



AUGUSTA

UNIVERSITY

**COLLEGE OF
ALLIED HEALTH SCIENCES**

DEPARTMENT OF PHYSICAL THERAPY

**DOCTOR OF PHYSICAL THERAPY
STUDENT HANDBOOK**

2018 - 2021

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Department of Physical Therapy
DPT STUDENT HANDBOOK
2018 - 2021

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INTRODUCTION AND PURPOSE

This Handbook has been developed by the faculty and students of the Department of Physical Therapy to assist you. The Student Handbook serves as the official source of Policies and Procedures related to student activities in the Department of Physical Therapy as approved by the Dean, College of Allied Health Sciences. We hope that you find it useful. If you have questions or need clarification, please contact the interim Chair of Physical Therapy (EC-1312), phone 706-721-2141 or the Associate Dean for Academic Affairs, College of Allied Health Sciences (EC-3423), phone 706-721-2621.

Note: In addition to the policies and procedures stated here, physical therapy students are subject to all policies of the university as delineated in the [Augusta University Catalog](#), [Student Handbook](#) and [Student Code of Conduct](#) and Procedures and [College of Allied Health Sciences](#) web pages.

Student Affairs

Dr. Charlotte Chatto, interim Chair, Department of Physical Therapy, has an open-door policy and is available to serve as a counselor and advisor to students with personal or adjustment problems, problems of an academic or financial nature, or any other matter of concern to students. At the first sign of any of these problems you should come to see her. The interim chair also serves as a referral service and student advocate dedicated to assisting you in the successful completion of this phase of your professional development. Dr. Chatto is available in his office (EC-1304, 706-721-2141) during school hours, by email (cchatto@augusta.edu).

Communication

E-mail is the official method of communication between the physical therapy faculty, staff, and all students. Therefore, it is your responsibility to check your Augusta University Outlook® e-mail account correspondence at least daily and empty your mailbox regularly so that you can receive messages. You will be held accountable for a timely response to all e-mail requests.

NOTICE

Policies and programs presented in this Handbook are subject to change at any time. As changes occur in institutional policies that affect students, you will be notified via e-mail.

Other Sources of Information

[GA Open Records Act](#)

[Family Educational Rights and Privacy Act \(FERPA\)](#)

[Augusta University Student Conduct](#)

[Americans with Disabilities Act](#)

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ACADEMIC CALENDAR

All students are strongly encouraged to refer to the Augusta University academic calendar that can be accessed at <http://www.augusta.edu/currentstudents.php/calendar.php>. Additional information specific to the Department of Physical Therapy also can be accessed at the Augusta University Department of Physical Therapy web site.

DOCTOR OF PHYSICAL THERAPY CURRICULUM

Summer Year 1

ANAT 7300 Anatomy (6 cr)
PTHP 7101 Evidence Based Practice (3 cr)
PTHP 7111 Practice Expectations 1 (1 cr)
PTHP 7121 General Concepts of Patient Management 1 (3 cr)

Fall Year 1

CAHS 7110 Human Physiology (3 cr)
PTHP 7211 Applied Physiology (3 cr)
PTHP 7222 Foundations of Physical Therapy (6 cr)
PTHP 7223 General Concepts of Patient Management 2 (3 cr)
PTHP 7212 Practice Expectations 2 (1 cr)
PTHP 7202 Research 2 (1 cr)

Spring Year 1

PTHP 7331 Orthopaedics 1 (6 cr)
PTHP 7341 Medical Conditions 1 (6 cr)
PTHP 7313 Practice Expectations 3 (2 cr)
PTHP 7303 Research 3 (2 cr)

Summer Year 2

PTHP 8132 Orthopaedics 2 (3 cr)
PTHP 8191 Clinical Experience 1 (8 cr)

Fall Year 2

PTHP 8242 Medical Conditions 2 (4 cr)
PTHP 8243 Medical Conditions 3 (6 cr)
PSIO 8003 Applied Neuroscience (4 cr)
PTHP 8214 Practice Expectations 4 (1 cr)
PTHP 8204 Research 4 (1 cr)

Spring Year 2

PTHP 8361 Management (4 cr)
PTHP 8351 Neuromuscular (8 cr)
PTHP 8315 Practice Expectations 5 (1 cr)
PTHP 8305 Research 5(1 cr)

Summer Year 3

PTHP 9144 Medical Conditions 4 (1 cr)
PTHP 9152 Pediatrics (4 cr)
PTHP 9171 Integrated Patient Management (3 cr)
PTHP 9106 Research 6 (1 cr)
PTHP 9116 Practice Expectations 6 (1 cr)

Fall Year 3

PTHP 9292 Clinical Experience II (16 cr)

Spring Year 3

PTHP 9393 Clinical Experience III (12 cr)
PTHP 9394 Elective (4 cr)

GRADUATION

PROGRAM INFORMATION

Mission and Vision Statements

Augusta University

The mission of the Augusta University is to discover, disseminate, and apply knowledge to improve health and reduce the burden of illness on society.

In realizing its mission, the Augusta University is committed to serving the people of Georgia, the nation, and the world by:

- Preparing the health professional workforce of the future;
- Conducting research through programs that create, disseminate, and apply new knowledge relevant to human health;
- Providing exceptional, innovative, patient-centered health care services;
- Contributing to the economic development and wellbeing of the State of Georgia through integrated programs in education, research and clinical care.

College of Allied Health Sciences

Preparing professional leaders through interdisciplinary academic programs, research, family-centered care, evidence-based clinical practice, and caring faculty devoted to improving the health of the population.

Department of Physical Therapy

The Mission of the Department of Physical Therapy is to improve the physical function, overall health and quality of life of the population served by:

1. Providing quality physical therapy educational programs (for students).
 - Conducting scholarly inquiry into the biological, clinical and social sciences and to provide leadership in the generation of basic knowledge in physical therapy for rehabilitation, health promotion and disease prevention.
 - Providing community and professional service at the local, state, national levels. (i.e.- a resource for meeting the physical therapy needs of the community and a resource for continuing education)

Vision: To be a premier academic physical therapy program in the United States

Program Goals

- Graduates will demonstrate the necessary skills for the competent, ethical, entry level practice of physical therapy and the motivation for lifelong learning.
- Students will participate in service to the community and profession.
- Students will demonstrate critical and integrative thinking skills as applied to foundational and clinical sciences.
- Faculty members will contribute to improving the health of the population served through the discovery, dissemination and application of new knowledge relating to physical therapy education, research and clinical practice.

- Faculty will demonstrate a commitment to the community and profession through service activities, consulting, continuing education, and advocacy for the PT profession.
- The PT department will be a leader in the development of creative and innovative approaches for physical therapy education.

Philosophy Statement

The primary goal of the Augusta University Physical Therapy Program is to provide the necessary foundational knowledge and skills for students to become reflective physical therapy practitioners. This reflective practitioner will possess technical proficiency and problem solving capabilities sufficient to enable the safe, efficient, and effective practice of physical therapy in a rapidly changing health care environment. We strive to create an educational experience using current evidence-based practices that will challenge talented and ambitious students to grow into autonomous health professionals.

Student participation is facilitated through an interactive learning environment with clear, concisely stated outcomes. Maintenance and growth of the learning environment are the responsibility of both the faculty and the student. In addition to curricular and instructional responsibilities, faculty members strive to be role models of scholarly practitioners, competent and informed current clinicians, nationally recognized researchers, and skillful educators.

Core Values

1. A professional educational program characterized by
 - Self-directed learning
 - Spiraling of content- The expected transference of content throughout the curriculum (also simple to complex)
 - Value is placed on the learning process, as well as the outcomes
 - Students are invested in their learning (engaged, participatory and interactive, seeking resources, asking questions)
 - Students are responsible for their learning
 - Self-assessment and reflection
2. Participatory management
3. Collaborative team approach

Principles

Society and human beings are goal oriented, have a desire to learn, are influenced by their environment and the expectations of others, and function most effectively in an open and safe environment. We believe people can be trusted and wish to trust others.

Health Care Provision

People are entitled to high quality health care and should participate in decisions regarding the provisions of that care. Each individual has a high degree of responsibility for his or her health care, especially in the area of being an informed consumer of and an active participant in health services.

Physical Therapy is one part of the health care system, and is dedicated to the promotion of optimal human health and function, the prevention of disability, and the restoration and maintenance of function through application of scientific principles to prevent, identify, assess, correct or alleviate acute or prolonged movement dysfunctions.

We believe that to provide the services necessary to meet the health care needs of society, physical therapy practitioners must be clinically competent, mature, self-directed, and lifelong learners who can function autonomously within a complex health care system and exhibit intellectual curiosity, openness, caring, and flexibility.

Professional Education

We believe that to provide the services necessary to meet the health care needs of society, physical therapy practitioners must be clinically competent, mature, self-directed, and lifelong learners who can function autonomously within a complex health care system and exhibit intellectual curiosity, openness, caring, and flexibility.

We believe that an educational program designed to provide practitioners to meet the physical therapy needs of society must reflect the views of people, society, and practitioners must include both general and professional components.

The purpose of general education is to provide a base on which the professional education can be built. General education also serves to educate individuals to function effectively in society. We believe that physical therapy practitioners need to be open-minded, thinking individuals who are able to critically analyze ideas, understand human nature, and who have broad interests. General education has the potential for and is designed to develop these qualities in individuals.

We believe that professional education develops or enhances clinical competence, critical thinking, communication skills, problem-solving abilities, and the formulation of value systems consistent with the profession.

The two major components of the professional education curriculum are clinical and academic experiences. We believe that the two components should be planned and implemented to be interdependent and to reinforce one another. We believe that the clinical competence can only be verified in the clinical setting. The academic setting is designed to provide the information and theory base which is integrated and expanded in the clinical setting.

We believe that the curriculum should be organized in a manner to integrate discrete subject matter concepts, and to stimulate problem-solving, self-awareness, and the development of professional values. We believe that a curriculum designed around a competency based approach and organized around case based learning experiences is most effective and efficient. (*Competency based means that learning experiences and evaluation are organized around the major performance behaviors that must be exhibited by the students at entry into the profession.*) We believe that spiraling learning experiences throughout the curriculum enhances the acquisition, utilization, and retention of concepts and skills necessary for competent entry level practice.

We believe that the teaching learning activity is an interactive process requiring the active participation of both the teacher and learners. In addition, we believe that learning is an individual process and that individuality needs to be considered in the choices of teaching methodologies, within resource constraints. A wide range of teaching methodologies should be utilized to meet the stated objectives of the educational experience.

Faculty Responsibilities

The faculty believes that we have the responsibility for establishing acceptable levels of performance within the scope of practice as defined by the profession. We are also responsible for evaluating student performance and providing feedback to the students regarding their performance. Evaluations should be used both as a teaching tool (informative evaluation) and a certifying tool (summative evaluation). The faculty believes that preliminary clinical competence should be evaluated across courses and independent of courses within the academic setting. A critical component of the evaluation process is self-evaluation and it is the faculty's responsibility to facilitate the development of meaningful self-evaluation skills within the learners. We believe that students should have the opportunity to exhibit competence which may have been gained prior to entry into the program through life experiences.

The faculty believes that we provide the students with role models of scholarly practitioners, competent and up-to-date clinicians, researchers, and skillful educators. The faculty believes that we have the primary responsibility for establishing the learning environment in the classroom. The learners and the faculty share the responsibility for maintaining that environment. The faculty believes in a balance between faculty obligations (professional, institutional, departmental, and personal) and availability to self, to other faculty, and to students. The control of that balance lies within the individual faculty member.

Student Responsibilities

Students have the responsibility for their own learning. This requires openness, making choices, and accepting the consequences of those choices, soliciting and providing feedback/guidance, participating in experiences offered, evaluating their own experiences, and seeking help when needed. The qualities of the students that the professional program will enhance or develop are professional competence, critical thinking, self-evaluation, self-reliance, sensitivity, clear communication, respect for self and others, lifelong learning, self-confidence, creativity, responsibility, accountability, caring, and curiosity.

