

College of PHHP/Department of Physical Therapy -- Spring 2014

Course title: PHT 6189C: Examination, Evaluation, and Basic Intervention for the Physical Therapy Patient.

Course description: The purpose of this course is for the physical therapy student to develop competence and confidence in the use Guide to PT Practice and the ICF model for interview, outcomes, and the selection and justification of appropriate tests, measures, the development of a basic evaluation and the selection and justification for basic interventions for the individual patient. The student will also have adequate instruction and practice time to develop accuracy, reliability, and confidence in the administration of these tests, measures, and interventions as well as the documentation of results and the modification of said measures for the individual patient while maintaining reliability and validity. Appropriate affective behaviors will be integrated into the skill sets. The ICF model will used to construct the exam, determine appropriate tests, measures, anticipated outcomes, and interventions.

This is not a course in developing differential diagnosis for the individual patient. Those skills require the knowledge of specific disease/conditions/disabilities which will be discussed in more patient specific courses such as Principles of Disease, Musculoskeletal I/II, Neuro Rehabilitation I/II.

Course prerequisites: Course participation is limited to entry-level DPT student in their first year of the UF program.

Credit hours: 3 credits

Course instructor(s): Gloria Miller, PT, PhD gtmiller@phhp.ufl.edu;

Lab Assistants: Primary (1st 8 wks): Fredy Mora Solis, PT fredy@ufl.edu;
Secondary (then primary 2nd 8 wks): Sudeshna Chatterjee, PT, sudeshna1@phhp.ufl.edu;
Guest instructor: Jay Nair, PT (jay19oct@phhp.ufl.edu;))

Clock hours: 5: 1 lecture hour, 4 lab/discussion/group work hours/week – 16 weeks

Class time: M First lab 12:50-2:45/Second lab 3:00-4:55; Wed Lecture 10:40-11:30, W First lab 1:15-3:00/Second lab 3:15-5:00 (**alternates weekly** with Neuroscience on Friday)

Office hours: by appointment via email or personal request.

Loss of range, length, strength, function are evaluated and provided with intervention based on the patient history, current injury/disease, stage of recovery, and patient goals.

| Hospital | Rehab-Homebound | Functioning in Community - OP | Community |
|---|---------------------------|--|---|
| Acute illness/surgery | Subacute, not acutely ill | Work or not | Participation full |
| Function of jts/mm | Function of mm/jts | Transportation | Leisure |
| Roll, reach, sit, eat, walk | Cook, clean, shower | Drive/bus/bike walk fast | Community activities |
| Tests per setting | Reach cabinets | Family, shop, | Advanced family |
| Impairment & functional | Tests per setting | Tests per setting | Outcomes return to participation activities |
| Outcomes – ADLs, discharge home or next setting | Outcomes | Outcomes return to work, basic home activities | including sports, leisure, community |
| | ADLs some IADLs | | |

Objectives: At the conclusion of PHT 6189C the student will be able to:

