# PT 8955 Clinical Orthopedic Internship I

# Oakland University - Program in Physical Therapy

# **Orthopedic Manual Physical Therapy Graduate Certificate Program**

# Description:

This course is designed to provide supervised clinical practice in an orthopedic physical therapy setting. Students will actively apply principles and techniques taught in PT 510 & 511 to manage patients with impairments, functional limitations, and disabilities due to musculoskeletal pathologies. Additional instruction in aspects of orthopedic physical therapy intervention will include coordination, communication, documentation, and patient/client-related instruction. The student will take an active role in the interpretation of and progression of selected patient cases.

# Course pre-requisites

Enrollment in this course requires admission to Orthopedic Certificate or Orthopedic Manual Physical Therapy Certificate Program, or permission of the instructor.

# Course Purpose:

- To provide a structured clinical experience(s) with patients/clients experiencing extremity and/or spinal orthopedic conditions/pathologies.
- To reinforce and further develop the physical examination and intervention skills taught in PT 510 & 511.
- To skillfully interpret selected patient cases and develop functional and goal oriented treatment plans,
- 4) To reinforce and further develop clinical decision making skills, including clinical reasoning, clinical judgment, and reflective reasoning through direct patient interaction and management.

## **Credit Hours**

1

### Instructor of Record

John R. Krauss PT, PhD, OCS, FAAOMPT Associate Professor Coordinator of the Orthopedic Manual Physical Therapy Program Oakland University

### **Course Format**

Approximately 80 hours of direct one to one clinical instruction.

## Course Schedule

Clinical hours will be scheduled with OMPT clinical instructors on a per student and instructor basis.

#### Location

Associated OMPT clinical sites.

#### Office Hours

Tuesdays 12:00pm-1:00pm, Thursdays 11:00am-12:00pm, other days and times to be arranged by appointment

### **Contact Number**

(248) 364-8693

# **Email**

krauss@oakland.edu

# **Course Requirements**

- 1. Clinical logs:
  - Students are required to keep a daily log while obtaining direct clinical hours (see clinical log form)
  - These logs must be signed off by the clinical instructor who will check their accuracy and thoroughness prior to delivery to the instructor of record.
- 2. Students are required to submit two patient cases using the patient case templates posted on Oakland University's Moodle e-learning site. Specifically one patient case must be about a patient experiencing a primary spinal impairment; the other case must be about a patient experiencing a primary extremity impairment. Each student will be assigned a time to post his/her patient case. Students not posting the case are responsible for providing feedback using the discussion feature within Moodle.
- Naming of cases: In order to receive credit for the cases submitted for the course the cases must be named using the following format: student last name\_case type (spinal or extremity)\_WI12

# **Grading Scale**

This course is grades S (successful) and U (unsuccessful). All course requirements must be met in order for S grades to be granted.

# **Attendance Policy**

The specific hours of clinical supervision are negotiated between the clinical instructor and the resident. A great deal of time and effort is involved in constructing a learning environment in the clinic. Unnecessary and/or excessive absenteeism will impact the instructor's ability to maintain this environment and will result in the cessation of clinical hours. At this point the instructor of record must be contacted and other arraignments made for completion of required clinical hours.

#### Academic conduct statement

Students are expected to adhere to the procedures for Academic Conduct described in the University Graduate Catalog. Please read and refer to the University Graduate Catalog, Policy on Academic Conduct. This policy states that "All members of the academic community . . . are expected to practice and uphold standards of academic integrity and honesty. Academic integrity means representing oneself and ones work honestly. Misrepresentation is cheating since it means students are claiming credit for ideas or work not actually theirs and are thereby seeking a grade that is not actually earned." Examples of cheating include "cheating on exams, using

books and/or notes when not authorized to do so, copying from someone else's work or ideas without giving that person credit . . . Both direct quotations and paraphrases must be documented. Even if students rephrase, condense, or select from another person's work, the ideas are still the other person's and failure to give credit constitutes plagiarism of another's idea." This policy will be applied in this and all courses in the Program in Physical Therapy. Students found guilty of academic misconduct by the university will be subject university sanctions and to sanctions from the program by the Physical Therapy Promotion and Honors Committee including probation, suspension or dismissal.

#### Feedback

Students will receive feedback on an ongoing basis throughout the clinical experience. Student concerns with any component of this course should be addressed with the primary instructor as soon as possible.