As junior colleagues and partners in the professional education experience, students may be asked participate in curriculum development, evaluation, and improvement within the Department. We have designed our curriculum to reflect this philosophy.

Practice Expectations

Practice expectations are a description of behaviors, skills, or knowledge that defines the expected performance of the physical therapist. When taken in aggregate, they describe the performance of the graduate upon entry into the practice of physical therapy.

1.0 Professional Practice Expectation: Accountability

1.1 Adhere to legal practice standards, including all federal, state, and institutional

regulations related to patient/client care and fiscal management.

1.2 Has a fiduciary responsibility for all patients/clients.

1.3 Practice in a manner consistent with the professional code of ethics.

1.4 Change behavior in response to understanding the consequences (positive and negative) of his or her actions.

1.5 Participate in organizations and efforts that support the role of the physical therapist in furthering the health and wellness of the public.

2.0 Professional Practice Expectation: Altruism

2.1 Place patient's/client's needs above the physical therapist's needs.

2.2 Incorporate pro bono services into practice.

3.0 Professional Practice Expectation: Compassion/Caring

3.1 Exhibit caring, compassion, and empathy in providing services to patients/clients.

3.2 Promote active involvement of the patient/client in his or her care.

4.0 Professional Practice Expectation: Integrity

4.1 Demonstrate integrity in all interactions with patients/clients, family members, caregivers, other health care providers, students, other consumers, and payers.

5.0 Professional Practice Expectation: Professional Duty

5.1 Demonstrate professional behavior in all interactions with patients/clients, family members, caregivers, other health care providers, students, other consumers, and payers.

5.2 Participate in self-assessment to improve the effectiveness of care.

5.3 Participate in peer-assessment activities.

5.4 Effectively deal with positive and negative outcomes resulting from assessment activities.

5.5 Participate in clinical education of students.

5.6 Participate in professional organizations.

6.0 Professional Practice Expectation: Communication

6.1 Expressively and receptively communicate in a culturally competent manner with patients/clients, family members, caregivers, practitioners, interdisciplinary team members, consumers, payers, and policy makers.

7.0 Professional Practice Expectation: Cultural Competence

7.1 Identify, respect, and act with consideration for patients' /clients' differences, values, preferences, and expressed needs in all professional activities.

8.0 Professional Practice Expectation: Clinical Reasoning

8.1 Use clinical judgment and reflection to identify, monitor, and enhance clinical reasoning in order to minimize errors and enhance patient/client outcomes.

8.2 Consistently apply current knowledge, theory, and professional judgment while considering the patient/client perspective in patient/client management.

9.0 Professional Practice Expectation: Evidence-Based Practice

9.1 Consistently use information technology to access sources of information to support clinical decisions.

9.2 Consistently and critically evaluate sources of information related to physical therapy practice, research, and education and apply knowledge from these sources in a scientific manner and to appropriate populations.

9.3 Consistently integrate the best evidence for practice from sources of information with clinical judgment and patient/client values to determine the best care for a patient/client.

9.4 Contribute to the evidence for practice by written systematic reviews of evidence or written descriptions of practice.

9.5 Participate in the design and implementation of patterns of best clinical practice for various populations.

10.0 Professional Practice Expectation: Education

10.1 Effectively educate others using culturally appropriate teaching methods that are commensurate with the needs of the learner.

11.0 Patient/Client Management Expectation: Screening

11.1 Determine when patients/clients need further examination or consultation by a physical therapist or referral to another health care professional.

12.0 Patient/Client Management Expectation: Examination

12.1 Examine patients/clients by obtaining a history from them and from other sources.

12.2 Examine patients/clients by performing systems reviews.

12.3 Examine patients/clients by selecting and administering culturally appropriate and age-related tests and measures.

13.0 Patient/Client Management Expectation: Evaluation

13.1 Evaluate data from the examination (history, systems review, and tests and measures) to make clinical judgments regarding patients/clients.

14.0 Patient/Client Management Expectation: Diagnosis

14.1 Determine a diagnosis that guides future patient/client management.

15.0 Patient/Client Management Expectation: Prognosis

15.1 Determine patient/client prognoses.

16.0 Patient/Client Management Expectation: Plan of Care

16.1 Collaborate with patients/clients, family members, payers, other professionals, and other individuals to determine a plan of care that is acceptable, realistic, culturally competent, and patient/client-centered.

16.2 Establish a physical therapy plan of care that is safe, effective, and patient/client centered.

16.3 Determine patient/client goals and outcomes within available resources and specify expected length of time to achieve the goals and outcomes.

16.4 Deliver and manage a plan of care that is consistent with legal, ethical, and professional obligations, and administrative policies and procedures of the practice environment.

16.5 Monitor and adjust the plan of care in response to patient/client status.

17.0 Patient/Client Management Expectation: Intervention

17.1 Provide physical therapy interventions to achieve patient/client goals and outcomes.

17.2 Provide effective culturally competent instruction to patients/clients and others to achieve goals and outcomes.

17.3 Complete documentation that follows professional guidelines, guidelines required of the health care systems, and guidelines required by the practice setting.

17.4 Practice using principles of risk management.

17.5 Respond effectively to patient/client and environmental emergencies in one's practice setting.

18.0 Patient/Client Management Expectation: Outcomes Assessment

18.1 Select outcome measures to assess individual and collective outcomes of patients/clients using valid and reliable measures that take into account the setting in which the patient/client is receiving services, cultural issues, and the effect of societal factors such as reimbursement.

18.2 Collect data from the selected outcomes measures in a manner that supports accurate analysis of individual patient/client outcomes.

18.3 Analyze results arising from outcomes measures selected to assess individual outcomes of patients/clients.

18.4 Use analysis from individual outcomes measurements to modify the plan of

care.

18.5 Select outcome measures that are valid and reliable and shown to be generalizable to patient/client populations being studied.

19.0 Practice Management Expectation: Prevention, Health Promotion, Fitness, and Wellness

19.1 Provide culturally competent physical therapy services for prevention, health promotion, fitness, and wellness to individuals, groups, and communities.

19.2 Promote health and quality of life by providing information on health promotion, fitness, wellness, disease, impairment, functional limitation, disability, and health risks related to age, gender, culture, and lifestyle within the scope of physical therapy practice.

19.3 Apply principles of prevention to defined population groups.

20.0 Practice Management Expectation: Management of Care Delivery

20.1 Provide culturally competent first contact through direct access to patients/clients who have been determined through the screening and examination processes to need physical therapy care.

20.2 Provide culturally competent care to patients/clients referred by other practitioners and ensure that care is continuous and reliable.

20.3 Provide culturally competent care to patients/clients in tertiary care settings in collaboration with other practitioners.

20.4 Participate in the case management process.

21.0 Practice Management Expectation: Practice Management

21.1 Direct and supervise human resources to meet the patient's/client's goals and expected outcomes.

21.2 Participate in financial management of the practice.

21.3 Establish a business plan on a programmatic level within a practice. Participate in activities related to marketing and public relations.

21.4 Manage practice in accordance with regulatory and legal requirements.

22.0 Practice Management Expectation: Consultation

22.1 Provide consultation within boundaries of expertise to businesses, schools, government agencies, other organizations, or individuals.

23.0 Practice Management Expectation: Social Responsibility and Advocacy

23.1 Challenge the status quo of practice to raise it to the most effective level of care.

23.2 Advocate for the health and wellness needs of society.

23.3 Participate and show leadership in community organizations and volunteer service.

23.4 Influence legislative and political processes.

STANDARDS FOR ADMISSION, ACADEMIC PROGRESSION, AND GRADUATION

Essential Abilities

Physical therapy education requires that the accumulation of scientific knowledge be accompanied by the simultaneous acquisition of skills, professional attitudes and appropriate behavior. As such, admission, promotion and graduation decisions will be based not only on candidates' scholastic accomplishments, but also on their physical and emotional capacities to meet the full requirements of the curriculum and to graduate as skilled and effective practitioners. The Doctor of Physical Therapy (DPT) degree awarded by the Augusta University certifies that the individual has acquired a broad base of knowledge, skills and attitudes requisite for the practice of physical therapy.

In order to acquire the knowledge and skills to function independently in a broad variety of clinical situations and to render a wide spectrum of patient care, candidates for the Doctor of Physical Therapy degree must have abilities and skills in five areas: observation; communication; motor; conceptual (integrative and quantitative); and behavioral/social.

- ***Observation***

The candidate must be able to observe lectures, demonstrations and experiments in basic and applied sciences including, but not limited to human anatomy and physiology, neuroscience, as well as in didactic courses in physical therapy theory and practice. In addition, the student must be able to sit quietly during class without distracting the instructor or other students. A candidate must be able to observe a patient accurately at a distance and close at hand. Observation requires the functional use of the senses of vision, hearing, and palpation and is enhanced by the functional use of the sense of smell.

- ***Communication***

The candidate must be able to speak, to hear, and to observe subjects in order to elicit information, describe changes in mood, activity and posture, and perceive and accurately report nonverbal communications. The student must be able to read technical English rapidly and with comprehension, communicate with instructors, peers and other members of the health care team by means of both spoken and written English using reasonable grammar and syntax in both immediate and recorded modes.

- ***Motor***

Candidates should have sufficient motor function to elicit information from subjects by palpation, auscultation, percussion, manual positioning of body segments and other evaluative procedures. A candidate should be able to do basic screening and examination (physiological measures such as vital signs), diagnostic procedures (palpation, manual muscle testing, goniometry, sensory evaluation, gait analysis, balance assessment), and evaluate electrocardiograms and radiographic studies. A candidate should be able to execute motor movements reasonably required to provide general care and emergency treatment. Examples of emergency treatment reasonably required of physical therapists are cardiopulmonary resuscitation, and application of pressure to stop bleeding. Additionally, candidates must be able to perform debridement of wounds and other physical therapy

intervention maneuvers, where such actions require coordination of both gross and fine muscular movements, equilibrium, and functional use of the proprioceptive senses.

- ***Conceptual (Integrative and Quantitative)***

These abilities include measurement, calculation, reasoning, analysis, synthesis, and retention of complex information. Problem solving, the critical skill demanded of physical therapist practitioners, requires all of these intellectual abilities. In addition, the candidate should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

- ***Behavioral/Social***

Candidates must possess the emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the physical therapy evaluation, diagnosis and intervention, as well as the development of mature, sensitive and effective therapeutic relationships. Candidates must be able to tolerate physically-taxing workloads and to function effectively under stress. They must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the educational process as well as the clinical care of patients. Accountability, altruism, compassion, excellence, integrity, professional duty, and social responsibility are all personal qualities that are assessed during the admissions and education processes.

The department faculty will consider for admission, promotion and graduation candidates who demonstrate the ability to perform the essential abilities listed in this document. It is the responsibility of the individual to request those accommodations that the candidate feels are reasonable and are needed to execute the requirements described. Technological compensation can be made for some disabilities in certain of these areas, but a candidate should be able to perform in a reasonably independent manner. The use of a trained intermediary means that a candidate's judgment must be mediated by someone else's power of selection and observation, and as such is unacceptable.

ACADEMIC POLICIES AND PROCEDURES

Grades

Augusta University is on the 4.0 grade point average system. The following grades are approved for use in the Augusta University and are included in the determination of the grade point average:

<i>Grade Description</i>	<i>Grade Points</i>
A 90%-100%	4.0
B 80%-89%	3.0
C 70-79%	2.0
D 60-69%	1.0
F 59% or lower	0.0
WF withdrew, failing	0.0

The following symbols are approved for use in the cases indicated, but will not be included in the determination of the grade point average.

- I - This symbol indicates that a student was doing satisfactory work but, for non-academic reasons beyond his/her control, was unable to meet the full requirements of the course. The requirements for removal of an *I* are left to the respective schools; however, if a school does not designate a shorter time period, an *I* not satisfactorily removed after two semesters in residence will be changed to the grade of F by the registrar.

