

*DPT*

**Student Handbook**

**Arkansas State University**



Arkansas State University  
College of Nursing and Health Professions  
Jonesboro, Arkansas

Department of Physical Therapy

2015-2016

Approved: May 14, 2015

Arkansas State University  
Department of Physical Therapy  
Jonesboro, Arkansas

## Academic and Clinical Policies

Arkansas State University  
College of Nursing and Health Professions  
Department of Physical Therapy

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Department of Physical Therapy  
College of Nursing & Health Professions  
Arkansas State University

Dear DPT Student:

The faculty and staff of the Arkansas State University Department of Physical Therapy are privileged to be a part of your professional academic studies leading to a career as a physical therapist. Physical therapist education is an experience characterized by hard work and long hours. The acquisition of meaningful skills and important goals almost always require hard work and long hours. Even so, we expect that you will find your time here exciting, meaningful and intellectually rewarding. Your classmates will be lifelong friends as well as colleagues in your chosen profession, and in three short years, you will join the ranks of practicing physical therapists.

The members of this faculty have a passion for teaching. We intend to assist you in the development of your academic and clinical skills. We also believe in the interpersonal and professional benefits of a cohort experience. The faculty is here to support your enjoyment of the experience and help socialize you into the profession. It is both a personal and professional privilege to be by your side as you learn to be a physical therapist. We value all aspects of the faculty-student relationship and will do our part to honor it by providing you educational experiences that are up to date, state of the art and evidence based, and delivered in a professional, respectful and student centered environment.

To reach the shared goal of your success in the DPT program, there are a variety of policies and procedures to which we all must adhere to and respect. These are outlined in this handbook. There is much more to know and learn about the department than what is provided here, but this book serves the foundation for your effective participation in this department and program. It is your basic resource for descriptions of our expectations and plans for you.

Again, congratulations on your admission to the DPT program. Welcome to the A-State DPT Program! We all look forward to being a part of your professional education and training.

Sincerely,

The DPT Faculty of A-State

## INTRODUCTION

The purpose of the A-State DPT Student Handbook is to introduce students to the philosophy and objectives of the Department of Physical Therapy at A-State. This document contains policies and procedures for academic and clinical experiences designed to enhance student learning. These policies and procedures are congruent with and in some cases in addition to those contained in other University publications such as the A-State Student Handbook and the University Graduate Bulletin. Policies and procedures are subject to change at any time during your course of study. Students will be notified of any changes to policies and procedures. Students are accountable for acting according to these policies as well as the published University policies. Deviation from these and other published policies may be considered grounds for dismissal from the program.

## CAPTE ACCREDITATION

The Doctor of Physical Therapy Program at Arkansas State University is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: [accreditation@apta.org](mailto:accreditation@apta.org); website: [www.capteonline.org](http://www.capteonline.org).

## MISSION STATEMENTS

### *Arkansas State University*

Arkansas State University *educates* leaders, *enhances* intellectual growth, and *enriches* lives.  
(A-State =  $e^3$ )

### *College of Nursing and Health Professions*

The mission of the College of Nursing and Health Professions is to provide quality education to students, graduate, and health care providers in a variety of health disciplines. Recognizing its unique position in the lower Mississippi Delta region, the College provides educational programs that are designed to promote lifelong learning based on the expressed needs of its varied constituencies. The College assesses the attainment of this mission in terms of the contributions its graduates make to health care in the Delta region and beyond.

### *Department of Physical Therapy*

#### **Mission Statement**

The mission of the Department of Physical Therapy at Arkansas State University is to *educate* physical therapy professionals to practice in a manner that is best described as “state of the art” for the profession, to *enhance* the intellectual growth of our students, faculty and alumni, and to *enrich* the lives of all individuals and communities in the Mississippi Delta region who encounter A-State DPT faculty, staff, students and alumni.

#### **Vision Statement**

The vision of the Department of Physical Therapy at Arkansas State University is to instill the essential foundation required to promote a passion for the profession within students, faculty and alumni to educate, enhance and enrich our communities.

#### **Philosophical Statement**

Our perspective of physical therapy is the learning and application of clinical principles as based on our understanding of evidence uncovered in the problem solving process.

#### **Value Statement**

As a physical therapy program, we value excellence, service, compassion, integrity, professionalism, accountability and mutual respect. We are committed to these values as we *educate* physical therapy professionals, *enhance* intellectual growth and *enrich* the lives of all individuals and communities who encounter A-State DPT faculty, staff, students and alumni.

**PT Department Unifying Theme: “Passion for the Profession”**



## **GOALS OF THE DPT PROGRAM**

1. Prepare competent physical therapy graduates who are ready to professionally practice in the Mississippi Delta Region and beyond.
2. Prepare physical therapy graduates who are ready to utilize the patient / client management model to produce effective clinical outcomes.
3. Prepare physical therapy graduates to pursue lifelong learning and service to the profession of physical therapy (including advocacy for social, governmental, and regulatory policies).
4. Expose and involve physical therapy students in the development of research and evidence-based practice.
5. Promote continued program quality that includes student and alumni satisfaction.
6. Attract and retain quality faculty who hold appropriate academic credentials, are facilitated to progress through the promotion and tenure process, and consistently contribute to the body of knowledge associated with the profession.

## **PROGRAM LEVEL STUDENT LEARNING OUTCOMES**

- 1.0 Upon graduation from the physical therapy program, our graduates will demonstrate professionalism as it relates to the practice of physical therapy.
- 2.0 Upon graduation from the physical therapy program, our graduates will demonstrate effective clinical reasoning, judgment and reflective practice.
- 3.0 Upon graduation from the physical therapy program, our graduates will use the patient / client management model to effectively interact with persons that have movement dysfunction to optimize outcome across the lifespan.
- 4.0 Upon graduation from the physical therapy program, our graduates will demonstrate the ability to manage the delivery of contemporary / professional practice.

## FINANCIAL INFORMATION

### *Tuition*

This information is designed to assist you in planning for your financial needs while obtaining physical therapy education. Because our program requires full time attendance, it may be difficult to find time for employment while you are in school. Students should have plans for adequate finances prior to entering the program. The information is subject to change and is meant to give you a general idea of the overall program costs. Tuition and fees can be estimated by going to <http://www2.astate.edu/toolkit/tuition/> or by visiting the PT website (<http://www.astate.edu/conhp/pt/>).

### *Differential Tuition*

Each student admitted into a graduate program in the College of Nursing and Health Professions pays an **ADDITIONAL 20% DIFFERENTIAL TUITION** to cover the expenses of health professions education not covered by A-State graduate school tuition.

### *Other Educational Expenses*

The following is a list of estimated expenses associated with the program. Actual cost may vary.

1. BOOKS: The cost of books is estimated at \$2,500 annually.
2. UNIFORMS, NAME TAGS: Two name tags are purchased for approximately \$10 each. Students may choose to purchase their own lab coats (\$45) and goggles (\$25) for gross anatomy. Clinical sites may require uniforms and cost will vary.
3. LOCKER: Lockers are provided free of charge to students on a first come, first served basis. Students must supply their own lock. The cost for lock removal is \$25 (if keys are lost or combination forgotten).
4. PROFESSIONAL LIABILITY INSURANCE: Malpractice insurance is required for clinical educational experiences. The cost is approximately \$50 per year.
5. ORGANIZATIONAL MEMBERSHIPS. American Physical Therapy Association membership is strongly encouraged at an approximate cost of \$80 per year. Additionally, students are encouraged to participate in the A-State Physical Therapy Student Association (\$20/year).
6. HEALTH INSURANCE: The University offers each student the opportunity to purchase an accident and hospitalization insurance policy as part of a group consisting of A-State students and students enrolled in other universities across the state. Membership in the group is voluntary. Application forms are available through the website located at

<http://www.astate.edu/a/student-health-center/index.dot>. Health insurance is required during clinical educational experiences.

7. PHYSICAL EXAMINATION AND IMMUNIZATIONS: Clinical education agreements require specific immunizations and an annual physical examination. Costs for these procedures vary and are available through the A-State Student Health Center. Price information is available at <http://www.astate.edu/a/student-health-center/index.dot>. TB mask fitting has been \$15. Immunizations may also be obtained through the Craighead County Health Department.
8. CPR CERTIFICATION: The cost varies depending on the location and sponsor (American Heart Association or Red Cross) of CPR courses. The usual expense is approximately \$35 per year. The CPR certification must be for Healthcare Provider status.

BACKGROUND CHECKS / DRUG SCREEN: The costs for background/drug screen checks are variable. Additional information is located on the A-State physical therapy website at <http://www.astate.edu/college/conhp/departments/physical-therapy/student-resources/>.