1. The student will appreciate the need for a knowledge base of facts, principles, and concepts as well as the application of critical thinking concepts (induct, deduct, analyze, infer, and evaluate) in the development of beginner examination, evaluation, and intervention skills.
2. The student will understand the ICF model, the Guide to PT Practice model for examination/evaluation, and the HOAC and utilize these models when analyzing appropriate tests, measures, and basic interventions to be selected for a specific patient.
3. The student will be able to verbalize the principles and procedures for each standardized and/or functional test, measure, and intervention. (e.g. principle of MMT, goniometry) and develop a comprehensive guide for easy reference for use in the clinic. Based on the principles for each procedure, the student will be able question information, argue for or against principles, and justify selections per specific patient case.
4. The student will recognize and interpret the limitations of specific measures (e.g. goniometry, MMT).
5. The student will utilize evidence, clinical expertise, the characteristics/goals of the individual patient, and inference when developing an examination, evaluation, and intervention.
6. The student will understand the differences of testing and intervention selection in various patient care settings (e.g. acute, OP, rehab, community wellness) and use principles of induction and inference when selecting tests and interventions.
7. The student will be able to justify (verbally and written) the selection of each test, outcome measure, and intervention for an individual patient and/or individual setting.
8. The student will be able to analyze and organize tests, measures, and interventions in a rationale and organized manner which is efficient and tailored to the individual patient.
9. The student will demonstrate accuracy and reliability at a level of 90% and safety at 100% when performing basic examination procedures and basic intervention procedures including but not limited to patient interview, palpation of muscle/bone/ligament, muscle length testing, goniometry, manual muscle testing, anthropometric measurements, stretching and strengthening manually and with equipment, functional muscle testing, and basic neurological testing.
10. Students will demonstrate appropriate affective behaviors (at the level of 90%) during the subjective exam (interview), objective exam (tests & measures), as well as evaluation (explaining to patient the impact of impairments/deficits), and intervention. These behaviors include but are not limited to respect, consideration, communication, and professionalism. (Please refer to the generic abilities and professional development plan for more details). Students will use feedback to improve affective skills.
11. The student will understand, analyze, and value the importance of performing a test and measure accurately so that evaluations, judgments, and outcomes based on results are valid and justifiable.
12. The student will be able to evaluate and modify standardized testing and intervention procedures to the individual needs of the patient while maintaining the validity and reliability of the test.
13. The student will be able to clearly and accurately document the results of testing and intervention in standardized and organized format.
14. The student will be able to develop an evaluation statement, deduct prognosis, and infer anticipated goals given guidelines and information from instructors.
15. The student will recognize and be able to compare and contrast the correlation between testing measures for ROM, flexibility, and strength and interventions for stretching and strengthening.
16. The student will be able to select and justify simple stretching, flexibility, and strengthening exercises for simple case studies and describe (with words and pictures), demonstrate, and teach those exercises to a patient in the cognitive stage of learning.
17. The student will be competent in writing patient notes in both SOAP format and patient/client management format. Writing will be legible and grammatically correct

18. The student will be able to interpret, analyze, and utilize feedback from course instructor and teaching assistants in a timely fashion without defensiveness to increase accuracy, reliability, and confidence. The student will use feedback to modify performance.
19. The student will incorporate and synthesize material and resources from both previous and concurrent courses (e.g. FA I, II, Basic Skills I, II, Neuroscience) to enhance understanding and application of course material.
20. The student will utilize lecture/lab environment, learning experiences, and feedback/interaction with instructors, teaching assistants, and peers to analyze and progress in their individual professional development plan.

Organization of teaching lab: Students are placed in two (2) labs consisting of 24 or 26 students with a ratio of three instructors/TAs. This ratio of 1:9 provides demonstration, practice, observation, and feedback for the development of confidence and competence in skills. It also provides opportunity for student-teacher discussion and reflection. Authentic cases will augment practice.

Teaching methods: Demonstration, explanation, authentic cases, practice, and modification.

Materials required:

- **Palpation skills**, knowledge of muscle origin/insertion, nerve supply
- Triangular reflex hammer (provided in class)
- Goniometer (large)
- Tape measure (provided in class but good idea to purchase your own for clinic)
- Clipboard (for practicals, clinic visits, and taking notes in lab)
- Bathing suit top or sports bra for women when doing upper quarter, loose fitting shorts for all
- Name tag first 3-4 weeks

RESOURCES

Instructor and teaching assistants

Required Textbooks

Please use syllabus as a Guide to materials to read

- Daniels & Worthingham; 7th or 8th Edition (muscle testing)
- Norkin and White: Goniometry 3rd or 4th Edition
- Kisner and Colby 5th Edition/6th Edition
- Kettenback: Writing SOAP notes 3rd or 4th Edition
- Articles available online
- Course Web Page: Sakai
- Dutton (from Functional Anatomy I/II) 2nd or 3rd Edition

Reference textbooks and materials (used in previous coursework):

- Trail Guide; **palpation skills from Functional Anatomy I**
- Guide to Physical Therapy Practice, APTA, newest edition (accessible online)
- Notes for Professional Issues I

Class preparation/Attendance/Instructor expectations:

