

**Montgomery College Physical Therapist Assistant Program**  
**PTHT 223 Clinical Practicum I**

Credit/clock hours: 5 semester credit hours; 240 hours (8 full-time weeks) clinical education hours. Full-time, equivalent to forty (40) hours per week, for six weeks, for a total of 240 hours at a clinical affiliation facility. Daily clinic hours will be announced by your Clinical Coordinator or Clinical Instructor. Students are required to follow the schedule of their clinical instructors regarding daily attendance.

Meeting schedule and location: **November 5, 2018 – December 14, 2018**. Others may be scheduled based on clinical site availability. There are a limited number of sites in the immediate area; therefore, students may have to travel up to 1 hour's distance from their homes or from campus. The site to which a student is assigned will, however, be in the metropolitan areas of Montgomery County, Washington, DC, Northern Virginia, and Baltimore.

Course Coordinator:                   Annet Glenn, PTA, MS  
E-mail address: anniet.glenn@montgomerycollege.edu

Course description: Capstone clinical course consists of 8 full-time weeks of supervised clinical experience in a physical therapy setting. The student will practice advanced skills learned in the physical therapist assistant curriculum under the supervision and direction of a licensed physical therapist or supervision team of licensed physical therapist and physical therapist assistant. The student will develop entry-level skills in the legal and ethical issues of clinical practice, the measures and interventions required of a clinical population, documentation, and progression of patient care, and the comprehensive non-direct patient related skills necessary for the professional role and responsibilities of the entry level physical therapist assistant.

Course prerequisite: All prior coursework and practical exams must be satisfactorily completed.

Clinical objectives: To provide students with an additional clinical experience to develop and refine skills for effective and safe implementation of patient care, and to further enhance professional and personal growth. To enable the student to develop the skills necessary for entry level physical therapist assistant practice.

Course objectives: Upon completion of the clinical affiliation, the student will:

1. Demonstrate the entry level knowledge, clinical skills, and professional abilities of a physical therapist assistant.
2. Manage initial steps toward an effective transition from the educational program to a career as a licensed PTA.
3. Exhibit competent patient care under the direction and supervision of a licensed physical therapist or supervision team of licensed physical therapists/physical therapist assistant in an ethical, legal, and effective manner in a health care setting.

**Affective:** the student will be able to successfully:

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

1. Internalize the role of the PTA by seeking evaluative patient information from the PT
2. Exhibit support and understanding for the patient who may be having psychological difficulty in dealing with their diagnosis or treatment and discuss these patients with the clinical instructor
3. Recognize when the direction to perform an intervention is beyond that which is appropriate for a PTA and initiate clarification with the PT
4. Relate statutory and regulatory information pertaining to the delivery of physical therapy services including supervision to other colleagues
5. Recognize the difference between ethical and unethical practice situations
6. Cooperate with other personnel within the physical therapy department to assure a high quality of care and professionalism toward all individuals both clinicians and patients
7. Obey statutory and regulatory rules that govern the practice of physical therapy
8. Devote time to the reading of professional literature

**Performance expectations relative to CAI criteria for this experience**

Anchor definitions:

4 – Consistently meets the stated objective. The student seeks **confirmation** from the clinical instructor.

**Confirmation** – Student confers with the clinical instructor prior to or following an activity for the purpose of sharing information and/or validating decision-making. The student is capable of functioning safely and independently. The student is capable of functioning safely without the CI in direct line of sight supervision.

3 – Consistently meets the stated objective. The student needs intermittent **guidance** from the clinical instructor.

**Guidance** – Student needs advice from the clinical instructor to expand knowledge or skills. The direct presence of the CI can be in line of sight for the activity being performed.

2 – Meets the stated objectives with inconsistencies. The student requires **supervision** from the clinical instructor.

**Supervision** – The student needs verbal cueing or physical assistance from the clinical instructor. The presence of the clinical instructor in the immediate vicinity is necessary.

1 – Does not meet the stated objective. The student requires **constant supervision** from the clinical instructor.

**Montgomery College Physical Therapist Assistant Program  
PHTT 223 Clinical Practicum I**

Performance expectations at final evaluation	Performance and Behavioral Expectations of Physical Therapist Assistant Student
	<b>1.0 Professional, Ethical and Safety*</b>
4	Demonstrates safe, professional, legal, and ethical behavior consistent with APTA, institutional, federal and state standards and regulations. Adheres to legal practice standards including federal, state, and institutional regulations related to patient/client care and fiscal management. Ensures the safety of patient, self, and others during all aspects of patient care. Participates in facility efforts to increase patient and provider safety. Adjusts behaviors to reflect culturally competent care:
	<b>2.0 Interventions</b>
3	Interventions, test, and measures reflect knowledge, skills, and affect consistent with professional standards for evidence based practice within the plan of care established by the supervising PT. Interventions observed (not all may be observed in a single facility): <ul style="list-style-type: none"> <li>• Airway clearance techniques</li> <li>• Application of devices and equipment</li> <li>• Physical agents/modalities</li> <li>• Wound management</li> <li>• Functional training in self-cares</li> <li>• Functional training for home, work, school, community</li> <li>• Manual therapy: PROM, massage</li> <li>• Motor function training – gait, balance, coordination</li> <li>• Patient/client education</li> <li>• Therapeutic exercise</li> </ul>
3	Student is competent in performing tests and measures before, during, and or after intervention. Check any of the interventions observed (not all may be observed in a single facility): <ul style="list-style-type: none"> <li>• Aerobic capacity and endurance</li> <li>• Measures of height, weight, length girth</li> <li>• Assistive technology</li> <li>• Gait, locomotion, and balance</li> <li>• Joint integrity and mobility</li> <li>• Muscle performance</li> <li>• Neuromotor development</li> <li>• Pain</li> <li>• Posture</li> <li>• Integumentary integrity</li> <li>• ROM</li> <li>• Self-care and physical environment inspection (home, educational, social, community or work)</li> <li>• Ventilation, respiration and circulation</li> </ul>
	<b>3.0 Communication &amp; Data Collection</b>
4	<ul style="list-style-type: none"> <li>• Communication and documentation reflect standards of the profession and requirements of the facility, internal and external agencies. Communication strategies are adjusted for maximum effectiveness with all audiences. Adjusts communication to meet the needs of varying stakeholders, including patients, families, caregivers, co-professionals, inter-professional team members, consumers, payers, and policymakers. Demonstrates cultural competence in all interactions.</li> </ul>
	<b>4.0 Resource Management</b>

