

This is a SouthArk Master Syllabus. The course syllabus distributed by the instructor may include additional requirements, must be followed by the student in the given term, and is considered to supersede the Master Syllabus.

Course Number

PTAP 2315/L

Course Title

Applied Physical Therapy I / Lab

Course Description

Course Description: Applied Physical Therapy I involves the study of physical therapy data collection procedures relating to patient status (temperature, heart rate, blood pressure, respiration, pain), and selected therapeutic interventions such as asepsis, Universal Precautions, sterile technique, body mechanics, transfers, positioning, gait training with assistive devices, and range of motion exercises, stretching exercises, peripheral joint mobilization, resistive exercises for the upper extremity, and data collection related to the assessment of motion and strength for the upper extremity. Emphasis shall be placed on effective oral and written communication, the roles of the other members of the health care team, and the performance of treatment interventions as developed by the Physical Therapist.

Lecture hours: 45 hours

Lab hours: 60 hours

College Mission

South Arkansas Community College promotes excellence in learning, teaching, and service; provides lifelong educational opportunities; and serves as a cultural, intellectual, and economic resource for the community.

College Wide Student Learner Outcomes

Critical Thinking

Responsibility

Communication

ACTS Course

Program Course

Physical Therapist Assistant

ACTS Outcomes

NA

Program Goals and Objectives / Outcomes

PTAP 2315/L includes preparation in the cognitive, affective, and psychomotor domains utilizing critical thinking to become competent entry-level Physical Therapist Assistants. The student successfully completing this course

- 1) Works under the supervision of a Physical Therapist (PT) in providing patient care services after the PT performs the initial evaluation and delegates responsibilities to the Physical Therapist Assistant (PTA).
- 2) Defines and applies the scope of practice of PTAs within the team of health care providers.
- 3) Exhibits conduct that reflects a commitment to the profession while safely, ethically, and legally practicing within the field of physical therapy.
- 4) Applies knowledge of anatomy and physiology of the human body as related to pathologies / injuries commonly seen in the practice of physical therapy.
- 5) Performs selected physical therapy interventions within the plan of care; adjusts interventions as indicated; and reports to supervising PT.
- 6) Performs data collection skills as directed by the supervising PT and reports to supervising PT.
- 7) Communicates effectively, verbally, nonverbally, and in writing, with patients and their families, the supervising PT, other members of the physical therapy staff, and all members of the health care team.
- 8) Recognizes and responds appropriately to the emotional, psycho-social, economic, and relational aspects of physical therapy care with an appreciation of individual and cultural differences.

Course Learner Objectives / Outcomes

CLO #	Course Learner Outcomes (CLO)	Unit Outcomes/Competencies	Program Outcomes	Critical Thinking	Communication	Responsibility	Assessment
CLO 1	Describe normal/abnormal vitals, describe appropriate response to pt incidents, perform vitals assessment,	1, 2, 3, 4	1, 2, 3, 4, 6, 7	CT1	C2	R2	Written examination Peer lab assessment Lab practical examination
CLO 2	Describe & perform Universal Precautions, sterile technique and ace wrap	1, 5, 6, 7, 8	1, 2, 3, 4, 5	CT1	C2	R2	Written examination Peer lab assessment Lab practical examination
CLO 3	Achieve CPR certification	9	4, 7	CT1		R2	Written examination Skills examination
CLO 4	Explain & perform pt positioning, proper body mechanics and transfers	10, 11, 12, 13, 14, 15	1, 2, 3, 4, 5, 6, 7	CT1	C2	R2	Written examination Peer lab assessment Lab practical examination
CLO 5	Discuss & perform wheelchair maneuvers, gait w/ assistive devices	16, 17, 18	1, 2, 3, 4, 5, 6	CT1	C2	R2	Written examination Peer lab assessment Lab practical examination
CLO 6	Discuss & apply appropriate physical therapy documentation & patient instruction	19, 21, 24, 30, 33	7	CT1	C1 C2		Written examination Lab practical examination
CLO 7	Discuss & perform therapeutic exercises (stretching, ROM, resistive)	20, 21, 22, 23, 24, 29, 30, 31	1, 2, 3, 4, 5, 6	CT3	C1 C2	R2	Written examination Peer lab assessment
CLO 8	Discuss & perform assessment techniques for the shoulder (goniometry, MMT)	25, 26, 27, 28	1, 2, 4, 6	CT3	C1 C2	R2	Written examination Peer lab assessment
CLO 9	Discuss Evidence-Based Practice	32	3, 5, 6	CT1	C1 C2	R2	Written examination

- 1) Written examinations: 75% of the measures for the above CLO were met on written examination/s.
- 2) Peer lab assessment: students will complete lab practices on a minimum of 4 subjects
- 3) Lab practical examination: all students will successfully complete the lab practical exam within 3 attempts
- 4) Documentation of lab practical using departmental rubric

