.
2. Move carefully and calmly to the nearest exit and evacuate to the designated meeting area.
3. Alert others and take them with you.
4. Do not attempt to re-enter the building until told to do so.
What to Do In The Event of a Fire

1. Pull the nearest fire alarm
2. Call or alert the front desk, give the receptionist the exact location of the fire. She will call 911.
3. Inform others in the immediate area.

IF IT’S SAFE TO DO SO, attempt to put the fire out using the nearest fire extinguisher. There are generally three types of extinguishers:

- Type A is used for ordinary combustibles such as paper, wood and fabric.
- Type B is used for flammable liquids such as gasoline or alcohol.
- Type C is used for all electrical fires

RMUoHP fire extinguishers may be used on all fires and are placed in wall-mounted metal boxes with glass doors located in hallways, usually close to exits and near fire alarm stations. To use an extinguisher, hold it upright and:

- P - Pull the pin
- A - Aim the nozzle at the base of the fire
- S - Squeeze the trigger
- S - Sweep from side to side at the base of the fire

CAUTION:

- Fight only small fires and those with limited smoke and fumes.
- Make sure you have access to a safe and quick exit.
- If you have the slightest doubt about whether or not you should fight the fire, DON’T! Close the door to contain the fire and leave immediately. If you can’t leave, line the cracks around the door with wet towels and wait for the Fire Department.

What to do in the event of lab equipment failure or malfunction
RMUoHP expends every effort to make sure that all laboratory and classroom equipment is safe and functioning properly through regularly scheduled maintenance and, where appropriate, calibration procedures. However, if any equipment malfunction is experienced:

1. Unplug or turn off the equipment immediately.
2. Place a temporary “Out of Order” sign on the equipment so that others do not attempt to use it prior to you notifying the school personnel.
3. Inform your lab instructor or Program Director as soon as possible.

What to do in the event of a liquid spill

1. Alert others in the immediate area
2. Inform your instructor
3. Don appropriate protection e.g. gloves, mask and eye wear.
4. Place appropriate absorbing material over spill and allow to absorb
5. Place saturated material in plastic bag and place bag in proper waste receptacle.
6. Clean area with appropriate cleaning agent and wipe dry.
7. Properly dispose of cleaning materials and gloves in waste receptacle.
What to do in the event of a medical emergency

1. Call for help, alert the instructor, have someone call 911
2. If you are trained, follow basic First Aid procedures:
   - Is the person breathing? If not, tilt the head, clear the airway and breathe for them.
   - Is the heart beating? If not, begin CPR. Use the AED if appropriate.
   - Elevate the legs and support the neck, keep them warm.
   - Reassure them while you wait for medical help.

What to do if you are injured

1. Immediately inform your instructor
2. Follow the instructor’s directions to receive care and to fill out an Incident Report, available at the front desk.
3. The nearest emergency medical facility is:
   Utah Valley Regional Medical Center
   1034 North 500 West
   373-7850
   (The Emergency Entrance is on the east side of the hospital)
4. A First Aid Kit is located in the south lab and another is available at the front desk.
5. If you are injured but choose not to seek professional care, you must sign the Waiver of Medical Care Form in the Appendix.

General Suggestions for Preventing Personal Injury

Healthcare workers often suffer from musculoskeletal complaints because of the nature of our work. We spend a great deal of time leaning over and moving patients, using equipment and completing paperwork.

1. Learn and follow basic principles of good body mechanics. Use good posture while sitting in class, working in labs and during activities of daily living. Always lift correctly.
2. Take good care of yourself. Eat right, get enough sleep and exercise regularly. Working in healthcare can be an athletic event.
3. Handle all equipment, instruments and substances with caution and respect.
4. Think Safety and Act Safely!

Infection Control Policies

Equipment

1. All plinths and treatment surfaces will be cleaned using a bactericidal agent at least once a week.
2. Other equipment (e.g., ultrasound, wheelchairs) will be cleaned using a bactericidal agent as needed, but at least yearly.
3. Whirlpools will be emptied and cleaned using a bactericidal agent at the end of each day of use.
Linen

Linens and towels must be changed after each use and all soiled linens must be promptly placed in the designated receptacle for laundering.