9. CLINICAL EDUCATION: You are responsible for living expenses, transportation, and tuition while on all clinical education experiences. The fee for the clinical education assessment tool varies. Additional information will be provided by your Director of Clinical Education.
10. PT Clinical Equipment/Kits: Students will either purchase the kit provided by APTA and/ or purchase individual items at the students' discretion. The costs vary. Required equipment includes goniometer, pulse oximeter, stethoscope, lab coat or scrubs for gross anatomy, short white lab coat for clinic (with pockets and loose or roll up sleeves), reflex hammer; additional recommended equipment includes penlight, bandage scissors, tuning fork, blood pressure cuff, CPR mask, gait belt and tape measure.
11. OTHER EXPENSES: Other costs associated with the program may include but, are not limited to: composite class photograph (\$75), A-State DPT polo shirt (\$35), graduation fees (\$85), PEAT comprehensive examination (\$95), PTSA Membership (\$10), and PTSA Banquet (\$25).

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## **ADVISING**

All students admitted to the Doctor of Physical Therapy are assigned an individual PT faculty advisor. Students in the College of Nursing and Health Professions are subject to mandatory advising. In order to register for classes, the student must meet with his/her advisor unless directed to do otherwise.

Students are to schedule appointments with advisors or classroom instructors for answers to their questions rather than obtaining advice from other students. Experience has proven that student generated advice, although given with the best of intentions, is often in error. PT faculty post office hours on their doors during which times they are available for drop in advising; however, pre-arranged appointments are encouraged to ensure adequate time and preparation to respond to student questions/needs.

### ***Access to Department Chair/Communication Chain***

Any student may make an appointment with the Department Chair at any time to discuss any issue; however, students are encouraged to address problematic issues first with their advisor or appropriate course instructor and/or student colleague before scheduling a meeting with the chair. Meetings with the chair are most appropriate when satisfaction is not reached through other means. Meetings with the chair for purposes other than problem resolution are encouraged at any time!

The Chair schedules routine meetings with class representatives, each class and the entire department; however, additional meetings may be called as needed on the recommendation of faculty, staff and/or students.

### ***Faculty Office Hours***

Physical Therapy faculty will have office hours listed on their course syllabi and posted by faculty office doors

### ***Schedule Changes***

When it is necessary to change the schedule, the student will be given as much notice as possible. When schedule changes occur, it is expected the student will comply with the changes and handle the situation with appropriate professional demeanor. Students should not schedule non-academic activities Monday through Friday 8:00-5:00.

## **PROFESSIONAL BEHAVIOR EXPECTATIONS**

The Professional Behaviors for the 21<sup>st</sup> Century are the fundamental behavioral expectations of all students and faculty in the A-State DPT Department. In addition, the A-State College of Nursing and Health Professions Honor Code ([Appendix M](#)) outlines specific expectations of academic honesty and the American Physical Therapy Association (APTA) Code of Ethics outlines ethical practice standards for physical therapy practitioners.

### ***PT Specific Professional Behaviors for the 21<sup>st</sup> Century***

The Professional Behaviors for the 21<sup>st</sup> Century (<http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf>) have been adopted by the Arkansas State University Department of Physical Therapy faculty as an essential component of the program and are considered necessary for successful fulfillment of the requirements of the program. The process of becoming an effective physical therapist involves attaining competency in cognitive knowledge, psychomotor skills and professional behavior. Each aspect of this triad is equally important for the student to develop as s/he progresses through professional physical therapy education. The ten physical therapy-specific professional behaviors define the professional behaviors expected of Arkansas State University Physical Therapy graduates. The ten professional behaviors include critical thinking, communication, problem solving, responsibility, professionalism, use of constructive feedback, effective use of time and resources, stress management, and commitment to learning.

Appropriate levels of behavior are expected in all courses and required for successful completion of each component of the curriculum. To facilitate the development of competency in the ten professional behaviors, the instructors will provide, when necessary, opportunities to practice, and provide formal and informal feedback to the student throughout the semester. The student will be responsible for ongoing self-assessment and for seeking feedback from faculty and fellow students as well as for responding to faculty recommendations for remedial action related to the PT specific professional behaviors in any given course.

### ***Academic Integrity***

The University policies relating to academic integrity, notably plagiarism and cheating are detailed in the A-State Student Handbook. Students must familiarize themselves with these policies since violation can result in dismissal from the program as well as expulsion from the University.

Students are also encouraged to be aware of and practice adhering to the College of Nursing and Health Professions Honor Code, APTA Core Values, APTA Standards of Professional Conduct, the Arkansas Physical Therapy Association Standards, and the PT Specific Professional Behaviors. Progression and retention in the Graduate Program in Physical Therapy is also dependent upon the adherence to these standards and abilities.

Additional ethical principles related to behavior in clinical settings are set forth in the clinical policies and procedures in this Handbook.

### ***Monitoring Professional Behavior***

It is the responsibility of all students and faculty to monitor their own professional behaviors as well as that of departmental colleagues. Students who observe unprofessional behavior or academic dishonesty on the part of student colleagues in the physical therapy program should do the following:

1. Notify the instructor or faculty member.
2. The instructor or faculty member will complete the Student Conference Record ([Appendix P](#)) if necessary.
3. The completed form will be submitted to the appropriate advisor or departmental chair. Every attempt will be made to ensure confidentiality.
4. Upon receipt of a completed form, the faculty member will schedule an interview with each respondent.
5. The faculty member will place the form in the student's program file. In evaluating the nature of an individual student's problem, the faculty member will evaluate the number of forms submitted on a student, the nature of the submitted reports.
6. The faculty member will inform the student of the reported problem and meet with the student. The student will have the right to refute the observations/assertions.
7. The faculty member will synthesize all relevant information and report to the Department Chair to solicit input regarding the appropriate steps for providing assistance to the involved student.
8. The faculty member will prepare a final report and define the steps to be taken to resolve the problem. A meeting will be held with the involved student to summarize the report and provide an opportunity for assistance. Both the student and faculty member will sign the report. The report will be placed in the students' file. If the student does not agree with the report or the remedial step he/she may begin filing formal grievances as set forth by the University Handbook.
9. Student may also be referred to services on or off campus such as counseling, medical care, and or academic assistance among others if determined appropriate by the faculty.
10. The Academic Advisor will monitor progress and provide the Department Chair and core faculty with relevant information regarding the student's progress.

## **ACADEMIC STANDARDS**

### ***Progression***

In addition to academic standards outlined by the A-State Graduate School, the Department of Physical Therapy has specific academic policies and procedures. To progress in the professional curriculum, students must:

1. maintain a 3.0 cumulative GPA in all physical therapy program courses,
2. receive grades of C or better in all professional courses,
3. maintain academic integrity and professional behavior in classroom, laboratory, any clinical sites visited, and in the community,
4. maintain the standards of affiliating clinical facilities, and
5. exhibit affective behaviors consistent with the Professional Behaviors for the 21<sup>st</sup> Century and APTA Core Values.

### ***Unsatisfactory Performance***

Physical Therapy is a clinical profession. It is vital to public safety that department faculty are assured that students progressing to their clinical experiences, and those entering the profession, have the skills necessary to practice in a safe, legal and ethical matter consistent with contemporary practice. For this reason, the faculty of the DPT Program has established formal academic standards of performance beyond those of the A-State Graduate School (See [Remediation](#)).

### ***Probation***

A graduate student on probation may not hold an assistantship and is not eligible for graduation. Students may also be placed on probation for non-compliance with the PT Department professional and behavioral expectations (See Professional Behaviors, APTA Code of Ethics, and College of Nursing and Health Professions Honor Code).

### ***Withdrawal***

Students may choose to withdraw from the program to avoid a failing grade. Students must withdraw from the program by the published university deadline. For more information, students should refer to the A-State Graduate Bulletin. Students may reapply to the program and be considered on a competitive basis.

Students who withdraw from the program for extenuating circumstances (e.g., death of a spouse/child, pregnancy, medical conditions) and are currently in good academic standing may submit a request to the faculty advisor and department chair to be placed in the next student cohort. Withdrawing from the program for extenuating circumstances cannot be used as a means to avoid failure. The option to be placed in the next cohort will only be available to students who leave the program for reasons other than academic and are in good academic standing in the DPT program at the time of the request. No promise of placement in the next cohort is guaranteed.