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

3	Utilizes human and materials institutional-based resources and services to provide high-quality efficient and cost-effective services (i.e. rehab aides).
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**Teaching methods and learning experiences:** Students receive direct personal supervision by their clinical instructors (CI) during all clinical education experiences. The CI is a licensed physical therapist and licensed physical therapist assistant. CIs provide student orientation, instruction, access to patients and their families and are bound by the policies and procedures of their clinical sites as well as the practice act for physical therapy in the jurisdiction in which the facility is located (DC, MD, or VA).

**Evaluation and grading:** Students are evaluated by their clinical instructor at the facility to which they are assigned during the mid-term and final weeks of the experience. Timely submission of all required paperwork as well as the student’s achievement of course objectives forms the foundation of the course grade. Students have one week from last day of clinical to submit all required documentation. Late submission of the final documentation will cause a reduction of the final grade by one letter grade.

Completed CAI	75%
Completed Student Evaluation of the Clinic	5%
In-Service Presentation	8%
ADA Project	8%
Discussion/Attendance Forms (via Blackboard and fax)	2%
Paperwork (on time and complete)	2%

**On the course Blackboard site, the students will find the CPI, Student Evaluation of the Clinic, and weekly planning and attendance forms. These tools are discussed during orientation to the clinic. Students may also refer to the PTA Student Handbook for clinical education policies and procedures.**

Students may receive an Incomplete (I) grade due to some alteration in clinic schedule or timely receipt of required paperwork, which will convert to the letter grade when the clinical rotation has been completed and all course requirements are complete.

**Course Requirements:**

Clinical attendance: The student’s responsibility is to use the weekly planning forms to record actual clinical hours. An absence of one single 8 hour day does not need to be made up. All other absences of any kind must be made up. The student must call and notify the CI or Chief Therapist at the site and the College Faculty if for any reason he/she cannot report for clinical duty or cannot report on time. Punctuality is expected; and student’s arrival and departure times are identified by the clinical instructor. Lunch and other breaks are scheduled by the clinical instructor and students are expected to be on-site during these times unless prior arrangements are made with the clinical instructor.

Student clinical behavior policies: Students are required to comply with all regulations as outlined in the PTA Program Student Handbook, as well as, all policies and procedures of the clinical facility. In summary, students are required to act in a manner that will reflect credit on themselves, the school, and the profession for which they are being educated.

Any occurrence of less than acceptable behavior will be documented and handled in accordance with the appropriate documents such as the Catalog, Student Code of Conduct, PTA Program Student Handbook sections on Clinical Education Policies and Procedures, APTA Code of Ethics, and APTA Guide for Conduct of the Physical Therapist Assistant.

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

Personal appearance/uniform policy: The personal appearance and demeanor of Physical Therapist Assistant students at Montgomery College reflect the standards of the profession, the College, and the Program and are indicative of the students' interest and pride in their chosen profession. Students are referred to the PTA Program Student Handbook for uniform standards.

The MC Identification card and name tag serves as the student's official identification and must be worn at all times. The clinical facility may provide additional identification.

**Course Schedule**

<b>Date</b>	<b>Activity</b>	<b>Assignment</b>
<b>Week of Sept 4</b>	Faculty completes preliminary clearance for participation in clinical education. Faculty reviews all academic records, student safety and professionalism, and required Precheck, CPR, health and immunization records are on file	<b>If notified, supply any missing documents</b>
<b>Week of Sept 25</b>	Orientation to PT 209 and clinical education. Clinical Education facility assignments and course paperwork requirements. Review <i>PTA Student Handbook</i> , sections on Clinical Education; review of APTA core documents and MD state practice act for physical therapy. Review of course requirements and deadlines for assignments	<b>Review all documents and Maryland, Virginia or DC practice acts. Know law on supervision of PTA student in each jurisdiction</b>
<b>Week of Nov 2</b>	Faculty final clearance for participation in clinical education. Faculty review program standing, student safety and professionalism, and assure all required forms are on file	
<b>Week of Nov 6</b>	Student orientation at assigned clinical facilities and clinical practicum experience begins	Submit weekly planning and attendance form for week 1
<b>Week of Nov 20 – Nov 27</b>	Student mid-term and final performance evaluation. Visit as scheduled by PTA Program faculty. Personal visits or telephone calls are made.	Submit weekly planning and attendance form for week 2-4  <i>ADA project due 11/26/19 by 5pm</i>
<b>Week of Dec 7</b>	Student In-Service Presentation	<b>Submit In-service presentation to Prof. Glenn.</b>
<b>Week of Dec 14</b>	Student final performance evaluation	<b>Submit completed CPI reflecting final performance; submit final weekly planning and attendance forms; submit completed Student Evaluation of the Clinic</b>
<b>All required forms to PTA program are due in Trajecsys by Wednesday, December 12th by 4:00pm. Unless prior arrangements are made with the PTA Program faculty, any materials received after the assigned time/date will be considered late, with reductions made to the student's grade.</b>		