Unit Objectives / Outcomes / Competencies

The student successfully completing this course will be able to

1. Prepare patient, treatment areas, and equipment;
2. Demonstrate entry-level performance in monitoring and recording vital signs (temperature, heart rate, blood pressure, respiration and pain);
3. Describe normal and abnormal values of temperature, heart rate, blood pressure, and respiration;
4. Respond appropriately to common patient incidents;
5. Describe and perform therapy interventions using Universal Precautions;
6. Demonstrate proper sterile technique / clean technique / ace wrap;
7. Achieve CPR certification;
8. Demonstrate entry-level performance in patient positioning, including skin and sensory assessment, documentation, identification of postures, positioning and activities that create good/poor body mechanics, and patient/family instruction in positioning;
9. Demonstrate proper body mechanics;
10. Demonstrate safe and efficient patient transfers, including documentation and patient/family instruction of such;
11. Assemble, disassemble and measure standard wheelchairs;
12. Demonstrate entry-level performance in safe gait training using assistive devices, including appropriate patient/family instruction and documentation of such;
13. Discuss the format for documentation, documentation for reimbursement, HIPAA guidelines and begin applying appropriate notewriting in mock patient care situations;

14. Discuss the basic objectives of a therapeutic exercise program including strength, endurance, relaxation, flexibility, coordination and stretching;
15. Demonstrate entry-level skill in performing ROM exercises (passive, active-assistive, active, resistive, self-assistive, mechanically-assisted), including documentation and appropriate patient/family training for the upper extremity;
16. Demonstrate entry-level skill in performing stretching exercises (including relaxation and inhibition techniques), including documentation and appropriate patient/family instruction for the upper extremity;
17. Demonstrate entry-level skill in data collection of measurement of joint motion (goniometry) and muscle strength (MMT) for the upper extremity;
18. Discuss rationale for progression of therapeutic interventions within the Physical Therapist's plan of care; and
19. Discuss the purpose of evidence-based practice and its application to physical therapy interventions.

Course Outline:

- I. Evidence-Based Practice
 - A. Terminology
 - B. Types of evidence
 - C. Evaluating evidence
 - D. Applying evidence-based practice to physical therapy interventions
- II. Preparation for patient treatment
 - A. Introduction to equipment used in physical therapy
 - B. Introduction to patient handling (privacy, draping)
- III. Safety and First Aid
 - A. Vital signs: temperature, heart rate, blood pressure, respiration, pain
 1. Normal and abnormal parameters
 2. How to measure
 3. How to recognize patient distress
 4. Documentation of patient status
 5. Pain questionnaires, graphs, drawing, visual and behavioral scales
 - B. First aid for common patient incidents (fainting, dizziness)
 - C. Safety precautions for patients with IVs, catheters, tracheostomies, respirators
 - D. Variance / Incident / Accident Reports
 - E. Asepsis
 - F. Universal Precautions
 - G. Sterile Technique / Clean Technique
- IV. Cardiopulmonary Resuscitation
 - A. CPR Training and Certification
- V. Patient Positioning
 - A. Pressure points in various positions (supine, prone, sidelying, sitting)
 - B. Skin and sensory assessment (temperature, pressure, 2-point discrimination)
 - C. Relief of pressure points
 - D. Positioning for proper posture (supine, prone, sidelying, sitting, standing)
 - E. Documentation of patient positioning
- VI. Body Mechanics and Transfer Training
 - A. Definitions of terms related to body mechanics (center of gravity, line of gravity, body mechanics, posture, equilibrium)
 - B. Identification of postures, positioning and activities that create good/poor body mechanics
 - C. Transfer techniques
 1. Standing pivot
 2. Sitting
 3. 3-man lift
 4. Sliding board transfer
 5. Tilt table
 6. Safety precautions
 - D. Documentation of transfers
 - E. Patient and family education for safe transfers
- VII. Wheelchair mechanics
 - A. Types of wheelchairs
 - B. Basic measurement for wheelchairs
 - C. Disassemble and assemble wheelchairs
- VIII. Basic Gait Training and Ambulation Skills