### ***Dismissal***

A student may be dismissed from the Doctor of Physical Therapy Program if in the judgment of the core Program Faculty any of the following conditions exist:

1. failure to comply with academic standards.
2. failure to exhibit behaviors outlined in the following: College of Nursing and Health Professions Honor Code, APTA Code of Ethics, APTA Core Values and the Professional Behaviors for the 21<sup>st</sup> Century.
3. clinical performance that jeopardizes safety of patients.
4. physical or emotional condition that affects one's clinical or academic performance.
5. failure to conform to the legal standards of the physical therapy profession as stated in the Arkansas Practice Act available at [http://www.arptb.org/rules\\_regs/index.html](http://www.arptb.org/rules_regs/index.html).
6. excessive absences (See attendance policy) or tardiness.

### ***Readmission***

Readmission procedures to the graduate school are fully explained in the University Graduate Bulletin. Readmission to the Doctor of Physical Therapy Program is dependent on the reason for the withdrawal or dismissal. Readmission may be on a competitive basis with all other applicants at the time of readmission. Any student seeking readmission must have the written support of the Program Chair who will provide (or choose not to provide) such support after consultation with the Program faculty. Such support, should it be given, does not eliminate the competitive process mentioned above.

- A. In the event that a student withdraws from the Program to prevent failure in a course or multiple courses, the faculty advisor and Department Chair may suggest the re-applicant to complete remedial coursework prior to re-application.
- B. Student will complete application to the Doctor of Physical Therapy Program by the application deadline.
- C. Students seeking readmission, advanced standing or transfer credit for graduate physical therapy courses must be aware that physical therapy knowledge changes rapidly. Therefore, students may be required to meet additional requirements before or concurrent with progression in the Doctor of Physical Therapy Program.



## ***Remediation***

### Students not on probation

1. When a student has a class average below 75% OR fails an examination in any class, the student is responsible for scheduling an appointment with the course instructor. The course instructor will inform the Department Chair of the meeting ([Appendix P](#)- Student Conference Record).
2. The course instructor and the student will document a remediation plan. The remediation plan may include suggestions for improved preparation, referral to other members of the faculty for suggestions, or even referral to professionals on campus, who assist with academic problems. Ultimately, it is the student's responsibility to seek assistance to improve his/her academic performance to a satisfactory level (>75).

### Students on probation

1. When a student has a class average below 80% OR fails an examination in any class, the student is responsible for scheduling an appointment with the course instructor. The course instructor will inform the Department Chair of the meeting ([Appendix P](#)- Student Conference Record).
2. The course instructor and the student will document a remediation plan. The remediation plan may include suggestions for improved preparation, referral to other members of the faculty for suggestions, or even referral to professionals on campus, who assist with academic problems. Ultimately, it is the student's responsibility to seek assistance to improve his/her academic performance to a satisfactory level (>80).

## ***Grading Policies***

Grading policies are determined for each course by the responsible faculty member in accordance with University and program standards. Grades for all courses will be according to the following scale:

|   |             |
|---|-------------|
| A | 100-90      |
| B | 89-80       |
| C | 79-75       |
| F | 74.99-Below |

Students must read each course syllabus carefully to ensure understanding of course requirements.

## ***Incompletes***

An "I" grade will prevent a student from progressing to the next semester or term unless alternative arrangements are approved by the program. This policy supersedes the general University policy for incomplete grades.

### ***Grade Reporting***

Grades are not given out over the phone, by e-mail, or by the clerical staff. University policies for issuing course grades will be followed unless otherwise specified by the professor in the class syllabus.

Respective course syllabi identify the exact grading requirement for the given course. The individual instructor determines the grading policy for each course, adhering to overall departmental standards.

### ***Examinations***

All examinations will remain within the control of the instructor during development, administration, scoring, and use during the term in which the exam is given.

### ***Missing an Examination***

All examinations are to be taken as scheduled. The student must notify the course faculty member before the examination is to be given. If prior arrangements are not made, the student may forfeit the right to earn a grade for that examination. The faculty member is not obligated to provide late or make-up examinations for unexcused absences; however, individual judgment by faculty members will prevail.

### ***Appeal of Grades, Other Decisions or Requests for Exceptions***

If a student feels that he or she has been treated unfairly in the matter of grades, or any other decision that affects the student's academic rights as described in the A-State Student Handbook, he or she may invoke the Student Academic Grievance Procedure outlined in that publication. This same procedure may be used to request waivers or variance from published University or program policies, rules and regulations.

In all cases, students should first discuss their concerns with the faculty member involved. If the matter is not resolved at that level students should request a meeting with the Department Chair followed by the Dean of the College until the matter is resolved or another avenue of appeal is identified.

### ***Assignments***

Each faculty member establishes assignments and the deadlines for their completion. Deadlines may be contained in a course syllabus or communicated orally in class when appropriate. The faculty may alter deadlines when conditions warrant such a change. Students are expected to comply with deadlines unless unusual circumstances occur such as an emergency or illness severe enough to temporarily disable a student. In these cases students should make every effort to notify the faculty member involved. Most faculty will assess a penalty for assignments,

papers, projects, etc. that are submitted after the stated deadline. If this is the case the penalty will be stated in the course syllabus or communicated in class. If a crisis arises in a student's life such as the above-stated emergency or illness, a faculty member may be willing to allow a grace period. Most faculty members will not agree to provide this grace period after a deadline has already passed.

**Students are urged to make photocopies or electronic copies of all written assignments completed to provide a backup mechanism for a "lost paper" contingency.**

Students are expected to participate in all assignments stipulated in course syllabi. Exceptions may be made under unusual circumstances if the faculty involved agrees that an exception should be made. An example of an exception of this type would be not requiring a student to submit to a certain laboratory class procedure if the student has a condition which contraindicates the particular procedure. Such conditions could include open or healing lesions, other types of temporary injuries, pregnancy, etc.

### ***Basic Disaster Life Support***

Students are expected to complete the Basic Disaster Life Support course prior to graduation. This course is offered through Blackboard and is taken during the second year of the DPT program. Failure to complete this online course will preclude a student from graduating.

### ***Health Literacy***

Students are expected to complete Health Literacy course requirements for all CNHP graduates. This course is offered through Blackboard and is taken during the second year of the DPT program in PT 7612 Methods of Instruction and Consultation . Failure to complete this online course will preclude a student from graduating.

### ***Graduation***

Complete graduation requirements and the procedure to be followed are fully explained in the A-State Graduate Bulletin. The student is ultimately responsible to assure all forms have been completed, all fees for graduation have been paid, and all policies have been met regarding graduation. The faculty will assist the student in the process.

### ***National Physical Therapy Board Exam (NPTBE)***

After graduation, students seeking licensure must take the Federation of State Boards of Physical Therapy (FSBPT) national board exam. Students will only be allowed to sit for the licensure examination after the cohort graduates. Students should refer to the FSBPT website (<http://www.fsbpt.org>) for specific exam procedures.

### *Alumni Activities*

Alumni provide valuable information to the Department of Physical Therapy about the effectiveness of our program. Graduates should provide the program with current address and current employment status immediately after graduation and as changes occur. Graduates of the program are strongly encouraged to complete and return to the University any follow-up surveys or questionnaires sent to alumni to support the continued improvement our Doctor of Physical Therapy Program.

### *Student Services*

Assistance is available to all A-State students. Specific information can be located in the A-State Student Handbook and online at <http://www.astate.edu/a/disability/>. It is the student's responsibility to register with A-State's office of disability services. Any specific disabilities concerns should be directed to:

A-State Disability Services  
Student Union, Room 2181  
State University, AR 72467-0360  
(870) 972-3964  
(870) 972-3965 TDD

Reasonable accommodations will be made for students that register with disability services.

### Financial Aid

Information regarding financial aid may be obtained from the financial aid office (<http://www.astate.edu/finaid/>). One of the major sources of financial assistance for students in the physical therapy program is working as a graduate assistantship.

### Graduate Assistantships

Graduate assistantships (GA) will be awarded to students who demonstrate the academic performance and other capabilities to fulfill the duties of the position. GA's are compensated for 20 hours of work each week. Each graduate student will be assigned to core faculty members as designated by the Department Chair. This core faculty member will oversee the GA duties. GA's shall only treat patients with supervision of a licensed PT. Failure to perform GA duties may result in dismissal from their position. The department will work with the Graduate School to determine the number of assistantships available for each semester.

### Student Health Center

A-State's Student Health Center (SHC) and pharmacy is available to all A-State students. Students can be treated for illnesses, injuries, immunizations and general physical exams. For more information refer to <http://www.astate.edu/a/student-health-center/index.dot>.

### Counseling

The University Student Counseling Center (<http://www.astate.edu/student-affairs/counseling/>) provides confidential counseling services and crises intervention to the student who may be experiencing psychological, behavior, and learning difficulties.