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

<b>In-Service Presentation Expectations (8%)</b>
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Identify a topic relevant to physical therapy practice, it might be:

- A specific physical therapy diagnosis
- A specific treatment technique
- A specific treatment approach
- An innovative piece of therapeutic exercise equipment
- A surgical procedure
- A new or frequently used testing tool
- medical complications that patients commonly seen in that department have and their impact on physical therapy regimens

Research the topic utilizing various forms of media

- print (research articles from journals, books, etc.)
- interviews
- Internet (WWW, support group sites, etc.)
- Videos or DVDs (if available)
- Seminars (if available)

Develop an outline for a 30 - 45 minute presentation for your peers within the physical therapy department

Prepare the presentation utilizing audio-visuals to clarify the information

Present your in-service

- Be prepared to answer questions from your audience
- Videotape your in-service presentation (optional)
- Evaluate your performance using the rubric provided.
- Submit an outline of your presentation along with a copy of all handouts to the course director.
- If you used a PowerPoint Presentation, you can email that to me as well.

Please keep in mind that I am looking to see that YOU learned something new AND that you taught your audience something new that they can immediately use in their patient care.

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

<b>Presenter Feedback Rubric: In-Service Presentation</b>
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**Student:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Title of Presentation:** \_\_\_\_\_

**Directions: Mark the appropriate box for each of the Performance Elements. Comments on reverse side.**

<b>Performance Element</b>	<b>Level 3</b>	<b>Level 2</b>	<b>Level 1</b>
Topic relevance	Topic was interesting and relevant to PT & the audience in attendance	Topic was somewhat relevant to PT and/or the audience in attendance	Topic was not relevant to PT and/or the audience in attendance
Interaction	There were several opportunities for discussion & sharing of ideas	There were some opportunities for discussion and sharing of ideas	There were few opportunities for discussion and sharing of ideas.
Incorporation of research	Information was included from various sources which were included in a reference list	Information was included from 1-2 sources which were included in a reference list	Unclear as to the source of information presented. No reference list provided.
Organization	A presentation outline was shared. Main ideas and sequence can be recalled.	A presentation outline was mentioned. Some main ideas can be recalled.	A presentation outline was not evident. Some of the main ideas can be recalled.
Presentation	Speaker was relaxed, well-articulated, and maintained goo	Speaker met two of the previous criteria	Speaker met one of the previous criteria.
Handouts/visuals	The handouts were aligned with the presentation, and showed main ideas clearly and concisely	The handouts were loosely aligned with the presentation, and related to the main ideas	The handouts were not aligned with the presentation but included many ideas

Did you learn anything NEW? Yes/No

Will you be able to incorporate information from this in-service into your daily practice? Yes/No

Additional Comments: (continue on back if needed)

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

**ADA Project**

**Environmental Accessibility Project:** Students are asked to select a patient that they have interacted with while on their first clinical internship. Complete a thorough, well organized paper utilizing college level writing, accurate attributions if needed, and submit electronically to Professor Glenn no later than **5 pm on Thursday, December 6th**. No late work will be accepted. Professor Glenn will always reply that your report was received and that it could be printed out. Do not exceed 10 pages for this report.

Work to be posted in Blackboard.

**Instructions and project description**

**1. Select the patient**

Please provide a brief summary of this person's relevant past and current medical history. What is this person's social history and any additional relevant information. Remember to provide CONFIDENTIALITY. Do not mention the name of the clinical setting, the patient, or the patient's physician. **You get no credit for this area if you violate confidentiality.**

**2. Summarize the functional limitations and participation restrictions**

Summarize the issues that this person has with both function and participation. Is this person supposed to drive? Is he/she working outside of the home? To what recreational activities will this person like to return?

**3. Overview of accessibility issues**

What physical access issues are required in the environments listed above? You can refer to your 1<sup>st</sup> semester power points on ADA in both PT102 and PT 101. Both textbooks (Dreeben and Pierson & Fairchild) have chapters on ADA.

Big Red has two chapters called Examination of Functional Status and Activity Level (Ch. 11) and Examination of the Environment (Ch. 12) in the 5<sup>th</sup> edition; Examination of Function (Ch. 8) and Examination of the Environment (Ch. 9) in the 6<sup>th</sup> edition. The appendix provides useful forms, resources and measurement tools.

**4. Describe the environment(s)**

Describe the environment or environment(s) that this person will be accessing. If their home, what type, how many stairs, where is the bed, where is the bathroom? Can you get accurate measurements of doorway widths, counter top heights, etc. for the home environment and ditto for work and recreational facilities?



**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

**5. Analysis**

a. Where their obstacles which made these tasks impossible? Difficult? Easy? What family or social support is available for this person? What problems are you anticipating? Are these the same or different from what the patient, family, and or social services personnel are anticipating as discharge is planned?

b. In the best of all worlds, what recommendations would you make regarding the obstacles identified? If your patient had unlimited resources – time, money, energy – how would he/she solve this problem?

c. Now come back to reality. What is the patient and their family actually going to do?

**6. Resources**

Briefly identify community-based and web-based information that you would offer to this patient and or family.