Responsibilities

1. Hand washing is the single most effective means of controlling the spread of infection. Remember to wash your hands frequently, using proper hand washing procedures.
2. Any student with a known communicable infection will not be a patient in the whirlpool, will place all linen they come in contact within the laundry basket, and will clean treatment surfaces.
3. Use protective barriers (e.g., gloves, masks, eye/face protection and lab coats) if there is any possibility of exposure to body fluids, chemicals, infection, or contaminated substances.
4. The faculty member using a lab space will be responsible for assuring the infection control policies are enforced in their lab.

Blood Borne Pathogen Program

*Purpose:*
All DPT students will receive training in Universal Precautions/Blood Borne Pathogens. It is the responsibility of the instructor to ensure that these procedures are modified to accurately reflect current practices. This infection control plan complies with OSHA requirement, 29 CFR 1910.1030, Blood Borne Pathogens.

All DPT students receive training in Universal Precautions/Blood Borne Pathogens in the first semester PT 704 Intervention 1.

*Procedures for Reporting and Record Keeping:*

Any reports required by OSHA occurring on University property will be maintained by the University. On clinical, all documentation should follow facility policy. All reports (training certificates, notice of HBV Vaccinations, and Exposure Reports) will be maintained by the program or the University.

1. **Hepatitis-B Virus (HBV) Vaccinations:** HBV vaccination is mandatory for most clinical sites. Any exceptions must have a qualified, sign waiver.
2. **Post Exposure Treatment and Notification Procedures:** Should an RMUoHP employee or student become exposed to HIV/HAV/HBV, the individual will report the exposure to their supervisor or Program Administrator. Exposed individuals must follow the recommendations provided by a medical doctor or by the U.S. Public Health Service. During all phases of Post Exposure, the confidentiality of the affected individual and exposure source will be maintained on a "need to know basis". RMUoHP will use the Blood-Borne Pathogens Exposure and Treatment form to document the exposure.
General Procedures:

RMUoHP personnel and students must follow the following procedures when in laboratories:

1. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a potential for exposure to any health hazard.

2. Food and drink must NOT be stored in refrigerators, freezers, or cabinets where blood or other potentially infectious material is stored or in other areas of possible contamination.

3. Gowns, aprons, or lab coats must be worn whenever there is a possibility that body fluids could splash on skin or clothing.

4. Gloves must be made of appropriate disposable material, usually intact latex or vinyl. They must be used in the following circumstances:

5. When the individuals have cuts, abraded skin, chapped hands, dermatitis, or similar conditions.

6. When examining abraded or non-intact skin of a patient or student with active bleeding.

7. While handling blood or blood products or other body secretions during routine laboratory procedures.

8. Faculty, staff and students must wash their hands immediately, or as soon as possible, after removal of gloves or other personal protective equipment and after hand contact with blood or other potentially infectious materials.

9. All personal protective equipment must be removed immediately upon leaving the laboratory area, and if this equipment is overtly contaminated, it must be placed in an appropriate area or container for storage, washing, decontamination, or disposal.

10. Contaminated clothing must not be worn in clean areas or outside the building.

11. All procedures involving blood or other potentially infectious agents must be performed in a manner that will minimize splashing, spraying, and aerosolization.

12. Medical Wastes
   - Medical/infectious waste must be segregated from other waste at the point of origin.
   - Medical/infectious waste, except for sharps (i.e., razor blades, broken glass, needles, etc.) capable of puncturing or cutting, must be contained in double disposable red bags conspicuously labeled with the words "INFECTIOUS WASTE - BIOHAZARD."
   - Used needles or other sharps (razor blades, broken glass, scalpels, etc.) must not be sheared, bent, broken, recapped, or re-sheathed.
   - Infectious sharps must be contained for disposal in leak-proof, rigid puncture-resistant containers. Infectious waste contained as described above must be placed in reusable or disposable leak-proof containers that are conspicuously labeled with the words "INFECTIOUS WASTE – BIOHAZARD". Biological wastes that do not contain radioactive or hazardous substances may be disinfected by steam sterilization (autoclave) then disposed of in the regular trash.