If a student is assigned an *I*, the course director must notify the student in writing of the requirements for removal of the *I* and of the deadline for removal of the *I*. A copy of the notice must be submitted to the Office of the Registrar at the time the *I* is submitted. An e-mail notification to the student, with a copy of the e-mail sent electronically to the Office of the Registrar (registrar@augusta.edu), meets the requirements of this policy.

- W - This symbol indicates that a student was permitted to withdraw without penalty. Any student who withdraws on or before midterm will receive a W. Withdrawals without penalty will not be permitted after the mid-point of the total grading period (including final examinations) except in cases of hardship as determined by the appropriate academic dean.
- S - This symbol indicates that credit has been given for completion of degree requirements other than academic course work. The use of this symbol is approved only for dissertation and thesis hours, student teaching, clinical practicum, internship and proficiency requirements in graduate programs. Exceptions to the use of this symbol for academic course work must be submitted to the Chancellor for approval.

- U - This symbol indicates unsatisfactory performance in an attempt to complete degree requirements other than academic course work. The use of this symbol approved only for dissertation and thesis hours, student teaching, clinical practicum, internship and proficiency requirements in graduate programs. Exceptions to the use of this symbol for academic course work must be submitted to the Chancellor for approval.
- V - This symbol indicates that a student was given permission to audit this course. After the last day of late registration, students may not transfer from audit to credit status or vice versa.
- K - This symbol indicates that a student was given credit for the course via a credit by examination program approved by the respective school's faculty. (CLEP, AP, Proficiency, etc).
- CP- At Augusta University, this symbol designates a course that extends beyond the semester. A grade is not given until the course is completed. This symbol cannot be substituted for an I (Incomplete).

Rounding

For calculation of final course grades, cumulative scores ≥ 0.5 will be rounded up to the nearest whole number. Scores on individual graded activities *will not be rounded up* to the nearest whole number for the purpose of determining mastery.

Academic Requirements for Promotion and Graduation

For a physical therapy student to be recommended for promotion to the next term, he or she must have satisfied the Department faculty in terms of ability and professional behavior by obtaining a passing grade in all didactic and clinical education coursework. Passing is defined as a final grade of at least 80% in any course carrying a PTHP prefix and a final grade of at least “C” in any course not carrying a PTHP prefix.

To be certified for graduation, a student must have earned a passing grade in all required didactic and clinical educational courses and earned a cumulative grade point average of at least 3.0 in the curriculum leading to the Doctor of Physical Therapy degree. In addition, all students must have made appropriate arrangements to discharge all financial obligations to the University.

Final responsibility for meeting the academic and clinical requirements of the Doctor of Physical Therapy degree rests with the individual student.

Academic Probation

Any student in the Department of Physical Therapy whose GPA for any semester is below 3.0 (on a 4.0 scale) or whose cumulative grade point average is below 3.0 at the end of the semester will be placed on academic probation and may be subject to a department recommendation to the Dean for withdrawal.

Withdrawal

Any termination of a student’s enrollment other than graduation that is initiated by the institution will be considered a withdrawal. Short-term leaves of absence granted by college officials that

do not prevent the student from completing the academic term are not considered withdrawals. Withdrawals may be student initiated or administrative.

Student Initiated Withdrawal - Voluntary withdrawal initiated by a student not having academic trouble. A student may initiate their own withdrawal by providing official notice to the Dean. While students may be encouraged to discuss their withdrawal with faculty and others, the only step a student must take to initiate a withdrawal is to provide official notice to the dean.

Students who voluntarily withdraw without being granted a leave of absence may apply for re-admission by submitting the appropriate application for admission as a first time student and following standard admissions procedures. Exceptions to this requirement may be made by the dean.

Administrative Withdrawal – Suspension or dismissal imposed by the institution due to academic or conduct sanctions. Suspension differs from dismissal in that a time period may be stated during which return to the program may be permitted without re-applying. A student who has been suspended may be advised of any conditions necessary for reinstatement and may be permitted to re-enroll at the appropriate time after meeting these conditions.

The authority to withdraw a student for disciplinary, academic, or other appropriate reasons rests with the Dean. In addition to administrative withdrawal for academic reasons, a student may be administratively withdrawn from the Augusta University when in the judgment of the Dean it is determined that the student exhibits behavior which: (a) poses a significant danger or threat of physical harm to the student or to the person or property of others, or (b) causes the student to interfere with the rights of other members of the university community or with the exercise of any proper activities or functions of the university or its personnel, or (c) causes the student to be unable to meet institutional academic, disciplinary or other requirements for admission and continued enrollment, as defined in the student conduct code, Augusta University Catalog, Student Handbook and other publications of the university, or (d) casts doubts upon a student's character and/or on the potential capabilities as a health science or basic science professional. Prior to making a decision, the Dean may consult with the student's parents and personal physician, if any, and other health professionals as appropriate.

Students who are administratively withdrawn as the result of disciplinary, academic, or other reasons may appeal the withdrawal. During the appeal process, students may or may not be allowed to attend courses at the discretion of the dean. Withdrawn students are not eligible to participate in educational or co-curricular activities of the institution and are not eligible to use services including but not limited to Student Health, Student Housing, the Wellness Center, or campus parking.

The authority to withdraw a student for failure to comply with selected administrative policies and procedures rests with the Registrar. The Registrar may administratively withdraw a student for failure to pay tuition and fees, failure to meet the conditions of a provisional acceptance, failure to meet institutional requirements for immunizations, or failure to comply with other administrative requirements for admission or continued enrollment. Any withdrawal initiated by the Registrar shall be considered an administrative withdrawal. Students who are withdrawn by the Registrar may only be re-admitted when they provide documentation that they have complied

with the administrative policy in question. Students may be readmitted by the Registrar as soon as the student demonstrates compliance with the policy or regulation in question.

Academic Withdrawal

A physical therapy student shall be recommended for withdrawal whenever he/she fails to achieve a semester GPA of at least 3.0 following his/her placement on probation.

A physical therapy student shall be recommended for withdrawal whenever he/she fails to earn a final grade of at least 80% in any course carrying a PTHP prefix.

A physical therapy student shall be recommended for withdrawal from the DPT program whenever he/she fails to earn a final grade of at least “C” in any course not carrying a PTHP prefix.

A physical therapy student shall be recommended for withdrawal from the DPT program whenever he/she fails to achieve mastery (earn a grade of at least 80%) on any graded activity in any course carrying a PTHP prefix *following* the Mastery Support Process as described in Appendix G below. Please note that scores on graded activities will not be rounded up to the nearest whole number, therefore a student receiving a 79.9% or lower on a graded activity will not be considered to be at mastery for that activity.

A physical therapy student shall be recommended for withdrawal whenever he/she fails to earn a final grade of “satisfactory” following a mastery support program in a clinical education course.

Non-Academic Withdrawal

Any student may be denied permission to continue enrollment in the College of Allied Health Sciences if, in the opinion of the faculty and the dean, the student's knowledge, character, or mental or physical fitness cast grave doubts upon his potential capabilities as a physical therapist. Behaviors or conduct which could result in non-academic withdrawal of a physical therapy student will normally be referred to the Student Affairs Committee.

A student who re-enters the program after non-academic withdrawal is governed by the usual policies for academic progress and dismissal.

Reenrollment Following Withdrawal

The DPT curriculum is arranged so that each succeeding course is dependent on the material taught in the preceding course(s). Faculty may recommend that students recommended for administrative withdrawal may return to the program with specified stipulations when the student can continue in the curricular sequence. Stipulations for return may include auditing and / or repeating all or part of courses previously completed in the DPT curriculum at the discretion of the course coordinator and / or Chair of the Program. Where the course is essential to some but not all further study, the Committee may choose to offer the student a reduced academic load over an increased number of semesters to assist the student in completing the program of study (alternate curriculum).

No administratively withdrawn student will be allowed to re-enroll in the Doctor of Physical Therapy program unless the dean provides written permission.

The student who re-enters the program following administrative withdrawal must complete all stipulations specified by the faculty, including achievement of mastery (i.e., course grade of 80% or above) in all courses taken after re-entry into the program. Non-mastery of any course taken after re-enrollment following withdrawal will result in dismissal from the program.

Student Affairs Committee

The Student Affairs Committee (“the Committee”) of the Department of Physical Therapy shall advise the Chair, Department of Physical Therapy on matters affecting student recruitment, admissions, orientation, and retention, promotion, and graduation activities within the Department. The committee will also provide advice and support for activities promoting student success and well-being (e.g., academic advising, counseling, career planning, financial assistance, student department, college, and institutional awards, and help for students with disabilities) and assisting students, faculty and the department to maintain a positive image at the institutional, state and national levels. The committee will be responsible for fostering on-going alumni relations including identification of Outstanding and Distinguished Alumni nominations. This would include Outstanding Program Alumnus – Physical Therapy and Distinguished Alumnus – College of Allied Health Sciences.

The Committee also reviews each physical therapy student’s cumulative performance and makes recommendations to the Chair, Department of Physical Therapy regarding student promotion, graduation and general academic progress. Grade appeals are not subject to review by this committee.

Composition

The Committee will include:

- Four (4) Department of Physical Therapy ranked faculty, with one designated the Chair
- Three (3) student representatives, one from each DPT Class

Scheduling and Frequency of Meetings

1. Routine meetings of the Committee will be scheduled monthly.
2. Special meetings may be called by the Chair when appropriate information has been transmitted to him/her requiring a special session.
3. The committee will meet in executive session at least once each semester to discuss progression of students from one term to the next, certification of students to proceed to full-time clinical education, certification of students for graduation, and consideration of students encountering varying degrees of academic or professional difficulty. Core faculty are expected to participate in these student progression meetings as non-voting members. Specific students to be discussed are those who have failed a course(s), those who are performing at less than satisfactory levels after an interim evaluation, and those who have failed to achieve mastery (80%) in any non-elective course offered by the Department (PTHP prefix). Any other student

may be discussed at the request of a department faculty member. An attempt will be made to proactively identify students in minor as well as major difficulty (academic or professional) with the goal of providing help for those in need. The Committee shall recommend to the Chair, Department of Physical Therapy appropriate action to be taken for each student, including advancement to the next semester, entry into a mastery support program, leave of absence, suspension, dismissal, readmission and graduation.

Policies and Procedures

The following defines the rules and guidelines under which the Committee carries out its responsibilities.

- Student committee members and representatives will be excused whenever the committee meets in executive session.
- The method by which student committee members and representatives are chosen will be determined by each class.

Quorum Requirements

1. A quorum for any regular or called meeting of the Committee shall be defined as one more than half of the voting members.
2. All actions of the Committee will require a simple majority of those voting.

Confidentiality

Proceedings of the Committee during executive sessions are confidential. Except as specified in this policy, the meetings and records of the Committee will be closed to persons other than University representatives authorized by the Dean of the CAHS. The Chair of Physical Therapy will contact a student's advisor as necessary.

Minutes and Records of Meetings

Minutes of executive sessions shall be confidential. The department Chair will share recommendations of the Committee with the department Chair and student advisors as necessary.

Minutes of routine meetings shall be distributed to members of the Committee and the Chair, Department of Physical Therapy.

Mastery and Mastery Support Process

The faculty has the responsibility for establishing acceptable levels of performance within the scope of practice as defined by the profession. We are also responsible for evaluating student performance and providing feedback to the students regarding their performance. Evaluations should be used both as a teaching tool (informative evaluation) and a certifying tool (summative evaluation). The faculty believes that preliminary clinical competence should be evaluated across courses and independent of courses within the academic setting. A critical component of the evaluation process is self-evaluation. It is the faculty's responsibility to facilitate the development of meaningful self-evaluation skills within the learners.

A student who fails to demonstrate mastery (score 80% or higher) on any graded activity in a course with a PTHP prefix is subject to administrative withdrawal. Please note that scores on

graded activities will not be rounded up to the nearest whole number, therefore a student receiving a 79.9% or lower on a graded activity will not be considered to be at mastery for that activity.

