University of Kansas Medical Center
Department of Physical Therapy & Rehabilitation Science
PTRS 921: Full-Time Clinical Experience II
Course Syllabus Semester VIII or IX
Fall 2021 (9 weeks) or Spring 2022 (12 weeks)

Course Director: Yvonne Colgrove, PT, Ph.D.
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Office Hours: By appointment or onsite visit as needed and as viable
Credit Hours: 6-8
Course Time: Full-time clinical experiences /clinical rotations are based upon 40 hours per week and daily clinical schedules are determined by the assigned clinical instructor

Prerequisite: The student must have successful completion of the first 7 semesters of the DPT program or permission of the instructor.

Course Location: As individually assigned by DCE
Collaborators: Clinical Instructors per assigned facility

Textbook: No required text
Reference Text: All didactic courses textbooks may be used as reference while in the clinic

Required Readings: None for the course in general but may be assigned readings by the clinical instructor

OTHER LEARNING RESOURCES: All information concerning the background information, procedures to be followed, required course forms and additional resources are found in EXXAT and the Clinical Rotations folder in your Class folder on Blackboard. Information is also disseminated by the DCE during a class clinical education meeting before going out on full time clinical experiences. Individual meetings with the DCE may be arranged if additional information is needed. The clinical site provides the clinical environment in which integrated learning and practice of physical therapy occurs. Additional learning resources may exist at the clinical practice site.

COURSE DESCRIPTION:
Nine to twelve weeks of full-time clinical experience. During the clinical rotation, the student will have the opportunity to develop the patient care skills needed for successful practice as a physical therapist. The student will work under the supervision of an experienced physical therapist in clinical settings affiliated with the program.
COURSE OBJECTIVES:
Upon completion of this course the student will demonstrate consistent clinical competency in physical therapy practice with a wide variety of patients in inpatient and outpatient settings in general or specialty practice by:

1. **practicing** in a safe manner that minimizes risk to patient, self and other team members (threaded in unit objectives).
2. **displaying** professional behaviors in all situations such as initiative, resourcefulness, good judgement, integrity, dependability, flexibility, appropriate self-confidence, constructive conflict management, etc.
3. **exhibiting** accountability in ethical conduct compatible with standards addressed in the APTA Code of Ethics and other established legal and professional standards.
4. **demonstrating** exemplary communications skills for purposes of written and verbal facilitation of information within the clinical setting, the community and the field of physical therapy at large that are congruent with situational needs.
5. **exhibiting** appropriate culturally competent interpersonal relationships within the clinical setting and for purposes of the community and field of physical therapy at large.
6. **demonstrating** commitment to fulfilling professional responsibility and toward continued professional performance growth.
7. **exhibiting** sound clinical reasoning by applying knowledge, current evidence, theory, and clinical judgment with consideration of patient values and perspectives (threaded in unit objectives).
8. **performing** all aspects of an initial physical therapy examination/evaluation to arrive at a diagnosis/prognosis that guides effective patient centered, evidence based care plan development.
9. **demonstrating** awareness for a referral to another discipline or professional of expertise in an area that would better address the patient problems/concerns based upon appropriate screening.
10. **implementing** all aspects of a physical therapy plan of care adjusting the program with use of ongoing assessment to address current needs and circumstances.
11. **exhibiting** exposure to and competence in performing a wide range of physical therapy intervention.
12. **demonstrating** financial management of physical therapy services including judicious use of personnel within regulatory guidelines.

UNIT OBJECTIVES

**UNIT 1 PROFESSIONAL BEHAVIOR**
Upon completion of this clinical rotation, the student will:

1. **demonstrate** appropriate initiative by:
   a) **making suggestions** for changes considering implications and possible consequences.
   b) **responding** to recognized need for and request assistance beyond immediate responsibilities.
c) initiating appropriate actions without being prompted.
d) actively seeking learning opportunities.

2. exhibit good judgment by:
a) demonstrating integrity by his/her actions that he/she had considered all the implications and consequences of words and deeds.
b) demonstrating that he/she is able to make decisions on the basis of priorities.

3. demonstrating ability to evaluate own strengths and areas needing improvement by:
a) recognizing limitations when managing the patient and requesting assistance as needed.
b) exhibiting resourcefulness.
c) citing areas where additional experiences, information or study would be beneficial.

