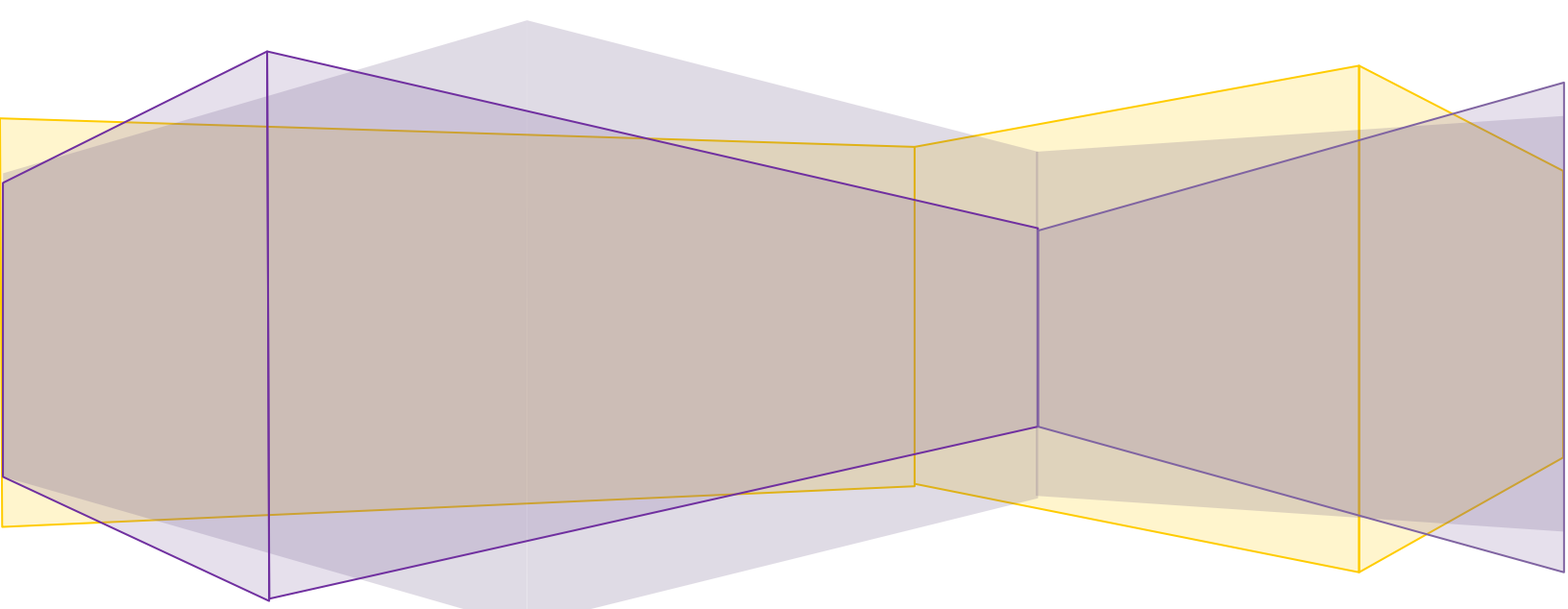


# LSU Health Sciences Center- New Orleans

## Student Manual Department of Physical Therapy



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**DEPARTMENT OF PHYSICAL THERAPY****LSU Health Sciences Center - School of Allied Health Professions**

The Department of Physical Therapy offers an entry level Doctor of Physical Therapy (DPT) degree program for persons interested in becoming a physical therapist. The policies outlined in this document apply to these DPT students. The entry level program is fully accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE). The Department continuously evaluates the curriculum and policies, thus, modifications may occur.

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**MISSION**

**The Mission Statement of the LSU HEALTH SCIENCES CENTER** is as follows:

The mission of Louisiana State University Health Sciences Center in New Orleans (LSUHSC-NO) is to provide education, research, and public service through direct patient care and community outreach. LSUHSC-NO comprises the Schools of Allied Health Professions, Dentistry, Graduate Studies, Medicine, Nursing, and Public Health.

LSUHSC-NO educational programs prepare students for careers as health care professionals and scientists. The Health Sciences Center disseminates and advances knowledge through State and national programs of basic and clinical research, resulting in publications, technology transfer, and related economic enhancements to meet the changing needs of the State of Louisiana and the nation.

LSUHSC-NO provides vital public service through direct patient care, including care of uninsured and indigent patients. Health care services are provided through LSUHSC-NO clinics in allied health, medicine, nursing, and in numerous affiliated hospitals, and clinics throughout Louisiana.

LSUHSC-NO provides referral services, continuing education, and information relevant to the public health of the citizens of Louisiana. In addition, LSUHSC-NO works cooperatively with two Area Health Education Centers (AHEC's), whose programs focus on improving the number of health care providers in underserved rural and urban areas of Louisiana and on supporting existing rural health care providers throughout continuing education programs.

**The Mission, Philosophy and Objectives Statement of the LSUHSC SCHOOL OF ALLIED HEALTH PROFESSIONS SCHOOL** is as follows:

The School of Allied Health Professions subscribes to the philosophy of the LSU System which has a threefold purpose:

- Developing to the highest level the intellectual and professional capacities of citizens through resident instruction;
- Enriching instruction and establishing new frontiers through research and scholarship;
- Providing all Louisianans with information useful to advancing the State's economy and culture.

The School of Allied Health Professions recognizes that total health care of the community, State, and the Nation must increasingly draw upon personnel, talents, and techniques of a broad range of disciplines. Therefore, programs for the education of allied health professionals must not only incorporate an understanding of, and appreciation for their own field but also, the fields of medicine, dentistry, and nursing. A comprehensive acquaintance with the cultural and physical heritage and bodies of knowledge which will assist the student in living a productive, humanitarian, and successful life in society is deemed important. The School recognizes its obligation to develop educational programs in the allied health professions compatible with this philosophy and striving for the highest level recognized as being justifiable in terms of the roles and responsibilities its graduates will assume.

The primary objective of the School is to increase the supply, at the undergraduate and graduate levels, of a variety of patient-oriented health professionals in the State of Louisiana and to meet the need for health services and future teachers in health-educational programs. The training for any health profession can best be accomplished in a health-oriented environment such as the Health Sciences Center. This environment will permit the physician, dentist, nurse, allied health professional, and the student an opportunity to see the patient as a team, thus developing sound working relationships requisite to educating the student for a role of leadership. Because of the close relationship developed with other undergraduate campuses of the LSU System, a strong core curriculum is available from which students can obtain a basic foundation and general understanding of various fields in allied health. This will permit students to sample a broad spectrum before final selection of a specific field and admission to the School of Allied Health Professions. The School provides vital public health and human services through direct patient/client care, and support for families. Health care services are provided through the Allied Health Clinics in New Orleans and Shreveport, and in association with the State Public Hospital System. Human services for clients with developmental disabilities and their families are provided by the Human Development Center in New Orleans, and the Children's Center in Shreveport. A further objective of the School is to develop and maintain programs to investigate studies and research within the allied health disciplines. The School will also assume a position of leadership in providing a mechanism to promote development of programs to meet the continuing educational needs of allied health professionals in Louisiana.

### **Department of Physical Therapy Mission:**

The DEPARTMENT OF PHYSICAL THERAPY is recognized by LSUHSC for our contribution to the achievement of the mission of the LSU Health Sciences Center. The mission of the Department supports and augments the missions of both the LSU Health Sciences Center and the School of Allied Health Professions.

The DEPARTMENT OF PHYSICAL THERAPY is recognized by LSUHSC for our contribution to the achievement of the mission of the LSU Health Sciences Center. The mission of the Department supports and augments the missions of both the LSU Health Sciences Center and the School of Allied Health Professions.

*The mission and primary enterprise of the Department is to educate thoughtful individuals who are competent, knowledgeable, and ethical professionals; dedicated to improving their community through provision of quality, evidence-based physical therapy services. Our graduates demonstrate a commitment to the professional organization and to the education of future physical therapists. Our graduates are scientific clinicians, skilled in critical thinking and capable of integrating theory with clinical practice.*

*The faculty members, collectively and individually, embody and exemplify each of those attributes we seek to instill in our graduates. It is the obligation of each faculty member to provide the intellectual and inspirational foundation needed to guide the development of those attributes in our graduates. As role models of professional behavior and practice, faculty members provide public service through direct patient care, including care of underserved populations; and they advance the knowledge of physical therapy through clinical and basic health science research.*

**The Department of Physical Therapy Vision Statement** is in keeping with the Vision Statement of the Louisiana State University Health Sciences Center in New Orleans.

The Department will be recognized for its:

- Campus culture of learning and discovery, positioned for constant change and continuous growth and exploitation of opportunities.
- Skilled professionals, who are specialists in concentrated areas of physical therapy, who produce innovative education for physical therapy students, enhance acquisition of knowledge and research grants, and provide excellence in all patient care.
- Bright future, entwined with community and local partnerships, to serve the needs of the State of Louisiana as well as the nation with more health professionals, new knowledge, and excellent clinical care.

The program philosophy, purpose, primary aim, and program goals are specified below.

### **Program Philosophy**

Physical therapy is a health profession founded in response to the health care needs of individuals and society. Attitudes and beliefs about the quality of life, the nature of health and illness, and man's right to reach life's full potential are implicit in its philosophical tenets. As a profession, physical therapy seeks to maintain, improve, or restore dignity and health through the delivery of quality physical therapy services. A pursuit of excellence, as well as a commitment to service and the helping process enables the physical therapist to function as an integral part of the health care team.

With this intent, the focus of physical therapy education becomes dynamic and diverse. The educational process involves active, responsible participation by both faculty and students. Through an exemplary quest for competence in educational and professional practice, the physical therapy educator becomes a role model and guide. The primary mission of the Department is to provide leadership, foster research, and promote professional growth and responsibility. The student must also accept the responsibility to develop and grow professionally to the fullest extent possible. For these reasons, the Department of Physical Therapy is committed to promoting a respect for human dignity and a quest for excellence.

The curriculum is designed to impart to the student the requisite knowledge, skills, and attitudes necessary to function as a qualified and responsible professional.

We believe the combination of experience, scholarship, and opportunity embedded in this program will enable the student to assume responsibility for the health care needs of individuals and society. The graduate of this program will be prepared to examine roles and responsibilities of being a physical therapist, as well as to regard the profession as a lifetime of learning. Toward this end, the Department of Physical Therapy is directed toward the education of academically and professionally qualified physical therapists that are committed to the delivery of comprehensive and quality health care.

### Department, Program and Curricular Purposes/Goals

The primary aim of the Department of Physical Therapy is to educate academically and professionally qualified physical therapists who are committed to the delivery of comprehensive and quality health care. The curriculum enables the student to develop the requisite knowledge, skills, and attitudes necessary to enter the profession and to practice in a safe and autonomous manner. In keeping with the Health Sciences Center and the School missions and philosophies, and consistent with contemporary preparation of physical Therapy professionals, the Department of Physical Therapy subscribes to the purposes & goals of providing education, research, and public service by:

- Developing to the highest level, the intellectual and professional capacities of citizens through the preparation of health care professionals and scientists who are:
  - Professionally involved, culturally competent, knowledgeable and ethical practitioners.
  - Capable of developing sound working relationships and leadership skills that will translate to effective team work in whatever capacity they find themselves in life.
  - Scientific clinicians skilled in critical thinking, capable of integrating theory and clinical practice, and capable of providing quality, evidence-based physical therapy services.
- Enriching instruction and establishing new frontiers through research and scholarship by:
  - Advancing the knowledge of physical therapy through educational, clinical and/or basic health science research
- Providing vital public service through activities such as:
  - Direct patient care, community outreach, continuing education, dissemination of information relevant to the public health of the citizens of Louisiana.

With this intent, the following program curricular goals have been established. Upon successful completion of the requirements for a Doctor of Physical Therapy Degree, the graduate will be able to:

- Demonstrate professional behaviors.
- Engage in the diagnostic process through the use of appropriate examination and evaluation of patients across the lifespan.
- Design and implement a physical therapy plan of care reflecting critical inquiry and sound clinical decision making strategies, including:
  - Determine the physical therapy needs of any patient by the use of appropriate assessment and
  - Evaluative procedures and correct interpretation of patient care.
  - Design an appropriate plan of physical therapy services based on evaluation results and realistic goals.
  - Implement the physical therapy plan of care and modify the goals or plan as needed.

- Communicate effectively with patients, families, peers, and the community using written, verbal, and nonverbal processes:
  - Observe, record, and interpret pertinent information concerning patient problems, treatment, goals, and progress.
  - Communicate accurate and appropriate verbal information in a clear and concise manner.
  - Listen in a manner which facilitates communication and accurately interprets the communication of others.
  - Use nonverbal communication processes to express oneself.
  - Value the importance of effective communication in the provision of health care services.
- Participate in the design and management of a physical therapy services:
  - Apply principles of planning, organization, supervision, and evaluation.
  - Design a system for the management of personnel, equipment, space, and finance.
- Promote ethical and legal practices.
- Contribute to and participate in the growth and development of physical therapy.
- Utilize the scientific method in the patient care process.
- Support professional advancement through appropriate participation in professional activities, research, continuing education, and recruitment.
- Discuss the issues and problems in health care delivery systems.
- Accept responsibility for personal and professional growth.