A graded activity is considered to be any activity subject to a numerical or pass-fail grade and includes, but is not exclusive, to quizzes, check-offs, examinations, practicals, presentations, papers, posters, or any other written assignments. Only one opportunity for a retest attempt will be allowed for each graded activity. The exception is the opportunity for a second retest attempt with respect to undergoing mastery support for a practical examination (this opportunity does not apply to any written graded activity). In this case that a student does not pass the first retest, the student may receive one additional opportunity to continue the mastery support process and take a 3rd attempt to achieve mastery. The student will only receive this opportunity once throughout the curriculum.

For example, suppose a student does not pass a practical examination. If the student does not pass the retest (i.e., second attempt), then he/she may be afforded the opportunity to be tested a 3rd time. If the student achieves mastery, then he/she will continue through the curriculum. If the student fails to meet mastery on a subsequent practical examination in the current or any future course, then he/she will be allowed only one opportunity to achieve mastery as outlined above.

Mastery support is a two-phase process that includes: 1) Formalized Mastery Support Plan – The Learning Activity (faculty-guided review and analysis of the graded activity, student self-reflection, and collaborative development of a plan of remediation) and 2) Reassessment to Evaluate Mastery of the Necessary Knowledge and/or Skills (retesting/grading of the activity by the instructor). Permission to engage and participate in the Formalized Mastery Support Plan phase is a **privilege** dependent upon many factors, including, but not limited to, the student's demonstrated investment in his or her learning. The Formalized Mastery Support Plan phase is not guaranteed and may be withheld in the event the student has not displayed investment in his/her learning activity. Examples of behaviors suggestive of not investing in learning include, but are not limited to, the following:

- Inadequate preparation for class sessions
- Reported poor effort in preparation for a quiz, examination, check-off, practical, or other graded activity
- Repeated poor performance on quizzes, examinations, check-offs, practicals, or any other graded activities suggesting poor engagement in preparation
- Unprofessional use of electronic devices such as cell phone, computers, head-phones, Smart Watch, and/or iPad/tablet during class sessions, laboratory sessions, and guest visits
- Poor participation in class activities including lack of preparation, distractive behavior (e.g., inappropriate talking, laughing, and texting)

In the case that a student is not offered the Formalized Mastery Support Plan phase, he or she can request to meet with instructors with specific questions regarding content that will be included on the retest attempt.

DENIAL OF THE FORMALIZED MASTERY SUPPORT PLAN PHASE DOES NOT PRECLUDE THE STUDENT FROM RETESTING.

The highest score that a student can make on retesting used to demonstrate mastery of the material will be 80%. The final grade that will be recorded for the activity will be the average of the original score and 80%. The student must meet mastery within the schedule determined by the course faculty. In all cases, the mastery must be completed by the date grades are due for the semester.

Appeal Mechanism for Academic or Administrative Sanctions

A student who has been recommended for withdrawal has the right to appeal this recommendation to the School Review Body of the College of Allied Health Sciences. If a student chooses to appeal the recommendation of the department chair, it will be recommended to the Dean that s/he may attend class but will **not** be able to participate in any graded examination or practical examination until the complete appeal process has been concluded.

The School Review Body (SRB) is a centralized subcommittee of the School of Allied Health Sciences Faculty Council (Council) utilized at the Dean's discretion to review the due process afforded to a Student who has received an academic sanction or who has a grievance against a faculty for perceived infringement on their rights to freely express themselves. The School Review Body serves in an advisory capacity to the Dean of the College of Allied Health Sciences to ensure that Students who have been imposed an academic sanction or who have a grievance against a faculty (as defined below) are provided the appropriate due process. As necessary, the SRB may hold any necessary hearings during the process to assist in rendering an appellate decision by the Dean. It is the responsibility of the faculty and the SRB to evaluate the records of academic performance and professional behavior of Students in accordance with the policies of each department and/or program.

Request for Hearing before the SRB

1. Upon receipt of a recommendation from a Department Chair for an academic sanction or grievance response from a student, the Dean will communicate his/her decision to support or deny the recommended sanction in writing to the Student and the Department Chair.
2. The Student shall have five (5) working days from receipt of the Dean's decision letter to file an appeal. The Dean's written decision will include a notice of the Student's right to appeal and notice that the Student should submit any additional documentation to support their appeal request. This documentation will be considered during the preliminary SRB review to determine whether or not a hearing will be granted.
3. After the appellate time frame expires, the appropriate paperwork is submitted to the Registrar for the imposed sanction (academic dismissal, academic suspension, or alternate curriculum).

4. If the Student files an appeal within five (5) working days after receipt of the written decision from the Dean, the Dean will request that the SRB convene and review the Student appeal to ensure due process was afforded.

Complaints Falling Outside of Due Process

Complaints and disputes received from faculty, staff, and students that fall outside of due process and complaints received from clinical education sites, employers of graduates, or the public will be handled initially by discussion among the parties involved. After the discussion, if the involved parties have reached a mutual agreement as to the solution, the parties shall file a statement with the chair of the department outlining the facts of the incident and the agreed-upon solution signed by all parties to the agreement. If no solution is reached, the matter should be referred to the chair of the department for attempt at resolution with the advice of the advisory committee or the faculty-at-large. If no resolution is reached, the matter will be referred to the dean of the college for attempt at resolution. A record of the complaint, including the nature of the complaint and the disposition of the complaint will be maintained by the department chair. If a complaint is carried to a higher administrative office for resolution, the offices managing the complaint would house the record of the action.

STUDENTS' RIGHTS AND SERVICES

Handicaps-Disabilities-Learning Disorders

The Augusta University adheres to a policy of equal educational opportunities for all students with handicaps, disabilities or learning disorders. In accordance with Section 504 of the Rehabilitation Act of 1973 and The [Americans with Disabilities Act](#), it is the policy of the Augusta University to ensure that all students are afforded equal opportunity and access to programs and facilities. Students are encouraged to contact the Director of Student Affairs to identify their disability so Augusta University can determine what reasonable accommodation may be made. The term "accommodation" is a deliberately flexible standard to incorporate different types of disabilities, handicaps and learning disorders.

At the Augusta University, determining eligibility for services and appropriate accommodations is the decision of the Provost. It is not a decision to be determined by individual faculty, a department or a school. However, a student given accommodations by the institution must meet the [technical standards](#) (i.e., essential skills and abilities) for admission, promotion and graduation established by the faculty of the Doctor of Physical Therapy program.

To learn more about the eligibility procedures, please see the department Chair or Augusta University Director of Student Affairs.

Students' Privacy and Confidentiality of Information

Information in student records are considered confidential and will not be released except as allowed by law and Augusta University policy. The student records, [listed in this table](#) (<http://www.augusta.edu/registrar/privacy.php>) and maintained by the Augusta University, are accessible to student review except for financial records of parents, employment records, letters of recommendation received before Jan. 1, 1975 and recommendation letters to which the student has waived the right of access.

Specific details concerning those records--including names of individuals in charge of records, names of individuals with access to records and details of the type of records--are available to any student upon request by contacting the Office of the Vice President for Enrollment and Student Services.

Students who want information from their records sent to prospective employers, other institutions, etc., must submit a signed request to the registrar authorizing such release. One copy of such material will be made available upon request at no charge to the student. Augusta University reserves the right to charge for additional copies at the same rate it costs to photocopy the material (at the time of printing this rate was 10 cents per page). Copies of transcripts available from other institutions will generally not be copied or sent.

The following information will be considered public directory information and may be released without student consent; however, a student may restrict the release of this information by annually notifying the registrar in writing by the last day of fall registration (or the initial registration if other than fall) that he/she does not want the information released.

Public directory information includes:

- Name
- Address
- Phone number
- E-mail address
- Photograph
- Program of study
- Dates of attendance
- Enrollment status
- Grade level
- Honors and Awards
- Degree Awarded

Student Health Services

The student health clinic is open Monday through Friday, 8:30 a.m. to 5:00 p.m. For additional information concerning any health concern, please contact the Student Health Center at (706) 721.3448 or <http://www.augusta.edu/shs>.

Student Representation on Department Committees

Each Doctor of Physical Therapy class shall be represented by one voting student member on each of the following Department committees:

- Student Affairs Committee
- Service Committee

Each Doctor of Physical Therapy Class shall be represented by one non-voting student at each of the following Department meetings:

- Advisory Committee meetings

Procedure

Student committee members and representatives will be excused whenever committees meet in executive session.

The method by which student committee members and representatives are chosen will be determined by each class. [See Appendix A for responsibilities of class representatives and officers.]

Intellectual Property Rights of Students

Students who submit work (e.g. data sets, exams, tests, cases, projects, lab reports, essays, research papers, films, etc.) which is eligible for copyright protection, and which is submitted as a requirement of the DPT program, are entitled to sole copyright ownership. Works or parts of works created while employed by a professor or a contracting agency are not owned by the student (see next paragraph).

Students have no rights, unless by prior written agreement, to any intellectual property created because of being employed by the University or by a contracting agency. If a research project is to be completed while employed through an external contract or contribution agreement, students must be informed, in writing, of the terms of the contract, including stipulations concerning confidentiality, intellectual property ownership and publications. It is in the interest of students, faculty and the University to ensure that students' publication rights for work completed as a program requirement are protected by the terms of a contract or contribution agreement.

Where the work submitted is part of a team project or a program of research, ownership may be attributed to more than one individual (student, staff, and faculty) according to a written agreement signed by all parties who contributed to the work, regardless of the duration of the project or program.

For rights to authorship of papers, books or reports prepared by faculty but based primarily on the student's own research project, there must be a significant intellectual and creative contribution to the work by the professor and there must be a sharing of responsibility and accountability for the content of the work by students.

Before a work is submitted for publication, a student co-author must have the right to review and approve the draft manuscript, including the order of authorship.

For a subsequent work based primarily on the student's own research paper, the student should have the right of first refusal to senior authorship, regardless of whether the final copy of the work is prepared by the student or the professor. Second authorship for a professor is not required, nor should it be expected, if the professor mainly provides encouragement, physical facilities, financial support, critiques, or editorial contributions. In these cases, a footnote acknowledging assistance or a contribution may be sufficient.

Where the research of a student and a professor results in an invention which may be patentable, a memorandum of agreement should be written and signed, with the assistance of the Office of Research and/or lawyers for all parties. In this agreement, the rights of the student, the professor and the University should be identified.

STUDENTS' RESPONSIBILITIES

Academic Advisement

Each student will be assigned to a faculty advisor for general academic advisement. Students are required to meet with their advisor approximately *within the first 4 weeks* of a semester except as stated in Appendix C. Students are responsible for contacting their faculty advisor in a timely manner to arrange a meeting.

Professionalism Portfolio

Each student will maintain and periodically submit an individualized *Student DPT Professionalism Portfolio* ("the Portfolio"). The purpose of the Portfolio is to allow students to track and reflect upon their individual growth as professionals and to aid with progression and promotion decisions. The Portfolio will also serve as a tool for making recommendations for awards and other professional recognition. [See Appendix for required content and review procedures.]

Academic Integrity

The university recognizes honesty and integrity as being necessary to its academic function. The following regulations protect the equity and validity of the university's grades and degrees, and help students develop standards and attitudes appropriate to academic life.

1. No student will receive assistance not authorized by the instructor in preparing any assignment, essay, laboratory report or examination to be submitted as a requirement for an academic course.
2. No student will knowingly give unauthorized assistance to another person in the preparation of any assignment, essay, laboratory report or examination to be submitted as a requirement for an academic course.
3. No person will sell, give, lend or otherwise furnish to any unauthorized person material that can be shown to contain the questions or answers to any examination scheduled to be given at any subsequent date, in any course of study offered by the university excluding questions and answers from tests previously administered and authorized for release by the administering faculty member.
4. Plagiarism is prohibited. Themes, essays, term papers, tests and other similar requirements must be the work of the student submitting it. When direct quotations are used, they must be indicated, and when the ideas of another are incorporated in the paper, they must be appropriately acknowledged.
5. Fraudulent research activity is prohibited. Misrepresentation of data collection and analysis, including falsification, fabrication or omission of data is prohibited.