### Required References

All references required for PT 510/8860 & 511/8861

# Required Reading

While no formal reading requirements are assigned to this course. Individual clinical instructors or the Instructor of Record may assign journal article(s) relating to the course and content delivered in PT 510 & 511 as needed.

# Required supplies

To be announced if required.

#### Clinic Attire

Students are expected to dress in attire appropriate for the clinical setting. Individual clinic requirements will be respected including the wearing of laboratory coats if mandated. Failure to abide by dress requirements may lead to cessation of the clinical and reassignment of the student by the instructor of record.

### Malpractice Insurance & Proof of Licensure

Student must be enrolled in PT 601 and have a current malpractice insurance policy prior to beginning any one-on-one clinical hours. Prior to beginning clinical hours students are required to provide a copy of their current malpractice insurance and their state license to both the Instructor of Record, and the Clinical Instructor. Individual clinics may also require proof of a negative TB test or other health measures normally required for employment. These requirements should be identified by the student and instructor prior to arriving for the first supervised clinical day.

# Student Objectives:

#### General

# 1. Communication skills, documentation and the patient interview:

- a. Demonstrate effective verbal and nonverbal communication skills.
- b. Meet or exceed documentation guidelines established by the APTA and clinical host sight.
- Obtain and develop a patient profile, which includes but is not limited to subjective findings, results of diagnostic tests, a review of systems and objective findings.
- b. Gather additional information relevant to a person's condition, level of function, occupation and social history, etc.
- c. Identify and document the critical characteristics of a patient's symptoms.
- d. Write concise, comprehensive S.O.A.P. notes, including:
  - Subjective and objective findings.
  - Treatment goals.
  - Treatment administered and method of administration.
  - Patient response(s) to examination and intervention(s).
  - Modification of examination and/or intervention based on patient response.
- e. Discuss examination findings, physical therapy diagnosis, physical therapy progress, intervention options/approach, rehabilitation potential, factors that could potentially limit outcome, special circumstances/issues and referrals, with the patient, family members, and other health-care professionals, using both professional and appropriate terminology.
- f. Describe a complete treatment plan including the progression from the first day of treatment through discharge.

### 2. Therapist and patient safety:

- c. Demonstrate a working knowledge of indications, contraindications and precautions to orthopedic physical examination and interventions through the appropriate selection and application of orthopedic tests, measures, and interventions.
- d. Demonstrate safe and functional postural habits during patient examination and treatment.
- e. Demonstrate a functional awareness of the patient's position in space.
- f. Modify patient positioning, tests and measures and interventions based on specific patient limitations.
- g. Demonstrate the ability to educate/instruct your patient in appropriate postural habits/ body mechanics.
- h. Maintain a safe working environment including inspection of all equipment and the treatment area as necessary.

# 3. Differential diagnosis and understanding of orthopedic conditions:

- i. Organize examination findings into clusters, syndromes, or categories.
- b. Identify and describe specific pathological conditions/syndromes/disorders.

c. Provide referrals to other health care professional(s) as indicated.

# 4. Critical thinking skills:

- a. Describe age normative and transcultural expectations as they relate to examination and treatment techniques.
- b. Recognize and analyze abnormal and normal examination findings.
- c. Describe possible reasons/mechanisms for variations from normal values.
- d. Recognize typical compensations and alternations in normal function as they relate to common pathological conditions and injuries.
- Demonstrate clinical decision making skills, including clinical reasoning, clinical judgment and reflective reasoning.
- f. Demonstrate the integration of specific treatment techniques across varied patient populations, pathologies and body regions.
- g. Select appropriate physical therapy interventions for patient(s)/client(s) managed/treated during clinical hours.
- Discuss progression of intervention, rationale, and expected functional outcomes for selected case studies.

#### 5. Professionalism:

- a. Both demonstrate and facilitate professional qualities and behaviors that are consistent with those required of a physical therapist including the following (based on the Generic Abilities, UWM, 1996)
  - Identifying/locating appropriate resources to complete course requirements.
  - Demonstrating a positive attitude toward learning.
  - Offering thoughts and ideas in class.
  - Prioritizing information needs.
  - Accepting that there may be more than one correct answer to a problem.
  - Maintaining a professional demeanor in all classroom and clinical situations.
  - Respecting cultural and personal differences of others.
  - Communicating with others in a respectful manner.
  - Respecting the personal space of others.
  - Maintaining confidentiality in all clinical interactions.
  - Assuming responsibility for his/her actions.
  - Using existing resources effectively.
  - Using unscheduled time effectively.
  - Completing assignments in a timely fashion.
  - · Actively seeking feedback and help when necessary.
  - Demonstrating a positive attitude toward feedback.
  - Developing a plan of action in response to feedback.