## FACULTY & STAFF

Jane Eason, PhD, PT  
 Department Head  
 Associate Professor

Mattie Pontiff, PT, DPT, OCS  
 Instructor

Luther Gill, PhD, PT  
 Assistant Professor

Jeffrey Thompson, PT, DPT, OCS  
 Assistant Professor

Ha Hoang, PT, MHS, DCE  
 Assistant Professor

Rachel Wellons, PT, DPT, NCS  
 Assistant Professor

Noelle Moreau, PhD, PT  
 Associate Professor

Rose Rousselle  
 Administrative Assistant



**DEPARTMENT OF PHYSICAL THERAPY**  
**School of Allied Health Professions**  
**LSU Health Sciences Center**

**TECHNICAL STANDARDS POLICY \***

The American with Disabilities Act (ADA) ensures the qualified applicant with a disability the opportunity to pursue program admission at public institutions. To determine whether an individual is a qualified applicant for programs or services, the ADA states that applicants must meet essential eligibility requirements.

The following performance standards are set forth so that the student will understand the essential eligibility requirements for participation and progression in the physical therapy curriculum. Standards cover interpersonal skills, communication, psychomotor skills, and cognitive skills. The ability to observe, evaluate, and treat a patient independently, while ensuring patient safety at all times is an expectation of the Department of Physical Therapy.

The purpose of this policy is to ensure that all physical therapy students are able to provide swift, safe, and competent evaluation and treatment to patients. All students will be held to the same standards and must be able to perform the technical standards of their positions with or without reasonable accommodation.

Upon request of persons with disabilities, Louisiana State University Health Sciences Center will provide reasonable accommodations. However, the Department of Physical Therapy of LSU Health Sciences Center is unable to make accommodations that impose an undue burden, present a threat to the health or safety of the individual or others, or fundamentally alter the nature of the curriculum including didactic components, laboratory sessions, and clinical affiliations.

Each accepted applicant must complete an affidavit that attests to their ability to fulfill the technical standards of the Physical Therapy Department. Questions about the accommodation process may be directed to the Dr. Erin Dugan, Associate Dean of Academic Affairs at [emart3@lsuhsc.edu](mailto:emart3@lsuhsc.edu). The procedure for requesting accommodations is located in the School of Allied Health Professions Student Handbook, located at <http://alliedhealth.lsuhscc.edu/Admin/docs/StudentHandbook.pdf?version1.081116>.

\* Adapted with permission from Howard University

*See specific Technical Standards on pages 48-51 in this handbook.*

## COURSES/COURSE DESCRIPTIONS

Course descriptions are located in the LSUHSC Catalog/Bulletin:

[http://catalog.lsuhs.edu/content.php?catoid=5&catoid=5&navoid=929&filter%5Bitem\\_type%5D=3&filter%5Bonly\\_active%5D=1&filter%5B3%5D=1&filter%5Bcpage%5D=10#acalog\\_template\\_course\\_filter](http://catalog.lsuhs.edu/content.php?catoid=5&catoid=5&navoid=929&filter%5Bitem_type%5D=3&filter%5Bonly_active%5D=1&filter%5B3%5D=1&filter%5Bcpage%5D=10#acalog_template_course_filter)

## COURSE SEQUENCING

The Doctor of Physical Therapy Curriculum is located at the following link:

<http://alliedhealth.lsuhs.edu/pt/docs/DPTCurriculum.pdf?version1.4122017>

## GENERAL POLICIES

All Departmental faculty and students must be aware of our responsibility for preserving the privacy, dignity, and safety of all people, including patients, patients' families or care givers, students, faculty, and support staff who are involved in the program in any way. Involvement in the program includes in classrooms, laboratories, clinical education, patient care, research, and administrative activities.

### Nondiscrimination

Nondiscrimination policies of the Health Sciences Center are stated in the *LSUHSC Catalog/Bulletin*: "LSU System assures equal opportunity for all qualified persons without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, marital status, or veteran's status in the admission to, participating in or employment in the programs and activities which the LSU System operates." The *Catalog/Bulletin* further identifies mechanisms for filing an inquiry or complaint regarding equal opportunity at the LSU Health Sciences Center. Addresses and phone numbers of the Affirmative Action/Equal Opportunity Office and the Office of Human Resource Management are provided. These offices also answer questions regarding equal opportunity at the Health Sciences Center. The *Catalog* states that anyone "believing they have been discriminated against contrary to federal law are entitled to make an inquiry or file a complaint with: United States Equal Employment Opportunity Commission or United States Department of Health and Human Services, Office for Civil Rights" and addresses of these agencies are provided (*LSUHSC Catalog/Bulletin*). Policies regarding reasonable accommodation for persons with a disability and policies protecting against sexual harassment also are outlined in the *Catalog*.

The *LSUHSC Catalog/Bulletin* is available by Internet access through the LSUHSC web site. Departmental Academic Policies are published in subsequent sections of this *Manual*. The *LSUHSC Catalog* outlines the academic policies in sections entitled "Grading and Evaluation of Performance," "Graduate Professional Scholastic Requirements," and "Provisions for Academic Progression." Furthermore, the *Catalog* describes policies for Leave of Absence, Withdrawals, and Dismissals. The SAHP "Statement of Satisfactory Academic Progress" and "Student Academic Appeals" are outlined in the *Catalog*. Policies and procedures for Academic Conduct are specified in the *LSUHSC School of Allied Health Professions Policy And Procedures Related To Student Conduct*.

Evaluation and retention of students are provided in an equitable manner. Policies and procedures regarding due process in the handling of student concerns and/or complaints of the program and of the Health Sciences Center are outlined in the *LSUHSC Catalog/Bulletin*. In addition, the *LSUHSC School of Allied Health Professions Policy And Procedures Related To Student Conduct* explicitly outlines complete

descriptions of academic misconduct and the consequences for such misconduct including due process for students. Similarly, the mechanisms for appealing decisions also are described in detail in the *LSUHSC Catalog/Bulletin*. The *Catalog/Bulletin* identifies mechanisms for filing an inquiry or complaint regarding equal opportunity or discrimination at the LSU Health Sciences Center. The Health Sciences Center has specific procedures that protect the rights of students including leaves of absence, dismissal, and academic misconduct and the policies are outlined for complaints regarding dismissals due to unprofessional conduct of any kind (*LSUHSC Catalog/ Bulletin*). Receipts of complaints are rare but any complaint received is forwarded to the proper University channel in accordance with established policies. Any complaint regarding research is forwarded to the Institutional Review Board (IRB) following specific IRB policy.

Program faculty members are responsible for ensuring that each student remains qualified based on his (her) academic and clinical achievements as well as the student's professionalism. In order to monitor the appropriateness of each student's progression through the program, core faculty regularly review all students enrolled in the program. Students in all classes are discussed at faculty meetings in order to identify potential problems early so that a plan of remediation can be implemented. Any student who earns a "B" but whose grade is close to a "C" or who makes below a grade of "B" on an individual examination is directed to meet with the course director or faculty member responsible for that instructional unit. All faculty members, including the student's Departmental faculty adviser, are informed of these "at risk" grades at faculty meetings.

Any student in academic difficulty shall take the responsibility to request counseling by his/her Departmental faculty adviser and/or the instructor(s) of the course(s) in which the difficulty occurs. Documentation of meetings of this nature is maintained in the individual student's file. A student in jeopardy of not remaining in compliance with the academic policies is notified in writing with a recommendation for the student to schedule a meeting with his/her faculty adviser to establish a plan to address any weaknesses.

Furthermore, objectives and requirements for satisfactory completion of each course in the curriculum are provided in writing in the course syllabus which is distributed at the beginning of the semester. Criteria for successful completion of all clinical education courses are well delineated with the expectations and requirements of each clinical education course. All policies are applied equitably to ensure nondiscrimination by the Department, School, and Health Sciences Center according to the regulations.

## Safety

LSUHSC provides for the safety of faculty, staff, students, and patients through policies, procedures, and education. The Health Sciences Center has appointed committees with the responsibilities of ensuring that the rights of all employees and students are protected. Other committees ensure that employees and students adhere to safety policies. The *LSUHSC Catalog /Bulletin* delineates in detail the policies and procedures that protect the rights of students including leaves of absence, dismissal, and academic misconduct. Specific policies are outlined for complaints regarding dismissals due to unprofessional conduct of any kind (*LSUHSC Catalog/Bulletin*). Likewise, specific procedures are outlined for student academic appeals of final grades in the *LSUHSC Catalog/Bulletin*. In addition, the LSUHSC School of Allied Health Professions has a *Student Code* with specific policies.

## Schedules

The academic calendar for the Department may be different from that published in the *Catalog* and so is provided to students by the Department Head.

## SCHOOL OF ALLIED HEALTH POLICY AND PROCEDURES RELATED TO STUDENT CONDUCT

The policies of the School of Allied Health Professions are presented in the *LSU Health Sciences Center Catalog* <http://www.lsuhsac.edu/administration/academic/policies.aspx> and the *SAHP Policy And Procedures Related To Student Conduct*. <http://alliedhealth.lsuhsac.edu/Admin/studentconduct.aspx>

Students are expected to be familiar with this information and should pay particular attention to attendance, grading, dismissals, and scholastic requirements.

## STUDENT RIGHTS and RESPONSIBILITIES

Students are responsible for adhering to all policies/procedures, rules, regulations and other information listed in the general section of the Catalog/Bulletin as well as the School of Allied Health Professions section of the Catalog/Bulletin. Please note that Student Responsibility is detailed under the Chancellor's Memorandum #56. Please note the link: <http://www.lsuhsac.edu/administration/cm/cm-56.pdf>

## DEPARTMENTAL POLICIES

### Academic Policies

All courses in each semester are prerequisite for the following semester and for continued enrollment (except Independent Study, which is an elective, see below).

In most courses, a portion of the student's grade is termed professional behavior or class participation. Criteria used to determine this grade include class attendance, student attitude, contribution to creating a learning atmosphere in the course, submitting written assignments on time, quality of discussion concerning topics contained in outside readings or other assignments, proper attire, and interpersonal relationships with faculty members and classmates. This portion of the student's grade also includes professionalism.

### Academic Progression

The doctoral student of physical therapy will find that the expectations, requirements and responsibilities of the clinical graduate program far exceed those of undergraduate school. The following sections outline some of the students' academic responsibilities and the process by which students are evaluated and the curricular objectives carried out.

### Statement of Requirements and Notification of Progress

At the start of each course including elective and optional courses, students will be informed, in writing, of the standard performance expected of them by the faculty of that course. The standard of performance includes how grades are derived, and a description of the student's responsibilities in the course such as

attendance at classes, laboratories and other course activities. A current syllabus outlining these requirements is to be filed with the Departmental Curriculum Committee and posted on the Department share drive prior to the start of the semester.

On an annual basis following the summer semester, the promotions committee meets to review each student's performance in the curriculum as determined by examinations, faculty and staff reports, and other available means of appraisal. During this meeting, the promotions committee formally votes to promote or not promote a student to the next academic year. Following this meeting, the students are notified of their promotion status in a written letter from the promotions committee.

### **Promotion**

All of the following criteria must be met satisfactorily for a student enrolled in the Department of Physical Therapy to be eligible for promotion to the next academic year or graduation:

1. Satisfactory completion of all course work and requirements specified for the academic level.
2. Fulfilling all requirements established by the faculty of each course within the academic year.
3. Approval for promotion by the appropriate promotions committee.

Should a student's cumulative GPA fall below a 3.0 (with the consequence of being placed on academic probation by the school), an individual plan of action is prepared by the Promotions Committee with input from the student, such that the student may, based on their circumstances, make an informed decision and take appropriate steps towards increasing their GPA or other outcomes. The student then has two consecutive didactic semesters of coursework (excluding summer semesters comprised solely of clinical education coursework) to raise their cumulative GPA to at least a 3.0 and thus be considered in satisfactory academic standing (not on academic probation). If the student fails to remediate their GPA in the allotted time, they will most likely be dismissed from the program.

### **Requirements for Graduation**

1. Satisfactory completion of all course work and requirements specified in the curriculum with a final cumulative GPA of 3.0 or greater. In courses designated Pass/Fail a grade of Pass is required. The minimum scholastic requirement for course work is a grade of C; however, no more than 12 hours of C are allowed. Students who earn more than 12 hours of C in the first two years of the curriculum will be removed from the program.
2. Approval by the promotions committee and recommendation by the faculty of the Department of Physical Therapy for conferring of the degree, doctor of physical therapy.
3. Satisfactory status concerning obligations to the LSU System.

## **REGULATIONS**

### **Statement of Satisfactory Academic Progress**

A student who is allowed to continue enrollment in the Department of Physical Therapy is considered making satisfactory academic progress. Student promotions committees meet at the end of the summer semester and early in the spring semester and review the qualitative and quantitative academic progress of

each student. A student not satisfactorily completing all course requirements will go through a full review by the appropriate promotions committee and a decision will be made regarding possible disciplinary or remedial actions that will be taken. Each student must complete the three year curriculum in no more than five years after initial enrollment. Time granted for a leave of absence will not be included in the maximum time period for completion of the program.

### Promotions Committees

Individual promotions committees, established for each of the three years of the doctoral program, perform full scale reviews of the performance of students enrolled in that particular year of the program. Each committee will be appointed by the Department Head and will consist of two to three Physical Therapy faculty members who are course directors of courses taught in the respective year. The Department Head will assign a chairman of each committee. The promotions committees have regular meetings biannually (after the fall and summer semesters). However, the promotions committees may call additional meetings any time throughout the year if deemed necessary by the promotions committee or departmental faculty/Department Head. During these meetings, the promotions committees may vote and make decisions on current enrollment status of any student in the respective year.

During the fall meeting, the promotions committees review the student records of all students in the respective year of the program and discuss the performance of the student in all three domains (academic, clinical, and professional). The committee writes up individual reports on each student summarizing their performance and potential for promoting to the next academic year given current performance levels. If a student's performance is considered to be marginal or below minimal course standards, the student's faculty advisor and/or a member of the promotions committee may arrange for a personal conference with the student involved to discuss deficiencies observed and to suggest corrective measures to be taken.