13. Cuts
   - If an individual sustains a needle stick, cut, or mucous membrane exposure to another person’s body fluids he/she must report the incident immediately to the Instructor or Program Administrator who must in turn file an incident report with RMUoHP.
14. Blood Exposure
   - All students exposed to human blood and blood products must report to the Program Director for information.

FAILURE TO COMPLY
All of the above guidelines, policies and procedures, and expectations are designed to foster each student’s sense of responsibility in preparation for employment as an entry-level physical therapist. Failure to comply with these guidelines and policies and procedures or failure to meet these expectations may result in failure of the clinical course and subsequent dismissal from the Program.

Library, Resource Center, and Bookstore
The University provides students and faculty with access to the physical and electronic medical library collection of reference texts and journals. The Library and Resource Center is staffed by a medical librarian and library assistant, whom faculty and students may contact for research assistance. This facility is open during normal business hours and at the student’s request.

The Resource Center contains many books and journals, as well as Internet, copying, and printing capabilities, and room for study and group meetings. The library staff may be reached at library@rm.edu. Articles may be requested via articlerequests@rm.edu. For more information regarding the learning resource center and related services, please refer to the University Handbook.
The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. They are:

1. The right to inspect and review the student's education records within 45 days of the day the University receives a request for access. Students should submit to the registrar, dean, head of the academic department, or other appropriate official, written requests that identify the records(s) they wish to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

2. The right to request the amendment of the student's education records that the student believes are inaccurate or misleading. Students may ask the University to amend a record that they believe is inaccurate or misleading. They should write the University official responsible for the record, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

3. The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent. One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.

4. The right to file a complaint with the U.S. Department of Education concerning alleged failures by Louisiana State University to comply with the requirements of FERPA. The name and address of the Office that administers FERPA are:

Family Policy Compliance Office
U.S. Department of Education
600 Independence Avenue, SW
Washington, DC 20202-4605
HIPAA and Related Policies

In the course physical therapy training, students will likely have access to confidential information related to other students, patients/clients, or others. Students receive training in protecting patient/client confidentiality and HIPAA guidelines. It is the responsibility of the student to maintain confidential any information related to patients and/or clients. Specifically, per HIPAA guidelines, the following behaviors are prohibited:

- Releasing confidential patient/client information by any means (i.e., verbally, electronically, or in print) to any individual/agency who does not have the legitimate, legal or clinical right to the information
- Unauthorized use, copying, or reading of patient medical records
- Unauthorized use, copying or reading of employee/hospital records
- Taking patient records outside the clinical facility
- Any tampering of patient information

This policy applies not only to patients/clients with whom the student has direct contact in the clinical setting, but to any personal/confidential information to which the student may have access while participating in physical therapy education.

The student is to use discretion when discussing patient/client information with other appropriate individuals to assure that the nature of the discussion remains professional, pertains only to information clinically relevant while in the clinical setting, and cannot easily be overheard by those not involved in the patient’s care. When discussing any patient information for educational reasons in the classroom, information must be properly de-identified and/or appropriate authorization obtained.

Additionally, some clinical facilities will have their own published policies/procedures related to protecting patient/client information that students are expected to follow.

Violations of this policy may result in sanctions and may be grounds for dismissal from the program.

Identification

Students will receive a “Student Identification Card,” complete with picture, at the time of orientation, at the start of their first Semester. These cards entitle the student to use campus facilities. In addition, prior to participating in clinical education, students will receive name badges to be worn during all clinical education experiences. More information regarding this is available in the Clinical Education Handbook.

Laptop Requirement

All RMUoHP DPT program students are required to have a current laptop computer with wireless capability that has the minimum requirements online. Students MUST comply with the Technology requirements noted in the University Handbook. More information is available in the University Handbook and in admissions materials.