### Advising Center

The Wilson Center for Academic Advising and Learning Assistance (<http://www.astate.edu/college/university-college/advising-center/>) provides writing laboratory and study skills assistance for students. Advisors are committed to helping students explore a variety of study techniques to help improve their academic outcomes. Additionally, Student Support Services (<http://www.astate.edu/college/university-college/student-support-services/index.dot>) are available for eligible A-State students. Services include peer and professional tutoring, advising and counseling services, mentoring, career planning and cultural activities.

## **EXPECTED STUDENT BEHAVIOR**

### *Class Attendance*

Students are expected to attend all scheduled classes and will be excused only for those instances cited previously (see Assignments): **“unusual circumstances occur such as an emergency or illness severe enough to temporarily disable a student.”** Specific requirements are stated in individual course syllabi. In addition, absences caused by illness or emergency, even though excused, may have a negative effect on a student's grade. Excessive absences, even though excused, may make it impossible for a student to progress further in the program. Such cases will be dealt with by the Department Chair.

Procedures for notifying faculty of **Absence** or **Tardy**:

- 1) Students will notify the departmental secretary and faculty members affected prior to class if they expect to be absent or tardy.
- 2) It is expected that students will be able to provide documentation to substantiate absences or tardiness due to illnesses or emergencies.
- 3) Students have the right to petition faculty for an excused absence or tardy prior to or after the fact, however, if a student fails to notify the department of the absence or tardy prior to class, the event will remain unexcused unless faculty determine the lack of contact was justifiable and/or unavoidable.
- 4) It is the responsibility of the student to contact each faculty member about missed assignments and to follow up in a timely manner.
- 5) Students should not send a message about an absence or tardy via another classmate.

### ***Cell Phones and Electronic Devices***

Cell phones and other electronic devices (includes telephone accessories) may not be used for personal, non-course related purposes during class. If your phone rings during class, you will be asked to leave and not return. Family emergency calls can be routed through the departmental office. Using devices to cheat on tests and papers is a violation of the Honor Code. PDA/cell phones, computers, tablets and similar "smart" devices may be used as a student resource, essentially as a textbook or calculator, at the discretion of the faculty member.

Cell phones are not allowed in the clinical setting. Use of any Personal Digital Assistants (PDAs) to store/enter any type of patient information is a violation of the Healthcare Information Portability Accessibility Act of 1996 (HIPAA). PDA/cell phones may be used as a student resource, essentially as a textbook or calculator, at the discretion of the clinical faculty member.

Taking of photographs in the clinical settings is strictly prohibited.

Violation of any of these policies may lead to dismissal from the program. Students are expected to conduct themselves in a manner, which promotes a collegiate learning environment. Behaviors and attitudes, which disrupt the learning environment will not be tolerated.

***(adopted Fall 2010 CNHP Executive Council)***

### ***Social Media***

Social media can be a way to share life experiences and opinions with others. Use of social media presents risks and carries with it certain responsibilities.

Social media includes all means of communicating or posting information or content of any sort via the Internet or other electronic communication method. Social media includes your personal or someone else's personal web log/blog, journal, website, or chat room, and group interchanges such as Facebook, Twitter, or LinkedIn and social media anonymous sites. You are solely responsible for what you post online. Inappropriate postings specific to patients, classmates or faculty that include discriminatory remarks, harassment or threats, or violations of professional codes of conduct are subject to disciplinary action. Your actions could adversely affect your standing in your health professions program, which could include program dismissal.

You should be aware that future employers may view a potential candidate's website. Students are advised to review their site(s) for any unprofessional images or language, which could adversely affect successful employment upon graduation.

Please make responsible decision about your use of social media.

### ***Actions Associated with Breach of Appropriate Classroom Behaviors (Due Process)***

During the course of the tenure of the students' association with the professional program, in the event of an unexcused absence, unexcused tardy, breach of the CNHP cell/phone electronic

devices policy, or other breaches of acceptable professional behaviors, the following steps will be taken:

- 1st event, the student will meet with the instructor and a warning is given. A record of the warning is placed in the Student Academic File ([Appendix P](#)). The instructor will notify the Faculty Advisor of the incident.
- 2<sup>nd</sup> event, the student's case will be referred to the Academic advisor and Department Chair. The advisor and Department Chair will determine a remediation plan and/or other recommendations in consultation with the student, faculty advisor and other parties as determined to be appropriate.
- 3<sup>rd</sup> Event, student may be removed from the Program at the discretion of the Chair and the faculty.

### ***Informal or Minor Complaints***

From time to time complaints may arise that are not formal grievances. Formal grievances and the processes associated with filing grievances are covered in the [A-State Student Handbook](#). Informal complaints will be handled in a process that seeks to produce resolutions which are equitable for all involved, maintain the academic integrity of the program, and result in improved relations and operations relative to the program. Informal complaints will be filed in the Department Chair's office. For informal or minor complaints, the following process shall be used.

1. Student who has a complaint regarding another students:
  - a. Student should first attempt to settle the matter with the other student in a prompt and professional manner.
  - b. If satisfactory resolution of the issue cannot be achieved, the issue should be brought to the attention of the faculty advisor or another faculty member who will attempt to help resolve the issue.
  - c. If satisfactory resolution of the issue cannot be achieved, further intervention by the chain of command will be utilized to try to resolve the issue. If no resolution is possible, the student may need to utilize the formal grievance system.
2. Student has complaint regarding a faculty member:
  - a. The student should make an appointment to meet with the faculty member and discuss the matter in a courteous manner. The student is expected to have a prepared presentation of the issue in question.
  - b. The faculty member will hear the student complaint and consider its merit in an open-minded fashion.
  - c. The faculty member and student will seek to resolve the issue together.
    1. Should it become impossible for the faculty member and student to resolve the issue, an appointment will be made to discuss the matter with the Department Chair.

2. The Department Chair will attempt to mediate the problem. He/she will facilitate a resolution that follows the policies and procedures of the program, while protecting the rights and concerns of both parties.
  3. If the Department Chair's mediation efforts do not lead to resolution, the Dean of the College will be consulted by the Department Chair and become involved in the mediation.
  4. If no resolution is possible, the grievance system will be used.
3. Process of filing a complaint with CAPTE.
- a. Students that are unable to resolve a complaint using the departmental or college grievance process may file a complaint with CAPTE through their website ([www.capteonline.org](http://www.capteonline.org))

## **TECHNICAL ABILITIES AND SKILLS**

Upon admission, a student who discloses a properly certified disability will receive reasonable accommodations but must be able to perform the essential functions of the curriculum and meet the standards for the physical therapy. Students seeking disability may contact Disability Services (<http://www.astate.edu/a/disability/>). Technical standards for the A-State Physical Therapy students are as follows:

### **Motor Skills**

Candidates for admission to the Department of Physical Therapy must have sufficient motor function to elicit information from patients by palpation, auscultation, percussion, and other evaluation procedures. Candidates must be able to execute motor movements reasonably required to provide general physical therapy, including the physical strength to stand and ambulate with a walker, cane, or crutches. Candidates must have the physical strength to lift and transfer patients.

Therapeutic physical therapy procedures require coordination of both gross and fine muscular movements, equilibrium, and functional use of the sense of touch and vision. For this reason, candidates for admission to the Department of Physical Therapy must have manual dexterity and the ability to engage in procedures involving grasping, fingering, pushing, pulling, extending and rotation.

### **Sensory/Observational Skills**

Candidates for admission to the Department of Physical Therapy must be able to observe demonstrations and participate in laboratory experiments as required in the curriculum. Candidates must be able to observe patients and be able to obtain an appropriate medical history directly from the patient or guardian. Such observation necessitates the functional use of vision, hearing, and other sensory modalities. Candidates must have visual perception which includes depth and acuity.



### **Communication Skills**

Candidates for the admission to the Department of Physical Therapy must be able to communicate in English effectively and sensitively with patients. In addition, candidates must be able to communicate in English in oral and written form with faculty, allied personnel, and peers in the classroom, laboratory and clinical settings. Such communication skills include not only speech, but reading and writing in English. Candidates must have the ability to complete reading assignments and search and evaluate the literature. Candidates must be able to complete written assignments and maintain written records. Candidates must have the ability to complete assessment exercises. Candidates must also have the ability to use therapeutic communication, such as attending, clarifying, coaching, facilitating, and touching. These skills must be performed in clinical settings, as well as the didactic and laboratory environments.