The promotions committees meet after the summer semester to formally vote on the promotion status of each student of the respective years of the program. (The third year promotions committee meets after the spring semester to vote on eligibility for graduation). A majority vote is required in order to promote a student to the next academic year. A unanimous vote is required in order to determine a student eligible for graduation or dismissal from the department. These rulings are then furthered to the Department Head for final approval.

Promotions committees have the responsibility for final action relating to student promotions. They also have an obligation to conduct a comprehensive review of the records of students who have acquired deficiencies, using all pertinent data available from any appropriate source, such as student files. In order to assure that the committee has adequate information for making a proper decision, it may seek comments from a student's faculty advisor or any other faculty member.

In reaching a decision on action to be taken in connection with a student who has incurred deficiencies, the committee shall give due consideration to the nature, extent, and significance of the deficiencies manifested. It shall take into account the relationship of the activity and time required for completion of the measures for removal of deficiency specified by the departments or faculty involved. It shall also evaluate the influence of other factors which relate to the best interest of the student and the department.

The committee may designate an appropriate course of action as described below:

1. Promotion with no deficiencies noted.
2. Promotion after removal of all deficiencies as specified.
3. Dismissal for failure to meet the requirements in a satisfactory manner.
4. Special procedures which may be indicated in exceptional cases.\*

\*Students who are in poor academic standing may petition the Promotions Committee for permission to repeat coursework in order to improve their academic record. The petition letter should include the student's perceived rationale for poor academic performance as well as a specific plan to remediate those factors the student believes led to their poor performance. The Promotions Committee will have 1 week to determine if the student's perceived reason(s) for poor performance, as well as the identified remediation plan, has a high potential for ensuring successful matriculation. If the Promotions Committee accepts the petition, the petition goes to the Office of Academic Affairs and then to the Dean. If the Dean approves, the student may be allowed to repeat coursework.

To further specify students' levels of achievement with regards to the promotions committee, guidelines have been devised for designation of differing tiers of promotion. These include:

1. Promotion with accolades
2. Promotion
3. Marginal promotion
4. Promotion with remediation

The level of promotion is dependent upon a student's composite performance across four major areas of performance. These areas are 1) Academic, 2) Practical/Clinical performance, 3) Professional conduct, and 4) Consistency of performance.

### **Promotion with Remediation**

If the promotions committee renders a decision of "Promotion with remediation", this is indicative of deficiencies (academic, clinical or professional) on the part of the student. All academic deficiencies must be removed before a student is eligible for promotion. This requires additional work or some corrective action on the part of the student. Permission to remove a deficiency is granted the student by the appropriate promotions committee. The manner in which a deficiency may be removed and the length of time to be allowed for the removal is to be specified by the promotions committee. The student may be allowed to continue in the program as usual while remediating the identified deficiencies and continue to promote regularly contingent upon satisfactory remediation of these deficiencies.

### **Academic Dismissal**

If the promotions committee concludes that a student should be dismissed because the student has failed to meet academic requirements satisfactorily, a recommendation for dismissal will be sent to the Dean of the School of Allied Health Professions. Appeals of decisions of the promotions committee must be initiated by the student within thirty days after the beginning of the next academic semester. The following procedure is to be followed:

- The student shall make a written request to the head of the department asking for a meeting with the department head and promotions committee. The written request should clearly state the purpose of the meeting; however, it should not go into detail as to the justification for the appeal.
- The department head shall arrange a meeting within two weeks from the date of receipt of the request. At this meeting, the student may be accompanied by their faculty advisor.
- At the close of the meeting, or within seven days thereafter, the department head shall make a decision. If a decision is made at the close of the meeting, it is to be given orally to all present. If the matter is taken under advisement, the department head shall inform all parties of the decision in writing.
- If the decision reached requires change in an official record, the promotions committee must comply with all regulations and procedures necessary to accomplish the change.

If the student is not satisfied with the decision reached, the student may appeal to the Dean of the School. The student's appeal must be in writing and must contain the following information: 1) An explanation of the complaint; 2) the relief requested; 3) and a specific statement of the reasons supporting the relief sought. Upon receipt of the request, the Dean will forward copies to the department head, who must promptly reply with an individual written statement supporting their previous actions. When the reply from the department head has been received, the Dean may take one of the following actions.

1. Decide the question on the basis of the written appeal and the written reply of the department head.
2. Meet with all parties concerned, who may be accompanied by advisors if desired, and, after discussion, reach a decision.
3. Refer the appeal to a hearing panel for its recommendation.

Hearing panels to consider appeals will be appointed by the Dean or his/her designee and shall be composed of three faculty members selected by the Dean, or his/her designee with no more than two from the same department, and two students appointed by the student government president of the School. The Dean or his/her designee shall appoint a chairperson for the panel. The panel will conduct a hearing to elicit facts from the concerned parties. After deliberation, the panel will make its recommendation in writing to the Dean. Copies of the recommendation and the Dean's final decision must be given to all parties. Regardless of the method used, the Dean must make a decision within thirty days from the date of receipt of the student's appeal. The decision must be written, listing the reasons supporting the decision; copies must be given to all parties. If the decision requires change in an official record, the department must comply with all regulations and procedures necessary to accomplish the change.

If any party to the appeal seeks resolution of the matter through any agency outside the Health Sciences Center, whether administrative or judicial, the Health Sciences Center shall have no obligation to continue the appeal process, subject to constraints of law. If any party to the appeal believes that a serious procedural error occurred or that there was an abuse of discretionary authority in reaching the decision, that person may file with the Vice Chancellor for Academic Affairs a written petition for review. This petition, which must be filed within seven days after receipt of the decision in Step 3, must contain a complete statement of the alleged serious procedural error, or examples of abuses of discretionary authority complained of, and also must contain reasons for the relief sought. The petition must be accompanied by all documents produced in the appeal. Copies should be sent to all parties to the appeal and to the Dean.



The Vice Chancellor for Academic Affairs shall decide within two weeks after receipt of the petition whether further action should be taken. In reaching this decision, this official may ask other parties to the appeal to make written reply to the request for a review or these parties, on their own, may make a written reply. If the decision is reached that a review is not justified, the student and all other parties will be so notified. If the Vice Chancellor for Academic Affairs decides to respond favorably to the petition for review, this official will hold a formal meeting with all parties and their advisors, if desired, and reach a decision based on discussions at this meeting, as well as on all written materials furnished. Once a decision is reached, the Vice Chancellor for Academic Affairs will notify all parties, plus the Dean, of the decision. The decision of the Vice Chancellor for Academic Affairs shall conclude the matter, subject to the right of the Chancellor to review the case. The Chancellor will consider the case only on the basis of a petition for review following the procedure outlined above. The appeals process described above is for promotion committee decisions only; students who wish to appeal grades received for examinations, quizzes, laboratories, or clinical-practicum experiences, must resolve their appeals within the Department of Physical Therapy or through the School of Allied Health Policy for Grade Appeals. The instructor of record will have the final authority for assignment of grades in all departmental courses and activities.

### **Disciplinary Action**

For a student who has engaged in cheating, unprofessional conduct, or other improper behavior, occurring within or outside the confines of the teaching program, dismissal or other specified disciplinary action may be recommended after review by the Associate Dean for Academic Affairs and/or a committee convened by the Associate Dean for Academic Affairs for that purpose.

Accusations against students are to be submitted in writing to the Associate Dean for Academic Affairs to be managed as specified in the LSUHSC School of Allied Health Professions *Policy And Procedures Related To Student Conduct*.

### **Anecdotal Record**

Anecdotal records are used to document exemplary (e.g., outstanding participation in class, devoting extra time in lab to assist other students, etc.) and non-exemplary (e.g., exhibiting unprofessional behaviors, tardiness, using email in class, etc.) behaviors by students. A faculty member who writes an anecdotal record will provide a brief description of the observed action or behavior and an interpretation of the student action or behavior. The faculty member will meet with the student to discuss the anecdotal record and at that time, the student can also add comments/responses to the faculty member's interpretation of the student's actions or behaviors. After discussing the anecdotal record, the student and the faculty member will sign the form which indicates that they have discussed the anecdotal record and that the form will be placed in the student's file located in the physical therapy department. Anecdotal records can be used in promotions decisions.

### **Leave of Absence**

A leave of absence for a short period of several weeks up to one year may be granted to a student in good standing, subject to the discretion of the Dean, because of illness or other appropriate reasons. Students taking short-term leave of absence of less than one week must make acceptable arrangements with the faculty involved for completion of course work and other assignments which will be missed. Leave of absence of a longer duration may be granted students in good standing for reasons of a personal nature or

to participate in a special program of research or other activity designed to augment the student's academic training. Specific arrangements must be made on an individual basis with the Dean and Department Head before beginning a leave of absence. The University policy governing the processing of leave of absences are applicable and are described in the general information section of the catalog.

### **Withdrawal**

Students are permitted to withdraw from the Doctor of Physical Therapy program at any time. If a student who has voluntarily withdrawn wishes to be considered for readmission to the program, he/she must file an application for readmission with the Departmental Admissions Committee.

### **Readmission Process**

Students who have voluntarily withdrawn or who have been dismissed from the Doctor of Physical Therapy program may elect to apply for readmission.

## **GRADING AND EVALUATION OF PERFORMANCE**

### **Grading**

In each course in the curriculum, the student's performance is evaluated by examination as well as other means, and a grade is submitted by way of a grade sheet to the School of Allied Health Professions' Office of Student Affairs and, from there, to the Office of the Registrar, within a two week period after completion of the course. The single final grade to be assigned to a student on completion of the course work should be determined by considering all important attributes of that student's performance in the course. A descriptive comment concerning student performance in the areas of knowledge, deportment, interpersonal relationships, attitude toward course work, and other factors which, in the opinion of the course faculty, are important to the student's future role as a physical therapist, is encouraged for all courses. Such descriptive comments become a part of the student's permanent record.

1. Official permanent grades to be recorded for each student upon completion of a course are:  
**A, B, C, F, I, W and P.**

**"A"** is given to all students whose quality of performance is considered to be excellent and who have demonstrated a degree of understanding and ability which is considered above the level of adequacy required for passing status.

**"B"** signifies that all work in a given course has been completed at a level above the minimal requirement but below that of "A."

**"C"** is indicative that minimal requirements for completion of the course work have been met. A grade of C is not considered satisfactory graduate work within the Doctor of Physical Therapy program. In the event a student earns a C in a course, the faculty should alert the Promotions Committee for that class as well as the faculty advisor for that student. The committee will discuss the matter on an individual basis and notify the student according to Promotion Committee procedures.

"F" is the grade assigned to students who are considered to be inadequate in meeting the minimum course requirements and have demonstrated a degree of deficiency which makes them ineligible to be promoted, or in some instances, to continue in school without appropriate remedial action.

The "P" grade indicates a Pass. Certain courses are graded on a Pass or Fail basis, instead of the letter grades A,B, C, or F. A grade of Pass indicates satisfactory completion of course requirements and has no numerical correlation.

The grade of "W" (Withdraw) will be issued to all students who enroll in a course and who attend up to eighty percent of the actual class prior to withdrawing.

The grade of "F" (Fail) will be issued to all students who enroll in a course and who attend eighty percent or more of the actual class and withdrew before completion of the course. A brief statement describing the basis for each grade of F (Fail) issued will be placed in the student's file. Each Course Director must specify in the course syllabus, the specific percentages assigned to each grade and the standards for acquiring those specific percentage points within the course.

2. A grade of temporary significance which may be issued by the Department of Physical Therapy but which is not recorded on the student's permanent record is "I"(Incomplete).

A grade of "I" (Incomplete) is assigned when, for reasons beyond the student's control or because of some acceptable circumstance, the student has been unable to complete the course requirements in the usual time or manner. This grade does not imply a deficiency on the part of the student. On completion of the required course work, the grade of "I" will be changed to an appropriate grade as described above.

Students with Incomplete status in a course must finish all required work in a manner specified by the Department. In general, this should be done in a relatively short period of time after the regular termination of the course. The Department may allow a longer period of time for reasons which are considered appropriate. A student cannot be promoted until all incomplete grades have been removed. Unless there is an acceptable reason for further delay, a grade of "I" (Incomplete) which is not removed by the date for registration for the next school year will be recorded on the record as "F" (Fail).

Letter grades are assigned on the basis of the following distribution:

90 - 100%	A
80 - 89.99%	B
70 - 79.99%	C
<69.99%	F

The departmental grading policy and procedure follows the stipulations outlined in the Graduate Professional Scholastics Requirements of the LSUHSC-NO Catalog:

1. A minimum cumulative GPA of 3.0 is required for graduation.
2. The minimum scholastic requirement for course work is a grade of C. In courses designated Pass/Fail a grade of Pass is required.

Provisions for academic progression are further outlined in the LSUHSC-NO Catalog and include, but are not limited to the following details regarding Scholastic Probation:

- Students who fall from 1-10 quality points below a 3.0 cumulative GPA will be placed on scholastic probation.
- Students who earn a grade of Fail in clinical or didactic courses will be removed from the program.
- Students who fall more than 10 quality points below a 3.0 cumulative GPA will be removed from the program.
- Students will remain on scholastic probation until the minimum scholastic requirement for cumulative GPA is achieved. Failure to meet this requirement within the allotted time frame will result in removal from the program.

### **Appeal of Final Grades**

As per the LSUHSC Catalog, the School of Allied Health Professions Policy for Appeal of Final Grades is as follows:

Appeals of final grades must be initiated by the student within thirty days after the beginning of the next academic semester. The following procedure is to be followed.