- Attendance is mandatory.
- All reading assignments will be reviewed prior to lecture/lab, since reference to this information will be made during class time, and will not always be repeated in detail.
- Students prepared with standardized positions, landmarks, norms, etc. for goniometry (see Sakai).
- Students are **proactive** asking questions to clarify assignments.
- Students come to lab properly attired (e.g. no need to run back to restroom to change after class has started) and prepared with all materials/equipment.
- Lab assignments have been reviewed prior to lab. Lab time is an opportunity to perfect your skills, and get feedback from faculty

- Students utilize feedback to progress with professional abilities.
- Students complete assignments SOAP note text on time. (see grading above)
- Emails to faculty and teaching assistants are appropriately titled for ease of response.
- NO emails will be sent or answered Friday 6 pm to Monday 8 am.
- ***While laptops, smart phones, and cell phones may be brought to class, they should not be visible or in use during actual class time. Students who use a cell phone or other electronics during class time will be give a **Professionalism warning** and this will be placed in their file. Please refer student handbook for possible consequences.
<http://pt.phhp.ufl.edu/pdf/StudentHandbook.pdf>;

Policy Related to Make-up Exams

In extraordinary circumstances it may be possible to take an exam early or late. If for any reason you are unable to attend an exam at the last minute, you must notify the instructor as soon as possible. Personal issues with respect to exams will be handled on an individual basis.

Grading: The teaching and grading format emphasizes the epistemology (beliefs about what and how you know e.g. knowledge is complex, constructed and interpreted in individual context vs. knowledge is simple) of this course. The focus of this course is to develop accuracy, reliability & confidence. Students must have **multiple opportunities** to practice the skills and receive feedback. Assignments with both group and individual accountability allow the student to work individually and as a team, both elements of current clinical practice. Three written exams allow the student to demonstrate mastery in a timed situation without access to multiple resources, similar to the clinical situation. Competencies ensure material is mastered.

GRADING: (see course grades in Student Handbook)

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| Exam 1(written) | 15% (30 points) |
| Exam 2(written): | 25% (50 points) |
| Quiz hand | 5% (10 points) |
| Exam 3 (written): | 25% (50 points) |
| <u>Assignments (inclusive of 3 cases)</u> | <u>30% (60 points)</u> |
| Subjective assignment | 3% |
| Competency 1 write up | 3% |
| Competency 2 write up | 3% |
| Competency 3 write up | 3% |
| Case 1 (group work) | 5% |
| Case 2 (individual work) | 6% |
| Case 3 (individual work) | 7% |
| Kettenbach book assignments | Required for pass, loss of 1% for each day late OR max 5% incomplete |
| DVD Reflections | Required |
| Total | 100% or (200 points) |

Competencies (3 total): Pass/Fail 90% competency and **100% safety** required (please see rules for failure of practicals in Student Handbook) <http://pt.phhp.ufl.edu/pdf/StudentHandbook.pdf>.

Any assignments missing Student Honesty Statement, Signature, or late will result in reduced grade.

Grading Scale:

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| 93-100 = A | 4.00 grade point |
| 90-92 = A- | 3.67 grade point |
| 87-89 = B+ | 3.33 grade point |
| 83-86 = B | 3.00 grade point |
| 80-82 = B- | 2.67 grade point |
| 79-70 = C | 2.00 grade point |
| 69-60 = D | 1.00 grade point |
| Below 60 = E | 0 grade point |

Test Scores will be posted within one week of the exam. Every effort will be made to return exams in a timely manner for your review. Your patience is appreciated. Students receiving a grade of "C" (less than "80") or less will be *required* to meet with the instructor. A time will be scheduled for all class members to review the exam with the answer key. After exams have been returned, grades will not be changed once a week has elapsed. Students wishing to discuss exam questions should schedule *individual* appointments. Students are responsible for checking with the instructor to ensure that the grade is recorded properly if the grade has been changed.

Dress Code: Students are allowed to wear lab attire to both lecture and lab. See Student Handbook. Nails should be short so that nails are not visible from the palmar side of the hand. **Name tags**-students required to wear name tags for the first **3-4 weeks**.