Program Complaint

The Program encourages and solicits ongoing feedback from enrolled students, faculty members, patients, clinical faculty, and employers of our graduates. When there is a specific complaint about a student, faculty member, or the program in general, it should be documented in writing and discussed first with the person involved, then with the Program Director, the Academic Dean, or other administrative personnel as outlined in the University Handbook. If this series of actions does not bring about a satisfactory resolution related to an accreditation issue, complaints about the Program can be directed to the Commission on Accreditation in Physical Therapy Education (CAPTE). Contact information for CAPTE can be accessed through the APTA website at www.apta.org or by calling the Department of Accreditation of APTA at 703-
706-3245. CAPTE can only respond to specifically PT accreditation criterion violations. If a student chooses to file a complaint with CAPTE they should address the complaint to CAPTE.

Commission on Accreditation in Physical Therapy Education  
1111 North Fairfax Street  
Alexandria, Virginia 22314

In order for CAPTE to address a complaint, they require that the student sign the letter of complaint.

Complaints that are not related to accreditation issues should follow the procedures outlined in the University Handbook. Complainants are guaranteed that no retaliation is allowed. Complaints that fall outside of due process are handled in the manner described by the University handbook and in the program policy and procedure manual.

**Program Expenses and Financial Aid**

Please refer to your enrollment agreement and the RMUoHP University Handbook for specific and related program costs including tuition, fees, and refund policy. RMUoHP reserves the right to change charges and fees at the University’s discretion with appropriate notification to students.

A variety of financial aid loans and grants are available for qualified applicants to RMUoHP. Students will need to meet with a financial aid adviser at the time of admission, before each Semester, and upon graduation. Students seeking financial assistance may apply by contacting the Finance Office. Further information is found in the University Handbook.

**Registration Process**

Registration for specific courses occurs through the Registrar’s office. Once students are accepted and enrolled, even in a cohort model, students must confirm their registration for the courses for each semester.
Appendix
University Handbook, DPT Program Student Handbook, DPT Clinical Education Handbook, and Honor Code Acknowledgement

By signing below, I, ________________________________, agree that I have received, read, and understand all information contained in the Rocky Mountain University of Health Professions University Handbook, the DPT Program Student Handbook and the DPT Program Clinical Education Handbook. I also agree that I will adhere to and abide by the rules and regulations contained therein, which include, but are not limited to, the University Honor Code and code of conduct. I am aware of the consequences of violations of specific policies and standards, including plagiarism and dishonesty.

Signature ___________________________ Date ___________________________

Printed Name ___________________________ Program and Year ___________________________
DPT Program Release, Informed Consent and Waiver

I, ___________________________, am a student at Rocky Mountain University of Health Professions, Inc. (the “University”). I will be enrolled in courses that will include the teaching of laboratory activities and interventions, including hands-on techniques (the “lab activities”). I understand that participation in the lab activities is an important part of the education offered in the RMUoHP DPT program and that my participation is generally expected except in the case where medical or other extenuating circumstances might temporarily excuse such participation. Any exceptions must be approved by the instructor or Program Director in writing and I am still responsible for mastering all required skills and knowledge. In participating, I agree to obtain and provide informed consent for all lab activities.

I hereby release the University and all of its shareholders, directors, trustees, officers, employees, representatives and faculty members (the “Released Parties”) from all liability for any harm, injury or illness of any kind that I may incur as a result of my participation in the lab activities (any “Harm”).

If I participate in the lab activities, by so doing I will represent and agree that:

1. I have no pre-existing condition that would make my participation harmful to me in any manner and will disclose any such conditions;
2. I have had the opportunity to discuss my participation and this Release with competent medical and legal advisors;
3. I RELEASE and DISCHARGE all Released Parties (except anyone who intentionally causes Harm) from all liability for any Harm;
4. I WAIVE ALL CLAIMS AGAINST and COVENANT NOT TO SUE the Released Parties (except anyone who intentionally causes Harm) for any Harm;
5. I ASSUME FULL RESPONSIBILITY FOR ANY HARM, INCLUDING ANY RISK OF BODILY INJURY, ILLNESS OR DEATH arising out of or relating in any way such participation; and
6. The Released Parties shall have NO DUTY TO WARN me of any risks at any time.