The student should meet with the faculty member concerned to discuss the situation and attempt to arrive at a solution. Although each may have an advisor present, under most circumstances the meeting will be more productive if only the student and the faculty member are present. If an administrative officer (department head, dean, or vice chancellor for academic affairs) is the faculty member who assigned the grade which is appealed, that person should be excused from the appellate process; that place in the procedure will be taken by a faculty member appointed ad hoc by the Vice Chancellor for Academic Affairs or the Chancellor, as appropriate. If the decision reached requires change in an official LSU System record, the faculty member must comply with all University System regulations and procedures necessary to accomplish the change.

If the matter is not resolved between the student and the faculty member, and the student wishes to pursue the appeal, the student shall make a written request to the head of the department in which the course was taught asking for a meeting with the department head and faculty member. The written request should clearly state the purpose of the meeting and should indicate the faculty member's name; however, it should not go into detail as to the justification for the appeal. The department head shall arrange a meeting within two weeks from the date of receipt of the request. At this meeting, both the student and the faculty member

may be accompanied by an advisor. At the close of the meeting, or within seven days thereafter, the department head shall make a decision. If a decision is made at the close of the meeting, it is to be given orally to all present. If the matter is taken under advisement, the department head shall inform all parties of the decision in writing. If the decision reached requires change in an official record, the faculty member must comply with all regulations and procedures necessary to accomplish the change.

If the student is not satisfied with the decision reached, the student may appeal to the Dean of the School. The student's appeal must be in writing and must contain the following information: 1) An explanation of the complaint; 2) the relief requested; 3) and a specific statement of the reasons supporting the relief sought.

Upon receipt of the request, the Dean will forward copies to the department head and faculty member concerned, who must promptly reply with an individual written statement supporting their previous actions. Either may request that a hearing panel be convened. When the department head's and faculty member's replies have been received, the Dean may take one of the following actions.

1. Decide the question on the basis of the written appeal and the faculty member's and department head's written replies.
2. Meet with all parties concerned, who may be accompanied by advisors if desired, and, after discussion, reach a decision.
3. Refer the appeal to a hearing panel for its recommendation.

If a hearing panel has been requested by the student, the faculty member, or the department head, the Dean will convene such a panel. Hearing panels to consider grade appeals will be appointed by the Dean or his/her designee and shall be composed of three faculty members selected by the Dean, or his/her designee with no more than two from the same department, and two students appointed by the student government president of the School. The Dean or his/her designee shall appoint a chairperson for the panel. The panel will conduct a hearing to elicit facts from the concerned parties. After deliberation, the panel will make its recommendation in writing to the Dean. Copies of the recommendation and the Dean's final decision must be given to all parties. Regardless of the method used, the Dean must make a decision thirty days from the date of receipt of the student's appeal. The decision must be written, listing the reasons supporting the decision; copies must be given to all parties. If the decision requires change in an official record, the faculty member must comply with all regulations and procedures necessary to accomplish the change.

If any party to the appeal seeks resolution of the matter through any agency outside the Health Sciences Center, whether administrative or judicial, the Health Sciences Center shall have no obligation to continue the appeal process, subject to constraints of law. If any party to the appeal believes that a serious procedural error occurred or that there was an abuse of discretionary authority in reaching the decision, that person may file with the Vice Chancellor for Academic Affairs a written petition for review. This petition, which must be filed within seven days after receipt of the decision in Step 3, must contain a complete statement of the alleged serious procedural error, or examples of abuses of discretionary authority complained of, and also must contain reasons for the relief sought. The petition must be accompanied by all documents produced in the appeal. Copies should be sent to all parties to the appeal and to the Dean.

The Vice Chancellor for Academic Affairs shall decide within two weeks after receipt of the petition whether further action should be taken. In reaching this decision, this official may ask other parties to the appeal to make written reply to the request for a review or these parties, on their own, may make a written reply. If

the decision is reached that a review is not justified, the student and all other parties will be so notified. If the Vice Chancellor for Academic Affairs decides to respond favorably to the petition for review, this official will hold a formal meeting with all parties and their advisors, if desired, and reach a decision based on discussions at this meeting, as well as on all written materials furnished.

Once a decision is reached, the Vice Chancellor for Academic Affairs will notify all parties, plus the Dean, of the decision. The decision of the Vice Chancellor for Academic Affairs shall conclude the matter, subject to the right of the Chancellor to review the case. The Chancellor will consider the case only on the basis of a petition for review following the procedure outlined above. The appeals process described above is for final course grades only; students who wish to appeal grades received for examinations, quizzes, laboratories, or clinical practicum experiences, must resolve their appeals within their own departments. The instructor of record will have the final authority for assignment of grades in all departmental courses and activities.

## **PROGRAM EVALUATION**

On a yearly basis, the department administers a Cohort Survey to all students. The purpose of this survey is to obtain student feedback regarding the physical therapy program for continuous improvement of the program. Information is also obtained about various other entities that students interact with such as Student Health, Financial Affairs, etc. This information is an essential part of the reporting requirements placed on the university, school and program in order to maintain accreditation standards.

## **COURSE EVALUATION**

Each semester, students have an opportunity to provide feedback on each course in which they are enrolled and the instructors that participated in the course. Invitation and reminder messages are sent to students during the evaluation period, typically the 3 weeks preceding the date when course grades are submitted to the Registrar's Office.

## **OFFICE OF STUDENT AFFAIRS**

The primary goal of the Office of Student Affairs is to maintain academic student records beginning with the admissions process and concluding with the graduation process. For more information about the Office of Student Affairs, please see <http://alliedhealth.lsuhs.edu/Admin/studentaffairs.aspx>

## **OFFICE OF ACADEMIC AFFAIRS**

The Office of Academic Affairs is responsible for a variety of areas including student academic accommodation, student emergency loans, student justice, student grade appeals and student conduct. For more information about the Office of Academic Affairs, please see <http://alliedhealth.lsuhs.edu/Admin/academicaffairs.aspx>

## **ACADEMIC ACCOMMODATIONS**

Students must be able to meet all technical standards with or without reasonable accommodations. Students who need reasonable accommodations through the ADA should contact the Associate Dean for Academic Affairs. Students may request for academic accommodations at any time during their enrollment. Students requesting accommodations are responsible for providing necessary documentation and costs associated with documentation. Information regarding a student's disability is confidential and shared only

on a professional need-to-know basis. The Request for Academic Accommodations form is available at <http://alliedhealth.lsuhs.edu/Admin/docs/ADAPolicy2014.pdf>.

Students who are granted academic accommodations are required to schedule in a timely manner a meeting with appropriate course coordinators to discuss accommodation needs and arrangements. At the beginning of subsequent semesters, students are required to meet with course coordinators of each individual course to discuss arrangements for specific activities.

Students may choose to decline academic accommodations. If a student declines any requested accommodation, the student is required to complete and submit a Declination of Academic Accommodations form to the appropriate faculty at least 2 days prior to the activity.

## STUDENT ATTENDANCE

### General Attendance

As stated in the LSUHSC Catalog, "Students are expected to attend all scheduled appointments in each course. Determination of the number of absences which may be interpreted as excessive, rests with the Department, and is subject to approval by the Dean." Excessive absence, regardless of the cause thereof, may be construed as sufficient reason for considering a student as academically deficient. Promptness and attendance are mandatory for all classes and laboratory sessions. Each unexcused absence will result in the loss of one (1) percentage point from the student's final grade in the course in which the class or laboratory session was missed.

An absence occurs when a student misses all or part of any one scheduled class or lab session. Tardy means that the student arrives after the class or laboratory session has started. When a student comes to class more than five minutes after the class has started, the student shall submit a note of explanation, either written or electronic, to the course director by the end of the day. The instructor can then decide whether it constitutes an excused/unexcused tardy. The first instance of tardy in a course will result in an anecdotal report and a warning; whereas, each subsequent tardy in that course will result in an anecdotal report and the loss of one (1) percentage point from the student's final grade in the course. Attendance and promptness are also mandatory during all clinical assignments. Absences from any clinical assignments must be rescheduled. A student who is going to be absent or tardy from a clinical assignment must notify the Director of Clinical Education (DCE) and the clinical instructor (CI) as early as possible.

Attendance at all scheduled examinations is mandatory (see policy for Examinations).

### Alternate Lab Periods

Alternate labs periods are included in the didactic semester schedules to allow for flexibility in scheduling. Students are expected to reserve this time without scheduling other personal business so that it may be utilized to accommodate unforeseen changes or a guest instructor's schedule. If a faculty member identifies the need to use an alternate lab period to accommodate changes in the regular class schedule, the faculty member must give students at least five business days notice prior to the new class period. Attendance for a class session scheduled during an alternate lab period is mandatory unless otherwise indicated by the faculty member.

## Approved Leave

Approved leave must fall into one of the following categories: personal leave, sick leave, bereavement leave, or professional leave.

*Personal Leave:* During the didactic portion of the curriculum, students may apply to take up to two (2) days (partial or full days) of “personal leave” per regular length didactic semester, and one (1) day or partial day during the abbreviated semesters of the first year summer and third year fall and spring. Leave requests may be denied if any tests, quizzes, projects, patient laboratories, student presentations, etc., are scheduled on the day for which leave is requested. Course Directors may also designate other specific class periods as “required.” No personal leave may be taken on days when the student is assigned to a clinical site.

*Sick Leave:* Reasons for an absence to be considered as sick leave include but are not limited to illness, accident, or medical emergency. Regularly scheduled, non-emergent appointments for doctors, dentists, etc., are not considered sick leave but rather fall under the category of personal leave. Any absence due to sickness of any length (including a portion of a day or a class) is considered as an event. Any event that lasts longer than two consecutive days will require documentation (note from a doctor, etc.). Any more than two events in the same semester will require documentation (note from a doctor, etc.). The documentation must be submitted on the first day the student comes back to school and it must be dated with the same date(s) as the absence(s). Failure to provide documentation in these cases may result in the absences being considered as unexcused.

*Bereavement Leave:* Reasons for an absence to be considered as bereavement leave are for the death of a loved one. This includes leave granted when attending the funeral or burial rites of a parent, step-parent, child, step-child, brother, step-brother, sister, step-sister, spouse, mother-in-law, father-in-law, grandparent, or grand-child; provided such time off shall not exceed two days on any one occasion. Leave granted when attending the funeral or burial rites of any other individuals other than those listed above would not be considered bereavement leave but rather fall under the category of personal leave.

*Professional Leave:* Reasons for an absence to be considered as professional leave include but are not limited to, attendance of meetings of the professional organization (National, State, or District), continuing education course, research related activities, etc. Leave requested for the purposes of job interviewing or other non-professional development activities are not considered professional leave but rather fall under the category of approved leave. Any absence due to professional leave of any length (including a portion of a day or a class) will require documentation of attendance at the professional event (registration form, certificate of completion, etc.). Leave requests may be denied if any tests, quizzes, projects, patient laboratories, student presentations, etc., are scheduled on the day for which leave is requested. Course Directors may also designate other specific class periods as “required.” Professional leave may be taken on days when a student is assigned to a clinical site; however, approval must be attained from both the DCE and CI at least one month prior to the event. A student approved for professional leave during a clinical rotation will be required to provide an in-service on the event or activity to the clinical staff.

For any approved absence of personal or professional leave, students must complete a “Leave Request Form” at least 2 school days prior to the requested day(s) of leave and obtain the signatures of all course directors/instructors who approve the absence from their class(es). Approval for absence from courses taught outside the department must be obtained by the P.T. course coordinator. For any excused absence



of sick/bereavement leave, a "Leave Request Form" must be submitted as soon as possible, if the event is unforeseeable. It is the responsibility of the student to route the form for signatures in person and have the form completed within 5 business days following return to school. Once the signatures of all course coordinators for the courses missed have been obtained, the approved form is to be given to the student's faculty advisor for final approval and placed in the student's file.

### Attendance for Examinations and Testing

Attendance at all scheduled examinations is mandatory. A student who is unable to take any particular scheduled and required examination is expected to notify (by phone or in person) the course director (and the Departmental course coordinator in cases of courses taught outside the Department) at once. The reason for your absence must subsequently be submitted in a letter to the course coordinator (and course director). A student who does not appear for a regularly scheduled examination may, at the discretion of the Department, be allowed to take a make-up exam, which may be an essay or an oral examination.

Before a make-up examination will be given, a student absent from an examination because of illness must have in writing, from his/her physician, an explanation of the illness that justifies his/her absence on the exam day.

All make-up examinations must be taken no later than one week after the student returns to class, or as scheduled by the course director. Absence from an examination for any other reason must be excused by the course director before the time of the scheduled examination. Unexcused absence from an examination results in a score of zero for that exam.

1. Absolutely no communication of any type between students will be allowed during an examination.
2. Each student must complete the examination prior to leaving the room.
3. The student will be permitted to have at his/her desk only those materials necessary for completing the examination. Food or drink is not permitted during comprehensive examinations.
4. Unprofessional conduct of any kind, including cheating on examinations, plagiarism, cheating in any class exercise or unprofessional conduct in classes, laboratories or in the clinical setting will subject the offending student to disciplinary action. This action may include dismissal from the program (See the *SAHP Policy And Procedures Related To Student Conduct*).
5. The student's signature on all examination papers indicates that he/she is abiding by the following Honor Code: "I have neither received nor given any assistance on this examination, nor have I seen anyone else do so nor will I communicate anything about an examination (includes any format written, practical, oral, etc.) with anyone other than LSUHSC Physical Therapy academic faculty and that doing so will be considered unprofessional conduct which will be reported to the Promotions Committee."