4. exhibit flexibility by:
a) adjusting schedule to accommodate unforeseen conditions or circumstances.
b) accepting feedback without defensiveness.
c) managing conflict in constructive ways.
d) adapting to new clinical situations.
e) modifying behavior according to feedback from the clinical instructor or other mentors.

5. exhibit appropriate self-confidence by:
a) conveying through verbal and non-verbal behavior the impression that he/she understands the situation and is able to deal with it effectively.
b) conveying appropriate confidence that is within his/her exhibited ability.

6. demonstrate resourcefulness by:
a) combining ideas and performance of activities in unique ways to solve problems.
b) using illustrations or similes which are original but fit the situation.
c) exhibiting inventiveness or creativity in making or modifying equipment.

7. be punctual and dependable.
8. determine the need for a referral to another discipline as appropriate
9. appear well groomed and appropriately dressed at all times in alignment with practice setting expectations.
10. suspend own biases to provide care in a non-judgmental manner.
11. exhibit tact.

UNIT 2 ETHICAL CONDUCT
Upon completion of this clinical rotation, the student will: perform according to acceptable standards of professional ethics and legal regulations by:
1. making clinical decisions within the context of ethical practice.
2. maintaining patient confidentiality.
3. providing quality care to all persons without regard to personality or medical problems (recognizing the dignity and worth of all individuals) and above self-interest.
4. timely reporting of mistakes or concerns taking steps to remedy the
error/mistake/concern.
5. **respecting** the roles and contributions of all encountered in the course of his/her professional activities.
6. **recognizing** and accepts responsibility for words and deeds may reflect on the school, the facility and the profession.
7. **adhering** to the all applicable regulatory guidelines including facility policies and procedures.
8. **taking** advantage of opportunities to contribute physical therapy knowledge to individuals and the community.

**UNIT 3 COMMUNICATION SKILLS**
Upon completion of this clinical rotation, the student will:
1. select pertinent information from all applicable sources in the clinical setting.
2. organize and prioritize information.
3. document all aspects of physical therapy care legibly, concisely, accurately, and timely following all applicable regulations.
4. utilize correct grammar and terminology.
5. adjust level of communication for reader and auditory recipients.
6. express him/herself clearly and concisely in a timely professional manner.
7. communicate effectively with all personnel and stakeholders encountered in the clinical setting.
8. communicate with cultural sensitivity.
9. present oral reports clearly and concisely.
10. actively listen and respond to patients and co-workers.
11. adjust voice, posture and facial expressions to meet situational demands.
12. recognize the effects of his/her own non-verbal communication upon others.
13. develop alternate methods of communication with patients who demonstrate areas of disability or exceptionality (for example, hearing impaired, cognitive or language delays, visually impaired, etc.) so teaching methods are adjusted to learner needs.
14. identify barriers and biases that impede communication, teaching and interpersonal interactions and take steps to constructively address the issues.
15. interpret and effectively responds to communication of others.

**UNIT 4 INTERPERSONAL RELATIONSHIPS**
Upon completion of this clinical rotation, the student will:
1. introduce oneself to the patient and patient’s family.
2. prepare patient for treatment by explanation of treatment and what to expect from the treatment if applicable.
3. carry on an appropriate conversation with patients to establish an individual patient rapport.
4. secure and develop the patient’s and family’s interest and confidence.
5. demonstrate awareness of the parameters of encouraging a patient to participate in the
recommended intervention and when to accept the patient’s decision.

6. **motivate** and **encourage** patient to become more independent within the patient’s limitations.

7. **exhibit** caring, compassionate and empathic patient care especially recognizing the psychological/social/emotional/cultural/economic needs of the patient.

8. **exhibit** a realistic attitude about his/her responsibilities and abilities.

9. **demonstrate** proper rapport with other personnel, being tactful and considerate of others.

10. **communicate** patient’s needs to personnel in other departments when applicable and obtain information regarding patient’s needs from others.

11. **contribute** positively during patient care conferences to establish a working relationship between all departments involved in the patient’s care.

12. **evaluate** and **recognize** the responsibilities of each member of the department/organization.

13. **establish** proper rapport with all staff members keeping in mind individual differences.

14. **communicate** necessary information to the correct individual using discretion in terms of the administrative organization of the department.

15. **contribute** constructively to staff discussion groups, inservice training and other pertinent meetings.

**UNIT 5 PROFESSIONAL DEVELOPMENT**
Upon completion of this clinical practicum the student will **demonstrate** commitment to fulfilling professional responsibility by:

1. **assuming** additional responsibility for any staff limitations.