Any person taking, or attempting to take, steal or otherwise procure in any unauthorized manner any material or information pertaining to the conduct of a class including tests, examinations, laboratory equipment, roll books, etc., violates this regulation.

The Department has adopted the following honor pledge for use with all graded activities:

“I have neither given nor received assistance on this assessment, nor have I seen anyone else give or receive assistance. I will not talk to anyone who has not completed the assessment about the activity.”

Student Honor Board

Each class is responsible for maintaining the honesty and integrity of its own membership. Suspected breaches of the Student Code of Conduct will be handled by a student Honor Board.

Purpose

The purpose of the Honor Board is to serve in an advisory capacity to any student(s) wishing to report an honor violation and to provide a mechanism for students to report and discuss suspected breaches of academic integrity and unethical behavior in a non-threatening environment. The Honor Board will also serve as an "incident repository" so that inappropriate behaviors that are not reported to the Campus Judicial Body may be addressed constructively rather than ignored.

Constituency

The Honor Board will consist of two representatives from each class enrolled in the DPT program.

Members of the Board for the incoming class will be elected in mid-September of each year and members will serve until their class graduates. Interim members from the new class will be elected in June.

Pictures and names of the Honor Board members will be posted in the department.

Duties and Responsibilities

The Honor Board is to act as an information resource to all students on issues related to the Augusta University Student Code of Conduct. Students composing the Honor Board are to become well versed in all aspects of the Student Code of Conduct and the procedures for reporting a suspected act of misconduct.

Procedures

Any student who believes that he or she observes another student cheating or demonstrating unethical behavior (e.g., stealing) will write out a full description of the incident, being as detailed as possible, sign it, and submit it to a member of the Honor Board who is not in the class in which the incident occurred.

When an Honor Board member receives a report, the member will meet with the individual who was reported to let them know that a report has been filed. It will be emphasized that this report is not a charge or accusation and is only being passed on as information. The name of the individual filing the report will NOT be disclosed at this time. The Honor Board member will also advise the person filing the report of their option to bring charges against the student(s) by presenting them in writing to the dean of the College of Allied Health Sciences and the campus Judicial Body through the director of Campus Life Services. Though the Honor Board member

will answer all questions, the member will not tell a student whether charges should be filed with the campus Judicial Body. This decision belongs to the reporting student.

Records

Incident reports shall be reviewed by the Chair, Department of Physical Therapy, and then kept in a locked Honor Board file located in the department office, and to which the Chair shall carry the only key. When the reported student is no longer enrolled in the DPT program, this record shall be destroyed. However, a copy of the file shall be given to the dean and the director of Campus Life Services if the student is subsequently charged with a violation of the Student Code of Conduct.

Attendance and Absences

Students are expected to attend class. It is the student's responsibility to notify the appropriate faculty ahead of time if they are unable to attend for any reason. The student is responsible for obtaining the necessary skills and knowledge to meet established proficiency requirements. A student may be denied the opportunity for a mastery support program if they have 2 or more unexcused absences. The faculty retains the right to require attendance at all scheduled academic offerings as a condition for continuing in the program or for special activities where attendance is the only way to obtain desired skills.

Specific attendance requirements for clinical education experiences are contained in the Clinical Education Section of this Student Handbook.

Citizenship

As junior colleagues and partners in the professional education experience, students may be asked participate in curriculum development, evaluation, and improvement within the Department.

Copier/Fax Machine

Students may not use the departmental copier. Copiers are available in the library for students. Students may receive course related information by fax in the department at (706) 721-3209.

Criminal Conviction Disclosure

Students are continually required to disclose in writing to their dean and/or the director of Student Affairs criminal convictions occurring since completing the application for admission. (Pre-application for admission criminal record disclosure is required on the application for admission.) Criminal convictions include adjudication of guilt by a judge or jury for any crime. This does not include minor traffic offenses, but it does include "no contest" pleas, first-offender treatment, convictions under appeal and convictions which have since been pardoned. Minor traffic offenses are those which do not involve driving while under the influence of alcohol and other drugs, which did not result in imprisonment and for which a fine of less than \$250 was imposed. Disclosures should be made within 30 days of conviction.

Drug and Alcohol Abuse

The following statement of policy is designated to emphasize, in fairness to all members of the university community, the possible repercussions of the illicit use of drugs or alcohol. In addition

to the policies of Augusta University and the Board of Regents concerning abuse of drugs and alcohol, numerous and serious sanctions are imposed under state and federal laws regarding the unlawful possession, distribution or use of illicit drugs and alcohol.

The use of illegal drugs such as marijuana, cocaine and LSD carries serious penalties. Under Georgia law, mere possession of an illegal drug may constitute a felony and could result in serious monetary fines, as well as imprisonment for 20 years or more. Similarly, the unauthorized use of legal, prescription drugs may constitute a felony and also carries serious penalties.

Georgia law may impose serious sanctions for drug-related crimes, including loss of or ineligibility for a professional license, or employment with any state agency. In addition, Augusta University will suspend or expel any student convicted of a drug-related felony, effective the date of the conviction.

While not an illegal drug per se, alcohol may also be abused and may result in criminal penalties. Persons convicted of operating a motor vehicle while under the influence of alcohol may lose their drivers' license, receive substantial fines or go to prison.

It is the policy of the Augusta University that students committing criminal acts on or off campus will be treated as citizens of the community. Clearly, Augusta University cannot protect members of its community--including faculty, staff and students--who commit criminal offenses. This applies to drug-related crimes as well.

Student Use of Department Space and Equipment

Equipment may be signed out by students to augment scheduled learning experiences after first obtaining permission from a faculty member. The student signs a form, which is kept by the faculty member. Both the student and the faculty member are responsible for the security of the equipment and returning it to its proper place at the conclusion of the learning experience. The student is responsible for returning the equipment to that particular faculty member and seeing to it that his or her name is removed from the form.

Personal Use of Department Space and Equipment

The PT space and equipment may not be used for personal reasons except where there is written permission of the Chair.

Community Use of Department Space and Equipment

The PT space and certain equipment may be used for service to the community with permission of the Chair. However, educational activities always come first. Faculty members and students assume personal responsibility for the equipment and PT space.

Borrowing Department Equipment

Equipment borrowed by students, faculty or other departments on campus should be signed out in the notebook in the front office. The following should be provided: date, name, department,

and telephone number, name of equipment and serial number or Augusta University number. When equipment is returned, the date should be entered in the notebook.

Emergencies

- Cardiac or Respiratory Arrest
 - Initiate CPR and get assistance if possible.
 - Call 1-2911-Public Safety. Tell them you need an ambulance equipped for cardiac arrest in Building EC, Physical Therapy Department (1st Floor).
 - A defibrillator (AED) is located outside the main entrance to the Department in the lobby

- Fire
 - Remove persons in immediate danger and close doors and windows to affected area.
 - Activate the nearest fire alarm and call Public Safety extension 1-2911.
 - Calmly notify other personnel in the area
 - Attempt to extinguish the fire by using the proper extinguisher.
 - All personnel should evacuate the building and assemble at its front entrance outside. Do not return to the building until an "all clear" is given.
 - Remain calm. Never run or yell "fire".

HIV/ Acquired Immune Deficiency Syndrome (AIDS)

This general policy recognizes the diversity of the academic and clinical requirements of the various schools and departments. Specific information regarding particular programs may be secured from the appropriate department and /or dean. In general however, all students should be aware that:

- The curricula will incorporate the basic principles of infection control and prevention. It is the responsibility of each student to be knowledgeable of such principles and strictly adhere to the universal precautions presented.

- Any student with patient-care responsibilities who knows or has reason to believe that he has human immunodeficiency virus (HIV) infection is required to immediately report this information to the Augusta University hospital epidemiologist in accordance with hospital policy and to his dean. Failure on the part of the student to report a known HIV infection may result in disciplinary action, up to and including dismissal.

- Suspected HIV exposure by students of the Augusta University or by students sponsored through a program of the Augusta University, during the course of their assigned duties should be reported immediately by the student to his clinical supervisor in accordance with the policies of the hospitals in which he has assigned duties. Students participating in clinical activities at the Augusta University Hospital and Clinics are subject to its policies on HIV infection.

- The Augusta University will carefully conform to state and federal laws regarding discrimination toward students with HIV infection. All information pertaining to

the condition and /or clinical assignment of a student with known or potential HIV infection or AIDS will be considered confidential information.

Additional information and counseling about AIDS and related issues (i.e. educational, financial, career implications) may be obtained from the Student Health Center or Hospital Epidemiology.

Blood & Body Fluid Exposure Protocol

Within 30 Minutes of Augusta University

1. Cleanse wound with soap and water, or irrigate splash areas (i.e., eyes, mucous membranes) with normal saline or water.
2. Notify attending/nurse supervisor to order lab from source patient.
3. Fill out hospital incident report. Please record source's name and pertinent demographics (**KEEP COPY**).
4. Report to Student Health (1-3448), located in Pavilion II, Monday-Friday, 8:30 a.m.-5:00 p.m. If closed, report to Augusta University ER (1-4951) within 3 hours of injury.
5. For questions, call Pepline @ 1-888-448-4911.

Outside Augusta University Area

1. Cleanse wound with soap and water, or irrigate splash areas (i.e., eyes, mucous membranes) with normal saline or water.
2. Notify attending/nurse supervisor to order lab from source patient.
3. Fill out hospital incident report. Please record source's name and pertinent demographics (**KEEP COPY**).
4. Report to facility Employee Health or Emergency Department for lab and assessment for HIV prophylaxis (**within 3 hours of injury**).
5. For questions, call Pepline @ 1-888-448-4911.
6. Follow-up at SHS or designated clinic as indicated.

Immunizations

All entering Augusta University students must provide the Augusta University Student Health Service with sufficient evidence that they are fully immunized or have proof of immunity with serological titer against mumps, rubella (German measles), rubeola (red measles), polio, tetanus, diphtheria, hepatitis B and varicella (chicken pox). Students are also required to have had a tuberculin test (PPD) within three months prior to first enrollment at Augusta University and annually thereafter. An immunization card can be obtained at Student Health that will serve as official documentation that the student is fully immunized. Vaccination against hepatitis A and meningococcus is not required for enrollment but is strongly recommended before beginning clinical education experiences.

Information Systems Security and Computer Use

Information systems resources are to be used as expressly authorized by Augusta University administration and management. The appropriate use and protection of all information systems and associated resources is expected from all users including faculty, students, employees and

visitors throughout the institution. "Appropriate use" of information systems resources is defined as use which is for the purpose of furthering the mission of Augusta University.

The information systems user is responsible for the proper use and protection of resources. All users of information systems resources are expected to comply with existing Augusta University Policies and Procedures and those of the University System. In addition, users are expected to honor copyrights and software licenses and comply with all federal and state laws including those prohibiting slander, libel, harassment and obscenity. Users must obey laws prohibiting the private use of state property. Information that is confidential by law, including educational and medical records must be protected.

Users must be aware that information stored or transmitted electronically (or via computer), including e-mail, may be subject to disclosure under open record laws. Users should have no expectation of privacy for information stored or transmitted using Augusta University information resources except for records or other information that is confidential by law (i.e., medical and educational records).

Participation of Students in Educational Experiences

The Augusta University is committed to presenting an exemplary educational experience for all its students. In meeting this goal, the components of each course of instruction and of each educational program are carefully selected for content and suitability. Students who anticipate problems in carrying out any part of their curriculum because of moral, religious or other reasons must consult with the appropriate program or course director prior to enrolling. Each problem will be carefully considered in an attempt to resolve the difficulty in a manner consistent with Augusta University's educational standards. However, the institution is not obligated to provide alternative educational experiences or to waive required parts of its courses or programs.