### COMPLIANCE TRAINING

As part of enrollment in the program, students are required to complete the compliance training modules in accordance with institution guidelines and federal/state laws and regulations. Compliance with such requirements is vital to the organization's operation and to avoid administrative sanctions ranging from stringent oversight to the suspension of Federal program funding and criminal/civil prosecution. Students are required to access the LSUHSC online compliance training website, <https://intranet.lsuhs.edu/ctms/kds/ComplianceTrainingOnLine>, and complete all modules in a timely

manner. Failure to complete the compliance training modules can result in disciplinary action up to and including termination of enrollment.

## HEALTH RECORDS

As part of enrollment in the program, students are required to meet the following health requirements:

- Health history
- Physical exam
- Varicella titer positive (i.e., immune) OR 2 varivax immunizations
- MMR vaccines must be after 1957 (two in series) OR proof of immunity
- Tetanus/diphtheria test within past 10 years
- TB skin test each year
  - Chest x ray is required only if the TB skin test is positive. INH therapy is strongly encouraged for latent TB for 9 months. Treatment of active TB is required.
- Hepatitis B vaccination at 0, 30, and 180 days OR proof of immunity
- Meningococcal Vaccine or Waiver
- Varicella Titer two childhood immunizations

Students are expected to update their health records in accordance with institution guidelines. If a student receives notification of a health block, the student is expected to address the block within 14 business days. Failure to comply with all health requirements can result in disciplinary action up to and including termination of enrollment.

## GENERAL DEPARTMENTAL POLICIES

1. Under no circumstance is anyone who has not obtained prior authorization from the Department of Cell Biology and Anatomy allowed to enter the gross anatomy laboratories (MDL 1 or MDL 2 in the MEB). This includes but is not limited to visiting undergraduate college students, and friends or relatives of students enrolled in gross anatomy courses in any of the schools within the LSUHSC. Under no circumstances are high school students allowed access into the gross anatomy laboratories.
2. The student is encouraged to see himself or herself as a perpetual learner and to respect the professional aspirations of the other class members. Each student is expected to participate and assist in creating a learning atmosphere in all classroom and laboratory sessions.
3. Students are expected to act in a professional manner at all times. Although professionalism is difficult to define, it includes such things as honesty, integrity, respect of others, being helpful and courteous in the classroom and clinic, prompt attendance at all scheduled classes and meetings, behaving in the appropriate and necessary manner which is consistent with a clinical/academic setting. In other words, it is behavior which reflects your view of yourself and your profession.

Students must maintain a professional attitude at all times, including, above all honesty and integrity. Students must also demonstrate respect for others at all times, including during classes, labs, clinics, etc. Students must also uphold the Code of Ethics and the Guide for Professional Conduct of the American Physical Therapy Association (included at the end of this document).

4. Whenever you are in the presence of a patient, you are expected to abide by the rules and regulations of the Health Information Portability and Accountability Act (HIPAA), and in so doing respect the dignity, individuality, and privacy of that patient. All information regarding any patient is considered private and confidential, and is not to be discussed outside of the academic or clinical setting. More information regarding HIPAA can be found at: <http://www.lsuhs.edu/administration/ocp/hipaa.aspx>.

5. All students are strongly encouraged to join and maintain membership in the American Physical Therapy Association (APTA).

6. Students will be provided with access to laboratory facilities after hours provided they have been given clearance by a faculty member to utilize the equipment. At no time is a student to practice any technique or procedure on anyone other than a classmate. Physical Therapy students may be allowed to be in specific classrooms and study areas after hours and on weekends but only if the privilege is not abused and the premises are left clean and orderly. The doors must be locked upon departing from the floor and the University Police must be notified when you leave the floor.

7. Students must purchase required texts.

8. Students are required to purchase the following items before the beginning of the first fall semester:

Short white lab jackets, School of Allied Health patches, a goniometer, a penlight, a tape measure, a reflex hammer (brush/pin attachment not required), an inclinometer, a stethoscope, and a sphygmomanometer. Other items may be required in specific courses.

9. Each student is assigned a faculty adviser who may be contacted by the student as needed. It is required that the student schedule a counseling session with his/her advisor twice a semester (after midterm and after finals – either directly after or at the beginning of the next semester). It is the student's responsibility to make appointments with his/her advisor as needed. In addition to the student's assigned advisor, all other members of the faculty are available for consultation.

10. Students should obtain permission from the attending therapist before entering any treatment area. Do not use clinical areas as a passageway through the Department.

11. Smoking and use of any form of tobacco is not permitted in LSUHSC buildings or on LSUHSC grounds.

12. Equipment and telephones in the Department Office are for business use and not for student's use. Incoming calls to the P.T. Office should only be in case of an emergency.

13. Bringing firearms (or other weapons) onto state property is illegal. Because the safety and well-being of our faculty, staff, students and visitors to our campus are of utmost concern, this message is a reaffirmation of our policy of no unauthorized firearms on the campus of the LSU Health Sciences Center in New Orleans and at university-sponsored functions.

Under the provisions of the Louisiana Criminal Code R.S. 14:95.2, it is illegal and expressly prohibited to engage in the unauthorized carrying of a firearm or dangerous weapon by a student or non-student on University property, including dormitory rooms, at university-sponsored events, or within one thousand feet

of any school campus at any time. These areas are designated by law as firearm-free zones. The law carries with it severe penalties.

LSUHSC fully endorses the enforcement of the provisions of this law. For further information, see CM-44, our Violence-Free Workplace Policy Statement and Violence Prevention Plan, located in the LSUHSC Policies section of our Web Pages.

14. The calendar of scheduled classes for the Department of Physical Therapy may vary from the School of Allied Health Professions calendar published elsewhere.

15. Students are assigned a locker in which all personal items and valuables not carried with you should be secured at all times. Students may not apply stickers or tape to the lockers. Magnets may be used to post necessary messages.

16. Due to the disruptive nature of cell phones, all cell phones must be turned off or kept in the silent/quiet mode during all class periods and during all patient care times (observations, clinical internships). If you are expecting an emergency-type call, place cell phone/pager on the silent mode. Leave the room before answering it. Also, prior to the beginning of class, inform the faculty that you may be leaving the room due to a potential emergency call. Cell phones are not to be utilized in any form or purpose during an examination. If you are expecting an emergency phone call during an examination, inform the proctor of the exam and you may leave your phone with the proctor on silent or vibrate to receive the call. At this point you may leave your exam with the proctor and leave the room to use your cell phone. Your exam will be returned to you upon re-entering the examination room.

## EMPLOYMENT

Due to the exacting requirements of *the* physical therapy curriculum, it is unwise for students to expect to meet their expenses by outside work. The School does not specifically forbid such additional duties but does definitely discourage them. The Department, furthermore, reserves the right to indicate that such work be discontinued, if in opinion of *the* faculty, it interferes with the satisfactory completion of prescribed academic activities (see *LSUHSC Catalog/Bulletin*).

## STUDENT ATTIRE

1. Students are required to wear attire which conforms to the image of the professional physical therapist. The Health Sciences Center, and specifically the Physical Therapy Department, is a patient-care setting where patients, other professionals, and the general public form an impression of us which is based on our appearance and conduct. Being neatly dressed and well-groomed is exemplary of professional behavior and is required at all times. Safety and comfort concerns for both the patient and clinician also drive the need for dress modification in the professional setting.

2. The trunk region should be covered at all times and in all body positions. This includes classroom and clinical situations. In labs, faculty members may express the desire for the trunk to be uncovered based on content covered during lab.

3. Clinical attire – this applies to dress to be worn during clinical work or during class visits to different clinical settings. Minimally appropriate clinical attire consists of polo shirts, cotton twill full length slacks,

and flat shoes with closed heels and toes. The students are responsible for contacting their clinical instructors in advance for any other dress requirements that clinic might have (e.g., lab coats, neckties, scrubs, etc.). Any specific clinic dress code requirements supersede the LSUHSC PT Departmental dress code while at that facility. If a lab coat is worn, the coat must be clean, free of stains, rip, tears, and pressed.

**Clinical preceptors, faculty or other clinical supervisors reserve the right to ask a student who is inappropriately attired to leave and return appropriately dressed.**

4. Classroom attire – Specific LSUHSC-NO PT Program polo shirts and cotton twill skirts/slacks is the expected attire for male and female students (Classes of 2019 and 2020). Students are **not permitted** to wear shorts, cut-offs, hats, jeans, capris, clothing with rips/tears, halter tops, t-shirts, flip-flops, sandals, short skirts, jeans, or warm-up style (athletic wear, sweat, yoga) pants, or leggings, or tights in the classroom during normal working hours.

Faculty members may require specific dress for a specific class related to activities during class that supersede departmental dress code. Instructors will inform students of specific dress code and subsequent enforcement policies for those classes. Uniform attire **MUST** be CLEAN and PRESSED.

5. Laboratory attire – the following attire is required for all physical therapy laboratory settings. Males and females should wear loose-fitting gym shorts. In order to expose the spine for observation, palpation, etc., females should wear a two-piece bathing suit top or may wear a sports bra with a back strap of no more than two inches in width. Students should obtain several sets of lab clothes so that one set is at school at all times. The lab instructor may have other specific instructions for lab attire in a specific lab (e.g., must wear low, closed and stable shoes, etc.). Students in lab attire should remain in the laboratory except when going to and from the dressing room or student lounge. Students should not go into the reception room or stand in the halls while dressed in laboratory attire. Students may come to school or leave school in their lab clothes if the lab session begins or ends the day. If the lab ends the morning session and then begins the afternoon session and students wish to go to the cafeteria, they may keep their lab clothes on as long as they are appropriately covered. Lab attire needs to be covered any time the student leaves the floor with the attire on.

**6. Specific requirements-** Clothing should allow for free movement during patient care and should not be tight, short, low cut or expose undergarments. Pant legs should not be form fitting (no skinny or straight leg pants, leggings). Socks must cover the ankles.

**Jewelry-** Watches, engagement, wedding and class rings are permissible.

Earrings- No more than 2 pair per ear. No dangling or overly large ear wear permitted.

No excessive jewelry

No other visible body piercing permitted.

**Nails-** Well groomed, clean. In clinical situation- no artificial nails permitted.

**Tattoos/Body art-** Students may not exhibit tattoos at any time.

**Perfume/Scents-** No excessive use of personal scents, after shave, shampoo, etc. is permitted.

**Hair-** should be neatly groomed, clean and arranged in a manner that permits optimal patient care.

Facial hair must be neatly groomed and clean at all times.

**Shoes-** No open-toed shoes are allowed in patient care areas.

7. On days when students are on campus but not in the SAHP or in the PT Department (e.g., studying at the library) they may dress in casual but appropriate clothes (e.g., jeans, sweat pants, etc.).

8. LSUHSC identification should be worn at all times.
9. Enforcement – if an instructor believes that a student is not dressing appropriately in his or her class or lab, the instructor will meet with the student privately. If a subsequent dress code violation occurs, the student will meet with the Department Head. Consequences of a third violation will be at the discretion of the Department Head.

## COMPUTER USAGE

### Computer Room

Computers in the computer rooms must be used carefully and with courtesy for all students. The following are rules for using Departmental, School, or Health Sciences Center computers:

1. The person to use a computer last is responsible for appropriately shutting it down before he/she leaves the Department.
2. No food or drinks may be near the computers for obvious reasons.
3. No one may change the programs or layout of the computer without written approval of the Department Head.
4. No one may load or download any programs without written approval of the Department Head or Business Manager.
5. No one should be using the computer who has not been trained in its specific use.
6. Only professional uses of the Internet or other programs will be allowed.

### Laptop Computer Use

You will receive a separate written policy on computer use, however, due to its importance, some of that information is reiterated here:

Computers may be used in the classroom or laboratories for school class-related activities only. Students found to be using their computers during class for non-class related activities may be excused from the classroom and reported to the Department Head's office, Dean's Office, and / or the respective promotions committee. In addition, students should not communicate (e-mail, instant message, blog, etc.) with others (including professors) during class time or review other lectures or materials other than that being covered in the class in which they are participating.

Students failing to comply with this policy may be subject to removal from the program. It may also be the decision of the promotions committee or faculty member to prohibit the student from utilizing their laptop during designated classes for a designated period of time.

### Email Use

The use of lsuhsc.edu e-mail must be related to Health Sciences Center business communications. The use of electronic mail should be consistent with the instructional, research, public service, and administrative goals and mission of the Health Sciences Center. Incidental and occasional personal use of electronic mail may occur when such use does not generate a direct cost to the Health Sciences Center.

**Prohibited use of E-mail:**

1. Personal use that creates a direct cost for the Health Sciences Center is prohibited.
2. The Health Sciences Center's electronic mail resources shall not be used for personal monetary gain or for commercial purposes that are not directly related to Health Sciences Center business.
3. Sending copies of documents or including the work of others in electronic mail communications in violation of any law, including copyright laws, is prohibited.
4. "Snooping" (i.e., obtaining or attempting to access) the files or electronic mail of others, or capturing or attempting to capture and "open" the electronic mail of others, except as required in order for authorized employees to diagnose and correct delivery problems, is prohibited.
5. Use of electronic mail to harass or intimidate others, threaten, or to interfere with the ability of others to conduct Health Sciences Center business is prohibited.
6. Use of electronic mail systems for any purpose that is restricted or prohibited by laws or regulations is prohibited.
7. Unauthorized "Spoofing" (i.e., constructing an electronic mail communication so it appears to be from someone else) is prohibited.
8. "Spamming" (i.e., sending unsolicited E-mail to lists of people you do not know) is prohibited. Bulk mailing is almost always considered Spam and places considerable stress on the E-mail system. Bulk mailings can be selectively used for Health Sciences Center related information but must be approved at a level appropriate to the scope of the mailing and the mailing must be handled in such a way that the E-mail systems are not adversely impacted. For example, it would be appropriate that a mailing to all of the School of Allied Health Professions be approved by the Dean's office. The mailing would be carried out in such a way as to avoid causing damage or disruption to the mail system. Authorized bulk mailings will be identified by the inclusion of the statement: "This message has been authorized by LSU Health Sciences Center administration for mass distribution as a service to our faculty, staff, and students."
9. Sending or forwarding chain-letters is prohibited. Most E-mail messages that ask you to forward it on to others fall into this category, including virus warnings.

