

University of Kansas Medical Center
Department of Physical Therapy, Rehabilitation Science, and Athletic Training
PTRS 924: Specialized Clinical Experience
Course Syllabus
Fall Semester VIII, Spring Semester IX or Summer Semester

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Office Hours: By appointment or onsite visit as needed and as viable (may be virtual)
Credit Hours: 1-6
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:

One and a half to nine weeks of clinical experience. During the clinical rotation, the student will have the opportunity to have exposure to a different health care system such as an international clinical experience, or a specialized area of physical therapy practice. The student will be under the supervision of an experienced physical therapist in clinical settings affiliated with the program.

OPTIONS FOR DIFFERENT SPECIALIZED CLINICAL ROTATIONS:

Plan A. Bridge between fall and spring semester for 12-week full-time clinical experience (PTRS 921) to maintain a full graduate credit hour load each semester since this clinical rotation spans both the fall and spring semesters.

Plan B. Adapted domestic clinical experience to balance clinical weeks for international clinical rotations or other special circumstances such as to finish incomplete coursework that spans into the final semester requiring enrollment.

Plan C. Adapted domestic clinical experience designed to meet the specialized requirements of an analogous course in a DPT dual degree programs

Plan D. International clinical experiences

COURSE OBJECTIVES

Plan A

- All students enrolled in this course who are on the 12-week track 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>.

Plan A&B

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.

Plan C. Upon completion of this course, the student will:

1. **complete** the time requirements outline in the dual course syllabus.
2. **demonstrate** regular professional interactions with peers, supervisors and/or clients
3. **add** value to the organization
4. **perform** regular responsibilities in the manner outlined in the dual course syllabus.

Plan D

Upon completion of this course, the student will:

1. **write** individual student learning objectives for the specialized experience.
2. **practice** in a safe manner that minimizes risk to patient, self and other team members (threaded in unit objectives).
3. **display** professional behaviors in all situations such as initiative, resourcefulness, good judgement, integrity, dependability, flexibility, appropriate self- confidence, constructive conflict management, etc.
4. **exhibit** accountability in ethical conduct compatible with standards addressed in the APTA Code of Ethics and other established legal and professional standards.
5. **demonstrate** 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.
6. **exhibit** appropriate culturally competent interpersonal relationships within the clinical setting and for purposes of the community and field of physical therapy at large.
7. **exhibit** sound clinical reasoning by applying knowledge, current evidence, theory, and clinical judgment with consideration of patient values and perspectives (threaded in unit objectives).
8. **explore** the following key questions:

What are the major causes of morbidity and mortality affecting the country of focus?
What health disparities and social determinants of health exist among the country's population?
What are the similarities and differences of destination culture and American cultures that contribute to the individual's contextual environment?
How do context variables influence performance and the physical therapy process?
How does religion or other cultural factors influence access to and the delivery of health care in destination country?
What are the barriers to healthcare delivery strategies and systems exist and how do they influence access to and quality of care?
What health care issues are unique or prioritized for populations in the destination country?
How will this international experience influence my future practice?

LEARNING EXPERIENCES

The above-listed course objectives will primarily be achieved through immersion and/or observation 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 clinical rotation 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 clinical rotation hours looking up relevant materials needed for patient care/physical therapy practice and completing assignments.

METHOD OF STUDENT EVALUATION

For Course Plan A and B, 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 clinical 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.

For Course Plan C, student performance will be graded as outlined in the dual degree syllabus. Student will deliver a synopsis of their learning experience upon completion of the "onsite" hours.

For Course Plan D, student performance and/or attendance will be graded using the evaluation method of the specific clinical site which generally includes evaluation of basic skills and/or

attendance sheet in addition to completion of a reflection as outlined below. Students will be expected to share their experience through flexible media during International Showcase Day or produce a written scholarly paper as outlined below.

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

Plan A:

Student Performance Evaluation

Adequate midterm evaluation scores on web-CPI (1/2 way between advanced beginner and intermediate).

- 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.

Complete a midterm self-assessment using the web-CPI.

- 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 Facebook group 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.

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.

Plan B.

Student Performance Evaluation

Web-CPI scoring as arranged with DCE. Will be based upon length of time and setting of clinical rotation.

- 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.

Course assignments, course evaluation and submission deadline same as Plan A.

Plan C:

1. Contact International Office to complete requirements and participate in currently required International Office activities prior to start of the international clinical rotation.
2. Meet with DCE to develop specific individual learning objectives and specific requirements for the clinical rotation.
3. During clinical rotation, evaluation of student performance/participation will be determined by which host international site student travels to. It will minimally contain:
 - a. Journal/Reflection – can be incorporated into the final paper/presentation
 - b. Compare and contrast assignment – consider:
 - perceptions of health/disability from the destination perspective?
 - the treatment of individuals with disability in the settings you were exposed to
 - the resources available to PTs and the flexibility in application.
 - c. Case study
 - d. Present Experience to KUMC students (presentation below) or submit paper
 - e. Professional behavior, basic skills and successful completion of experience
 - f. Routine communication with the KUMC Office of International Studies and DCE.
4. Students will be expected to share their experience through flexible media during International Showcase Day **or** produce a written scholarly paper.