- Assessing his/her performance accurately.
- Abiding by the APTA Code of Ethics and Standards of Practice.
- Projecting a professional image in the classroom and clinical setting.
- · Demonstrating dependability.
- · Accepting constructive feedback.

# 6. Orthopedic Physical Therapy:

In order to successfully complete this course the student must demonstrate the ability to:

- a. Specifically select, prioritize and implement orthopedic tests and measures based upon the patient's medical diagnosis, symptoms, clinical presentation, functional limitations, age, and ability to cooperate with the examination process.
- b. Effectively perform a physical examination which will include, but is not limited to: gross observation, static posture, dynamic posture/body mechanics, gait, active range of motion, passive range of motion, resisted range of motion, functional testing, joint play, passive joint movements, neurological screening, vascular screening, passive tissue mobility, flexibility screening, special testing, and palpation.
- c. Effectively examine and describe normal coupled and non-coupled combined movement of the spinal column and describe the likely consequences of typical joint pathologies.
- d. Effectively examine and describe the quantity of normal movement in each spinal segment.
- e. Effectively correlate findings from the physical examination with the patient's clinical signs and symptoms.
- f. Evaluate/analyze examination findings and develop a working hypothesis and orthopedic physical therapy diagnosis.
- g. Specifically describe probable causes of current patient complaint/movement impairment based upon examination findings.
- h. Establish a specific treatment plan, including, but not limited to: expected duration of treatment, frequency of treatment, manual therapy techniques, exercise techniques and/or protocols, physical agents, adaptive or assistive devices, community resources and/or support programs and referrals to be made.
- Effectively utilize specific physical therapy tests and measures which include but are not limited to:
  - Anthropometric Characteristics
  - Ergonomics and Body Mechanics
  - Integumentary Integrity
  - Joint Integrity and Mobility
  - Muscle Performance (Including Strength, Power, and Endurance)
  - Orthotic, Protective, and Supportive Devices
  - Pain

- Range of Motion (Including Muscle Length)
- Effectively utilize specific physical therapy interventions which include but are not limited to:
  - Manual therapy principles and techniques including massage/soft tissue mobilization, functional massage, manual muscle stretching, and basic joint mobilization.
  - Therapeutic exercise principles and training techniques to enhance muscle performance and coordination for select orthopedic conditions.
- k. Develop and prioritize a specific problem list based on clinical findings, functional limitations, rehabilitation potential, patient goals, pre-morbid function/habitual variations of patient's age, patient's sex, patient's body type, pertinent patient history and available resources.
- Establish a realistic physical therapy prognosis based on clinical findings, functional limitations, rehabilitation potential, patient goals, pre-morbid function/habitual variations of patient's age, patient's sex, patient's body type, pertinent patient history and available resources.
- m. Describe a comprehensive home exercise/self maintenance program.

# 7. Re-evaluation of orthopedic conditions:

In order to successfully complete this course the student must demonstrate the ability to:

- a. Identify subjective and objective measures that will serve as dependent variables to measure initial response to treatment.
- Identify subjective and objective measures that will serve as appropriate long-term goals and that can be assessed throughout the course of physical therapy treatment.
- g. Obtain and develop a patient profile, which includes but is not limited to subjective findings, results of diagnostic tests, a review of systems and objective findings.
- h. Gather additional information relevant to a person's condition, level of function, occupation and social history, etc.
- i. Identify and document the critical characteristics of a patient's symptoms.
- i. Write concise, comprehensive S.O.A.P. notes, including:
  - Subjective and objective findings.
  - Treatment goals.
  - Treatment administered and method of administration.
  - Patient response(s) to examination and intervention(s).
  - Modification of examination and/or intervention based on patient response.
- k. Discuss examination findings, physical therapy diagnosis, physical therapy progress, intervention options/approach, rehabilitation potential, factors that could potentially limit outcome, special circumstances/issues and referrals, with the patient, family members, and other health-care professionals, using both professional and appropriate terminology.

I. Describe a complete treatment plan including the progression from the first day of treatment through discharge.