2. **assuming** supportive personnel duties when the situation indicates.

3. **establishing** priorities and appropriate relationships with patients so as provide quality of care beyond expected standards.

4. **keeping** personal issues from interfering with professional responsibilities.

5. **writing** measurable individual student behavioral learning objectives.

6. **using reflective** self-assessment to contribute to student performance evaluation process and to design a plan to improve clinical performance.

7. **seeking** performance feedback from clinical instructor/others and guidance as needed.

8. **providing** constructive feedback to the clinical instructor.

9. **accepting** responsibility for continuous professional learning.

**UNIT 6 PATIENT EVALUATION AND PROGRAM PLANNING**
Upon completion of this clinical rotation, the student will:

1. **perform** an initial examination and comprehensive evaluation.

2. **obtain** the patient history.

3. visually **appraise** patient.

4. **use** information to formulate initial hypothesis and prioritize selection of tests and
5. perform systems review
6. select appropriate tests and measures and standardized assessments to identify patient's problem(s).
7. administer tests and measure, and outcomes assessments accurately, proficiently and efficiently.
8. adjust tests and measures and outcomes assessment based on patient response
9. synthesize all information obtained to produce an accurate picture of patient’s status.
10. gather information as indicated, including expectations and goals from patient, family, and health personnel.
11. critically evaluate current evidence for additional information on the patient's condition and possible intervention.
12. make clinical decisions in ambiguous or conflicting situations.
13. establish a diagnosis for physical therapy intervention and list for differential diagnosis.
14. integrate data and arrives at an accurate prognosis for intensity and duration of interventions and discharge status.
15. estimate contribution of factors on the effectiveness of interventions.
16. establish realistic long-range goals by:
   a) relating to examination/evaluation findings and prognostic evidence
   b) considering the discharge situation, preventive measures, functional outcomes, pathology, patient impairments, activity and participation limitations, environmental factors, time, and resources needed/available.
   c) collaboration with other team members, patient and family goals for integration of patient back into their home and community,
   d) considering psychological, social, emotional issues, vocational needs and community resources.
17. establish realistic short-range goals by:
   a) processing information from the medical record, medical history, evaluation and long-range goals.
   b) progressing in a logical and sequential manner.
   c) setting priorities.
18. plan and manage an intervention program based on the physical therapy evaluation and goals considering the feasibility in terms of time, money, and equipment, alternative methods of treatment, the investment of the patient in terms of willingness to follow through and be an active participant and how well the plan in holistically addressing individual patients needs and concerns.
19. present logical rationale for clinical decisions.
20. discuss alternative interventions with patient.
21. advocate for patient access to services.
22. consider prevention, health, wellness and fitness in developing a care plan.
UNIT 7 SCREENING
Upon completion of this clinical rotation, the student will:
1. select and interpret pertinent information from the medical record.
2. review medical history from patient.
3. perform system review to recognize cluster preventing examination or intervention.
4. use sensitive test and measures.
5. interpret test and measures.
6. determine further need for examination or referral to other services.
7. conduct screening at community sites.

UNIT 8 PLAN OF CARE IMPLEMENTATION
Upon completion of this clinical rotation, the student will:
1. select interventions based upon best available evidence, clinical expertise and patient preferences.
2. safely and consistently perform interventions as related to the established care plan.
3. contact physician and/or other health personnel and/or family when indicated.
4. revise and/or progress treatment program as indicated without being prompted by:
   a) continuously re-evaluating.
   b) intervening at times of fatigue or frustration.
   c) observing response of patient and modifying intervention appropriately.
   d) recognizing ineffective care plan/interventions.
   e) maintaining patient privacy, modesty and dignity.
   f) implementing appropriate care plan revision.
5. utilize appropriate methods of instruction and feedback to ensure correct performance of the procedure by:
   a) using terminology which is understandable to the patient.
   b) showing an awareness of the patient's medical situations, environmental factors and learning style which may affect learning.
   c) considering patient's attitude toward carrying out the intervention program.
   d) utilizing appropriate instructional principles when instructing in and facilitating an intervention program.
   e) instruct patient and caregivers about patient condition, intervention and transition to role at home, work, school or community.
   f) demonstrate the ability to modify instructions and/or methods when indicated.
   g) continually communicate with the patient in terms of how the treatment should feel, what reaction to expect, what the expectations are in terms of patient follow-through to meet goals and objectives, etc.
6. determine when patient has reached maximum benefit from frequent, direct skilled physical therapy intervention.
7. make appropriate recommendations for optimal patient benefit within the parameters of APTA Code of Ethics, reimbursement issues and consideration of alternate service delivery models.
8. manage the case management process that encompasses all levels of care including direct access.