- A. Introduction to normal gait
 - B. Assistive devices (crutches, walkers, canes) measurement and safety
 - C. Safety precautions
 - D. Documentation of gait training
 - E. Patient and family education for safe gait training
 - F. Progression of gait training within the PT's treatment plan
- IX. Medical Reports
- A. Components
 - B. Locating necessary information
 - C. Introduction to SOAP format
 - D. The PT record (evaluation, plan of care, progress notes, discharge summary)
 - E. "Guidelines for Documentation" from the American Physical Therapy Association
 - F. Privacy and confidentiality of medical records
 - G. HIPAA
 - H. Documentation for reimbursement
 - I. Documentation to prevent / defend an appeal
 - J. Documentation of function
- X. Introduction to Therapeutic Exercises
- A. Factors affecting the development of a therapeutic exercise program
 - B. Effects of therapeutic exercise on body systems and selected medical conditions
 - C. Objectives and goals of therapeutic exercise
 - D. Definitions relating to exercise (concentric, eccentric, isokinetic, isometric, gravity-assisted, gravity-resisted)
 - E. Indications for therapeutic exercise
 - F. Precautions and contraindications for therapeutic exercise
- XI. Range of Motion Exercises
- A. Causes of limitations
 - B. Goals and indications for ROM exercises
 - C. Precautions and contraindications for ROM exercises
 - D. Documentation of ROM exercises
 - E. Patient and family education for ROM exercises
 - F. Procedures and techniques (anatomical planes, patterns of motion, functional patterns, passive, active-assistive, active, self-assisted, mechanically-assisted, CPM)
 - G. Progression of ROM exercises within PT's plan of care
- XII. Stretching
- A. Definitions
 - B. Properties of soft tissues
 - C. Goals and indications for stretching exercises
 - D. Precautions and contraindications for stretching exercises
 - E. Documentation of stretching exercises
 - F. Patient and family education for stretching exercises
 - G. Therapeutic stretching techniques
 - H. Relaxation and inhibition techniques used with stretching (contract-relax, agonist contraction, etc.)
 - I. Progression of stretching techniques within the PT's plan of care
- XIII. Peripheral Joint Mobilization
- A. Goals and indications for peripheral mobilization
 - B. Precautions and contraindications for peripheral mobilization
 - C. Grades
- XV. Resistive Exercises
- A. Goals and indications for resistive exercises
 - B. Precautions and contraindications for resistive exercises
 - C. Therapeutic techniques
 - D. Manual resistance
 - E. Mechanical resistance
 - F. Documentation of resistive exercises / consultation with supervising PT
 - G. Patient and family education for resistive exercises
 - H. Progression of exercises within the PT's plan of care
 - I. PTA's role in assisting supervising PT with discharge planning
- VX. ROM Assessment
- A. Landmarks
 - B. Measuring techniques

- C. Documentation of motion
- XVI. Muscle Strength Testing
 - A. Grades
 - B. Testing techniques
 - C. Muscle action, origin, insertion, innervation, spinal level
 - D. Documentation of strength testing
- XVII. Shoulder Complex
 - A. Common shoulder pathologies
 - B. Therapeutic exercise techniques for the shoulder complex (ROM, stretching, peripheral joint mobilization, resistive exercises)
- XVIII. Upper Extremity PNF

Assessment Description(s)

Written examinations are criterion referenced scored.
 Homework assessed based upon departmental rubric.
 Lab practical examinations are scored based upon departmental rubric.

Materials and Technological Requirements

Physical Rehabilitation for the Physical Therapist Assistant, by Cameron & Monroe, Elsevier Publishing, 2011.

Therapeutic Exercise: Foundations and Techniques, 6th edition, by Carolyn Kisner and Lynn Ann Colby, F.A. Davis Publisher, 2012.

Documentation for Physical Therapist Assistants, 4th edition, by Wendy Bircher, F.A. Davis Publisher, 2013.

Muscle Testing: Techniques of Manual Examination, 9th edition, by Helen Hislop and Jacqueline Montgomery, W.B. Saunders Publishing, 2014.

Measurement of Joint Motion: A Guide to Goniometry, 4th edition, by Cynthia C. Norkin and D. Joyce White, F.A. Davis Publisher, 2009.

Packet of handouts – available in the bookstore

Class Attendance Policy

Students are expected to attend all classes in which they are enrolled. If a student is absent from a class session, it is the student’s responsibility to make arrangements to complete or make up any work missed. No make-up work for missed classes will be allowed without the approval of the instructor. Students who enroll late must assume all responsibility for work missed. Classes not attended as a result of late enrollment may be counted toward excessive absences. Students not attending the entire class period may be counted absent for that period. An instructor may drop students with a grade of “WE” if students have been absent for an excessive number of days. Warning letters will be sent to the students advising them of the consequences of nonattendance and urging them to contact their instructors immediately. Excessive absences are defined as follows:

Regular Semester

- Courses which meet once a week.....2 absences
- Courses that meet twice per week3 absences
- Courses that meet four times per week.....5 absences

Summer Session

- Courses that meet four times per week in a five week session3 absences
- Courses which meet two evenings per week in a 10 week session.....3 absences

Students enrolled in special programs or individualized instruction should contact their program director/instructor regarding specific attendance requirements for the program/course. Some of the selective-admission, health-science programs have specific criteria regarding attendance. Students are encouraged to refer to program policies in these matters.