**Scoring Rubric: The written paper will be worth 10% of your final grade in PHTH 204 Neuropathology.**

Content

Thorough, well organized and has required content 15 points

Process

College level writing with correctly identified attribution 5 points

Length of paper is not more than 10 pages, 12-point font, double spaced

Analysis and integration

Thoughtful insight into patient limitations and participation restrictions. 10 points

Accurate anticipation of problems and creative recommendations.

Possible total: 30 points

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

**Clinical Practicum Weekly Planning Form**

**Please Print or type.**

Student Name: \_\_\_\_\_  
 Clinical Instructor: \_\_\_\_\_  
 Clinical Site Name: \_\_\_\_\_

Date: \_\_\_\_\_  
 Week: \_\_\_\_\_  
 Level of Practicum    I    II

**Student's Review of the week** (*when completing this form consider the following performance dimensions: quality of care, supervision/guidance required, consistency of performance, complexity of tasks/environment, efficiency of performance size of student's caseload*):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Clinical Instructor's Review of the week** (*when completing this form consider the following performance dimensions: quality of care, supervision/guidance required, consistency of performance, complexity of tasks/environment, efficiency of performance, size of student caseload*):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Goals met for this week:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Goals for the Upcoming week:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Confirm schedule and attendance for the week**

Day(s)	Scheduled hours	Attendance (actual hours worked)

For CI:            \_\_\_\_\_            Montgomery College, I have concerns, please contact me  
                       \_\_\_\_\_            Montgomery College, I have questions, please contact me

**Please use Trajecsys or fax weekly to Attn: Annet Glenn, PTA, MS  
 Fax #: 240-567-5585**

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

# HANDBOOK

## 2017

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

Administrative Structure

President Montgomery College            Dr. DeRionne P. Pollard

Provost for Takoma Park Campus        Dr. Bradley J. Stewart

Dean, Health Sciences                    Ms. Angela M. Pickwick, MS, RT(RM)

Chair, Health Sciences                    Ms. Diane Barberesi, MS

***PTA Faculty and Staff***

Nancy Greenawald, EdS, MB, PT        *PTA Program Coordinator, Professor*  
Office: HC 239 Phone: 240-567-5523    E-mail: [nancy.greenawald@montgomerycollege.edu](mailto:nancy.greenawald@montgomerycollege.edu)

Annet Glenn, MS, PTA                    *Clinical Education Coordinator, Associate Professor*  
Office: HC 240 Phone: 240-567-5524    E-mail: [annet.glenn@montgomerycollege.edu](mailto:annet.glenn@montgomerycollege.edu)

Angela Venerable Joyner, MS, PT        *Part-Time Faculty*  
Office: HC 240 Phone: 240-567-5520    E-mail: [angela.venerablejoyner@montgomerycollege.edu](mailto:angela.venerablejoyner@montgomerycollege.edu)

Sherry Randolph, MS                      *Administrative Aide II*  
Office: HC 238 Phone: 240-567-5520    E-mail: [sherry.randolph@montgomerycollege.edu](mailto:sherry.randolph@montgomerycollege.edu)

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

***Clinical Education Policies and Procedures***

The clinical education component of the curriculum is different from the traditional classroom instruction to which the student has been accustomed. Clinical education experiences involve the care of real patients and the use of equipment and professional interventions, which could be dangerous if used improperly. Since many factors together constitute a very different situation than a classroom education, a much more structured set of rules and regulations are necessary to assure student success.

**CLINICAL ASSIGNMENTS**

Students enrolled in the PTA program will be assigned to two clinical rotations during the final academic year of the program. If the student has an interest in a particular facility for a future rotation, the sooner that the student identifies that clinical site to the Clinical Coordinator the better. This will allow faculty to make contact and begin the contractual process. Students are assigned to clinical facilities based on available facilities and student learning needs.

Clinical rotations are an integral part of the health science programs. Students must have experiences within approved clinical facilities in order to successfully complete their program of study. Clinical assignments are non-negotiable and faculty will not allow students to exchange site assignments with their classmates. While the faculty recognizes that students may be assigned to sites that are distant from their jobs or homes, students must be prepared to make adjustments to get to their assigned sites on time and for the entire period of the clinical practicum. The clinical faculty may allow schedule adjustments; however, all assigned clinical hours must be completed within the assigned semester.

In order for an experience to be considered as “full time”, the student is required to be at the clinic for a total of eight (8) hours per day, for the number of days per week stated in each course syllabus, but for no more than 40 hours in any one week. Isolated half-day experiences or one-day field trips are considered “part-time.”

**ASSIGNMENT AT PLACE OF EMPLOYMENT**

Students are not allowed to work as PTAs prior to graduation. A student employed in any capacity at a health care facility used for clinical internship must inform the Clinical Coordinator and request clinical placement at a different facility. This provides a broader learning experience for the student and prevents role conflict with facility staff.

**FINANCIAL COMPENSATION**

Under no circumstances are students paid during the clinical practicum experiences. Monetary gifts from grateful patients or families cannot be accepted. Students will discuss the situation with their clinical instructors if the need arises. Students are not permitted to work in any capacity in the same facility to which he/she has been assigned as a student. Serious liability issues will result and the student may be dismissed from the internship.

**CLINICAL PERFORMANCE ASSESSMENT**

Clinical courses are scheduled with the clinical faculty at the clinical affiliation site, based on availability. Evaluation of the student's clinical performance is based upon specified levels of technical and profession competence and in comparison with stated criteria in the Trajecys Clinical Performance Instrument.