### **Intellectual/Conceptual, Integrative, and Qualitative Skills:**

Candidates for admission to the Department of Physical Therapy must have the ability to measure, calculate, reason, analyze, and synthesize data. Problem solving and diagnosis, including obtaining, interpreting, and documenting data, are critical skills demanded of physical therapists which require all of these intellectual abilities. These skills allow students to make proper assessments, sound judgment, appropriately prioritize therapeutic interventions, and measure and record patient care outcomes. Candidates must have the ability to use computers for searching, recording, storing, and retrieving information. In addition, candidates must be able to comprehend three-dimensional relationships and understand the spatial relationships of anatomic structures.

### **Behavioral/Social Skills and Professionalism:**

Candidates for admissions to the Department of Physical Therapy must demonstrate attributes of empathy, integrity, concern for others, interpersonal skills, interest, and motivation, as such qualities are assessed not only during the admissions process but throughout physical therapy education. Candidates must possess the emotional well-being required for use of their intellectual abilities, the exercise of sound judgment, the prompt completion of all responsibilities attendant to the evaluation and care of patients, and the development of mature, sensitive, and effective relationships with patients. Candidates must be able to adapt to ever-changing environments, display flexibility, and learn to function in the face of uncertainties and stresses which are inherent in the educational process, as well as the clinical problems of many patients.

Candidates must have the ability to be assertive, delegate responsibilities appropriately, and function as part of a physical therapy team. Such abilities require organizational skills necessary to meet deadline and manage time.

*(From: Technical Standards/Essential Functions. APTA Education Section. AASIG, September 1998. University of Tennessee-Memphis.)*

The use of a trained intermediary is not acceptable, in that a candidate's judgment must be mediated by someone else's power of observation and selection. Students must sign the technical standards form ([Appendix S](#)) when accepting their slot into the DPT program.

## SPECIFIC STUDENT REQUIREMENTS

### *Equipment*

Students are required to purchase several items of equipment for use during their academic career and after graduation. These items can be purchased separately at local medical suppliers or a local vendor will package a complete student kit for purchase. It is the responsibility of the student to acquire the needed supplies. Specifically, at this time each student is minimally required to have:

1. Goniometer (large and small sizes, finger goniometer)
2. Tape Measure
3. Reflex Hammer
4. Stethoscope/ Blood Pressure Cuff
5. Sensory Testing Kit (two-point discrimination, sharp/dull tester)
6. Lab coat
7. Name tag (through A-State bookstore)
8. Gait belt
9. Pen light
10. Tuning fork
11. Pulse Oximeter

### *Appropriate Dress and Personal Appearance Requirements*

#### Lab attire

Appropriate dress is required for all laboratories. In most cases laboratory attire is specified in the course syllabus. Many of the procedures we practice require access to skin and visualization of muscles and muscle groups in all parts of the body and appropriate attire is required accordingly. Part of what we learn to do is to provide this access while preserving the modesty and dignity of the patient. When the student is the patient, this same principle applies.

When not serving as the patient or subject, shorts, shirts and shoes should be worn. Low heeled, rubber-soled shoes must be worn at all times except when on a treatment table (plinth), mat table or floor mat. Students going outside of the lab area should dress appropriately for the public.

When outside speakers are brought in or special events are scheduled it is expected that students will dress appropriately for the occasion. Students attending PT sponsored events (i.e., scoliosis screenings, 5K run) are expected to wear either clinical lab coats, A-State shirts or other attire as approved by the coordinating member of the faculty.

Jewelry is generally prohibited for health and safety reasons. No bracelets, necklaces, earrings other than small posts for pierced ears or rings other than bands should be worn in labs. Body piercing (i.e., tongue, eyebrow, etc.) should not be visible.

### ***Other Personal Requirements***

Students are required to adhere to certain personal standards both for their own safety and that of the patient. Hair must be confined so as not to interfere with any clinical procedure. Nails must be short and clean at all times. Fingernails should not extend beyond the fingertip. Students should check with their clinical sites regarding the use of nail polish. If nail polish is allowed, the polish cannot be chipped.

Any open lesions must be adequately covered and protected from contamination. Personal hygiene should be maintained at the highest level and students must pay attention to such potential problems as bad breath, foot odor, body odor, etc. Furthermore, cologne or perfume should not be worn while in class or during clinical rotations.

### ***Informed Consent***

Any person (guest, patient) who is involved in demonstration, treatment, or research will provide consent for that involvement. Forms are available through the Department Secretary. Guest, patients, research participants will sign consent forms prior to participation in any event.

1. Guests and patients provide consent by reading and signing the general consent form developed by the department which gives consent for treatment or class participation, and/or gives consent for photography. These forms are kept by the department secretary and are located in [Appendix U](#) and [Appendix V](#).
2. Subjects involved in research sign a specific informed consent form, which has been approved, along with the research design, by the University Institutional Review Board, Human Subjects Committee.
3. Consent forms will remain on file in the offices of the department of physical therapy for a minimum of five years, or for the life of any collected educational material.
4. All information obtained will be kept confidential according to Health Information Portability and Accountability Act (HIPAA) guidelines.

### ***Gross Anatomy Rules and Regulations***

The use of human remains for the purpose of study is governed by state regulations. There are specific regulations regarding the disposal of these remains after the termination of their use. As these are human bodies, they have to be treated with respect and should be disposed in the same manner and methods as any deceased person. Students are expected to adhere to the following rules while in the laboratory. **Failure to abide by these rules will result in dismissal from the course and may result in other penalties (including failure of the course) imposed by the Chair of Physical Therapy.**

1. Any student not wearing a laboratory coat will not be allowed to remain in the dissecting room. Do not wear open-toed shoes in the lab.

2. It is essential that the cadaver does not dry out. After completing the dissection, cover the cadaver with a sheet, spray with wetting solution, and lock the box.
3. Students who registered for the course and other authorized persons are the only people allowed in the dissecting room. Relatives, spouses and friends are absolutely not allowed access to the dissecting room.
4. The dissecting room will be open during the scheduled laboratory periods; other times may be arranged upon the approval of the instructor.
5. Smoking, drinking, and eating (including chewing gum) are not allowed in the laboratory.
6. Any tissue removed from the cadavers (e.g. skin, fat) must be placed in the corresponding designated container (labeled as “Human Tissue Only”) that is separate from the regular (e.g. paper, gloves) container.
7. Parts of cadavers are never to be removed from the laboratory. To do so is illegal and unprofessional.
8. While dissecting, be careful not to drop tissue on the floor. Clean up any spills or dropped tissue thoroughly and promptly.
9. Keep the dissecting table clear of debris. Wipe it clean at the end of the dissection.
10. Models, specimens, etc. are not to be removed from the laboratory without the permission of the instructor.
11. Professional behavior is mandatory in the lab.
12. Photographing or recording is not allowed in the lab.
13. Both the outside and inside doors of the laboratory must remain closed at all times.
14. Handle scalpels and other sharp instruments with care. Used scalpel blades are to be placed in special containers.
15. If you cut or otherwise injure yourself, notify the instructor immediately. You should check with Student Health Services or your physician after a cut or other wound that breaks the skin.
16. Always wash your hands and remove lab coats before leaving the lab after dissection.
17. Watch for mold. Give your cadaver a complete check before the study. Report any signs of mold to the instructor as soon as it is discovered.
18. Never remove the identification tag from the cadaver.

### ***Teratogenic Substances***

The faculty of the physical therapy program will design learning experiences and lab procedures, which minimize exposure to teratogenic substances. Exposure to teratogenic substances as a result of performing requirements for classes in this curriculum is highly unlikely. There is a measurable risk of exposure while working in the Gross Anatomy laboratory. A-State's environmental health and safety information can be located at <http://www.astate.edu/a/ehs/>. The cadavers used in Gross Anatomy have been injected with certain chemicals for their preservation. The Material Safety Data Sheets (MSDS) is located in the laboratory and the Physical Therapy office. The two chemicals of particular concern are formaldehyde and phenol. Formaldehyde is a suspected carcinogen and phenol can cause nerve damage when absorbed through the skin. More information on chemical agents used can be found at <http://ehc.astate.edu/cgi-bin/searchsf.php>. Working in the gross anatomy laboratory has

negligible risks if appropriate precautions are taken. **Students with respiratory problems and pregnant women should consult their doctor before taking gross anatomy. Contact lenses can absorb chemical vapors in the air; therefore contact lenses should not be worn in the laboratory without vapor proof goggles.** All students should report any problems with eye or respiratory irritation to their laboratory instructor. All students must wear a laboratory coat while in the laboratory. Students performing the day's dissection must wear dissecting gloves. Students with latex allergies and sensitivity should inform the course instructor. More information is located in [Appendix K](#). Embalming fluid soaked into the lab coat can irritate skin as well as increase the vapor exposure in the laboratory. Laboratory coats should be cleaned every couple of weeks, or more often when heavily soiled. Students with dirty lab coats will not be allowed to work in the laboratory if the instructor believes the coat to be a health risk.