**Violations:** Violation of this policy in any part may be sufficient grounds for disciplinary action and/or termination. Disciplinary action may include dismissal of computer privileges on an individual basis, or in extreme cases, removal from the program.

**USE OF LABORATORY LAB SPACE DURING AND OUTSIDE SCHEDULED CLASS TIME**

The laboratory classroom in the Department of Physical Therapy is available to faculty, staff, and students for educational purposes. Those classes which are scheduled to meet in the Lab have priority for the use of the space and anyone wanting to use the lab during this class time must have the permission of the class instructor.

If the lab appears vacant, those persons wishing to use the lab or its equipment must first obtain permission from the instructor who is scheduled to use the space.

If the lab is scheduled to be vacant, PT department faculty, staff, and students may use the lab for educational purposes, with the faculty and staff having priority over student use.

All persons who use the laboratory must maintain the appearance of the space and return any items to their

original location after use. Any linen used during classes or for study purposes must be placed in the designated hamper. A representative from each class will be appointed for this duty. In addition, a class representative will be named responsible for maintaining the lab's appearance and any issues regarding the cleanliness or order of the lab will be brought to the representative's attention for resolution.

No eating, drinking, or smoking is allowed in the lab. No storage of food or drink is allowed on shelves, countertops, or cabinets.

To protect the equipment from tears or marks, no shoes are to be worn on the examination mats. All students using the lab must be dressed appropriately according to the LSUHSC-NO Department of Physical Therapy Student Manual.

### Clinical Research Laboratory Policy

The primary function of the laboratory is to provide equipment and space for research, and to that end, research activities have absolute priority over all other activities.

To gain access to the laboratory area, the area and equipment must first be reserved. Admittance is possible only via a faculty member who has agreed to be responsible for activities to be performed, and that the lab is locked at all times.

Each research advisor/investigator is responsible for providing student investigators with all necessary materials and supplies. No individual is permitted to use any equipment before properly trained by a faculty member or designee. Students must have faculty supervision, either directly or indirectly when utilizing equipment. All equipment will be maintained as specified in the user's manual of each piece of equipment. Originals of all equipment manuals will be kept in the research laboratory. A faculty member must be present during all data collection, and no data collection on human subjects may proceed prior to Institutional Review Board (IRB) approval.

All lab users are responsible for their own computer files or data banks. It is necessary that data be saved to external storage disks or drives to avoid overloading the computer's own hard drive. All subject files are the responsibility of the principal investigator/advisor. All subject information is confidential and is to remain in a locked area when not in use. The chair of the research committee will survey the faculty annually to determine needs for space and equipment and present this information to the Department Head for budgetary consideration.

Equipment should be calibrated and recalibrated only with the presence of appropriate faculty and labeled to indicate the action performed and date, and initialed by faculty.

### COMPLAINTS WITHIN & OUTSIDE OF DUE PROCESS

Due process for reporting complaints are as follows:

- If the complaint is from an individual:
  - The individual should report the complaint to their respective faculty advisor.
  - The faculty advisor may suggest options for handling the complaint or simply forward the complaint to the faculty or department head.



- If, for some reason, the individual student feels that he/she can't report to his/her faculty advisor, then the student should direct the complaint to the class liaison for the respective class who will then forward the complaint to the department head or faculty.
- If, for some reason, the individual student feels that he/she can't report to either the faculty advisor or the class liaison (or if they are the same individual) then the student should report the complaint to the department head directly.
- If the complaint is from a class as a whole:
  - The class should report the complaint to their respective class president.
  - The class president may suggest options for handling the complaint or simply forward the complaint to the faculty liaison for the respective class.
  - If, for some reason, the class president feels that he/she can't report to the class faculty liaison for the respective class then the class president should report the complaint to the department head directly.

Procedures for handling a complaint outside of the realm of due process:

1. When possible, the Department head will discuss the complaint directly with the party involved within 14 business days. If at all possible, the matter is reconciled at this point. A letter from the Department Head acknowledging the resolution of the complaint will be filed with the complaint and a copy sent to the complainant.
2. If dissatisfied with the discussion with the Department Head, or if the complaint is against the Department Head, the involved party may submit a written complaint to the Dean of the School of Allied Health Professions. The Department Head will meet with each party separately and may schedule a joint appointment with the two parties in order to attempt to resolve the issue. A letter outlining the resolution by the Dean shall be filed with the complaint in the Department Head's office.
3. If the party feels that additional complaint is necessary, then the complaint may be brought to the Vice-Chancellor of Academic Affairs or the Chancellor of the Health Sciences Center depending on the nature of the complaint.
4. If no resolution of the complaint may be reached within the LSUHSC institution, the involved party may report a complaint directly to the Commission on Accreditation for Physical Therapy Education (CAPTE).

## ACCREDITATION

The Commission on Accreditation in Physical Therapy Education (CAPTE) is an accrediting agency that is nationally recognized by the US Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). The role of CAPTE is to grant specialized accreditation status to qualified entry-level education programs for physical therapists and physical therapist assistants. To learn more about CAPTE, please see <http://www.capteonline.org/home.aspx>. The physical therapy program is accredited through June 30, 2019. <http://alliedhealth.lsuhs.edu/pt/default.aspx>

## PROFESSIONAL ORGANIZATIONS & ASSOCIATIONS

The American Physical Therapy Association (APTA) is the national professional organization for physical therapists. To learn more about the APTA, please see <http://www.apta.org/>. The state physical therapy

professional association is the Louisiana Physical Therapy Association (LPTA). For more information about the LPTA, please see <http://www.lpta.org/>. Students are strongly encouraged to join the professional organization. There are multiple opportunities for students to become involved in both the national and state organization.

## STUDENT ORGANIZATIONS

The Student Physical Therapy Association (SPTA) LSU Health is the departmental student professional organization on campus. Any fulltime DPT student is eligible for membership in the SPTA. The purpose of the Association shall be to assist Student Physical Therapists at LSU Health - New Orleans, Louisiana State University Health Sciences Center by providing support:

- A. To encourage professional interest among university students in the study of physical therapy
- B. To provide a vehicle for student representation in matters of professional concern
- C. To provide a means to raise funds to support student attendance at professional conferences
- D. To provide a means for members to participate in community service.

## PROGRAM OUTCOME MEASURES

Program outcomes are located at <http://alliedhealth.lsuohsc.edu/pt/admissionrequirements.aspx>

## EXAMINATIONS

Cumulative written examinations are taken twice a semester, at mid-term and at the end of the semester. These examinations include questions from all courses that are taught within the physical therapy department. Course taught outside of the department administer their own examinations and coordinate those examinations with those administered within the physical therapy department. All written examinations are taken online using Moodle. Practical examinations are administered at the end of fall and spring semesters in the first and second year of the program.

## LICENSURE

Upon satisfactory completion of the program culminating in graduation, students are eligible to sit for the National Examination. The examination is administered by the Federation of State Boards of Physical Therapy. For more information, see <http://www.fsbpt.org/>. Upon successful completion of the National Examination, students are eligible to receive licensure to practice physical therapy. Each jurisdiction (state) has their own licensure board and students must follow the guidelines for the state they wish to procure a license. The Louisiana Physical Therapy Board is mandated to license and regulate physical therapists and physical therapist assistants who wish to work in this state. For more information, see <https://lptboard.org/>.

## BACKGROUND CHECKS/DRUG SCREENS

The Substance Abuse Policy applies to all faculty, staff, residents, and students of the LSUHSC-NO. Students must understand the initial and continued enrollment is contingent upon compliance to this policy. The complete policy on substance abuse is located at <http://www.lsuohsc.edu/no/administration/cm/cm->

[38.aspx](#). Participation in clinical experiences and affiliation is a required part of the curriculum and a requirement for graduation. Clinical rotation sites may deny a student's participation in the clinical experience and rotation because of failure of a required drug test, which would result in delayed graduation or in the inability to graduate from the program. The procedure for alcohol and drug screen located in the Clinical Education Manual: <http://alliedhealth.lsuhscc.edu/pt/docs/LSUHSCClinicalEducationMANUAL.pdf>.

Students may be required to have a background clearance to fulfill mandates from Clinical Sites or to participate in Clinical Affiliations. Prior to the start of an affiliation, the CCCE will inform the student if a criminal background check is required and the specific level(s) (i.e. multi-state, healthcare provider, elderly/child abuse, etc.). The procedures for background clearance are located in the Clinical Education Manual: <http://alliedhealth.lsuhscc.edu/pt/docs/LSUHSCClinicalEducationMANUAL.pdf>.

### **MALPRACTICE INSURANCE AND CPR CERTIFICATION**

Students are required to maintain professional liability insurance and CPR certification throughout the length of the program. These two requirements must not expire while the student is participating in the clinical affiliation experience. Please see the Clinical Education Manual for more information: <http://alliedhealth.lsuhscc.edu/pt/docs/LSUHSCClinicalEducationMANUAL.pdf>.

### **CLINICAL EDUCATION**

Clinical education is an essential component in the physical therapy curriculum. Clinical affiliations provide the integration of the student's didactic and laboratory coursework into a real clinical practice setting. The curriculum includes a series of clinical experiences throughout the program. It is through the integrated and full-time clinical affiliations that the student achieves curricular goals which lead to entry-level competence. For specific information regarding clinical education, please see the Clinical Education Manual located at <http://alliedhealth.lsuhscc.edu/pt/docs/LSUHSCClinicalEducationMANUAL.pdf>.

### **EXIT SURVEY**

On a yearly basis, the department administers a Cohort Survey to all students. The purpose of this survey is to obtain student feedback regarding the physical therapy program for continuous improvement of the program. Information is also obtained about various other entities that students interact with such as Student Health, Financial Affairs, etc. This information is an essential part of the reporting requirements placed on the university, school and program in order to maintain accreditation standards.

**CODE OF ETHICS HOD S06-09-07-12** [Amended HOD S06-00-12-23 ; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24] [Standard]

#### Preamble

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

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

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

#### Principles:

Principle #1: Physical therapists shall respect the inherent dignity and rights of all individuals.

*(Core Values: Compassion, Integrity)*

- 1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

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

Principle #2: Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

*(Core Values: Altruism, Compassion, Professional Duty)*

- 2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.
- 2B. Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
- 2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.
- 2D. Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.
- 2E. Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

Principle #3: Physical therapists shall be accountable for making sound professional judgments.

*(Core Values: Excellence, Integrity)*

- 3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.
- 3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.
- 3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.
- 3D. Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.
- 3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

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

*(Core Value: Integrity)*

- 4A. Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g., patients/clients, students, supervisees, research participants, or employees).
- 4C. Physical therapists shall discourage misconduct by healthcare professionals and report illegal or unethical acts to the relevant authority, when appropriate.
- 4D. Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.
- 4E. Physical therapists shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.
- 4F. Physical therapists shall not harass anyone verbally, physically, emotionally, or sexually.

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

*(Core Values: Professional Duty, Accountability)*

- 5A. Physical therapists shall comply with applicable local, state, and federal laws and regulations.
- 5B. Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.
- 5C. Physical therapists involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapists shall encourage colleagues with physical, psychological, or substance related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapists who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.
- 5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.

Principle #6: Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors.

*(Core Value: Excellence)*

- 6A. Physical therapists shall achieve and maintain professional competence.
- 6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, healthcare delivery, and technology.
- 6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.
- 6D. Physical therapists shall cultivate practice environments that support professional development, life-long learning, and excellence.

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

*(Core Values: Integrity, Accountability)*

- 7A. Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.
- 7B. Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.
- 7C. Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.
- 7D. Physical therapists shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
- 7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.
- 7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/clients.

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

*(Core Values: Social Responsibility)*

- 8A. Physical therapists shall provide *pro bono* physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.
- 8C. Physical therapists shall be responsible stewards of health care resources and shall avoid over-utilization or under-utilization of physical therapy services.
- 8D. Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.

Proviso: The Code of Ethics as substituted will take effect July 1, 2010, to allow for education of APTA members and non-members.

## **APTA Guide for Professional Conduct**

### **Purpose**

This Guide for Professional Conduct (Guide) is intended to serve physical therapists in interpreting the Code of Ethics for the Physical Therapist (Code) of the American Physical Therapy Association (APTA) in matters of professional conduct. The APTA House of Delegates in June of 2009 adopted a revised Code, which became effective on July 1, 2010.

The Guide provides a framework by which physical therapists may determine the propriety of their conduct. It is also intended to guide the professional development of physical therapist students. The Code and the Guide apply to all physical therapists. These guidelines are subject to change as the dynamics of the profession change and as new patterns of health care delivery are developed and accepted by the professional community and the public.

### **Interpreting Ethical Principles**

The interpretations expressed in this Guide reflect the opinions, decisions, and advice of the Ethics and Judicial Committee (EJC). The interpretations are set forth according to topic. These interpretations are intended to assist a physical therapist in applying general ethical principles to specific situations. They address some but not all topics addressed in the Principles and should not be considered inclusive of all situations that could evolve.