Professional Behavior: Effective professional behavior is critical for a successful transition from the classroom to the clinical setting. The faculty recognizes the importance of these behaviors and has incorporated the development as well as evaluation of these behaviors into each academic course. In order to demonstrate safe and effective professional behavior prior to clinical visits that occur in the third semester of the curriculum, all students must demonstrate progression in their professional development across semester classes. Students will formally self-evaluate their professionalism at midterm and end of second semester. Additional feedback will be provided by peers, instructors, and teaching assistants. Additionally, students must demonstrate 100% safety on all practical exams throughout the curriculum. Should a student fail a practical exam, due to safety or additional reasons, they will have only one opportunity to repeat the exam. See student handbook. <http://pt.php.ufl.edu/pdf/StudentHandbook.pdf>.

Academic Honesty:

In this professional program we are particularly sensitive to students submitting independent work and to using complete and accurate referencing in complying with the University of Florida Rules - 6CI-4.017 Student Affairs: Academic Honesty Guidelines. Further details regarding the University of Florida honesty policy is available at: www.aa.ufl.edu/aa/Rules/4017.htm

All students are required to abide by the Academic Honesty Guidelines, the following pledge has been accepted by the University and is expected of all students:

“I understand that the University of Florida expects its students to be honest in all of their academic work. I agree to adhere to this commitment to academic honesty and understand that my failure to comply with this commitment may result in disciplinary action, up to and including expulsion from the University.”

We, the members of the University of Florida community, pledge to hold ourselves and our peers to the highest standards of honesty and integrity. On all work submitted for credit by UF students, the following pledge is either required or implied:

"On my honor, I have neither given nor received unauthorized aid in doing this assignment."

Accommodations for students with disabilities: Students requesting classroom accommodations must first register with the Dean of Students Office. The Dean of Students Office will provide documentation to the student who must then provide this documentation to the Instructor when requesting accommodation.

Counseling and Student Health

Students may occasionally have personal issues that arise in the course of pursuing higher education or that may interfere with their academic performance. If you find yourself facing problems affecting your coursework, you are encouraged to talk with an instructor and to seek confidential assistance at the University of Florida Counseling Center, 352-392-1575, or Student Mental Health Services, 352-392-1171. Visit their web sites for more information:

<http://www.counsel.ufl.edu/> or

<http://www.health.ufl.edu/shcc/smhs/index.htm#urgent>

The Student Health Care Center at Shands is a satellite clinic of the main Student Health Care Center located on Fletcher Drive on campus. Student Health at Shands offers a variety of clinical services, including primary care, women's health care, immunizations, mental health care, and pharmacy services. The clinic is located on the second floor of the Dental Tower in the Health Science Center. For more information, contact the clinic at 392-0627 or check out the web site at:

www.health.ufl.edu/shcc

Crisis intervention is always available 24/7 from: Alachua County Crisis Center: (352) 264-6789.

BUT

– Do not wait until you reach a crisis to come in and talk with us. We have helped many students through stressful situations impacting their academic performance. You are not alone - do not be afraid to ask for assistance.

