PACIFIC UNIVERSITY
School of Physical Therapy

SYLLABUS

TITLE: DPT 642: Clinical Internship II

INSTRUCTORS: Jeremy Hilliard, PT, DPT
Assistant Professor, Academic Coordinator of Clinical Education

Brian Wilkinson, PT, DPT, CHT
Instructor, Assistant Academic Coordinator of Clinical Education

LECTURERS: Facility Clinical Instructors

CREDIT HOURS: 6 semester hours

CLOCK HOURS: 240 hours

OFFERED: Spring Semester, six weeks (daily), January-February

COURSE DESCRIPTION: Full time six-week clinical internship under the direct supervision of licensed physical therapists (PTs).

TEACHING METHODS/LEARNING EXPERIENCE: This course emphasizes application and integration of academic coursework in the clinical setting. Students are directly supervised by licensed physical therapists. Students must do at least one internship in an inpatient setting, and at least one internship outside of the Portland metropolitan area, during their five internships. Also, students must experience three different practice settings during the four final internships (Clinical Internships II, III, IV, and V) from the following five general categories: acute care, neurological rehabilitation, pediatrics, geriatrics, and outpatient orthopedics.

LEARNING SUPPORT SERVICES: Services are available to students covered under the Americans with Disabilities Act (ADA). If you a) believe you have a covered disability, or b) have documentation of an existing disability, and you require or are requesting accommodations for this course, you must contact Learning Support Services at 503.352.2194 or via email at LSS@pacificu.edu. Learning Support Services will partner with you to review the necessary documentation, discuss the services Pacific offers, and facilitate the provision of any accommodations required for specific courses. It is extremely important that this process begins no later than the end of the first week of the semester. STUDENTS WHO ARE REQUESTING ACCOMMODATIONS FOR INTERNSHIPS MUST SPEAK WITH THE ACCE ABOUT THE ACCOMMODATIONS AT LEAST THREE MONTHS PRIOR TO THE START OF EACH INTERNSHIP.

OUTLINE OF CONTENT: Patient care and related professional activities are specific to the facility.
GENERAL POLICIES:
1. Working hours are those established by the facility. The intern is not expected to work a longer day than any one staff PT.

2. If applicable, the intern may work on the weekend with a day off during the week according to departmental policies.

3. Students can expect to spend an additional 8-10 hours per week OUTSIDE OF SCHEDULED CLINIC TIME studying, preparing, and reviewing relevant material. This is not considered part of the 40 hours per week that the students spend in the clinic.

4. The facility dress code is to be the guide for the intern.

5. Interns must satisfy all internship requirements (described below) prior to internship start. Interns are responsible for keeping copies of their own records so that they can be presented to their clinical instructors on the first day. Failure to complete all requirements prior to the first day of the internship will result in a delayed start and possible removal from the internship.

6. Interns must be supervised by at least one licensed PT. A supervising PT must be located on the same premises as the intern at all times. In some cases, the PT should be in the same treatment area/room. Interns may not be supervised by a PTA.

7. If any problems or questions occur during the affiliation, consult the Academic Coordinator of Clinical Education (ACCE). DO NOT wait until a clinic visit, return to school, assume that things will improve, or try to "gut things out." Problem areas can often be easily handled without wasting valuable clinic learning time.

ABSENCES:
1. Absences must be due to illness or emergency only and must be made up at the discretion of the ACCE or clinical instructor (CI). If a clinic is closed for a national holiday, the student is not expected to make up this absence.

2. The facility must be notified each day of an absence by 8:00 a.m. or upon opening.

3. The ACCE must be notified each day of an absence.

4. Students may have the opportunity to participate in School-approved or School-sponsored activities during an internship, including state, national, or international professional meetings, and service learning experiences. Notably, the APTA Combined Sections Meeting (CSM) usually occurs during this internship, and students are encouraged to attend. Students may participate in these activities under the following conditions:
   a. The absence is approved by the clinical instructor
   b. The absence is approved by the ACCE
   c. The time missed is made up

   If all three of these conditions cannot be met, the student is not allowed to participate in the activity.
INSERVICES, CASE HISTORY, OUTSIDE ASSIGNMENTS:
1. Interns may be required to present a case study or in-service at the discretion of the clinical site.

2. Each facility has the authority to require extra reading, homework, or reports in order to enhance the clinical experience.

SITE VISIT:
1. The ACCE, Assistant ACCE, or another faculty member may visit the facility near the midway point of the affiliation. An intern may not be visited during each internship.

2. The visit will consist of an informal discussion with the clinical instructor, the intern, and possibly the Center Coordinator of Clinical Education (CCCE) to review the internship site, the intern’s performance, and the clinical education experience.

3. If any problems or questions occur during the affiliation, consult the academic coordinator. DO NOT wait until the clinical site visit or assume that things will improve. Problem areas often can be easily handled without wasting valuable clinical learning time.