Jury Duty/Military/Official School Function

Scheduled absences are those that occur due to college-related activities or as a result of summons to jury duty or military duty. Classes missed as a result of scheduled absences will not be counted as excessive absences if the instructor is

notified and provided documentation prior to the absence(s). Make-up work for scheduled absences will be at the discretion of the instructor.

In all instances, documentation must be provided to the instructor within 24 hours of receipt. Documentation should come from an appropriate party on letterhead or other official stationery with a signature and contact information.

Documentation should list the corresponding dates of the leave.

Medical leave

For medical-related absences, documentation must include written notice from the treating medical professional documenting time needed off related to medical reasons and time student may resume classes. The medical reason does not need to be listed on the documentation; the documentation must include only that there is a medical reason, the amount of time the student needs to be absent, and the time the student should be able to return to classes. Students who elect to work at home while on excused leave must meet with their instructors to make arrangements to do so. Working on coursework while on medical leave is not a requirement but can be requested by students. If students request that they be allowed to work at home while on an excused leave, the instructor will make every reasonable effort to ensure that the student is able to do so.

For students who have a medical condition necessitating time off or accommodation:

- 1) They may work at home on assignments if they choose to if on medical leave approved by a medical professional
- 2) Receive appropriate accommodations related to coursework (i.e., excused from labs with potentially harmful chemicals, have a larger desk, etc.)
- 3) Resume their studies where they left off once they return to classes
- 4) Be allowed to make up any missed work related to medical leave
- 5) Receive incompletes on their transcripts until coursework is completed, according to the incomplete grade contract.
- 6) Be given a reasonable time frame in which to complete missed coursework

Academic Honesty Policy

Students enrolled at South Arkansas Community College are expected at all times to uphold standards of integrity.

Students are expected to perform honestly and to work in every way possible to eliminate academic dishonesty.

Academic dishonesty includes cheating and plagiarism, which are defined as follows:

- Cheating is an attempt to deceive the instructor in his/her effort to evaluate fairly an academic exercise. Cheating includes copying another student's homework, class work, or required project (in whole or in part) and/or presenting another's work as the student's own. Cheating also includes giving, receiving, offering, and/or soliciting information on a quiz, test, or examination.
- Plagiarism is the copying of any published work such as books, magazines, audiovisual programs, electronic media, and films or copying the theme or manuscript of another student. It is plagiarism when one uses direct quotations without proper credit or when one uses the ideas of another without giving proper credit. When three or more consecutive words are borrowed, the borrowing should be recognized by the use of quotation marks and proper parenthetical and bibliographic notations.

If, upon investigation, the instructor determines that the student is guilty of cheating or plagiarism, the following penalties will apply:

- The student will receive a penalty of no less than a zero on the work in question.
- The instructor will submit a Student Academic Misconduct Form, written report of the incident, to the appropriate dean.
- The dean will submit form to Vice President for Learning to determine disciplinary action.
- The Vice President for Learning will determine whether further disciplinary action will be taken.
- All decisions may be appealed for review through the college's academic appeals procedure.

Equal Opportunity-Affirmative Action Statement

South Arkansas Community College does not discriminate on the basis of age, race, color, creed, gender, religion, marital status, veteran's status, national origin, disability, or sexual orientation in making decisions regarding employment, student admission, or other functions, operations, or activities.

Library Services

Library Homepage: <http://southark.libguides.com/homepage> Library Contact: LibraryStaff@southark.edu or 870.864.7115

Procedures to Accommodate Students with Disabilities:

If you need reasonable accommodations because of a disability, please report this to the Vice President of Student Services with proper documentation. . VPSS Contact: 870.875.7262

The Early Alert System

In an effort to ensure student retention and success, South Arkansas Community College employs an Early Alert System to identify and support at-risk students as soon as possible in a given semester. The intent of Early Alert is to provide this assistance while there is still time to address behaviors or issues that have the potential of preventing students from completing their courses and degree plans. Students referred through the Early Alert System will be required to work on a corrective action plan with their student advising coach and to include attendance accountability and mandatory academic tutoring either in the academic division or in the Testing and Learning Center (TLC).

Once the Student Advising Coach has met with the referred student, and again when the student has met the prescribed corrective actions, the coach will update the Early Alert System so that the instructor is kept informed of the progress in resolving issues.

Behavioral Review Team

At South Arkansas Community College (SouthArk), we are committed to proactive leadership in student wellbeing and campus safety. By focusing on prevention and early intervention with campus situations that involve any person experiencing distress or engaging in harmful or disruptive behaviors, the BRT will serve as the coordinating hub of existing resources to develop intervention and support strategies and offer case management. Students, faculty, staff, and campus guests are encouraged to report any person on campus who is a concern. BRT Contact: 870.875.7262
BRT@southark.edu

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