| <p style="text-align: center;"><i>PHT 6189C Spring 2014</i> <i>Examination, Evaluation, and Basic Intervention of the Physical Therapy Patient</i> <i>Gloria Miller, PT, PhD</i></p> | | |
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| <i>Week/Date</i> | <i>Topic – lecture/lab</i> | <i>Readings (to be done before class meets)</i> <i>Assignments due the week they are posted</i> <i>Individual MMT chapters(except intro) are for review and can be referenced AFTER class.</i> |
| Week 1 Jan 6/8 W(EE): A→B F(NSc): B →A | Intro, ICF, HOAC & Interview, Guide Examination, Evaluation, and Intervention Process Pt. Client Management Model vs. SOAP (HO) Posture, observation, anthropometric, documentation Accuracy, reliability, validity. | Guide to PT Practice Ch. 1, 2, 3 (review) ICF Model K&C Ch. 1 see pertinent pages Kettenbach Ch 1-4 (review) Edition 3 or Edition 4 K&C Postural Assessment pp 383-385 (Ed 6 414-415) Lab handouts circumferential measurements Assignment due Monday Jan 14: interview video, review subjective and history form, be prepared to use this week in lab. See instructions Sakai. See readings for week 2. |
| Week 2 Jan 13/15 W(EE): B→A F(NSc): all | The Interview/Subjective Exam Interviews continue Tests and Measures Posture assessment (hypotheses) | Assignment interview due. Monday Jan 13 Do readings BEFORE video. Dutton Ch. 8: Read 188-202 Edition 3: 151-166 Kettenbach Ch. 5, 6, 8, 9 text only 11 pp.(no worksheets) worksheets due week 3 (see below) Communication notes from Prof Issues I |
| Week 3 Jan 20/22 F(NSc): A→B F(EE): B→A | MLK Monday Jan 20 HOLIDAY- no class PROFESSIONAL DVLPMPT PLAN!! Revisit your plan and goals. Determine which class(es) will help you to develop skills identified in December plan. POST on Sakai | Kettenbach (abbrev) Ch. 4 worksheets Ed 3: pg. 27-30 Ed 4: 23-26 Kettenbach worksheets Ed 3: pg. 35-39, 51-53, 81-86 Kettenbach worksheets Ed 4: 31-35, 47-49,79-84. Kettenbach 7, 10 (text only) (11 pp) |
| Week 4 Jan 27/29 W(EE): B→A F(NSc): A→B | Monday Competency I – write up due W Includes interview,anthropometric,palpation Wed: Principles of Goniometry ROM & Length testing Shoulder/Scapula | Assignment: Goniometry/length testing table due Wed 1/30 See Guidelines (table) for assignments for Goniometry (Sakai) includes: standardized position, stabilization, end feel, fulcrum, proximal arm, distal arm, normal range Dutton Ch. 8: 202-208 (up to joint integrity) Ed 3:166-176 N&W Ch 1, 2, 3 (39-42), 4 (57-86) Procedures: Shoulder flexion, ab, ext, IR, ER, end feed, normal range 82, functional range 85-86, capsular pattern Kettenbach worksheets Ed 3: 63-66, 99-104 Kettenbach worksheets Ed 4: 59-62, 97-103. Case 1 (Dominic) distributed, due Feb 20 |
| Week 5 Feb 3/5 W(EE): A→B F(NSc): B →A | Exam I Wednesday NOTE: 10:40-12:00 Labs MW MMT/Strength testing Goniometry/Length/Strength cont'd Making a PT diagnosis, prognosis, anticipated outcomes Scap/shoulder cont'd | Dutton Ch. 8 :215-222 (Muscle Performance –up to reflex integrity) Edition 3: 176-180 (up to special tests) D&W Intro and Ch. 1 D&W 62-85 MMT procedures scapula.(review after class) Dutton Ch. 8 Scan 223-235, Read 235 -247 (most should be a review from Evidence I. Edition 3 180-188 ICF handout from new Kettenbach Ch. 22 (Ed 3: see Sakai for handout: Documentation using ICF) Kettenbach Ed 3 Ch.11-14 (text only) 16 pp. Kettenbach Ed 4: Ch. 11-15 text only D&W 85-113 MMT shoulder (review after class) |