I understand that the University provides DPT students with professional liability insurance that is only available for incidents occurring while enrolled as an RMU DPT student engaged in approved educational activities, including clinical education. However, I agree that I take full responsibility for my own health and well-being and accept responsibility for any injury or illness incurred in the educational process. Therefore, I shall maintain my own health insurance acceptable to the University, with a minimum of Major Medical coverage. I shall also provide the University with satisfactory evidence of the existence of such insurance at all times, including satisfactory evidence of its renewal or replacement before its expiration or cancellation. I further agree to hold harmless and indemnify the University, and its owners, directors, officers and employees, from and against all losses, claims, damages and expenses, including reasonable attorneys' fees and court costs, arising out of or relating to my actual or alleged professional negligence or misconduct.

This Release and Waiver is intended to be as broad and inclusive as is permitted by law, and if any portion is held invalid, the balance shall continue in full force and effect.

_________________________________________   _______________________________________
Student Signature                                           Signature of Witness

Date ______________
DPT Program Disclosure Form

The purpose of the form is to review certain facts described during the admissions process in an effort to prevent any misunderstanding by our students. Please read the following information regarding your education process and sign your initials at the end of each paragraph to indicate your understanding of and agreement to each item. When you have finished reading the entire form, please sign your name in the space provided at the bottom.

HOUSING AND JOBS WHILE ATTENDING RMUoHP: Although employment from local businesses and housing in the immediate area of the University may be available, the University has not guaranteed me employment or housing. Because of the demands of full time professional education in general, and the DPT program specifically, it is recommended that students do not plan to work full time during the didactic portion of the program, and not at all during clinical affiliations.

FINANCIAL ASSISTANCE: As with any university, student loans and/or grants are made available depending upon the financial information provided by the applicant. The University has not guaranteed that I will receive a loan or a grant. If I receive a loan, I understand that I will be responsible for repaying the loan.

HEALTH INSURANCE: I understand that I must have health insurance while enrolled as a student in the DPT program and must provide proof of insurance. I understand that I am responsible for all associated costs. Failure to show proof of insurance may result in disciplinary action up to and including dismissal from the program.

UNIVERSITY HANDBOOK: In addition to DPT program student and clinical handbooks, I understand that the University Handbook has terms and conditions regarding my education. The University Handbook is available through the www.rm.edu website. I agree to read the all handbooks and agree to abide by the contents.

ATTENDANCE: The University requires daily attendance as an important part of your training program. Students failing to maintain satisfactory attendance requirements for their courses are subject to administrative actions, which may include probation, suspension from school, or denial of graduation. The attendance policy is contained in the University Handbook.

APTA MEMBERSHIP REQUIREMENT: I understand that I must obtain student membership in the APTA and maintain this membership while enrolled as a student in the DPT program. I understand that I am responsible for all associated costs and that failing to comply could lead to disciplinary action up to and including dismissal from the program.

CRIMINAL BACKGROUND CHECK AND DRUG TESTING: I am aware that I will be required to undergo a criminal background check and possibly drug screening prior to being allowed to participate in clinical rotations. I understand that a record of criminal behavior may preclude me from being able to participate in clinical education at most if not all facilities and may prevent me from being employed. I understand that should I be prohibited from attending a clinical rotation at a clinical facility due to findings on my drug screening or criminal background check, I may be dismissed from the Program.

CLINICAL EDUCATION REQUIREMENTS: Clinical rotations and internships are an integral part of the curriculum and may require that a student temporarily relocate. I understand that I may, and most likely will, have to leave the local area, or the State, for any or all clinical affiliations. I am aware that I am responsible for the cost of the travel and other related expenses.
Students will be required to meet all requirements outlined in the Clinical Education Handbook on “Immunizations, Certifications, and Related Requirements” by required deadlines. Failure to comply with these requirements can lead to dismissal from the program.