This Guide is subject to change, and the Ethics and Judicial Committee will monitor and timely revise the Guide to address additional topics and Principles when necessary and as needed.

### **Preamble to the Code**

#### **The Preamble states as follows:**

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

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



No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

**Interpretation:** Upon the Code of Ethics for the Physical Therapist being amended effective July 1, 2010, all the lettered principles in the Code contain the word “shall” and are mandatory ethical obligations. The language contained in the Code is intended to better explain and further clarify existing ethical obligations. These ethical obligations predate the revised Code. Although various words have changed, many of the obligations are the same. Consequently, the addition of the word “shall” serves to reinforce and clarify existing ethical obligations. A significant reason that the Code was revised was to provide physical therapists with a document that was clear enough such that they can read it standing alone without the need to seek extensive additional interpretation.

The Preamble states that “[n]o Code of Ethics is exhaustive nor can it address every situation.” The Preamble also states that physical therapists “are encouraged to seek additional advice or consultation in instances in which the guidance of the Code may not be definitive.” Potential sources for advice and counsel include third parties and the myriad resources available on the APTA Web site. Inherent in a physical therapist’s ethical decision-making process is the examination of his or her unique set of facts relative to the Code.

## Topics

### Respect

#### **Principle 1A states as follows:**

1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

**Interpretation:** Principle 1A addresses the display of respect toward others. Unfortunately, there is no universal consensus about what respect looks like in every situation. For example, direct eye contact is viewed as respectful and courteous in some cultures and inappropriate in others. It is up to the individual to assess the appropriateness of behavior in various situations.

## **Altruism**

### **Principle 2A states as follows:**

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

**Interpretation:** Principle 2A reminds physical therapists to adhere to the profession's core values and act in the best interest of patients/clients over the interests of the physical therapist. Often this is done without thought, but sometimes, especially at the end of the day when the physical therapist is fatigued and ready to go home, it is a conscious decision. For example, the physical therapist may need to make a decision between leaving on time and staying at work longer to see a patient who was 15 minutes late for an appointment.

## **Patient Autonomy**

### **Principle 2C states as follows:**

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

**Interpretation:** The underlying purpose of Principle 2C is to require a physical therapist to respect patient autonomy. In order to do so, a physical therapist shall communicate to the patient/client the findings of his/her examination, evaluation, diagnosis, and prognosis. A physical therapist shall use sound professional judgment in informing the patient/client of any substantial risks of the recommended examination and intervention and shall collaborate with the patient/client to establish the goals of treatment and the plan of care. Ultimately, a physical therapist shall respect the patient's/client's right to make decisions regarding the recommended plan of care, including consent, modification, or refusal.

## **Professional Judgment**

### **Principles 3, 3A, and 3B state as follows:**

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

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

3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.

**Interpretation:** Principles 3, 3A, and 3B state that it is the physical therapist's obligation to exercise sound professional judgment, based upon his/her knowledge, skill, training, and experience. Principle 3B further describes the physical therapist's judgment as being informed by three elements of evidence-based practice.

With regard to the patient/client management role, once a physical therapist accepts an individual for physical therapy services he/she shall be responsible for: the examination, evaluation, and diagnosis of that individual; the prognosis and intervention; re-examination and modification of the plan of

care; and the maintenance of adequate records, including progress reports. A physical therapist shall establish the plan of care and shall provide and/or supervise and direct the appropriate interventions. Regardless of practice setting, a physical therapist has primary responsibility for the physical therapy care of a patient and shall make independent judgments regarding that care consistent with accepted professional standards.

If the diagnostic process reveals findings that are outside the scope of the physical therapist's knowledge, experience, or expertise or that indicate the need for care outside the scope of physical therapy, the physical therapist shall so inform the patient/client and shall refer the patient/client to an appropriate practitioner.

A physical therapist shall determine when a patient/client will no longer benefit from physical therapy services. When a physical therapist's judgment is that a patient will receive negligible benefit from physical therapy services, the physical therapist shall not provide or continue to provide such services if the primary reason for doing so is to further the financial self-interest of the physical therapist or his/her employer. A physical therapist shall avoid overutilization of physical therapy services. See Principle 8C.

### **Supervision**

#### **Principle 3E states as follows:**

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

**Interpretation:** Principle 3E describes an additional circumstance in which sound professional judgment is required; namely, through the appropriate direction of and communication with physical therapist assistants and support personnel. Further information on supervision via applicable local, state, and federal laws and regulations (including state practice acts and administrative codes) is available. Information on supervision via APTA policies and resources is also available on the [APTA Web site](#). See Principles 5A and 5B.

### **Integrity in Relationships**

#### **Principle 4 states as follows:**

4: Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public. (Core Value: Integrity)

**Interpretation:** Principle 4 addresses the need for integrity in relationships. This is not limited to relationships with patients/clients, but includes everyone physical therapists come into contact with professionally. For example, demonstrating integrity could encompass working collaboratively with the health care team and taking responsibility for one's role as a member of that team.

### **Reporting**

#### **Principle 4C states as follows:**

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

**Interpretation:** When considering the application of “when appropriate” under Principle 4C, keep in mind that not all allegedly illegal or unethical acts should be reported immediately to an agency/authority. The determination of when to do so depends upon each situation’s unique set of facts, applicable laws, regulations, and policies.

Depending upon those facts, it might be appropriate to communicate with the individuals involved. Consider whether the action has been corrected, and in that case, not reporting may be the most appropriate action. Note, however, that when an agency/authority does examine a potential ethical issue, fact finding will be its first step. The determination of ethicality requires an understanding of all of the relevant facts, but may still be subject to interpretation.

The EJC Opinion titled: [Topic: Preserving Confidences; Physical Therapist's Reporting Obligation With Respect to Unethical, Incompetent, or Illegal Acts](#) provides further information on the complexities of reporting.

## Exploitation

**Principle 4E states as follows:**

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

**Interpretation:** The statement is fairly clear – sexual relationships with their patients/clients, supervisees or students are prohibited. This component of Principle 4 is consistent with Principle 4B, which states:

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

Next, consider this excerpt from the EJC Opinion titled [Topic: Sexual Relationships With Patients/Former Patients](#):

A physical therapist stands in a relationship of trust to each patient and has an ethical obligation to act in the patient's best interest and to avoid any exploitation or abuse of the patient. Thus, if a physical therapist has natural feelings of attraction toward a patient, he/she must sublimate those feelings in order to avoid sexual exploitation of the patient.

One’s ethical decision making process should focus on whether the patient/client, supervisee or student is being exploited. In this context, questions have been asked about whether one can have a sexual relationship once the patient/client relationship ends. To this question, the EJC has opined as follows:

The Committee does not believe it feasible to establish any bright-line rule for when, if ever, initiation of a romantic/sexual relationship with a former patient would be ethically permissible.

The Committee imagines that in some cases a romantic/sexual relationship would not offend ... if initiated with a former patient soon after the termination of treatment, while in others such a relationship might never be appropriate.

## Colleague Impairment

### Principle 5D and 5E state as follows:

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

5E. Physical therapists who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report the information to the appropriate authority.

**Interpretation:** The central tenet of Principles 5D and 5E is that inaction is not an option for a physical therapist when faced with the circumstances described. Principle 5D states that a physical therapist shall encourage colleagues to seek assistance or counsel while Principle 5E addresses reporting information to the appropriate authority.

5D and 5E both require a factual determination on your part. This may be challenging in the sense that you might not know or it might be difficult for you to determine whether someone in fact has a physical, psychological, or substance-related impairment. In addition, it might be difficult to determine whether such impairment may be adversely affecting his or her professional responsibilities.

Moreover, once you do make these determinations, the obligation under 5D centers not on reporting, but on encouraging the colleague to seek assistance. However, the obligation under 5E does focus on reporting. But note that 5E discusses reporting when a colleague is unable to perform, whereas 5D discusses encouraging colleagues to seek assistance when the impairment may adversely affect his or her professional responsibilities. So, 5D discusses something that may be affecting performance, whereas 5E addresses a situation in which someone is clearly unable to perform. The 2 situations are distinct. In addition, it is important to note that 5E does not mandate to whom you report; it gives you discretion to determine the appropriate authority.

The EJC Opinion titled: [Topic: Preserving Confidences; Physical Therapist's Reporting Obligation With Respect to Unethical, Incompetent, or Illegal Acts](#) provides further information on the complexities of reporting.

## Professional Competence

### Principle 6A states as follows:

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

**Interpretation:** 6A requires a physical therapist to maintain professional competence within one's scope of practice throughout one's career. Maintaining competence is an ongoing process of self-assessment, identification of strengths and weaknesses, acquisition of knowledge and skills based on that assessment, and reflection on and reassessment of performance, knowledge and skills. Numerous factors including practice setting, types of patients/clients, personal interests and the addition of new evidence to practice will influence the depth and breadth of professional competence in a given area of practice. Additional resources on Continuing Competence are available on the [APTA Web site](#).

## Professional Growth

### Principle 6D states as follows:

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

**Interpretation:** 6D elaborates on the physical therapist's obligations to foster an environment conducive to professional growth, even when not supported by the organization. The essential idea is that this is the physical therapist's responsibility, whether or not the employer provides support.

## Charges and Coding

### Principle 7E states as follows:

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

**Interpretation:** Principle 7E provides that the physical therapist must make sure that the process of documentation and coding accurately captures the charges for services performed. In this context, where charges cannot be determined because of payment methodology, physical therapists may review the House of Delegates policy titled [Professional Fees for Physical Therapy Services](#). Additional resources on documentation and coding include the House of Delegates policy titled [Documentation Authority for Physical Therapy Services](#) and the [Documentation and Coding and Billing](#) information on the APTA Web site.

## Pro Bono Services

### Principle 8A states as follows:

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

**Interpretation:** The key word in Principle 8A is "or". If a physical therapist is unable to provide pro bono services he or she can fulfill ethical obligations by supporting organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured. In addition, physical therapists may review the House of Delegates guidelines titled [Guidelines: Pro Bono Physical Therapy Services](#). Additional resources on pro bono physical therapy services are available on the [APTA Web site](#).

8A also addresses supporting organizations to meet health needs. In terms of supporting organizations, the principle does not specify the type of support that is required. Physical therapists may express support through volunteerism, financial contributions, advocacy, education, or simply promoting their work in conversations with colleagues.

Issued by the Ethics and Judicial Committee

American Physical Therapy Association

October 1981

Last Amended November 2010

Last Updated: 11/30/10

Contact: [ejc@apta.org](mailto:ejc@apta.org)

**FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)**  
Notification of Rights under FERPA

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. They are:

- 1) The right to inspect and review the student's education records within 45 days of the day the University receives a request for access. Students should submit to the registrar, dean, head of the academic department, or other appropriate official, written requests that identify the records(s) they wish to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.
- 2) The right to request the amendment of the student's education records that the student believes are inaccurate or misleading. Students may ask the University to amend a record that they believe is inaccurate or misleading. They should write the University official responsible for the record, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.
- 3) The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent. One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing his or her tasks. A school official has a legitimate educational interest if the official needs to review an education record in order to fulfill his or her professional responsibility.
- 4) The right to file a complaint with the U.S. Department of Education concerning alleged failures by Louisiana State University to comply with the requirements of FERPA. The name and address of the Office that administers FERPA are:

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

**TECHNICAL STANDARDS FOR  
THE DEPARTMENT OF PHYSICAL THERAPY  
LSU HEALTH SCIENCES CENTER  
ADMISSION, PROMOTION, and GRADUATION**

Overriding Behaviors: Students must demonstrate professional behaviors, interpersonal skills, and safety concerns.

1. Observation: Independently the student must be able to observe a patient accurately.
2. Communication: The student must be able to utilize verbal, non-verbal, and written communication.
3. Sensorimotor: The student must be able to safely, reliably, and efficiently perform physical therapy assessment and treatments and possess speed, strength, coordination, and endurance for safely handling self, classmates, and patients.
4. Intellectual/Conceptual: The student must be able to problem-solve rapidly. Demonstrate the ability to learn and reason, and to integrate analyze and synthesize data concurrently in a multi-task setting. Students must be able to comprehend three-dimensional relationships and understand spatial relationships of structures.
5. Judgment: The student must be able to practice in a safe, ethical, and legal manner. The student must be able to respond to emergencies, demonstrate management skills, including planning, organizing, supervising, and delegating.



**TECHNICAL STANDARDS:** *The following list of examples is not inclusive but merely provides examples:***OBSERVATION:**

Independently, the student must be able to observe a patient accurately.

Assess gait deviation of patient 10 feet away  
Observe patient's response, diagnosis, pallor, grimacing.  
Determine pressure ulcer stage and depth.  
Read degrees of motion on a goniometer.

**COMMUNICATION:**

Utilize verbal and nonverbal communication with patients and care

Elicit information from patients/caregivers for written history  
Explain treatment procedures.  
Demonstrate exercise programs.  
Document client responses in the medical record.  
Establish rapport with the patient, caregivers, and colleagues.  
Apply teaching/learning theories and methods in healthcare and community environments.

**SENSORIMOTOR:**

Safely, reliably, and efficiently perform physical therapy assessments and treatments.

Practice in an ethical and legal manner.

Move from place to place and position to position

Respond to a timer, emergency alarms.  
Discern breath sounds.  
Perform tests of vital signs, pain, strength, coordination, cranial and peripheral nerves, balance, movement patterns, posture, sensation, endurance, skin integrity, joint motion, wound status, coordination, cognitive/mental status, soft tissue, assistive devices fit/use, reflexes, developmental stages, exertion of torque for manual muscle test, grading, push/pull forces.