### ***Practice of Procedures***

The practice of physical therapy includes the use of various physical agents, massage techniques, manual techniques, transfer, elevation and ambulation activities, therapeutic exercise and the use of different types of equipment. Students are expected to perform these procedures on each other under faculty supervision in the laboratory and later on in a clinical setting under the supervision of a licensed physical therapist or physical therapist assistant. Students may not perform physical therapy treatments other than those required for class, lab, or clinic except under the above-stated supervision.

### ***CPR Certification***

Prior to beginning clinical education students are required to present evidence of current valid CPR certification. This may be done by presenting a card along with a photocopy of it to the program secretary or to whoever directed. The photocopy is placed in the student file. Students who have expired CPR certification will not be allowed to participate in clinical education activities, which may lead to program dismissal.

### ***Child Maltreatment Reporter Training***

All students must complete the child maltreatment reporter training prior to graduation. This is a state mandated requirement for degree programs at institutions of higher education for professions that are required to be a child maltreatment mandated. This training will be completed in PT 8653 Neuromuscular II.

### ***Physical Examination and Immunizations***

All students are required to present proof of immunization as described in the University [Graduate Bulletin](#) and additional immunization and skin testing as described by the Director of Clinical Education. Documentation of immunization and tests include:

1. Rubeola (measles) and rubella (German measles) - State Statute;
2. Mumps and varicella (chicken pox) - required by most clinical affiliates;

3. Hepatitis B - required by most clinical affiliates - this immunization series require 5 months to complete and should be started immediately if not already begun.
4. TB skin test - required each year (available at the Student Health Center). Students with positive results will receive further instructions.

All students are required to complete a physical examination prior to their first and third clinical education assignments. Most clinical affiliates will insist that this examination be no more than one year old. The required form is located in the [Appendix C](#). Some clinical sites may have more extensive immunizations and/or physical requirements. The additional requirements must be met before the student is allowed to practice at that facility.

### ***Health and Liability Insurance***

Students must show verification of health insurance and personal liability (malpractice) coverage. Failure to have this coverage will bar students from clinical sites for clinical education, which would result in dismissal from the program. Proof of liability and health insurance must be completed by the first day of the fall semester and must remain current throughout the program. The University offers each student the opportunity to purchase an accident and hospitalization insurance policy as part of a group consisting of A-State students and students enrolled in other universities across the state. Health insurance is required during clinical educational experiences.

### ***TB Mask Fitting***

Students are required to be fitted for a TB mask. The College of Nursing and Health Professions offers this service to the students at a minimal cost. This typically occurs during the first few weeks of the fall semester.

### ***Communicable and Infectious Disease Policies***

All students receive appropriate education and training in dealing with blood-borne pathogens (Standard Precautions) as part of their clinical laboratory courses. In addition, the College has adopted additional policies and procedures, which may be found in the [Appendix E](#).

### ***Substance Abuse Policies***

The College has developed detailed substance abuse policies that are additional to those already in place at the university level. These policies may be found in the [Appendix I](#). Additionally, some clinical sites require a drug screen prior to coming to their facility. It is the student's responsibility to pay for this service.

### ***Clinical Background Checks / Drug Screens***

A criminal background check and/or drug screen is required after admission to the program. It is the student's responsibility to pay for this service. Many clinical facilities will require that the

student complete a different background screen at their facility. Information is located on the PT website (<http://www.astate.edu/college/conhp/departments/physical-therapy/student-resources/>). Students must read and sign the CNHP Criminal Background policy located in [Appendix Q](#).

Students with criminal backgrounds may not be able to complete clinical education coursework required by the DPT program or meet the criteria for professional licensure. If a student has a criminal record, it is the responsibility of the student to inquire with the respective state board of physical therapy in which the student plans to apply for licensure as to whether a criminal record may limit the student's ability to obtain licensure as a physical therapist or practice in certain settings.

### ***Student Acknowledgment and Waiver Forms***

Students must read and sign the waiver and release forms included in [Appendix H](#) of this document by the end of their orientation. No student will be allowed to proceed until these forms have been signed and returned to the program.

### ***Student Field Trip Participation***

Students must read and sign the waiver and release forms prior to attending off campus activities. This university form is located on the A-State Travel Office website. The completed form will be kept in the student academic file.

## **STUDENT ORGANIZATIONS**

The Physical Therapy Student Association (PTSA) is the student organization designed to promote the profession of physical therapy, support the ASTATE programs in physical therapy and provide charitable service to the community. Membership is encouraged and applications can be obtained from the main office of physical therapy. Students are expected to bear the cost of social events, travel to meetings and other activities unless some other source of funding is developed.

Students are encouraged to join the American Physical Therapy Association that is the professional organization for therapists and assistants. Membership includes subscription to periodicals titled Physical Therapy, PT Bulletin and PT Magazine. These periodicals are often used for reading assignments by faculty. Membership in the state and local PT organizations are included in the national dues. Membership forms are available from the Department Chair and the Department Chair's signature is required for validation of student status.

## **FACILITY PROTOCOLS**

### ***Exterior Doors***

Under normal circumstances the building is locked unless a scheduled activity is taking place. The "front" doors on the second floor are unlocked between 7 AM and the time of the last scheduled activity in the building in the evening. These doors may also be unlocked on a

weekend if a class is scheduled. The rear door on Driver Street and the South door on the first floor are normally unlocked between the hours of 8 AM and 5 PM. The South door may remain unlocked if an activity is scheduled on the first floor outside of normal business hours. The interior door at the South entrance should be unlocked at all times.

DPT students may study in designated areas (i.e., student lounge, room 117, 118, 120) after normal business hours only if a faculty member or graduate student (GA) is in the building. Students are **ONLY** allowed to practice practical skills that have been covered in class. The PT faculty will lock the doors at the end of the day, and students are responsible for making sure that all doors are shut and locked when leaving the building. If, for some reason, a door was not locked by the faculty member, the student is responsible for contacting campus security to secure the facility. For the safety reasons, students should leave the building as a group. Should a student leave alone, it is advisable that the student contact Campus Security for an escort.

For the purpose of studying on weekends, the student should arrange for the building to be opened and occupied by a graduate assistant and/or faculty member. The graduate student and/or faculty member is responsible for locking the doors when leaving the building.

### ***Vending Area***

All students and staff in the building share this space. Please set a good example for other students by caring for this space. Please remember that there are classrooms and offices nearby and be considerate by not making unnecessary noise. Eating and drinking should be confined to this area. *There is no eating or drinking in the classrooms.* Temporary storage of food in the refrigerator in front of the student lounge may be allowed unless the privilege is abused.

### ***Smoking Policy***

Arkansas State University is a smoke-free campus.

### ***Classrooms***

Most DPT classes will be scheduled in CNHP 110, 111, 117, 118, 119, and 120 but may also be held in Smith 119/122. All classrooms are locked when not scheduled for use. This unfortunate necessity is due to theft. If you see any such suspicious activity at any time please bring it to the attention of a faculty member, staff member or the ASU campus police.

### ***Main Office - Room 102***

This space is occupied by the clerical staff or student workers and is not to be used as a social gathering place except under unusual circumstances since it is a work area. The computers and telephones in the main office are not intended for student use. Only in emergencies may students' access telephones in the main office. Two student use phones are available in the student lounge (Room 115).



### ***PT Conference Room - Room 103***

This room within the office suite is used on a regular basis for committee meetings scheduled by the physical therapy program. It is sometimes used for small social gatherings as well. The Conference Room contains a number of periodicals and books that belong to the program and to individual faculty members. This space may be used as a meeting space by students with permission and may also be used for small group meetings between faculty and students.

### ***Faculty Offices - Rooms CNHP 104-109 and Eugene Smith Educational Building***

Normally, students are expected to gain permission to proceed into the interior office space from whoever is on duty in room 102 for offices on the first floor. The Smith Building offices are accessible from the 1<sup>st</sup> floor of the Smith Building

### ***PT Laboratory Suite - Rooms CNHP 110-120 / Smith 119/122***

Under normal circumstances this area is not accessible to the general population of the building. The sign indicating access to authorized personnel only includes DPT students, faculty and staff. The only other people who have unlimited access to this area are the Dean and workers from the physical plant. If you see anyone in this area who you do not recognize, you should ask them who they are and why they are there or, if you are not comfortable doing that, report their presence to a faculty or staff member.