Professional Attire

As a student in a professional practice program, your appearance is not only a reflection of you individually, but also a reflection of the physical therapy profession and the physical therapy program of the Augusta University. As such, you should adhere to the following dress code:

Classroom

Students may dress in casual attire, using good judgment, for class lectures. However, professional dress is expected when guest lecturers, patients, and visitors are present. Your Augusta University identification card must be worn visibly at all times.

Laboratory

During lab experiences, students are required to wear appropriate clothing for the experiences, e.g., during some labs, students may be required to wear swimming trunks, bathing suits, shorts, halters, or patient gowns. Students should be properly covered during class breaks beyond the lab space.

Practical Assessments, Presentations, and Clinical Settings

Dress should be neat, clean, practical, and safe:

- Augusta University identification card must be worn visibly at all times

- No jeans (any pants with rivets are also considered jeans)
- Shirts should have appropriate necklines (i.e. not too low), and sleeves that completely cover the shoulders. T-shirts, sweatshirts, and midriff tops are not permitted
- Pants should be appropriate in length (i.e. not dragging the floor)
- Shoes should have low heels, non-skid soles and a closed toe and heel
- Students should wear clothing that allows them to bend and move freely without exposing the skin above or below the waistline.

Clinical Experiences

Students will comply with the dress code of the clinical education site to which they have been assigned.

Professional Behaviors

Students will exhibit appropriate professional behaviors in class, labs, and clinical experiences. Appropriate professional behavior demonstrates respect for others, personal integrity, and responsibility. A student may be denied permission to continue in the curriculum if, in the opinion of the faculty, the student's knowledge, character and mental or physical capacity cast serious doubt upon the student's potential to function as a physical therapist.

Unacceptable behaviors include, but are not limited to, the following:

- Is not sufficiently prepared for class activities
- Does not fully participate in class activities
- Is not wearing appropriate dress for laboratory sessions
- Does not bring tools needed to conduct an examination
- Does not notify faculty of absence
- Arrives late to class sessions
- Is inattentive during class activities (e.g. studies other course materials during class, rests feet on plinth, etc.)
- Uses personal computer/other electronic devices during class sessions for purposes not related with the task at hand (e.g. checking e-mail, sending text messages, reviewing Facebook postings, online shopping, etc.)
- Uses inappropriate language
- Asks questions that infer no advanced preparation of material
- Does not alter behavior based on previously received feedback
- Acts in an unprofessional manner during interactions with colleagues
- Does not fulfill responsibilities related to group activities
- Fails to clean up after self at the end of class sessions
- Face-to-face and/or cyber bullying to peers, faculty, or staff

Tobacco-Free Environment Policy Statement

Because of the deleterious effects of tobacco use, the Augusta University, Augusta University Health, Inc., and the Physicians Practice Group have committed to a tobacco-free campus for the purpose of promoting a healthy environment for all persons, including faculty, students, staff, visitors, and others who visit the campus. The Augusta University prohibits the use of tobacco products on any property owned, leased or controlled by the Augusta University, Augusta University Health, Inc., or the Physicians Practice Group.

For the entire Tobacco-Free Environment policy text, please see the Augusta University Administrative Policy at <http://www.augusta.edu/tobaccofree/>.

Telephones

Personal cellular phones should be silenced during all instructional and assessment activities. Students may use the department telephones or fax machine with the permission of faculty or staff or in an emergency.

Use of the Building at Night and on Weekends

Students are welcome to use the department's classrooms, labs, and computer lab for educational purposes after hours and on weekends. All outside doors to the Health Sciences Building will be locked after 6:00 p.m. and will reopen at 7 a.m. on weekdays. Students are able to enter to the building during these times by using their smart cards.

Classroom Security

Regular classroom hours: 7:30 a.m. to 5 p.m. Classroom doors will be unlocked by faculty or staff each morning and locked again at the end of the day. Students needing access to classrooms before or after regular classroom hours will use the keypad controlled lobby entrance to the physical therapy suite. Prior arrangements for access to the classrooms will need to be made with the office manager (Cindy). The lobby doors in each classroom are to remain locked and closed at all times except that, while classes are in session, the lobby doors may be used for breaks, lunch, etc.

Student Organizations and Fundraising Activities

Student organizations, including class cohorts with designated officers (e.g., DPT Class of 2019), are independent associations. They are not agents or representatives of the Augusta University and are in no way authorized or empowered to enter into any agreement, contract or understanding on behalf of Augusta University. Any provision or understanding that purports to bind Augusta University to student organizations or their activities is null and void.

Class officers and representatives should contact the Chair of Physical Therapy before distributing any promotional materials or engaging in any fundraising activities which could affiliate them with the Augusta University or the Department of Physical Therapy.

NATIONAL PHYSICAL THERAPY EXAMINATION

Background

The Federation of State Boards of Physical Therapy (FSBPT) has reduced the available time slots that an individual can sit for the National Physical Therapy Examination (NPTE). Today's students have incurred a significant amount of debt to fund their physical therapy education, which represents a financial hardship to many students. Furthermore, many employers seek to

hire new graduates who can begin employment shortly following degree conferment. This environment has led to many students preferring to take the NPTE in April rather than July.

The FSBPT allows students to take the NPTE 90 days prior to degree conferment assuming that they are “on track” for degree conferment from a CAPTE-accredited program. The FSBPT also emphasizes that it allows students to take the NPTE early as long as it does not violate state licensure. As the state of Georgia allows students to take the NPTE prior to degree conferment, ***this policy only allows for students to take the NPTE prior to degree conferment for licensure in the state of Georgia. Any student requesting to take the NPTE for licensure in another state or jurisdiction other than the state of Georgia cannot apply until after degree conferment.***

Criteria for Eligibility

1. This policy ***ONLY*** applies to students wishing to take the NPTE in April for licensure in the ***state of Georgia***. Should a student plan to practice in another state (i.e., not in the state of Georgia), he/she must take the NPTE for licensure in Georgia and then request reciprocity to any other state once the Georgia license is conferred. Otherwise, students taking the NPTE for licensure in any state other than Georgia must take the NPTE after degree conferment.
2. The student must have an overall GPA of a 3.80 (with no rounding). Any student with a GPA of 3.79 or below will not meet this criterion.
3. The student cannot require mastery support on more than 2 graded activities throughout the ***entire*** Doctor of Physical Therapy curriculum.
4. The student cannot have any professionalism issues brought forth to the Student Affairs Committee at any time.
5. The student must affirm that he/she has successfully completed all paperwork related to professionalism (e.g., *semester PPDP, clinical education paperwork*) in a timely manner.
6. The student must provide at least 2 completed forms of attestation (***Refer to Appendix H***) regarding exemplary clinical performance from clinical instructors who have supervised the student during a long-term clinical affiliation during the 3rd year of enrollment. At least 1 form must come from a clinical instructor during the student’s PTHP 9393 clinical rotation.
7. The student must have evidence of exemplary performance (e.g., CPI feedback) during PTHP 8191, 9292, and 9393.
8. Any student who repeats a course in a subsequent year due to academic suspension will not be allowed to take the NPTE prior to degree conferment.

Procedures for requesting permission will be distributed during the fall semester of the 3rd year of the DPT curriculum.

MANDATORY FEE WAIVER POLICY

Pursuant to the Georgia Board of Regents, Augusta University can waive certain fees imposed on students in the event that they are off-campus for an entire semester. The reason for this waiver is to allow students who cannot utilize Augusta-based services a waiver for certain mandatory fees. Students can access the policy at

[https://augusta.policytech.com/dotNet/documents/?docid=443&LinkedFromInsertedLink=true&public=true.](https://augusta.policytech.com/dotNet/documents/?docid=443&LinkedFromInsertedLink=true&public=true)

Appendix A-Class Representative Position Descriptions

President: The president shall be chief executive officer of the organization, shall preside at all organization meetings, and shall chair the Executive Committee. The President shall be an ex-officio member of all committees. The President shall perform the duties customary to office and such additional duties as directed by the Executive Committee.

Vice-President: The Vice President shall succeed the President of the organization in the event that the President resigns or is unable to continue in office. The Vice President shall serve on committees in an ex-officio capacity and shall perform all other duties as assigned by the President.

Treasurer: The Treasurer shall keep the financial records of the PTSA and shall be responsible for: (1) maintaining accurate accounting records; (2) authorizing and signing checks approved by the Association; and (3) reporting financial status and each Association meeting. The Treasurer shall also perform additional duties as assigned by the President.

Secretary: The Secretary shall keep the non-financial records of the organization and shall be responsible for: (1) recording the minutes of the Association meetings to be sent in a monthly email to all general and associate members; (2) recording minutes of the Executive Association meetings; (3) maintaining a current list of membership with telephone numbers, email addresses, and mailing addresses; and (4) maintain the Association's email account daily. The Secretary will also perform additional duties as assigned by the President.

Service Chair: The Service Chair shall be responsible for providing service opportunities at Augusta University and within the community at all meetings and shall host at least one service-based event per term. The Service Chair will also perform additional duties as assigned by the President.

Social Chair: The Social Chair shall be responsible for hosting one student appreciation event per year. The Social will also perform additional duties as assigned by the President.

Member-at-Large: The members at large must be representative of both the health professionals and the pre-health professionals of the general membership. These members are responsible for serving as a liaison between general membership and the Executive Committee.

PTAG Representative: The Physical Therapy Association of Georgia Representative is responsible for communicating all PTAG information and updates to the Augusta University Class of 2018. The PTAG representative serves as a liaison between any state PTAG members and the members of the Augusta University community.

Honor Code Representatives: The Honor Code representatives are responsible for maintaining order and ensuring all rules and regulations of the Augusta University DPT Program are upheld and abided by for the Class of 2018. In the case of an Honor Code Violation, the Honor Code Representatives will act as liaisons between the involved student, faculty members, and Augusta University officials.

Appendix B-The Professionalism Portfolio in the DPT curriculum

Policy

It is the policy that every student will maintain and submit an individualized *Student DPT Professionalism Portfolio* (“the Portfolio”) as described by procedure. The purpose of the Portfolio is to allow students to track and reflect upon their individual growth as professionals and to aid with progression and promotion decisions. The Portfolio will also serve as a tool for making recommendations for awards and other professional recognition.

Procedure

1. Students will follow guidelines for scheduling and attending sessions with their assigned advisor as outlined in the instructions for the *Professional and Personal Development Plan* (PPDP).
2. Each student will bring the *Student DPT Professionalism Portfolio* to the routinely scheduled advisor meetings.
3. Students may request additional meetings with advisors to review the Portfolio or for other advisement as desired.
4. The Portfolio will be reviewed by the student with his/her advisor each semester. Based on this review, advisors will report recommendations or concerns to the Student Affairs Committee, according to the Committee’s prescribed times. An Advisor Reporting Form will be used for this purpose and to aid with record keeping of advisement sessions and recommendations.
5. The Portfolio will be included as a graded course requirement for each of the following courses: Professional Practice Expectations I, Professional Practice Expectations IV, and Professional Practice Expectations VI. An evaluation rubric for the Portfolio will be developed for each of these courses.
6. Other mechanisms for triggering a formal review (commendations and/or concerns) by the Student Affairs Committee include, but are not limited to, student self-report, course or clinical faculty report, ACCE report.

Contents of Portfolio

I. Required

1. Student resumé
2. PPDP – updated each semester
 - a. Accomplishments
 - b. Goals
 - c. Plan
3. Verification or recognition for service
 - a. Professional
 - b. Community
4. Recognitions or awards
 - a. Formal
 - b. Informal (such as letters of commendations from clinical supervisors or patients)
5. Continuing/Advanced Education or certifications

II. Optional

1. Journal of student’s self-reflection on professional growth
2. Research contributions, products, presentations
3. Clinical education materials

APPENDIX C-Professional and Personal Development Plan Augusta University DPT Program

Name: _____

Semester: _____

Introduction

The purpose of this tool is to provide structure for each student to develop a formal, progressive plan for professional development in consultation with his/her advisor. Program faculty and students who participated in the development of this form and its application subscribe to the belief that students and graduates of the Augusta University Physical Therapy Program strive to exceed minimum expectations in all aspects of professionalism.