UNIT 9 PHYSICAL THERAPY SKILLS
Upon completion of this rotation, the student will
1. demonstrate clinical competence in the following physical therapy, skills and strategies as exposed to in the clinical setting by:
   a) evaluating muscle performance, gait, posture, motor function, functional mobility, activities of daily living, pain, skeletal integrity, joint integrity and mobility, range of motion, muscle length, neuromotor development including sensory integration, reflex integrity, nerve integrity, prosthetic, orthotic and supportive device needs, respiratory function, cardiac function (aerobic capacity and endurance and circulation), coordination and balance, integumentary integrity, anthropometric characteristics, self-care, home management and work/community integration (including barrier assessment), arousal, attention and cognition and ergonomics.
   b) performing and instructing in therapeutic exercise.
   c) performing functional training for self-care, home, community and work management and integration.
   d) performing manual therapy techniques on soft tissue, and spinal and peripheral joints including mobilization and manipulation.
   e) performing physical agent and mechanical modality treatments.
   f) performing electrotherapy treatments.
   g) performing integumentary repair and protection techniques.
   h) performing airway clearance techniques.
   i) prescribing, and applying devices and equipment.
   j) identifying normal development across a variety of domains while recognizing signs and symptoms of abnormal or delayed development, perceptual motor and cognitive.
   k) discussing the risks, stresses, diseases, and disorders associated with different age groups.

UNIT 8 PRACTICE MANAGEMENT AND ADMINISTRATION
Upon completion of this clinical rotation, the student will:
1. use time effectively by:
   a) preparing daily work schedule allocating appropriate time, space and equipment for task completion.
   b) considering needs of other departments/patients/families as well as physical therapist/department when scheduling patients.
2. submitting effective, timely, accurate and objective departmental records including billing charges.
3. direct and supervise human resources in patient care by:
   a) asking for assistance when needed.
   b) discussing support personnel choice with the patient.
c) displaying clinical judgment for the direction and supervision of support personnel including responsibility for determining if task is adequately completed.
d) communicating adequately with support personnel
e) providing adequate instruction and feedback to supportive personnel.
f) utilizing clerical help according to departmental policy.
g) reviewing documentation produced by physical therapist assistant.
h) serving as a mentor to junior level physical therapy students (as applicable).
i) abiding by applicable laws for supervision and delegation

4. follow established lines of communication and regulatory agency guidelines.
5. demonstrate fiduciary responsibility.
6. maintain positive work environment in a manner conducive to efficiency and safety.
7. participate effectively in developing and/or teaching in-service programs.
8. demonstrate awareness of responsible participation in the organization’s quality improvement programs, risk management and overall Organizational Evaluation strategies.
9. demonstrate participation in and/or awareness for the importance of other administrative functions such as marketing, financial management, organizational culture and organizational planning.
10. promote the profession of physical therapy.

LEARNING EXPERIENCES
Students will primarily learn through immersion in the physical therapy practice environment, and secondarily through a class clinical education meeting, self-reflection, group discussion, assignments and other experiences that may be available at individual clinical education sites. Course material is posted on Blackboard, in EXXAT and/or the Clinical Education website.

COURSE PRIVACY
Sharing of recordings, PowerPoints, images, videos, etc. outside of this course (especially on social media) may be considered misconduct and should only be done with written permission of the instructor, other students (if applicable), and/or the clinical site. Please treat contents of this course (academic and clinical site) as private unless instructed otherwise by Course Director or the Site Coordinator of Clinical Education.

GENERAL INFORMATION AND COURSE SCHEDULE
The full-time clinical experience is held at a clinical education site as assigned by the DCE and is based upon a 40-hour week as arranged with the clinical instructor at each site. Students should also be prepared to spend time outside rotation hours looking up relevant materials needed for patient care/physical therapy practice and completing assignments.

METHOD OF STUDENT EVALUATION
Student performance is primarily graded using the web-CPI. The clinical instructor and student will complete assessment of student performance at midterm and upon completion of the rotation.
Evaluation forms will be submitted for in-services and projects completed during the clinical rotation. Students will also participate in class discussion by posting on the KUMC DPT Clinical Education closed Facebook Group.