All evaluations are discussed with the Clinical Instructor (CI) and signed by both student and CI. The student will receive a letter grade for clinical courses determined by the PTA program Clinical Coordinator in consultation with the clinical faculty who worked with the student during the affiliation. If a student requires additional clinical education time to successfully complete clinical course objectives,

## Montgomery College Physical Therapist Assistant Program PTHT 223 Clinical Practicum I

this may be granted if the student demonstrates an appropriate professional affect and progress. Additional clinical education time will not exceed two weeks.

If a student does not satisfactorily meet the clinical course objectives, he/she will be unable to progress in the curriculum. PTA clinical courses may be repeated only once according Academic Regulation 9.62, Sec. D. If a student does not successfully complete the course after a second attempt, he/she will not be allowed to continue in the program.

### ATTENDANCE AND BEHAVIOR EXPECTATIONS

Attendance is recorded at each clinical affiliation and verified by the Trajecys system. Students are required to behave in a manner that will reflect credit on themselves, the school and the profession which they are being prepared to enter. The MC *Catalog*, *Student Code of Conduct*, PTA program policies and procedures found in this *Handbook*, and professional guidelines, such as the *APTA Code of Ethics*, and *Standards of Ethical Conduct for the Physical Therapist Assistant* and *Values-based Behaviors for the Physical Therapist Assistant* contain the standards of professional behavior to which the student is held. The student should become familiar with the expectations listed below.

- If a student is not present at assigned area, then the student is considered absent for the day.
- All lost time must be made up. Exceptions to this rule will be made only for the most serious of reasons, on a case by case basis, and at the discretion of the Clinical Coordinator.
- Emergency or serious situations happen, but the time must be made up. The following situations are considered emergency or serious: personal illness, court appearances, death in the immediate family (e.g., parents, grandparents, or siblings).
- Proof of the reason for an absence may be required by the internship facility. For example, a facility may require a physician's return to work release if the student was absent for more than 2 days.
- Any time missed due to medical or dental appointments must be made up. Note that CIs and program faculty take a negative view of time missed due to appointments which could and should have been scheduled outside of clinical internship hours.
- Any lost clinical time must be communicated—**in advance**, whenever possible—with **both** the Clinical Coordinator and the student's CI.
- Students work the same hours and schedule as their CI. This includes holidays, evenings, and or weekends. If college classes are cancelled for any reason, the student is expected to attend scheduled clinical hours unless told not to.
- It is expected that students will be on time and prepared for their clinical duties and responsibilities. Habitual tardiness, absenteeism, and being unprepared will result in a reduction in the final grade and possible administrative withdrawal from the clinical practicum course.
- Students may be allowed thirty (30) minutes for lunch. This is left to the discretion of each CI at each institution. It is preferred that students do not go off facility premises for lunch but this may be left to the CI to decide as well. If the student goes off the premises, he/she is still expected to return to the clinical site by the appropriate time to resume responsibilities.
- Clinical paperwork requirements may change at any time and with little advance notice. If a student is required to, for example, complete a second drug screen or medical test, it is expected that the student will make every effort to complete the new requirement as soon as possible. Delays due to student procrastination may have a negative effect on the outcome of the experience.
- Clinical schedules which conflict with religious observances must be discussed with both the CI and Clinical Coordinator. Clinical time missed due to religious observances must be made up.

**Montgomery College Physical Therapist Assistant Program**  
**PTHT 223 Clinical Practicum I**

- All students are required to attend the clinical affiliation at the regularly scheduled time as identified in the published *Schedule of Classes*. If a need arises to request a minor change in scheduled time, the student must notify the Clinical Coordinator in writing of the requested change and its justification. Rules for adjustments to clinical hours are listed below:
  - The requested change must not interfere with student's education. The request must not interfere with the normal operation of the clinical facility or the PTA educational program. All clinical hours must be completed within the scheduled semester.
  - Reduction of commute time, unreliable personal transportation, or child care is not generally considered undue hardship. Requests for adjustments to clinical hours for these reasons will be denied.
  - Scheduled dates and work times may vary due to clinical site or clinical instructor availability. Students will be notified of any changes to their assignments as soon as this is known by the Clinical Coordinator.

Each clinical facility reserves the right to terminate a student's educational internship at the site for reasons interpreted as unprofessional behavior. Students are warned that frequent absence, tardiness, or behaviors that indicate disinterest or lack of preparation will invariably be interpreted as unprofessional. The program and clinical faculty expect that students will orient themselves to and abide by the clinical facility's policies on conduct. A student will be subject to disciplinary action if violations of any kind occur.

The clinical facility may request that the student be removed from the clinic. Upon this request, the student will leave and then inform the Clinical Coordinator. The student will not be reassigned to a clinical site until the behaviors leading to the dismissal are understood and addressed. An individualized plan to address student behavior will be developed, implemented, and assessed by the Clinical Coordinator before the student is allowed to continue. The Program Coordinator, clinical instructor, student, and or Dean of Health Sciences may assist in the development, implementation, and or assessment.

**PERSONAL APPEARANCE AND UNIFORMS**

The personal appearance of PTA students reflects the standards of the profession, the college, and the program. As such, personal appearance is seen as indicative of the students' interest and pride in their chosen profession. Any student reporting to the clinical site in improper uniform or in soiled or untidy clothes will be sent home. The student's CI will be the judge of student appearance and this judgment is not subject to appeal.

Clinical facilities may have a dress code and if so, the student will follow it. If the facility does not have a dress code, the following guidelines are provided as suggestions appropriate to many clinical settings.