COURSE REQUIREMENTS & METHODS OF EVALUATION/GRADING:
1. Interns must satisfy all requirements described in Oregon Administrative Rule (OAR) 409-030 including immunizations, screenings, trainings, and evidence of coverage for professional liability and general liability prior to beginning their first clinical internship. Interns must also satisfy any site-specific requirements in addition to the requirements described in OAR 409-030. Failure to complete all requirements prior to the first day of the internship will result in a delayed start and possible removal from the internship; any missed time will be considered unexcused.

2. The intern must complete a “Clinical Instructor Information Form” at the beginning of the internship. This form should be turned in to the Administrative Assistant to the ACCE by the end of the first day of the internship. If not received by the third day of the internship, the student will be pulled from the internship until the form is completed and turned in; all time missed must be made up; any missed time will be considered unexcused.

3. The intern and CI are required to complete a midterm evaluation using the APTA Clinical Performance Instrument (CPI). After completing the self-evaluation, the intern must write two or more goals for herself/himself to be achieved by the end of the internship. These goals should be written in the same format with which goals would be written for a patient and should be written in the “Recommendations” section of the CPI. The intern and CI must each sign both their own version and the other party’s version to indicate that the content has been discussed.

4. At the end of each internship, the intern and CI will again evaluate the intern’s performance using the CPI. As above, the intern and CI must each sign their own version and the other party’s version to indicate that the content has been discussed.

5. The intern must complete the midterm and final “Experience Evaluation” and “Instructor Evaluation” forms in Acadaware. The midterm forms should be discussed with the CI at the same time as the midterm CPI; the final forms should be discussed at the same time the final CPI is discussed. The final forms must be completed by 8:00 p.m. on the final day of the internship.
6. The intern must complete an “Internship Timesheet” and turn it in to the Administrative Assistant to the ACCE no later than 8:00 p.m. the final day of the internship.

7. Successful completion of any one internship is a combined decision of the clinical and academic faculty based upon the clinical instructor’s and intern’s written and verbal evaluation of the intern’s performance in the clinic. However, the academic faculty reserves the right to make the final determination of the grade.

8. Clinical internships not completed secondary to personal or medical reasons will be evaluated by the faculty on an individual basis to determine whether the student will continue progression through the curriculum.

GRADING:
1. Grading for internships is Pass, No Pass, or Incomplete.

2. As stated above, the academic faculty makes the final determination of the internship grade.

3. A final grade will not be given until all unexcused days and/or hours are made up and all signed evaluation forms are turned in.

4. Failure to complete Course Requirements listed above by the timeframes identified will result in a grade of “Incomplete” or “No Pass.”

5. If a grade of “No Pass” is received in an internship, the student must repeat the internship. The student will not be able to do this until the next time that internship is regularly scheduled. A second failed internship results in removal from the Program.

PROFESSIONAL BEHAVIORS:
Prior to initiation of DPT 642, the student will satisfactorily complete the academic course of study, and must exhibit at least a developing level of proficiency in all ten Professional Behaviors as clearly outlined in the School of Physical Therapy Student Handbook.

REQUIRED TEXT:
Intern Clinical Education Manual.
Material required per facility.

SUGGESTED READING:
Material suggested per facility.

COURSE OBJECTIVES:
A. Cognitive:
   1. Demonstrate (verbally and/or in writing) strong theoretical and didactic background in all areas listed under DPT 570 and, in addition, all other extremity joint and spine mobilization, clinical medicine and surgery, some geriatrics, pediatrics, and many neurological disabilities and treatments.
2. Appropriately justify any chosen treatment technique.

3. Report on any valid subject matter designed to enhance the clinical learning experience as determined by the clinical instructor.

B. Skill:
   1. Assist in evaluating patients in all settings.
   2. Evaluate and treat patients with simple orthopedic impairments with minimal to no direct assistance of the clinical instructor.
   3. Evaluate and treat patients with progressively more complex orthopedic impairments with moderate to minimal assistance of the clinical instructor.
   4. Evaluate and treat patients with simple neurological and general medical impairments with moderate assistance of the clinical instructor.
   5. Evaluate and treat patients with progressively more complex neurological and general medical impairments with maximal assistance of the clinical instructor.
   6. Demonstrate intermediate proficiency in choosing and applying therapeutic exercise, soft tissue mobilization, joint mobilization, physical agents, and functional mobility training, and balance techniques.
   7. Provide appropriate intervention for simple gait disorders, including identification of gait pattern, selection of assistive device, level of assistance, and therapeutic techniques.
   8. Instruct patients/caregivers in home management programs with intermediate level proficiency.
   9. Document with intermediate level proficiency any treatment provided including subjective, objective, assessment, and plan components.
   10. Demonstrate intermediate level of effectiveness in professional communication.
   11. Demonstrate intermediate level of time management (50-100% longer than entry-level).

C. Specific to APTA Clinical Performance Instrument (CPI):
   1. Student is expected to be rated between “Advanced Beginner” and “Advanced Intermediate” on all items.
   2. Student should demonstrate progress on all items.

D. Professional Behavior:
   1. Demonstrate at least developing level proficiency in all ten areas by the end of the affiliation (see table of Professional Behaviors).