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| <p>Week 6 Feb 10/12 W(EE): B→A F(NSc): A→B</p> | <p>Case 1 (Dominic) Due Wednesday Feb 19 Interventions and early Motor Learning /Pt. Education/Compliance Stretch/Strengthen Shoulder cont'd</p> | <p>Complete Cervical goniometry grid before lab Mon 2/18 K&C Intervention 20—33 Ed 6: starts 23-36 Kettenbach Ed 3 Ch. 15 text only Kettenbach Ed 4 Ch. 16 only K&C Ch. 4 pp. 77-96 (Ed 6 85-100) K&C Ch. 6 pp. 159-161 (alignment/intensity), 180-183 (include substitute motions), 186-190 (manual resistance for scapula/shoulder) K&C Ed 6:170-171, 192-195,198-203 K&C Exercise for Shldr Girdle Briefly scan these pages, look for similarities between MMT positions and exercise p. 529-547 (after class) Kettenbach worksheets Ed 3: 119-121, 139-142,153-155 Kettenbach worksheets Ed 4: 125-126, 143-145, 157-160 Case 2 distributed, due Mar 18</p> |
| <p>Week 7 Feb 17/19 W(EE): A→B F(NSc): B →A</p> | <p>Case 1 Dominic due this week! Interventions/Education cont'd Cervical</p> | <p>N&W Ch 11 Procedures 319-345 (no tape measure, no CROM); Norms 346, Functional ROM 352-353 D&W MMT procedures 14-34 (review after class) Ed 5: K&C 444-447, 451-454, 466-467. Ed 6: K&C 490-493, 508-511, 521-523 Kettenbach worksheets Ed 3 165-168 (both sets) Kettenback worksheets Ed 4 171-174</p> |
| <p>Week 8 Feb 24/26 W(EE): B→A F(NSc): A→B</p> | <p>Exam II Wednesday NOTE: 10:40-12:00 Lab: Elbow, wrist.</p> | <p>Complete elbow/wrist goniometry grid before class Mon 2/25 SOAP book – all assigned worksheets complete and turned in at start of exam 1% of total grade loss for each day late. Incomplete loss of up to 5%. N&W Ch 5. 91-106, norms 106,functional ROM 108-110 N&W Ch. 6 115-133, and 134-9 (normal and functional ranges) D&W 114-140 elbow/wrist MMT (review after class) K&C 97-98, 578-584, 634-636 (focus wrist) K&C Ed 6: 106-107, 640-648,701-705</p> |
| <p>Week 9 Mar 3/5</p> | <p>Spring Break</p> | |
| <p>Week 10 Mar 10/12 W(EE): A→B F(NSc): B→A Neuro Symposium March 15 mandatory</p> | <p>Elbow/wrist/hand Case 2 (Anna) due Wed Monday March 17 Complete hand. Hand assignment Quiz hand Wed. Competency II Tuesday (12:00-2:45) and Wed. 1:00-7:00</p> | <p>N&W Ch. 7 finger ROM see select procedures D&W 141-176 (review after class) K&C Ch. 4 635-638 focus hand K&C Ed 6 701-703</p> |
| <p>Week 11 Mar 17/19 W(EE): B→A F(NSc): A→B</p> | <p>Neuro exam/Upper Quarter and Lower Quarter Reflexes, sensory</p> | <p>Complete thoraco/lumbar goniometry grid for Mar 18 Dutton Ch 8 223-228, selections from Ch.2 Handout posted WebCT Neuroscience notes as reference Case 3 (Matt) due April 8</p> |
| <p>Week 12 Mar 24/26 W(EE): A→B F(NSc): B→A</p> | <p>OP exam eval selection of T&M Posture, thoraco-lumbar Thoraco-lumbar</p> | <p>Complete hip goniometry grid for 4/1 N &W Ch. 12 365-392 (no tape measure) 393 norms, 397-8 functional range. D&W 36-60 trunk MMT diaphragm (review after class) K&C 447-450, 454-456, 467-472 K&C Ed 6: 497-500, 511-521,525-529.</p> |
| <p>Week 13</p> | <p>Acute exam/eval</p> | <p>Complete knee goniometry grid for 4/8</p> |

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| March 31/Apr 2 W(EE): B→A F(NSc): A→B | Thoraco/lumbar cont'd Pelvis Hip | N&W Ch. 8 197-228, 229 norms, 234-5 functional ROM D&W 180-215 (review after class) K&C 99-102, 672-683 K&C Ed 6: 108-110, 746-756 |
| Week 14 April 7/9 M(EE): A→B F(NSc): B→A | Case 3 Matt due April 9 Rehab exam/eval, Pelvis-hip- Knee | Complete ankle grid for 4/15 N&W Ch. 9 241-253, 254 norms, 256-8 functional range D&W 215-226 K&C 102-103, 743-751 K&C Ed 6: 109-112, 828-838. |
| Week 15 Apr 14/16 M(EE): A→B F(NSc): all | Ankle Case 4 in class PROFESSIONAL DVLPMT PLAN DUE Revisit, revise, send via email to advisor, make appointment. MUST be complete before semester end for single day visits. | N&W Ch. 10 263-295, 300-303, 304 norms, 309-310 functional range D&W 226-252 K&C 103-104, 786-793 K&C Ed 6: 109-110, 883-889. |
| Week 16 Apr 21/13 | Competency III Monday and Wednesday | |
| April 28 | Exam III | |