### ***Locker Rooms/Student Lounge- CNHP 115 & Smith Hall***

The student lounge (CNHP 115) is available to all DPT students. Internet access, TV and telephones are available without charge to the student. Students must purchase their own printer cartridge and paper for the printers.

Lockers are available in the student lounge (CNHP 115) and in Smith Hall (1<sup>st</sup> floor). Students are required to provide their own locks and to select a particular locker for use each semester. At the present time there is no charge for the use of a locker but students must report to clerical staff the number of the locker they are using and must use this same locker for the entire semester. Students need a locker because the majority of lab classes will require a change of clothes and also require the storage of purses, wallets, any jewelry that must come off, etc. during labs. Specific dress requirements are found in individual course syllabi. Please remember to remove the lock from your locker at the end of your academic program.

### ***Laboratories***

Laboratories are available in the College of Nursing and Health Professions Building, the Eugene Smith Building and the Donald W. Reynolds Center for Health Sciences. It is expected that program development will dictate specific uses for different spaces. Please note that no one is to enter the Gross Anatomy Lab unless a DPT faculty member or GA is on site.

It is expected that students will use these areas and the equipment with care and attention to safety concerns. Students need to adhere to specific direction of faculty involved. To supplement clinical learning skills, students are expected to regularly participate in "open" lab periods.

Telephones are located in rooms 118 and 120 for use in an emergency or for internal communication between the labs and the main office.

Students are expected to assist the faculty as required to clean and secure the labs at the end of a scheduled class period. Such cleaning may include the processing of laundry and linens and the cleaning of equipment used during the lab similar to procedures that are required in any clinical setting at the end of patient treatment procedures. In some cases students may be required to provide their own consumable supplies if they wish to practice some procedures outside of normal lab hours.

It is never appropriate for visitors to be present in any laboratory unless special arrangements have been made with the Department Chair and involved faculty.

### ***Disaster Evacuation***

An evacuation plan for various disasters (fire, tornado, earthquake) is posted on bulletin boards on each floor of the CNHP and in the basement of the Smith Building. Stairs are to be used to exit. Alarm bells and fire extinguishers (maintained by the Physical Plant) are located on each floor.

### ***Inclement Weather Policy***

If the University is open, classes will meet as scheduled. Should the university open late, students should attend the class that would normally be scheduled at the time that the university opens.

### ***A-State Emergency Procedures***

Students can receive A-State's emergency information via text message. For A-State's emergency information please log into MyCampus (<https://mycampus.astate.edu>) and click on 'Emergency Alert' to register.

## CLINICAL EDUCATION POLICIES AND PROCEDURES

The following *Clinical Education Policies and Procedures* are provided to all clinical affiliates. The various forms referenced are contained in the *DPT Student Handbook* appendices. Students should familiarize themselves with these forms. The Director of Clinical Education, DCE, gives specific instructions to students prior to any clinical education assignment. Other specific requirements are contained in the course syllabi for clinical education courses. These are provided to students at the appropriate times.

Clinical education is a crucial part of any PT educational program. Students are sent, usually individually, to various clinical sites to practice physical therapy procedures and patient care under the supervision of a licensed PT. Student performance in clinical education is evaluated by both the clinical and academic faculty.

The clinical education experience simulates actual clinical practice and each clinical educational experience is a full-time, work-type experience. Students practice those skills that they have acquired in the didactic portion of the PT educational program. Students are generally not required to practice skills that they have not been taught unless the on-site supervisor teaches new skills to the student. In this case, the clinician assumes the responsibility for the student's performance.

PT students have six clinical experiences. Clinical experiences will include three 5-week and two 8-week clinical rotations. Clinical Education II is an interprofessional service-learning project which is completed in the Spring semester, year 2. Students admitted into the Doctorate of Physical Therapy Program are required to spend substantial time in clinical education experiences that are not on campus and may not be located in the immediate area. Students admitted into the program must be willing to temporarily relocate, as needed, to the clinical site assigned to them by the DCE. All costs of clinical education are the student's responsibility. Clinical assignments are determined by each student's educational needs and by availability of facilities.

Clinical sites are assigned by the DCE. Students will provide the DCE their top three sites from the clinical availability list for each clinical rotation. Sites are assigned by the DCE according to their availability, the students' particular needs at any given time, and other variables that are often unpredictable. Given the large number of students that require clinical assignments, it is not possible to place many in or around the northeast Arkansas area. Sites may be located at some distance from the campus, both within the State of Arkansas and elsewhere in the U.S. Attendance at clinical education is mandatory and students may not progress in the program if clinical performance is unsatisfactory. Notebooks containing data forms with all clinical center information is located in the program office for the students to view.

### ***Cancellation and Changes to Clinical Sites***

Occasionally, a site that was selected by a student and confirmed for availability will cancel due to variables outside of the control of the program. If a site cancels, the student is immediately notified by the DCE of the cancellation. Every attempt is made by the DCE to offer a

comparable site to the student to replace the canceled site. These placements are made from sites that were offered but were not selected by other students or additional sites can be contacted in order to fill the vacancy.

### ***Costs of Clinical Education***

Students are required to pay tuition for clinical education as well as all other associated costs. These costs include but are not limited to physical examinations, health insurance, drug screens, background checks, transportation, room and board, and uniforms (if required). Students may have to continue to maintain their permanent living arrangements as well as temporary quarters at the clinical site. It is the student's responsibility to secure their own housing if needed. Costs are the responsibility of the student. During off-campus educational experiences, any costs related to emergency services are the responsibility of the student. All costs related to clinical education are the responsibility of the student and discussed elsewhere in this handbook and during orientation.

### ***Supervision of Clinical Education***

Physical therapy students participating in clinical education are required to practice under the supervision of a licensed physical therapist with a minimum of one year's experience. The DCE is always available for consultation by telephone. The DCE will perform either an onsite visit or phone consultation with all CI's while students are on clinical rotations.

### ***Attendance Policy of Clinical Education***

Each student is allowed one excused absence per clinical education experience. An excused absence is considered a personal illness, illness of an immediate family member, death of a family member, or an absence that is arranged prior to the event with the clinical facility (e.g. doctor's appointment). The CI and DCE must be notified prior to the absence. In case of illness, the student will notify the CI and DCE at the beginning of the workday. If this is not done, the absence will be considered unexcused. All clinical time beyond one excused absence will be made up. This make-up time will be at the discretion of the clinical facility and DCE. This inability to make-up time missed will result in a delay in the student's progression in the program. Tardiness, unexcused absences, or abuse of excused absences will not be tolerated. Any unexcused absence or reoccurrence of tardiness will be addressed by the DCE and Department Chair.

### ***Pre-Clinical Requirements***

Students who have not given the DCE the health immunizations and/or other required documents, or who have not completed the required pre-clinical sessions will not be allowed to participate in their clinical education experience. Sites may require additional information such as background check and drug screens. The student is responsible for completing all specific site requirements prior to beginning the clinical rotation.

The Program Faculty will review affective, cognitive and psychomotor skills of each student prior to a student beginning a clinical rotation. Should a student not meet expected requirements, a formal learning contract will be completed with specific guidelines for progression.

### ***Clinical Problems***

If a problem arises during the clinical education experience, the student should make every attempt possible to communicate concerns regarding the experience to the clinical instructor. If this does not resolve the situation, the DCE should be contacted. At this time, the DCE will counsel the student on what action needs to take place next. The DCE may then contact the clinical site and request that a learning plan be instituted. The DCE has the authority to modify the learning plan as needed.

### ***Clinical Remediation***

When the CI, student, or DCE becomes aware of a discrepancy between performance expectations and the actual performance of the student, in any domain, a plan for remediation is put into place. The goal is to address the issue directly and as early as possible in order to reach resolution and minimize consequences. Once the CI, student, and DCE are aware of the issue, the process for remediation can be implemented. If the situation is not complex, a clarification of expectations by the CI and DCE may be all that is necessary. However, the next step is to draw up a learning contract to be reviewed and signed by the CI, student and DCE. At this point the Academic Progression Committee is notified of the situation. Regular communication will be established with all involved parties and a site visit will be scheduled as necessary. In most instances, the collaborative effort creates a more conducive learning environment and the student is able to meet performance expectations. If the student fails to meet the expectations, he/she may receive a failing grade or an incomplete. It is the role of the Academic Progression Committee and the DCE to determine if the student should be afforded another opportunity to make-up the clinical experience or assigned a failing grade. This is determined by the past academic performance of the student, the severity of the student's failing merits in the clinic, and any other relevant variable pertaining to situation. If the student is afforded another chance, the make-up rotation will be scheduled as soon as possible and in a similar setting. The student is required to establish a learning plan and contract with the DCE and share the plan for successful performance with the new clinical instructor. Evaluation of the make-up rotation follows the same guidelines per the usual program, with the requirement to meet additional written and performance expectations as agreed. Unsuccessful performance in a second clinical rotation results in dismissal from the program.