Paper Guidelines:

Final papers for the international specialized clinical rotation should reflect the specific learning objectives set forth prior to the rotation. The focus of the paper should be the medical or public health practices and/or the health care system experienced overseas. Documentation of touristic experiences should be secondary.

The paper should be of professional, graduate-level quality that is supported by scientific literary references. Each paper should incorporate at least 3-5 peer-reviewed articles that pertain to your specific learning objectives. These articles should be used: (a) to highlight the significance of the problem/solution; (b) to discuss the empirical prevention and/or treatment of the condition or problem in question; and (c) to provide insights as to how the target population differs from other populations and what is needed to better serve the target population or how the health care system differs from the US. Papers must be 6-10 pages (excluding tables, figures, and references), double-spaced, and typed in standard 12-pt font.

The following guideline is recommended for all papers:

1. Cover Page – Include your name, year of elective, and city and country to which you traveled on the first page of your paper.
2. Introduction – Specify the nature of the clinical rotation site, a brief description of your clinical experience at this site, and the objectives set prior to the visit.
3. Body – Choose

A. Global	B. Course key questions – experience application.
Evidence-Based Practice/Public Health – Reflect on the specific public health,	1. What are the similarities and differences of destination culture and

<p>clinical, health care system, or clinical training explored with during the rotation. A discussion should be made to present the significance of the topic and its prevention and/or treatment (when applicable). Contrasts should be made between your experience and what: a) what is considered evidence-based physical therapy, or b) how the issue is addressed typically in the United States or elsewhere.</p>	<p>American cultures that contribute to the individual's contextual environment?</p>
<p>Cultural Relativism – Cultural influences impact the way in which people approach health care practices. This is equally true in remote or developing countries as well as within developed regions. Critically discuss the impact of culture on preventive health and/or treatment and discuss the benefits and drawbacks of the cultural influence as you see them. Pay special attention to ensuring that your discussion is professional in nature.</p>	<p>2. How do context variables influence performance and the physical therapy process?</p>
<p>Sociocultural and Geopolitical Considerations – Sociocultural and geopolitical variations often compel a different approach to the same problem across populations or Countries. In this section, these variations should be discussed in light of the public health, clinical, health care system or medical training addressed in your learning objectives. Discussion can be made at the structural, cultural, and/or individual levels.</p>	<p>3. How does religion or other cultural factors influence access to and the delivery of health care in destination country? 4. What health care issues are unique or prioritized for populations in the destination country?</p>

3. Conclusion – A summary or personal reflection of your experience abroad, particularly in terms of whether set objectives are met and how the overall experience will help you to become a better clinician and, if that is not the case, why not.
4. References – Reference all citations using AMA style.
5. Travel Suggestions – Supply a brief list of practical suggestions for students who will travel in the future to the same international site.

Presentation Guidelines

The presentation during International Week can be in form of poster, oral presentation or sharing of a blog written during the experience.

The content of the presentation will include:

1. Background: Introduction to country and rationale for the primary issue/topic covered in your Specific Learning Objectives
2. Most Profound Knowledge Gained: Description of the most profound knowledge you gained related to the primary issue/problem addressed in your Specific Learning Objectives **and** to the course key questions.
3. Conclusion: Summary statement of how the learning experience can be incorporated/translated to better your clinical practice in the future.

Posters are limited to 15 slides.

Posters must include:

1. Title slide (1 slide)
2. Poster Title
3. Your Name
4. City and Country visited
5. Objectives (1 slide)
6. Description of site and hospital/clinic (1-2 slides)
7. Background information that supports/led to your Specific Learning Objectives choice (i.e., scientific literary sources/references) (1-2 slides)
8. Overall description of the topic/issues covered in your Specific Learning Objectives (1 slide)
9. A highlight of the primary information you learned specific to your Learning Objectives (5 slides maximum)
10. Conclusions/Suggestions – Concluding summary points regarding the topic(s) covered in your Specific Learning Objectives and suggestions for how to address the issues put forth (if relevant) (1 slide)
11. Most profound clinical/academic experience (1 slide)
12. Most profound cultural experience (1 slide)
13. References (1 slide)

Photos included in poster:

MUST include captions

Students who visit the same site **MUST NOT** use the same photos

NOTE: Students **MUST** prepare their own annotated bibliography, abstract, paper, and poster independently. For example, students going to the same international site must not present duplicate documents – all of your work must be individually prepared.

Plan D: See dual degree syllabus

REMEDICATION 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 clinical rotation hours for any reason, the student 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 policy and procedures.

ACADEMIC MISCONDUCT

Academic misconduct is covered fully in the DPT 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 & WELLNESS 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. Please access other related resources through the student resource folders located in the Blackboard "PTRSAT Students" organization.

ACADEMIC ACCOMODATION 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 <https://www.kumc.edu/academic-and-student-affairs/departments/academic-accommodation-services.html>. 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 ACCOMODATIONS

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.

If a student feels they are not doing satisfactory work at mid-term or any time during the semester, it is strongly recommended the student dialogue with the DCE to design a plan for improvement. [Counseling and Educational Support Services](#) may be an additional, beneficial student resource.

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 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 05/19/2023