Instructions

Advisor meetings

- During the first semester (Summer 1) of the program, an advisor meeting is to be scheduled **between the sixth and seventh weeks** of the semester.*
- During subsequent semesters (with the exception of semesters 4, 8 and 9) an advisor meeting is to be scheduled **within one month of the beginning of the semester**; follow-up sessions may be planned and scheduled on an individual basis, as determined by a student and his/her advisor.
- Although completing the template is not mandatory during the fourth semester (Summer 2), you must still meet with your advisor as required at least once during the semester.

*A **minimum** of 1 advisor meeting per semester is required. Students are encouraged to schedule advisor meetings as needed or desired in addition to the required meeting.

Completing the template

- *Accomplishments* (box 1) and *Overall Professionalism Objective* for this semester (box 2) are to be completed **prior to** meeting with your advisor.
- You may begin to complete the *Areas of Needed Improvement* section (box 3) prior to meeting with your advisor, or you may complete this section with your advisor's input during your advisement session.
- The *Goals* (box 4) and *Plan* (box 5) sections will be completed with your advisor's input.
- You and your advisor both sign and date your plan once finalized.
- On subsequent meetings each semester, what you document in the *Accomplishments* section (box 1) on a new form is based on your reassessment of how you did with your plan.
- To help you describe your accomplishments, identify areas of needed improvement, and compose your goals, refer to the Generic Abilities and the Core Values of Professionalism in Physical Therapy documents (Appendix).

**Professional and Personal Development Plan
Augusta University DPT Program**

Semester: _____

1. Accomplishments (Sample indicators of current level of Professionalism):						
2. Overall professionalism objective for this semester:						
3. Areas of needed improvement (utilize the attribute descriptions in the Appendix for specific indicators)	4. Goals for improvement in identified areas (State goals in behavioral and measurable terms to aid with assessment)	5. Plan for development (How will you achieve your goals? What outside resources or assistance will you seek?)				
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October 2007

Appendix D – Attribute Descriptions for Generic Abilities and Core Values

Attribute Descriptions for Generic Abilities:*

- 1) Commitment to Learning
 - a. Identify problems and prioritize your learning needs
 - b. Demonstrate a positive attitude toward learning; seek and welcome new learning opportunities
 - c. Set personal and professional goals
 - d. Offer your own thoughts and ideas during learning activities
 - e. Research and study areas when you identify lacking knowledge
- 2) Interpersonal Skills
 - a. Maintain professional demeanor in interactions as each situation demands
 - b. Communicate with others in a respectful, confident manner
 - c. Demonstrate acceptance of any limitations in your knowledge and experience
 - d. Demonstrate respect for all peers, faculty and staff within and outside of this department
 - e. Demonstrate responsibility and accountability for your own actions
 - f. Respond appropriately to unexpected situations
 - g. Talk about difficult issues with sensitivity and objectivity
 - h. Approach others appropriately to discuss a difference in opinion
- 3) Communication Skills
 - a. Recognize the impact of non-verbal communication: eye contact, active listening, body language
 - b. Demonstrate effective active listening skills
 - c. Use standardized English for oral and written communications, using logical organization, correct grammar and accurate spelling and expression
 - d. Mediate conflict if necessary, using effective professional and interpersonal communication techniques
 - e. Submit professionally written papers and assignments, according to recommended or prescribed format
- 4) Effective Use of Time and Resources
 - a. Focus on the task at hand without dwelling on past mistakes
 - b. Use unscheduled time efficiently
 - c. Respect demands on others' time and make arrangements accordingly
 - d. Set priorities and reorganize as needed
 - e. Demonstrate the ability to say "No" when this would be most effective
 - f. Advance personal and professional goals while maintaining expected workload
- 5) Use of Constructive Feedback
 - a. Demonstrate active listening skills during feedback sessions
 - b. Perform ongoing self-assessment and actively seek peer and faculty feedback and help
 - c. Use feedback to establish professional goals
 - d. Provide constructive and timely feedback to peers and faculty (academic and clinical) and staff as appropriate
 - e. Engage in non-judgmental, constructive problem-solving discussions
 - f. Reconcile differences in feedback with sensitivity

- 6) Problem-Solving
 - a. State problems and potential solutions clearly utilizing appropriate assertiveness skills
 - b. Examine multiple solutions to problems
 - c. Consider consequences/effects of possible solutions
 - d. Accept responsibility for implementing solutions to problems
 - e. Participate in efforts to examine and resolve problems in community
- 7) Professionalism
 - a. Abide by program and professional association (APTA) codes and positions
 - b. Demonstrate honesty, courage and continuous regard for all
 - c. Project professional image
 - d. Act on moral commitment
 - e. Seek and emulate positive professional role models
 - f. Participate actively in professional associations (regional, state, national)
 - g. Act in leadership role when called or led to do so
 - h. Support and engage in research
- 8) Responsibility
 - a. Demonstrate dependability and punctuality
 - b. Follow through on commitments
 - c. Accept responsibility for actions and outcomes
 - d. Offer and accept help when needed
 - e. Encourage accountability among peers and class communities
- 9) Critical Thinking
 - a. Raise relevant questions
 - b. Consider available information (based on knowledge and experience) and articulately offer ideas
 - c. Recognize gaps in knowledge and seek further information/understanding
 - d. Demonstrate an openness to be challenged with new and/or contradictory ideas and information
 - e. Justify suggested solutions to problems
 - f. Recognize own biases and suspend judgmental thinking
 - g. Challenge others to think critically
- 10) Stress Management
 - a. Recognize own stressors or problems and seek help as needed
 - b. Recognize distress or problems in others and help them recognize these
 - c. Maintain professional demeanor in all situations
 - d. Maintain balance between professional and personal life, establishing appropriate/healthy outlets to cope with stressors
 - e. Demonstrate effective affective responses in all situations, including remaining calm in urgent situations
 - f. Prioritize multiple commitments and obligations
 - g. Recognize when problems are out of your control or unsolvable
 - h. Offer solutions for stress reduction for individual peers and in classroom community

*From: May, W., Morgan, B. et al. *Model for Ability-Based Assessment in Physical Therapy Education*. Journal of Physical Therapy Education. 9:1, 3-6, Spring 1995.



Attribute Descriptions for Core Values:*

- 1) Accountability
 - a. Seek and respond to feedback from peers and faculty
 - b. Acknowledge and accept consequences of your actions
 - c. Maintain membership in APTA
- 2) Compassion/Caring
 - a. Communicate effectively, both verbally and nonverbally, with others, taking into consideration individual differences in learning styles, language, cognitive abilities, etc
 - b. Recognize and refrain from acting on your social, cultural, gender and sexual biases
 - c. Demonstrate respect for others and consider others as unique and of value
- 3) Excellence
 - a. Demonstrate initiative, evidenced by investing time, original thought and personal action
 - b. Demonstrate appropriate levels of knowledge and skill in all courses and learning activities
 - c. Use evidence consistently to support professional decisions
 - d. Demonstrate a tolerance for ambiguity – accept that there may be more than one “right” answer or way to approach problems
 - e. Share your knowledge with others
- 4) Integrity
 - a. Abide by Program policies and procedures
 - b. Articulate and internalize stated ideals and professional values
 - c. Resolve dilemmas with respect to a consistent set of core values
 - d. Be trustworthy
 - e. Know your limitations and act accordingly
 - f. Confront harassment and bias among others
 - g. Act on the basis of professional values even when the results of the behavior may place you at risk
- 5) Professional Duty
 - a. Preserve confidentiality of peers and others in all professional contexts
 - b. Involve yourself in professional activities beyond the academic setting
 - c. Take pride in one’s profession
- 6) Social Responsibility
 - a. Participate in community volunteerism
 - b. Provide leadership in the academic community

*From: *Professionalism in Physical Therapy: Core Values: Self-Assessment*. Alexandria, Va: American Physical Therapy Association; 2003.

Appendix E-Generic Abilities* Applied to Classroom Settings

*From: May, W., Morgan, B. et al. <i>Model for Ability-Based Assessment in Physical Therapy Education</i> . Journal of Physical Therapy Education. 9:1, 3-6, Spring 1995			
Generic Ability	Descriptions	Examples of Expected Classroom Behaviors	Examples of Unacceptable Classroom Behaviors
Commitment to Learning	<ul style="list-style-type: none"> Identify problems and prioritize your learning needs Demonstrate a positive attitude toward learning; seek and welcome new learning opportunities Set personal and professional goals Offer your own thoughts and ideas during learning activities Research and study areas when you identify lacking knowledge 	<ul style="list-style-type: none"> Prepared and self-directed learner Identifies own needs and seeks assistance Regularly attends and is on time for classes, labs, and clinical internships Notifies instructor of absences in accordance with Student Handbook. 	<ul style="list-style-type: none"> Uninterested Uninvolved Unprepared Does not take responsibility for own learning Actions distract from a positive learning environment Late for class Often absent
Interpersonal Skills	<ul style="list-style-type: none"> Maintain professional demeanor in interactions as each situation demands Communicate with others in a respectful, confident manner Demonstrate acceptance of any limitations in your knowledge and experience Demonstrate respect for all peers, faculty and staff within and outside of this department Demonstrate responsibility and accountability for your own actions 	<ul style="list-style-type: none"> Initiates discussion to resolve conflicts Actively listens Modifies communication based on listener. Respects cultural and personal differences including gender, age, and personal space. 	<ul style="list-style-type: none"> Inappropriate non-verbal communication Sleeps in class Feet are on table/desktop.

	<ul style="list-style-type: none"> • Respond appropriately to unexpected situations • Talk about difficult issues with sensitivity and objectivity • Approach others appropriately to discuss a difference in opinion 		
Communication Skills	<ul style="list-style-type: none"> • Recognize the impact of non-verbal communication: eye contact, active listening, body language • Demonstrate effective active listening skills • Use standardized English for oral and written communications, using logical organization, correct grammar and accurate spelling and expression • Mediate conflict if necessary, using effective professional and interpersonal communication techniques • Submit professionally written papers and assignments, according to recommended or prescribed format 	<ul style="list-style-type: none"> • Recognizes impact of non-verbal communication • Modifies written, verbal, and non-verbal communication to meet needs of audiences (e.g. patients/clients, caregivers, colleagues) • Able to communicate message in several different ways • Maintains open, honest, constructive, and timely communication. 	<ul style="list-style-type: none"> • Writes illegibly, unorganized • Verbal and nonverbal messages are inconsistent. • Uses computers and other electronic devices for non-course-related activities during class lecture and laboratory sessions
Effective Use of Time and Resources	<ul style="list-style-type: none"> • Focus on the task at hand without dwelling on past mistakes • Use unscheduled time efficiently • Respect demands on others' time and 	<ul style="list-style-type: none"> • Plans ahead • Uses all available resources • Independently seeks answers • Respects time commitments of others 	<ul style="list-style-type: none"> • Asks questions that indicate that the student is unprepared or has not made use of available resources, including faculty

	<p>make arrangements accordingly</p> <ul style="list-style-type: none"> • Set priorities and reorganize as needed • Demonstrate the ability to say “No” when this would be most effective • Advance personal and professional goals while maintaining expected workload 	<ul style="list-style-type: none"> • Comes to class (lectures and labs) prepared • Timely completion of all assignments and readings • Dresses appropriately for labs in accordance with syllabus • Actively participates in lectures and labs • Informs instructor if circumstances exist that might affect ability to safely participate. 	<ul style="list-style-type: none"> • Student is unprepared for lecture/lab • Fails to clean up after self at the end of class sessions
Use of Constructive Feedback	<ul style="list-style-type: none"> • Demonstrate active listening skills during feedback sessions • Perform ongoing self-assessment and actively seek peer and faculty feedback and help • Use feedback to establish professional goals • Provide constructive and timely feedback to peers and faculty (academic and clinical) and staff as appropriate • Engage in non-judgmental, constructive problem-solving discussions • Reconcile differences in feedback with sensitivity 	<ul style="list-style-type: none"> • Actively listens and demonstrates positive attitude toward feedback when provided 	<ul style="list-style-type: none"> • Is resistant to feedback • Unable to recognize own weaknesses • Becomes defensive in response to feedback when provided
Problem-Solving	<ul style="list-style-type: none"> • State problems and potential solutions clearly utilizing appropriate assertiveness skills 		