Uniform clothing: Polo shirts and khaki ankle length slacks are generally acceptable. Women may wear a white lab coat or lab jacket. Skirts, capri-length slacks, jeans, leggings, or shorts may be prohibited. Men may wear white lab coats or lab jackets. Pants or khaki slacks should be worn with a conservative belt. Jeans may be prohibited. Men may be required to wear neckties. If so, these will be appropriately tied and secured. Color coded scrub tops over color coded scrub pants with or without lab jackets is an acceptable variation for either men or women in the clinical setting. It is expected that all clothing is clean, in good repair, and without excessive wrinkles.



**Montgomery College Physical Therapist Assistant Program**  
**PTHT 223 Clinical Practicum I**

**Hair:** Neatly combed and clean hair of any style is acceptable on men and women as long as hair does not fall into the face, onto the patient, or onto equipment. Neatly trimmed and groomed facial hair is acceptable for men.

**Shoes:** Low heeled and closed toe shoes with skid proof soles are appropriate for all clinical settings. Shoes must be clean and in good repair. Check with the individual facility whether athletic shoes or sneakers (trainers) are allowed. If they are permitted, they must be clean, in good repair, and securely tied.

**Accessories:** The use of cosmetics should be discrete and kept to a minimum. Odors from perfumes, cosmetics, or other toiletries may be offensive or irritating to patients with respiratory conditions. Fingernails should be kept short, clean, and neatly trimmed. Note that some clinical facilities do not allow nail polish or nail extensions due to infection control issues. Students on internships are expected to adhere to the facility's guidelines. Watches, wedding, and or engagement rings, school rings or pins, and small earrings are generally acceptable. Students are reminded that large, sharp, and or pointy jewelry or belt buckles can scratch or tear fragile skin and that necklaces, bracelets, or dangly earrings can get caught in clinical equipment or pulled on by confused, agitated patients.

**Personal Hygiene:** High standards of personal hygiene are expected of all health care workers. Strong body or breath odors, colognes, perfumes, or cooking smells which cling to hair or clothing may be offensive or irritating to patients and co-workers. Students may expect feedback on their personal hygiene and should be prepared to deal with this in a constructive and professional manner.

**Identification:** Unless otherwise indicated by the clinical facility, the student must wear their student identification badge at all times. Students must be clearly identified and introduced as *students*.

**Piercings and tattoos:** Some clinical facilities will require the removal of or otherwise limit jewelry in body piercings while the student is on site. Students may also be required to cover tattoos or other body markings. Students may expect feedback on their personal choices from faculty and clinical instructors and should be prepared to deal with this in a constructive and professional manner.

**CLINICAL SUPERVISION**

Students are NOT ALLOWED in the clinical area without the supervision of a CI, facility supervisor, clinical faculty member, or designated physical therapist. Students are not under any circumstances permitted to treat a patient without the clinical supervision of a physical therapist in accordance with the Maryland practice act for physical therapy and APTA standards of ethical conduct for the PTA. Students are permitted to access only those areas of the clinical facility that support direct patient care of only those patients on the student's schedule.

**CYBERSECURITY**

Most clinical facilities utilize an electronic medical record (EMR). While students are on internship assignments, they may be given access to the EMR for the purpose of patient care. Access may involve passwords or other protections. Access to records of individuals not being treated by physical therapy constitutes a violation of HIPAA. Students who compromise the integrity of the clinical facility's EMR may be dismissed from the internship. Violation of HIPAA may result in the student earning a failing grade for the clinical experience.

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

**STUDENT HEALTH AND SAFETY DURING INTERNSHIPS**

During student experiences in the clinical setting, the student may come in contact with diseases, equipment, and treatments that could be hazardous to the student or an unborn baby. It is expected that the student will utilize common sense and sound patient care procedures endorsed by OSHA, and taught by the PTA Program related to pathogens, environmental hazards, and infectious diseases. Related health and safety policies are discussed in prior sections of this *Handbook*. It is expected that the student will be familiar with all health and safety guidelines. Students are reminded that their personal health also impacts the health of their patients and fellow health care workers.

According to the clinical education affiliation agreement (see section below), both the college and the clinical sites agree that students are responsible for payment of any charges for health care associated with their clinical education. This includes, but is not limited to, health physical examinations, PPD tests, current immunization records, and health care services for accidental injury or required following exposure to biohazard materials.

As part of the required paperwork (see section below), the student is required to complete a health physical examination. This documentation provides an immunization record, PPD test (or acceptable alternatives), and certifies that the student is free of communicable diseases and able to perform the duties and responsibilities of a PTA student as outlined in the Technical Standards. All immunizations and communicable disease testing are based upon the most recent OSHA regulations for health care workers and will be updated as needed.

Students with known latex sensitivity or allergy should be aware that the College cannot guarantee that he/she will not be exposed to latex during clinical experience. Students with latex sensitivity should make this information known to the Program Coordinator, Clinical Coordinator, and any of their clinical instructors so that appropriate protection and or supplies can be arranged.

Students with known communicable diseases will need to follow the clinical facility's protocols for managing their conditions during patient care. The College has no jurisdiction over these protocols and cannot intervene on the student's behalf.

A student may also be exposed to a communicable disease while on a clinical rotation. In these instances, the facility's protocols may, for example, require that the student leave all patient care areas until incubation periods have expired. In cases of exposure to certain diseases or conditions, the student may require medications, inoculations, or special tests. Costs are the student's responsibility. In addition, any missed clinical education time must be made up.

Unprotected contact with blood, blood products, or other body fluids may occur from needle sticks, urine splashes, or exposure to patients prior to the initiation of isolation procedures. The student is required to follow the clinical facility's protocols and exposure control policies and procedures. It is the student's responsibility to follow these measures and to be responsible for any fees related to these services. Any lost clinical education time must be made up.