**GRADING CRITERIA** This course is graded satisfactory or unsatisfactory. To receive a satisfactory grade in this course the following are required:

**Student Performance Evaluation**
- Performance Score halfway between Advanced Intermediate and Entry level, or above on the Clinical Performance Instrument.
  - Absence of critical deficiencies/incidence
  - Students are expected to follow the clinic hours arranged by their clinical site/clinical instructor
  - Please refer to the Clinical Education Handbook for expectations.

**Clinical site correspondence**
- Develop personal goals/learning objectives. Review goals with the CI at the beginning and end of the rotation. Add goals to comments section on web-CPI at midterm and comment on the attainment status of each goal on the final.
- Send information to facility at least 6-8 weeks before start of full-time clinical experience.

**Course Assignments**
- Participate in class discussion on the KUMC DPT Clinical Education closed group Facebook page (3 post minimum across the PTRS 900 clinical education series).
- Complete a project that will benefit the clinic (3 projects minimum across the PTRS 900 clinical education series). Ensure CI submission of the project evaluation form in EXXAT.
- Provide in-service with handouts for each facility (3 in-services minimum across the PTRS 900 clinical education series). Ensure CI submission of the in-service evaluation form in EXXAT and submit an outline of your in-service in EXXAT.

**Attendance**
- Each student is expected to attend all clinical hours as scheduled. If a student is unable to attend during scheduled clinic hours, they are responsible for notifying the clinical instructor prior to the missed time and making arrangements to complete all missed activities as outlined in the clinical education handbook.

**Course evaluation**
- Complete the student evaluations of clinical experience and clinical instruction.

**Comprehensive Examination (PEAT)**
- All students enrolled in this course are required to complete one of the PEAT (Practice Exam & Assessment Tool) examinations purchased for you by the department, as outlined in your departmental Student Handbook. Completion of one of the PEAT examinations by the fall semester’s last day of class is required for your course grade to officially be submitted. If the PEAT examination is not completed, you will receive an incomplete for your course grade until the examination is completed. This is a completion only course
requirement; your score on the PEAT examination will have no bearing on the grade earned in this course. If you need help with the PEAT examination, please contact FSBPT Exam Services at 703-739-9420 and select Option 1. If you have questions related to departmental requirements, please contact the Comprehensive Examination coordinators, not the Course Coordinator. The Comprehensive Examination coordinators will communicate student examination completion to the Course Coordinator prior to course grade assignment. More information on the PEAT can be found at this website: https://www.fsbpt.org/Our-Services/Candidate-Services/Practice-Exam-Assessment-Tool-PEAT.

Submission deadline

- ALL COURSE MATERIALS ARE DUE ONE WEEK AFTER THE COMPLETION OF THE CLINICAL ROTATION. FAILURE TO TURN IN ON TIME CAN RESULT IN A FAILING GRADE.

REMEDIATION STATEMENT
The student will need to meet with the Director of Clinical Education (DCE) to discuss and potentially develop a plan for repeating the clinical rotation. The student may not be allowed to continue with subsequent clinical rotations until the remediation is completed. Refer to the Clinical Education Handbook for the remediation process and policies.

PLAGIARISM
Plagiarism will not be tolerated. Student assignments like the inservice presentation may be submitted to TurnItIn and/or Blackboard’s SafeAssign for detection of plagiarism.

To learn more about plagiarism, visit: http://guides.library.kumc.edu/plagiarism

RESCHEDULING POLICY
If a student is unable to complete their full-time clinical experience hours for any reason, he/she is responsible for notifying the DCE in advance of the time missed, or in case of emergency, as soon as possible. Please refer to the clinical education handbook for policy and procedures.

ACADEMIC MISCONDUCT
Academic misconduct is covered fully in the PTRS Student Handbook (with reference to the KUMC School of Health Professions Student Handbook). Academic misconduct also includes knowingly breaching a patient's rights to privacy and confidentiality by disclosing Protected Health Information as specified by HIPAA regulation. This breach includes accessing an electronic health record in an area where others can view it, printing of information at an unauthorized printer, and sharing patient information details in social networking tools such as Facebook, Twitter, texting or photographing with a cell phone, and other electronic devices.

DIVERSITY, EQUITY, AND INCLUSION STATEMENT
As a part of the School of Health Professions and the University of Kansas Medical Center,
we are committed to creating and maintaining a diverse and inclusive learning and working environment that nurtures the growth and development of our students, faculty, staff and patients. Please go here for the full SHP DEI Core Value statement and other related resources.