Perform physical therapy procedures with speed, strength, endurance for handling self, classmates, and patients.

Simultaneously, physically support activities and observe a patient with a disability.

Coordinate verbal, manual and gross motor activities.  
Perform gait assessment on level surfaces, outdoor terrain, curbs, and steps. Assist with bed mobility and transfers from supine to sit, and sit to stand. Administer balance training, cardiopulmonary resuscitation, exercise techniques, activities of daily living, coordination training, prosthetic and orthotic training, joint mobilization, wound debridement and dressing, electrotherapy, soft tissue mobilization, thermal agents, neurosensory techniques, cardiopulmonary rehabilitation, developmental activities, hydrotherapy, tilt table, massage, relaxation techniques, traction, taping and draping techniques, and dependent patient transfers.

**INTELLECTUAL/CONCEPTUAL:**

The student must be able to problem solve rapidly and have the ability to learn and reason, and to integrate, analyze, and synthesize data on currently in a multitask setting.

The student must be able to comprehend three-dimensional relationships and understand the spatial relationship of structures.

The student must be able to participate in scientific inquiry process.

*The following list of examples is not inclusive but merely provides examples:*

1. Determine the physical therapy needs of any patient with a dysfunction.
2. Demonstrate ability to apply universal precautions.
3. Identify cause and effect relationships.
4. Perform physical therapy differential diagnosis.
5. Interpret patient responses.
6. Make appropriate modifications to evaluations and treatment. Determine realistic short and long term goals for the patient.
7. Recognize the psychological impact of dysfunction and disability.
8. Integrate the needs of the patient and caregiver into the plan of care.
9. Develop hypotheses; perform literature search and clinical research; perform statistical analyses; develop discussion and conclusions.

**JUDGMENT:**

- Students must be able to practice in a safe, ethical, and legal manner.
- Students must be able to respond to emergencies.
- Students must demonstrate management skills including planning, organizing, supervising, and delegating.

*The following list of examples is not inclusive but merely provides examples:*

1. Complies with the American Physical Therapy Association Code of Ethics
2. Abides by LSU Health Sciences Center School of Allied Health Profession Policy & Procedures on Student Conduct.
3. Complies with Louisiana State Board of Physical Therapy Examiner Rules and Regulations.
4. Modifies procedures in a manner that is appropriate to the patient's status and desired goals.

**BEHAVIORAL/SOCIAL:**

- Students must possess the emotional health required for full use of their intellectual abilities, exercise good judgment, and the prompt and safe completion of all responsibilities.
- Students must be able to adapt to change, to display flexibility, and to learn to function in the face of uncertainty and stress.
- Students must possess empathy, integrity, and concern for others.

*The following list of examples is not inclusive but merely provides examples:*

1. Assess learners ability to perform tasks. Identify cognitive and emotional needs of self and others.
2. Establish rapport.
3. Interact with individuals, families, groups from a variety of social, emotional, cultural, and intellectual backgrounds.
4. Demonstrate responsibility for lifelong professional growth and development.

**OVERRIDING BEHAVIORS POLICY:**

Students must demonstrate professional behaviors, interpersonal skills, and safety concerns.

*The following list of examples is not inclusive but merely provides examples:*

**Professional Behavior:**

- |  |  |
|--|--|
| 1. Abides by APTA Code of Ethics and Standards of Practice.  | 12. Offers own thoughts and ideas.                                       |
| 2. Follows state practice act.   | 13. Self-evaluates/critiques own performance.                            |
| 3. Abides by institutional policies and procedures.  | 14. Utilizes own resources before asking for help.                       |
| 4. Projects professional image.  | 15. Seeks constructive criticism for self-improvement.                   |
| 5. Attends professional meetings.  | 16. Utilizes feedback to modify behavior and for self-improvement.       |
| 6. Accepts responsibility for actions and outcomes.  | 17. Able to focus on tasks at hand without dwelling on past mistakes.    |
| 7. Asks pertinent questions.   | 18. Sets up own schedule, sets priorities, and meets external deadlines. |
| 8. Seeks assistance of instructor and/or peers to gain a better understanding of concepts learned. | 19. Collaborates with others.  |
| 9. Identifies and utilizes resources for learning.   | 20. Coordinates schedule with others.                                    |
| 10. Puts new information into practice.  | 21. Sets realistic goals   |
| 11. Accepts that there may be more than one answer to a problem.                                   | 22. Keeps commitments.   |
|  | 23. Is honest and has the highest integrity.                             |
|  | 24. Sets personal and professional goals.                                |

**Safety:**

1. Identifies and addresses potential and actual safety hazards.
2. Reports unsafe conditions to appropriate personnel.
3. Is able to assess physical and cognitive limitations of self and others and request assistance as necessary.
4. Determines safety and operational status of equipment.
5. Selects treatment interventions considering safety of patient at all times. Does not select treatment interventions in which:
  - a. patient's safety is compromised
  - b. other's safety is compromised
  - c. own safety is compromised.
6. Modifies evaluation and treatment based on patients' signs, symptoms, and response to treatment. Modifies when:
  - a. safety of patients, others, or self is compromised
  - b. patient's discomfort exceeds levels necessary for procedure
  - c. patient's assistance is necessary and he/she is no longer able to assist

- d. equipment becomes faulty
- e. procedure is not yielding results necessary for evaluating patient's physiologic, neuromuscular, skeletal problems.

***Communication and Interpersonal Skills***

1. Demonstrates understanding of basic English (verbal and written) and writes legibly; uses correct grammar, accurate spelling, and expression.
2. Recognizes voice quality and avoids vocal distractors; (e.g., song-singing, sighing, uh).
3. Maintains eye contact.
4. Summarizes verbal or written message clearly and concisely.
5. Presents verbal or written message with logical organization and sequencing, using accurate professional and/or lay terminology.
6. Gives feedback constructively.
7. Respects personal space of patients and others.
8. Takes responsibility for mistakes, apologizes.
9. Recognizes worth and dignity of each person as demonstrated in the following manner:
  - a. exhibits caring.
  - b. maintains confidentiality.
  - c. modifies response when appropriate.
  - d. exhibits courtesy by using polite language, listening without interrupting, tone of voice, body language, and verbal expression.
10. Demonstrates flexibility by being cooperative in changing plans to meet the needs of peers, faculty, patients, the institution.
11. Evidences loyalty by supporting the institution in a positive way to peers, staff, others.

Students are expected to demonstrate overriding behaviors in all courses and clinical experiences. Overriding behaviors will be assessed as part of all didactic courses, lab sessions, lab practical, and clinical science experiences. As students participate in the education program, academic and clinical faculty and the student's adviser will document problems that arise in overriding behaviors. The student will be given opportunities to demonstrate modifications of his/her behavior and faculty will assist where possible to facilitate strategies for this development.

When behaviors do not meet acceptable standards, depending on the nature and severity of the infraction, one or more of the following actions may be taken at the discretion of the Physical Therapy Department faculty:

- Notify the student about inappropriate behaviors first orally, and then with a written warning. Problem behaviors will be discussed with the student's faculty adviser. If inappropriate behaviors are cited on subsequent occasions, faculty will discuss the incident at faculty meetings for action.
- Clinical or academic faculty may require remedial action on the part of the student as a contingency to continuing in the program or passing the course.
- The faculty may terminate a student from the program because of failure to meet the standards of the overriding behaviors in the academic or clinical settings.

**Anecdotal Record**

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Date: [Click here to enter a date.](#)

Promotions Level:

Semester:

Faculty Member:

Student Name:

---

**Description of the event:**

**Setting:**

- Classroom
- Clinical setting
- Online (e-mail, etc.)
- Other

**Description:**

**Persons Involved:**

- Student named above
- Other students listed:
- Other

---

**Student Action or Behavior**

Provide a brief description of the observed action or behavior below.

**Anecdotal Record**

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**Faculty member interpretation of student action or behavior:**

Exemplary behavior

Inappropriate use of electronic devices

Dress code infraction

Unexcused absence

Unprofessional behavior

Other

---

**Student's comments / responses to faculty member interpretation of student action or behavior:**

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Student's Signature: \_\_\_\_\_

Date: [Click here to enter a date.](#)

Faculty member's Signature: \_\_\_\_\_

Date: [Click here to enter a date.](#)

### Declination of Academic Accommodations

I have voluntarily chosen to decline my right to academic accommodations provided for in the SAHP Department of Physical Therapy Academic Accommodations Policy:

Extended time for at-home assignments

Extended time to complete program

Alternate Testing

Extended time for in-class tests

Low-distraction testing environment

Different medium

Preferential class seating

Special Parking

Ergonomic equipment

Auxiliary learning aids:  Enlarged Print  Tape Recorder  Scribe  Assistive listening devices

Reader  Interpreter

Other \_\_\_\_\_

I also understand that my declination may affect my performance on:

\_\_\_\_\_

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Faculty

\_\_\_\_\_  
Date

## DEPARTMENT OF PHYSICAL THERAPY Student Leave Request Form

Student Name (print): [Click here to enter name.](#)    Date of Request: [Click here to enter a date.](#)

Date(s)/Times for which leave is requested: [Click here to enter a date.](#)     AM     PM     All Day

Type of Leave Requested:     Personal     Sick/Bereavement     Professional

Number of Leave Days taken this semester:    Personal:   0      Sick/Bereavement:   0      Professional:   0  

Class(es) for which leave is requested:	Approval		Signature of Respective Course Coordinators:
	Granted	Denied	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

Advisor Name:	Approval		Advisor Signature:
	Granted	Denied	
	<input type="checkbox"/>	<input type="checkbox"/>	

For any excused absence of approved or professional leave, students must complete a "Leave Request Form" at least 5 school days prior to the requested day(s) of leave and obtain the signatures of all course directors/instructors who approve the absence from their class(es). Approval for absence from courses taught outside the department must be obtained by the P.T. course coordinator. For any excused absence of sick/bereavement leave, a "Leave Request Form" must be submitted as soon as possible. If the event is unforeseeable, the form must be submitted no later than two school days following the return to class. The approved form will be given to the student's faculty advisor for final approval and placed in the student's file.

**Anecdotal Record: Tardy**

Date: [Click here to enter a date.](#) Semester: \_\_\_\_\_

Class Name / Number: \_\_\_\_\_

Faculty Member: \_\_\_\_\_ Student Name: \_\_\_\_\_

\_\_\_\_\_ Time the class was scheduled to start \_\_\_\_\_ Time student showed up for class

\_\_\_\_\_ Number of Unexcused Tardies in this course this semester (including this occurrence)

If this is the student’s first unexcused tardy in this course this semester, how was the student informed / warned that future unexcused tardies in this course will result in a 1% deduction of the overall course grade each, as well as, anecdotal reports being written up for each subsequent tardy and placed on the student’s file.

- Student was given a verbal warning
- A copy of this anecdotal report is being made and placed in the student’s mailbox.
- Other: \_\_\_\_\_

Yes Did the student provide an excuse for the tardy, either written or electronic, to the course coordinator by 5:00 PM on the day of the infraction?

No

Yes If yes, was the excuse adequate/ accepted by the faculty member as an acceptable excuse for being tardy?

No

Description of the excuse: \_\_\_\_\_

Excused Tardy

Unexcused Tardy

\_\_\_\_\_ (Student Initials) I understand the departmental policy on tardiness in the student handbook and acknowledge that by being tardy to class, I will have consequences (ie. loss of 1% of the overall grade for each class I am tardy to).

Student’s Signature: \_\_\_\_\_ Date: [Click here to enter a date.](#)

Faculty member’s Signature: \_\_\_\_\_ Date: [Click here to enter a date.](#)



## AFFIDAVIT

I have read the *Student Manual* of the Department of Physical Therapy and the *School of Allied Health Policy And Procedures Related To Student Conduct*, Louisiana State University Health Sciences Center and the Departmental Technical Standards. I understand and agree to abide by the regulations as stated.

Consent for laboratories: As a student in the Department of Physical Therapy, I understand that I will be required to participate in laboratory activities on multiple occasions in order to complete course work. These activities will usually be performed by fellow students after demonstration by an instructor or may be performed on me as a subject by an instructor.

I also understand that, if I have any condition for which the activity would be contraindicated, e.g., chronic illness, injury, pregnancy, etc., I must inform the respective faculty member and not put myself or others at risk.

Signature \_\_\_\_\_

\_\_\_\_\_ Date

**Students will not be considered officially enrolled until this sheet is signed and placed in their files.**

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### OPTIONAL:

Due to the highly specialized nature of the profession, there are occasions when interested persons, e.g., clinical instructors, prospective employers, etc., need information (e.g., academic and clinical strengths and weaknesses) concerning students.

In order to expedite this process, I, \_\_\_\_\_ (name), give my consent to allow faculty of the Department to release either in writing or verbally, any information regarding my performance as a student.

Signature \_\_\_\_\_

\_\_\_\_\_ Date

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### OPTIONAL: CONSENT FOR PHOTOGRAPHY, INTERVIEW, RECORDING

I, \_\_\_\_\_, hereby grant permission to LSU Health Sciences Center to photograph, video tape, record, or interview me for print or broadcast media use, for use in LSU Health Sciences Center publications, or for use in teaching by LSU Health Sciences Center faculty.

I hereby transfer to LSU Health Sciences Center all rights and claims I have, or in the future may acquire, with respect to such photographs, video recordings, audio recordings, and/or written materials, agreeing that same shall be the sole and absolute property of LSU Health Sciences Center. I hereby relieve and release LSU Health Sciences Center from any and all claims whatsoever, and for any and all kinds of remuneration for use of such materials.

Signature \_\_\_\_\_

\_\_\_\_\_ Date