If a student comes into contact with communicable diseases outside of the internship, is injured, or contacts a disease which in turn may be hazardous to classmates, patients with compromised immune systems, family members, young children, or other health care workers, it must be reported to the Program Coordinator immediately. The Program Coordinator, in consultation with the individual student, Dean of Health Sciences, MC personal counseling, and the student's own health care provider, will develop an individualized action plan for managing the issue. Depending on circumstances, the student

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

may have temporary or permanent limitations which may in turn affect his/her continued participation in the program.

**IDENTIFICATION**

Students will use their identification badges and name tags as part of the required equipment for clinical practicum courses. Unless otherwise instructed, the student must wear this identification badge at all times during their clinical practicum, or at any other time that they are representing the college or PTA program in an off-campus activity.

Students are required to introduce themselves to patients and their family members, facility staff, and other health care workers as “STUDENT.” It is both unethical and illegal for a student to fail to accurately identify himself/herself during a clinical education experience. Failure to do so is a violation of informed consent. Students are reminded that patients, their family members, or other caregivers are permitted to refuse treatment from a student PTA.

**CONFIDENTIALITY AND MEDICAL DOCUMENTATION**

Prior to participating in clinical education experiences, students are oriented to HIPAA regulations and the professional, ethical, and legal requirements along with their corresponding penalties for patient confidentiality. All facility and patient records are confidential. Requests for information concerning a patient from any source should be referred to the student’s clinical instructor.

Documentation examples extracted from the medical record for educational purposes must have all identifying information removed, including facility name, patient identification numbers, birthdates, provider names, and dates of service. Students sign a Memorandum of Agreement which includes affirmation of patient confidentiality at new student orientation and are expected to uphold this agreement throughout their time in the PTA program.

Students will follow all facility requirements for the format and process of medical record documentation. Unless otherwise required by the facility, students will sign any entry made in the patient’s medical record with their full first and last names followed by the letters “SPTA.” All student entries into the medical record must be co-signed by the clinical instructor.

**LEAVING THE PREMISES OR VISITING PATIENTS, FAMILY, or STAFF**

Students shall not leave their assigned clinical area without the permission of the CI or immediate person in charge. Any student doing so will have to make up the time lost. Students are not allowed to visit patients or other persons to whom they are not assigned, unless approved by the clinical instructor. The student will follow the visiting hours designated by the clinical institution if they wish to visit persons who are not assigned to the physical therapy service.

**PERSONAL PROPERTY**

Students are asked not to bring personal property of value, such as credit cards, excess cash, and personal electronics to clinical facilities. The student is solely responsible for their possessions. The clinical facility cannot be responsible for lost or missing personal property. Consult with your CI to inquire whether the facility has arrangements for securing student belongings.

**TELEPHONE CALLS, PHOTOCOPYING AND INTERNET USAGE**

Personal telephone calls or text messages are not allowed during clinical education hours. Cell phones or personal communication devices should be turned off or set to vibrate or privacy setting while the student is participating in clinical education. CIs and patients will consider answering personal telephone calls or responding to personal text messages as unprofessional behavior. As stated earlier, unprofessional behavior in the clinical setting may result in dismissal. In the event of an emergency call

**Montgomery College Physical Therapist Assistant Program  
PTHT 223 Clinical Practicum I**

or message, the student will notify his/her CI, will ensure that the patient is safe, and will seek a private location in which to respond. Any other actions are not professional.

Photocopying materials for personal use is not allowed. Photocopying proprietary documents may be considered a copyright violation for which the student may be held accountable. Students are not allowed to access the facility's internet or intranet for personal uses or any non-clinical data gathering. Accessing patient information or PHI of patients not on the physical therapy service is a violation of confidentiality and will be dealt with as such.

**EATING AND SMOKING**

Students shall not eat, drink, or smoke while on duty except in designated areas and during designated times. Each clinical site will have designated areas as required by OSHA and Maryland Occupational Safety and Health regulations. Please note that many health care organizations are "Smoke Free," meaning that smoking will not be allowed on their property or within sight of public access areas. This includes e-cigarettes or vapor tobacco products.

**TRANSPORTATION AND PARKING**

PTA students are responsible for providing their own transportation to all facilities used for education experiences. At the clinical sites, the parking facilities and regulations will vary. The student is responsible for becoming familiar with the institution's guidelines and is responsible for any fees or fines.

**STUDYING FOR NON-CLINICAL CLASSES**

Clinical education classes are time intensive. Even when there are no patient care assignments to be completed, students are encouraged to practice clinical skills, ask questions, read professional literature, or access material in the professional library with the permission of the clinical instructor. Students are expected to participate in the routine stocking, cleaning, and organizing in the clinic.

**DISMISSAL FROM CLINICAL FACILITY**

The faculty believes that the physical and emotional welfare of patients and their families has the highest priority during clinical educational experiences. A student who demonstrates clinically unsafe practice or a pattern of behavior which jeopardizes patient safety may be dismissed from the clinical facility for a specified amount of time.

Unsafe clinical practice is defined as any behavior determined by the student's CI to be actually or potentially detrimental to the patient, their families, or to the health care facility. This behavior may be related to many factors; e.g., physical or mental health problems, knowledge deficits, problem solving skills deficits, anxiety, drug abuse, etc. In addition, including patients, their families, facility staff or clinical instructors on social media posts, friend requests or "likes" will be considered inappropriate and may result in dismissal from the clinical facility. The clinical facility, therefore, maintains the right to refuse a student from working with the patients and staff.