**COMPUTER REQUIREMENTS:** All students will be expected to have reliable laptop computers with hardware and current software that meet the University Technology requirements noted in the University Handbook and available on the Website.

**EMPLOYMENT:** Enrollment in and successful completion of the DPT program does not guarantee that a student will pass the national licensure exam, nor does the school guarantee that a student will get a job or obtain employment.

**CORE PERFORMANCE STANDARDS:** Core Performance Standards are divided into two parts; Technical Standards and Professional Behaviors. As part of the application process applicants will be required to review the Technical Standards required for the program, and self-report if any questions exist regarding ability to meet these standards. Students will be introduced to the Professional Behaviors in their first semester. The Core Performance Standards are available for review on the RMUoHP web site.

The entry-level Doctor of Physical Therapy Program at Rocky Mountain University of Health Professions is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE; 1111 North Fairfax Street, Alexandria, VA, 22314; phone: 703-706-3245; email: accreditation@apta.org; website: www.capteonline.org).

By signing my name in the space provided below, I verify that I have read, fully understand, and agree, and will comply with the statements contained in this disclosure form.

Student Signature: ___________________________ Date: _______________
DPT Program

Health Insurance Statement

The practice of physical therapy may have certain occupational risks. Students are required to carry their own health insurance and sign a waiver assuming all financial responsibility for any illness or medical bills occurred while enrolled in RMUoHP DPT Program. RMUoHP assumes no financial responsibility for an ill student, and all medical bills are the student's responsibility.

Please complete the following information:

I have read the health insurance statement above. I am presently insured.

I declare to the best of my knowledge that I do not have and/or have not been exposed to any serious communicable diseases.

I understand that my status at RMUoHP will change if I do not tell my Program Director of any medical condition that my affect my school, other students, faculty, and staff members.

I understand that I assume all liability for any injury caused while performing laboratory or technical skills.

I understand that the performance of these procedures is required in order to graduate from this program.

I understand that any information discussed with the Program Director will be held in confidence, but that the Program Director reserves the right to discuss my needs and personal information with appropriate personnel including other faculty and administrators.

Name (please print):

Signature:

Name of Health Insurance Company:

Phone #:

Policy #:

Date:

Witness Signature Date:
DPT Program

Multimedia Consent/Release Form

I do hereby consent to be photographed and/or videotaped, and have my voice and image recorded or otherwise by students, staff, or faculty of RMUoHP.

I understand that these recordings will be utilized for educational purposes only and as such will not be made available for public viewing.

This authorization extends from ________________________________

to ____________________ (Indefinitely, if not otherwise stated).

Name (please print):

______________________________________________

Signature: ______________ Date: ______________

Witness: ______________ Date: ______________
Waiver of Medical Care

I waive medical care in connection with the incident on ________________ (date),
at ________________ (time), occurring ________________ (Where).

I understand that I have been counseled by my instructor to seek medical care, but I decline.

I understand that I assume all liability associated with this incident.

Name (please print):

Signature: ________________________________ Date: ________________

Witness: ________________________________ Date: ________________
DPT Program

Guest Participant Informed Consent Form

I willingly volunteer to participate as a clinical subject in one or more class or laboratory sessions at RMUoHP and agree to the following:

I may be asked questions pertaining to the details of my health and health care.

I may be asked to expose an area of my body for inspection by students and faculty but may expect my dignity and modesty to be protected.

I may refuse to participate in any way I feel necessary.

I understand that this is a student educational laboratory and that the quality of care I receive may be less than that received from a graduate professional.

I understand that my voice or image may be recorded (e.g. photograph or digital recordings), and that these images will be used only for educational purposes.

I waive any claims against RMUoHP, its representatives, employees, and students arising from my participation, excluding such claims as may be the result of gross negligence or willful misconduct.

I understand that I will not be compensated for my participation.

Name (please print):

______________________________

Signature: _____________________ Date: _____________________

Course(s): _____________________ Date(s): _____________________