ACADEMIC SUPPORTS
Learning assistance, academic performance enhancement, and psychological services at KUMC are free, confidential, and available at Student Counseling & Educational Support Services by calling 913-588-6580 or visiting G116 Student Center.

ACADEMIC ACCOMMODATION POLICY
Any student who needs an accommodation because of a disability in order to complete course requirements should contact the course director or Cynthia Ukoko, Senior Coordinator for Academic Accommodations for Students and Residents in the Academic Accommodations Services office as soon as possible. The office is in 1040 Dykes Library; the phone number is (913) 945-7035. You may also email Cynthia Ukoko at cukoko@kumc.edu. Online appointments may also be made at https://medconsult.kumc.edu.

For online information about academic accommodations, please go to www.kumc.edu/student-services. For the full policy, please go here.

If temporarily unable to meet the clinical expectations, please contact the DCE. See the clinical education handbook for more information.

RELIGIOUS ACCOMMODATIONS
KU Medical Center respects the religious diversity of its students and will make good faith efforts to provide reasonable religious accommodations for the sincerely held religious beliefs, practices or observances of its students when they conflict with University policy or procedure. Such accommodations must not fundamentally affect the University’s mission or commitment to patient care or otherwise create an undue hardship. If you wish to submit a request for religious accommodations, please complete this online form. https://form.jotform.us/71005615090142. For the full policy, please go here.

STUDENT RESPONSIBILITY STATEMENT
It is the responsibility of each individual student enrolled in this course to monitor grades and progress. Graduate school policy as stated in the current Student Planner/Handbook under "grades".

If a student feels that he/she is not doing satisfactory work at mid-term or any time during the semester, the student is responsible for communicating with the DCE to design a plan of improvement.
It is the responsibility of each student to enroll in this course prior to the first clinical day. It is the responsibility of each individual student to directly discuss any problems affecting student clinical performance and student learning on rotations the clinic with the clinical instructor first. If the student does not feel they are performing satisfactorily in the clinic or there are issues significantly impacting student learning, the student is responsible for communicating with the DCE to design a plan of improvement with the assistance of the SCCE and/or the CI. Refer to the clinical education handbook for more information.

**STATEMENT ON PROFESSIONAL BEHAVIOR**

Professional behavior is expected at all times. Any behavior exhibited by the student deemed inappropriate by the DCE, the Clinical Instructor, or the Site Center Coordinator may result in failure of this course. Please refer to the Clinical Education Handbook.

**WEAPONS ON CAMPUS POLICY STATEMENT**

KU Medical Center prohibits faculty, staff, students, and visitors from carrying weapons of any type on its Kansas City, KS campus. For additional information, please see the [KUMC Procedures for Implementing University-Wide Weapons Policy](#). Students who conceal carry on the Lawrence or Edwards campuses are responsible for making alternative arrangements when attending classes in Kansas City. Students can transfer a handgun from a backpack or purse to a secure location such as the trunk of their locked vehicle. Individuals who violate the weapons policy or procedures may be asked to leave campus with the weapon and may face disciplinary action under the appropriate university code of conduct.

**COURSE AND INSTRUCTOR EVALUATIONS**

Student evaluations of the clinical instructor and clinical site will be conducted at the end of the clinical rotation. Posting of the final course grade is contingent on verification of a completed course evaluation. Students have access to the evaluation of the clinical instructor and clinical site on Blackboard and will be prompted to complete the evaluation by email or Class Facebook Group in the final weeks of the clinical rotation. Evaluation submission will be tracked and forwarded to the clinical instructor except for the confidential section. Evaluation of the DCE and clinical education program will be completed at the end of the spring semester after completion of the final clinical rotation. As part of the continual process of improving the full-time clinical experience, students are asked to complete these evaluations as part of their professional responsibility. As you complete these evaluations, please provide thoughtful responses as a professional. Although the DCE and clinical education program evaluation is tracked, your feedback is anonymous and presented only as aggregate data.

**NOTICE**

This course syllabus may be changed at the discretion of the Director of Clinical Education/Course Director. In addition, the course schedule is subject to change per the discretion of the DCE, but students will be notified if a change is necessary.
STATEMENT OF STUDENT ACCEPTANCE
Any student who does not understand/or accept the contents and terms of this syllabus must notify the instructor in writing within one week after receiving this syllabus.

Revised 05/18/2021