The CI will identify and document unsafe behaviors. This will be provided to the program Clinical Coordinator. The decision about whether to permit the student to continue in the clinical practicum and under what conditions this will be permitted is reached by the program Clinical Coordinator in consultation with the student and clinical instructor. The Program Coordinator and Dean may assist in this process, if needed.

**RIGHT TO DUE PROCESS**

The student has the opportunity to respond to the circumstances resulting in suspension or dismissal by submitting any relevant data pertaining to the incident(s) and seeking appropriate recourse through channels described in the *Student Code of Conduct* and those described in the DUE PROCESS

**Montgomery College Physical Therapist Assistant Program**  
**PTHT 223 Clinical Practicum I**

section of this *Handbook*. However, if asked to leave the clinical facility, the student will do so and then begin the academic grievance procedures.

**CLINICAL SKILLS ACCOUNTABILITY**

Students are held accountable for all skills previously learned in all prior courses in the curriculum. All skills will be needed in the clinical practice environment. PTA skills labs are open at specified hours or by appointment through-out each semester and during the summer months. A faculty member must be available on site to provide students practicing in the lab with guidance and supervision.

**REQUIRED PAPERWORK**

Further information on all of these documents is available from the Program faculty. All health physical documents uploaded by the student and are kept on file on the CastleBranch website. Failure to file health physical documents and to keep these documents current will result in an administrative withdrawal from the program. Please note that health and physical requirements change and that clinical facilities may require additional information or testing. Those documents marked with an asterisk (\*) are the student's responsibility.

The Clinical Education Affiliation Agreement: MC has a uniform written agreement in effect with all of the affiliated hospitals and clinical sites, and close cooperation between the College and clinical coordinators is vital to the success of the program. Clinical facilities will have different regulations. Facilities require students to have complete health physicals, immunization records, records of annual flu shots and PPD test results, criminal background checks, drug and alcohol tests, and proof of insurance.

Copies of executed written agreements are on file in the PTA Program office and can be reviewed upon request to the Clinical Coordinator. The student's part in ensuring the effectiveness of the clinical portion of the program is to have a good understanding of the educational philosophy of "hands on" clinical training, a thorough knowledge of the pertinent rules, and the will to cooperate with them.

\* Health Physicals: After students are accepted and by July of the first year in the program, a complete physical must be performed by a physician. The health physical form provided to you in the Spring Semester includes all recommendations for health care workers.

\* The TB (Mantoux or PPD) test and Immunization: A record of all immunizations and/or titers for MMR (measles, mumps, and rubella), rubeola, and varicella are required.

\* The Hepatitis-B vaccine series is required since exposure to this virus is more common in health care settings than HIV exposure. A decline statement must be on file if the student does not wish to have the Hepatitis-B vaccine.

\*D-TAP or TDAP: (Polio), tetanus, acellular pertussis is recommended and we anticipate that the CDC may require the D-TAP vaccine or booster in the future.

\* Annual Influenza Vaccinations: The majority of the health care facilities with which MC affiliates require annual influenza (flu) vaccinations. Any exceptions must be documented. Acceptable reasons for not taking the influenza vaccination are physician-documented sensitivity, allergies, or diagnosis of Guillain-Barre syndrome. Religious reasons for declining must have documentation by the clergy or religious leader.

\* Drug and Alcohol Screening: All students must complete drug and alcohol screening (toxicology) before July 1 in the first summer session. Additional testing may be required based on facility requirements. Students are notified of these requirements *prior* to their assignment to the facility.

**Montgomery College Physical Therapist Assistant Program**  
**PTHT 223 Clinical Practicum I**

Students have the right to refuse placement at sites requesting drug and alcohol screening, but must be aware that other facilities may not be available during the same timeframes.

\* CPR Requirement: Health care provider or Basic Life Provider (first responder) CPR cards are renewed every 2 years. Students are required to maintain current certification in CPR, with a copy of the CPR card on file and uploaded in the medical document manager by October 1. Certification through the American Red Cross is recommended and the certification level must be for Basic Life Support (BLS) for health care providers acting as first responders and must include automated electric defibrillator (AED) training.

\* Criminal Background Checks: All enrolled PTA students must complete a criminal background check by July 1 of the first summer session. This process is reviewed during new student orientation.

\* Health Insurance Coverage: Students are required to have health insurance. Your health insurance card (back and front) will be uploaded to your medical document manager. The student will be responsible for his/her treatment if injured while at the clinical facilities.

Liability (malpractice) Insurance Coverage: The student is covered by liability insurance through MC at no cost during clinical hours published in the *Schedule of Classes*. This covers incidents involving possible negligence in patient care.

\* Additional requirements: Clinical educational requirements are continuously evolving. Students must be prepared to meet any requirements as soon as Program faculty is aware of them. Students must be able to verify compliance with any and all requirements.

**DUE PROCESS**

The student has the right to due process in all decisions made by the faculty concerning his/her education at MC. This most often takes the form of appeals regarding an exam grade, a course grade, or dismissals from clinical education, classroom, or laboratory settings. The faculty supports the student's right to due process and feels that problem identification and resolution ought to begin at the lowest levels before escalating to higher levels as described in the Chain of Command section in this *Handbook*.

When in doubt about what to do in a particular situation, the student is advised to speak directly to a PTA faculty member or to a member of the college's counseling staff. Students are also directed to the *Code of Conduct* and *Academic Regulations* found on the MC web page as well as in all college publications.