	<ul style="list-style-type: none"> • Examine multiple solutions to problems • Consider consequences/effects of possible solutions • Accept responsibility for implementing solutions to problems • Participate in efforts to examine and resolve problems in community 		
Professionalism	<ul style="list-style-type: none"> • Abide by program and professional association (APTA) codes and positions • Demonstrate honesty, courage and continuous regard for all • Project professional image • Act on moral commitment • Seek and emulate positive professional role models • Participate actively in professional associations (regional, state, national) • Act in leadership role when called or led to do so • Support and engage in research 	<ul style="list-style-type: none"> • Projects a professional image in all situations through appearance and interactions including with peers, faculty, staff, clinical supervisors, patients/clients, and during patient demonstrations, field trips, and attending conferences • Wears name tag for all labs and off campus class requirements • Abides by the <i>Augusta University Student Conduct Code</i> and APTA Code of Ethics. 	<ul style="list-style-type: none"> • Frequently and/or consistently demonstrates unprofessional behavior by violating examples of expected behaviors
Responsibility	<ul style="list-style-type: none"> • Demonstrate dependability and punctuality • Follow through on commitments • Accept responsibility for actions and outcomes • Offer and accept help when needed • Encourage accountability among peers and class communities 	<ul style="list-style-type: none"> • Demonstrates accountability for actions and outcomes • Is dependable, punctual, and timely with all assigned activities • Assumes responsibility for learning and change • Maintains confidentiality of information 	<ul style="list-style-type: none"> • Unreliable • Places blame on others for the outcomes and consequences of their personal choices and actions • Shares confidential information without prior approval

Critical Thinking	<ul style="list-style-type: none"> • Raise relevant questions • Consider available information (based on knowledge and experience) and articulately offer ideas • Recognize gaps in knowledge and seek further information/ understanding • Demonstrate an openness to be challenged with new and/or contradictory ideas and information • Justify suggested solutions to problems • Recognize own biases and suspend judgmental thinking • Challenge others to think critically 		
Stress Management	<ul style="list-style-type: none"> • Recognize own stressors or problems and seek help as needed • Recognize distress or problems in others and help them recognize these • Maintain professional demeanor in all situations • Maintain balance between professional and personal life, establishing appropriate/healthy outlets to cope with stressors • Demonstrate effective affective responses in all situations, including 	<ul style="list-style-type: none"> • Prioritizes and organizes commitments and responsibilities to decrease stress • Recognizes when problems are unsolvable • Handles unexpected changes appropriately 	<ul style="list-style-type: none"> • Allows stress to affect professional behavior • Fails to recognize stress in others to modify interactions with them

	<p>remaining calm in urgent situations</p> <ul style="list-style-type: none">• Prioritize multiple commitments and obligations• Recognize when problems are out of your control or unsolvable• Offer solutions for stress reduction for individual peers and in classroom community		
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APPENDIX F- Guidelines for Appropriate Use of the Internet, Electronic Networking and Other Media¹

The capacity to record, store and transmit information in electronic format brings new responsibilities to those working in healthcare with respect to privacy of patient information and ensuring public trust in our hospitals, institutions and practices. Significant educational benefits can be derived from this technology but students need to be aware that there are also potential problems and liabilities associated with its use. Material that identifies patients, institutions or colleagues (peers and faculty) and is intentionally or unintentionally placed in the public domain may constitute a breach of standards of professionalism and confidentiality that damages the profession and our institutions. Guidance for Doctor of Physical Therapy students and the profession in the appropriate use of the internet and electronic publication is necessary to avoid problems while maintaining freedom of expression. The Department of Physical Therapy is committed to maintaining respect for the core values of freedom of speech and academic freedom.

Students are reminded that they must meet multiple obligations in their capacity as future health professionals, as members of the profession and the American Physical Therapy Association, and as clinical affiliates of hospitals and other institutions. These obligations extend to the use of the internet at any time – whether in a private or public forum.

General Guidelines for Appropriate Internet Use

These Guidelines are based on several foundational principles:

- The importance of privacy and confidentiality to the development of trust between students, faculty, staff, and patient volunteers.
- Respect for colleagues and co-workers in an inter-professional environment,
- The tone and content of electronic conversations should remain professional.
- Individual responsibility for the content of blogs and other social networking forums.
- The permanency of published material on the Web, and
- That all involved in health care have an obligation to maintain the privacy and security of patient records and personal information in any form or any medium, whether written, printed, photographic, electronic, or otherwise.

Posting Information about Colleagues and Co-Workers

Respect for the privacy rights of colleagues and co-workers is important in an inter-professional environment. If you are in doubt about whether it is appropriate to post any information about colleagues and co-workers, ask for their explicit permission – preferably in writing. Making demeaning or insulting comments about colleagues and co-workers to third parties is unprofessional behavior.

¹ Adapted from Guidelines for Appropriate Use of the Internet, Electronic Networking and Other Media, University of Toronto Faculty of Medicine.
<http://www.facmed.utoronto.ca/Assets/ume/registrar/Guidelines+for+Appropriate+Use+of+the+Internet.doc>

APPENDIX G- Mastery Support Process Procedures

Participation in a mastery support process is a privilege dependent upon many factors, including, but not limited to, the student's demonstrated investment in his or her learning. The faculty member has the discretion to develop a formal mastery support plan to include activities targeted to resolve outstanding learning issues. In the case that the faculty member believes that the student has not demonstrated investment in his or her learning (thus denying the Formalized Mastery Support Process phase), then it will be the responsibility of the student to seek resources (including meeting with the faculty member to ask content-specific questions) necessary to successfully pass the retest attempt.

Although the faculty is aware of possible extenuating circumstances, all students who undergo mastery support in two or more graded activities in a semester are sent a proactive letter of counseling to facilitate and enhance academic success in the future. In the event that a student does not meet mastery on a graded activity in a course with a PTHP prefix, a mastery support process may be offered to the student.

Mastery support is a two-phase process that includes 1) Formalized Mastery Support Plan (subject to the discretion of the faculty member) and 2) Reassessment to Evaluate Mastery of the Necessary Knowledge and/or Skills (provided regardless if the faculty member denies offering a formal mastery support plan).

Phase 1: Formalized Mastery Support Plan – The Learning Activity (when offered by the instructor)

1. Identification and evaluation of knowledge and/or skill(s) deficits through methods such as:
 - a. Test item analysis performed by the student for written activities
 - b. Review of practical exam performance. Faculty would be available for students to review their practical feedback (recommended to do this within a week of the practical so the recollection of the performance is fresh). Students would be responsible for requesting a meeting and reviewing their feedback form prior to the meeting with the faculty.
2. Development and implementation of an action plan to correct the deficits in knowledge and/or skills
 - a. For written examination:
 - i. Discussion of the results of the test item analysis with a course faculty member.
 - ii. Discussion of suggested strategies and learning activities to improve understanding of concepts and knowledge in the areas of concern
 - iii. Documentation of the major points of the discussion will be documented and signed by faculty and student.
 - b. For practical examinations:
 - i. Discussion of the details of the skills or knowledge that were found to be deficient during the practical examination

- ii. Discussion of suggested strategies for preparing for the practical retest include practice with a faculty member and/or videotaping practice with a classmate followed by review with a faculty member.
- iii. Documentation of the details of the skills or knowledge that were found to be deficient would be agreed upon and signed by student and faculty. The document will clearly state the expectation of the practical retest. (See template titled “Documentation Template for the Mastery Support Process: Practical Examination” on the following page).

Phase 2: Reassessment to Evaluate Mastery of the Necessary Knowledge and/or Skills

In the event that the student is unsuccessful on retest following the mastery support process, the procedures for recommendation for withdrawal will be implemented. The student may be recommended for re-enrollment into the DPT program at a later date. In this case, the faculty members involved in the examination and mastery support process will provide suggestions for activities that the student should complete prior to re-enrollment.

One **exception** to this policy will exist regarding recommendation for withdrawal in the case that a student is not successful on retest on a practical examination. In the case that a student does not pass the first retest, the student may receive one additional opportunity to continue the mastery support process and take a 3rd attempt to achieve mastery. The student will only receive this opportunity once throughout the curriculum. For example, suppose a student does not pass a practical examination. If the student does not pass the retest, then he/she may be afforded the opportunity to continue the mastery support process and be retested a 3rd time. If the student achieves mastery, then he/she will continue through the curriculum. If the student fails to meet mastery on a subsequent practical examination in the current or any future course, then he/she will be allowed only one opportunity to achieve mastery as outlined in the DPT Student Handbook (Mastery and Mastery Support Process section above).

THE ONE-TIME OPPORTUNITY FOR A THIRD ATTEMPT AT MASTERY ONLY APPLIES TO A PRACTICAL EXAMINATION. A STUDENT ONLY HAS ONE RETEST ATTEMPT AT MEETING MASTERY ON ANY WRITTEN EXAMINATION.

Refer to the Mastery Support Process documentation form on the next page.



AUGUSTA UNIVERSITY
**COLLEGE OF ALLIED
 HEALTH SCIENCES**

Department of Physical Therapy

Student: _____ Course: PTHP _____
 Semester: _____

Instructor: _____

Date	Mastery Support Process	Comments	<u>Initials</u> Instructor & student
	Reviewed practical performance with student		
	Discussed reason for non-mastery <ul style="list-style-type: none"> ▪ Student's perception ▪ Instructor's perception 		
	Discussed possible remediation strategies <ul style="list-style-type: none"> ▪ Videotaping of practice sessions ▪ Practice case scenarios with peers ▪ Practice case scenarios with instructor ▪ Review of didactic instruction ▪ Practice individual skills ▪ Other 		
	Developed a remediation plan to include the following learning activities: (may circle above activities, specify in Comments or see attached sheet)		
	Discussed terms for re-testing <ul style="list-style-type: none"> ▪ Type of case/problem to expect ▪ Who will be evaluating the student ▪ Videotaping of performance ▪ Where it will occur ▪ When it will occur 		
	Documented time spent with student in mastery support activities (attach document if necessary)		

Entire plan must be signed prior to retesting

Student signature: _____ Date: _____

Instructor signature: _____ Date: _____

APPENDIX H- Attestation Statement for Exemplary Clinical Performance

Student Requesting Approval: _____

The above-named student has requested permission to take the National Physical Therapy Examination (NPTE) prior to degree conferment for licensure in the state of Georgia. Part of the process is for the student to have demonstrated *exemplary* performance during all clinical rotations to date as a Doctor of Physical Therapy student.

To facilitate this process, we request that you carefully read the following statements based on the student's performance. Afterward, please mark the box that signifies your support or non-support for allowing this student to take the NPTE prior to degree conferment.

- In my professional opinion, I believe that this student had demonstrated exemplary performance in the clinical setting. The student has demonstrated the ability to manage all aspects of patient care (e.g., planning, conducting, documenting, and implementing skills and clinical decision-making related to the examination, evaluation, and treatment of individuals seeking physical therapy services) in a safe, professional manner expected of an entry-level physical therapist. I support this student's request for taking the NPTE prior to degree conferment.
- In my professional opinion, I do not believe that this student had demonstrated exemplary performance in the clinical setting. The student has not demonstrated the ability to manage all aspects of patient care (e.g., planning, conducting, documenting, and implementing skills and clinical decision-making related to the examination, evaluation, and treatment of individuals seeking physical therapy services) in a safe, professional manner expected of an entry-level physical therapist. I do not support this student's request for taking the NPTE prior to degree conferment.

Clinical Instructor Signature

Date

Clinical Instructor Printed Name