## **RESPONSIBILITIES OF THE UNIVERSITY, CLINICAL AFFILIATES AND STUDENTS**

### ***Responsibilities of the University (Director of Clinical Education - DCE)***

- A. Provide clinical education sites with the following:
  - 1. Pre-clinical Forms as required by both parties
    - i. Clinical education contract to CEO
    - ii. Addendum to Clinical Education Agreement
    - iii. CSIF as required by accrediting body
  - 2. Information Sheets
    - i. Course Objectives & Grading Criteria
    - ii. Clinical Education Policies and Procedures
    - iii. Other relevant materials
  - 3. Individual Student Forms
    - i. Student information
    - ii. Health information and physical examination form (on request)
    - iii. Clinical Site Orientation Checklist
    - iv. Clinical Internship Progress Report
    - v. Clinical Experience and Clinical Instruction evaluation tool
    - vi. Evaluation of Student Performance
- B. Arrange and conduct orientation visit at prospective clinical education sites to:
  - 1. Survey Facility
  - 2. Meet with Appropriate Staff Members
  - 3. Discuss All Policies, Procedures and Curriculum
- C. Conduct orientation session with first-year students prior to first clinical education experience in order to review course syllabus and all aspects of this phase of the program including behavioral objectives and content of the clinical education evaluation form. Additional sessions will be conducted prior to the second and third and prior to the fourth and fifth clinical education experiences.
- D. Provide student access to information about clinical sites.
- E. Schedule and conduct an individual meeting with the students following clinical education I, III, IV, V and VI.
- F. Make appropriate student assignments as far in advance as possible prior to the beginning of each clinical education experience.
- G. Arrange a schedule for University faculty to visit or teleconference with students and their clinical instructors at least once during each clinical education experience; discuss student's present status with student and clinical instructor; and counsel students

regarding clinical behavioral problems. Review student evaluation of clinic and the clinic's evaluation of the student.

- H. Promote effective communication between students and clinical faculty.
- I. Correct and review written assignments with students
- J. Schedule and conduct a joint meeting with first and second-year students each spring to discuss clinical education.
- K. Conduct a meeting of clinical instructors on campus at least once each year and work to develop programs for professional development for clinical educators.
- L. Conduct a yearly review of course syllabus, various clinical forms, clinical policies and procedures and make necessary revisions.
- M. Review all student files to insure that each student complies with the requirements to have a current physical examination, proof of health and liability insurance, TB skin test, TB mask fitting, proof of immunization, hepatitis B vaccination and CPR certification.
- N. Conduct appropriate HIPAA education program and assess student competence prior to first clinical education experience.

#### ***Responsibilities of the Clinical Affiliate and Staff***

- A. Complete the following forms for the University: Clinical Education contract (CEO), Addendum to Clinical Education Agreement and CSIF. Inform the University of any changes in staff responsible for students.
- B. Provide students with a complete orientation to the facility including a tour of the institution and PT department, introduction to staff, introduction to policies and procedures, discussion of the role of a PT student at the facility and the expectations for students during the clinical education experience.
- C. Review annually the A-State Clinical Education Policies and Procedures.
- D. Provide students with the facility's policies/procedures regarding patients' rights.
- E. Be aware of student's experience level by reviewing the information provided related to the student's progression in the academic program and prior clinical experiences. This information, in addition to the information contained in the Student Information Form, is designed to be helpful in planning a meaningful customized learning experience.
- F. With the student, develop learning objectives for the clinical experience.

- G. Supervise students appropriately for their level of clinical education and experience. Discuss and demonstrate treatments and procedures students may be unfamiliar with to broaden the learning experience, including allowing students "hands-on" experience as soon as possible.
- H. Provide special experiences such as attendance at conferences, clinics, surgery, etc. if possible.
- I. Discuss student's performance with him/her on each clinic day providing on-going pertinent and timely feedback. Confer weekly with student to update progress toward goals.
- J. Each affiliate should ensure that the CI and the student mutually understand the criteria for obtaining a passing grade for a student's particular clinical education level at that particular facility.
- K. Notify the University, if the facility is a "one-person" department, if the absence of the therapist necessitates rescheduling of a student's clinical time.
- L. Notify the DCE if a student's overall performance is unsatisfactory prior to the midterm so that the program can generate the appropriate warnings and an opportunity for students to correct performance.
- M. Complete progress report at midterm and final. Meet with student to review the midterm evaluation and the final evaluation including the final suggested grade prior to submitting forms to the University. Document student performance with specific comments where appropriate.
- N. Review the *Clinical Experience and Clinical Instruction* after the clinical experience for future consideration in working with students. It is recommended that the site maintain a copy of this form for its records.
- O. Attend meetings on campus periodically, at which CIs from participating facilities meet with the faculty to discuss the program and to participate in a clinical education in-service activity.
- P. Submit an evaluation of the PT program at Arkansas State University.
- Q. Annually assess the facility's clinical education program. Notify the DCE of any clinical education development needs that the facility may have so that the DCE may assist the facility.
- R. Notify the DCE of any facility changes that may affect the quality of the clinical experience as soon as possible. Examples of changes include inadequate staff, staff not prepared or willing to be a CI for the time frame the student is assigned, and/or any other



situation that you believe would affect the student's clinical experience in a negative manner.

### ***Responsibilities of the Students***

- A. Attend Pre-Clinical Sessions given by the DCE and the Department Chair describing teaching and learning during the clinical education experience.
- B. Complete all clinical requirements and maintain updates as needed on the date assigned by the DCE. (See [Appendix A](#))
- C. Be aware of the contents of the course syllabus for Clinical Education and the Clinical Education Policies and Procedures regarding student responsibilities.
- D. Provide own transportation to and from the clinical education site.
- E. Complete the student information sheet and return it to the DCE by email one month prior to the beginning of each clinical education experience.
- F. Make telephone contact with CCCE to arrange for first day in clinic.
- G. Arrive at clinic 10 minutes prior to assigned time. Wear a watch and bring a pen.
- H. Dress appropriately for clinical education according to the particular institution's policy. Wear student nametag unless directed to do otherwise by the CI.
- I. First day, meet with CI to develop goals for clinical experience.
- J. Weekly, confer with CI concerning progress toward goals.
- K. Midterm, complete self-assessment; meet with CI to discuss midterm evaluation; fax midterm evaluation to DCE.
- L. Final, complete self assessment; complete evaluation of clinical site (*Clinical Experience and Clinical Instruction* evaluation tool); meet with CI to discuss final progress report and *Clinical Experience and Clinical Instruction* evaluation tool; fax final clinical report and skill summary sheet to DCE; meet with DCE as directed; mail the original reports to DCE.
- M. Effectively utilize PT CPI for self-assessment.
- N. Telephone CI and DCE to report an absence prior to expected arrival time.
- O. Arrange make-ups with DCE and CI for any absences in excess of one day.

- P. Maximize the learning experience by asking appropriate questions and being alert to all aspects of clinical education.
- Q. Refrain from attempting unfamiliar procedures. When in doubt, the student should always ask for assistance, because the patient's safety and comfort are the primary considerations.
- R. Attend designated conferences with DCE, usually at the midpoint and the end of clinical education experiences.
- S. Complete an evaluation of the DCE and the clinical experience.
- T. Obtain prior written approval from the University and any involved affiliate before publishing any material related to the clinical education experience.
- U. Satisfactory Progress in Clinical Education
- V. Students are required to secure their own housing prior to clinical education experiences which are out of area.
- W. Students are required to complete all assignments during their clinical education experience (see Clinical Assignments).
- X. Students should not contact a clinical site without prior approval from the DCE. Contacting a site without the permission of the DCE may result in dismissal from the program.

### ***Satisfactory Progress in Clinical Education***

Failure to meet the clinical education requirements may result in the student receiving a failing grade for the clinical course. Students are evaluated on ***the basis of quality of care, supervision/guidance required, consistency of performance, complexity of tasks/environment and efficiency of performance as set forth in the Clinical Performance Instrument (CPI)***. Should the Clinical Instructor (CI) have concerns in any area, the student may be required to remediate to correct identified deficiencies. Failure to observe certain "critical behaviors" ([Appendix B](#)) may result in immediate dismissal from the clinical site and possible dismissal from the program. In all cases, failure to perform at a level deemed appropriate by the CI will compel him or her to contact the DCE. The DCE is then informed of specific areas of concern. The CI, the DCE, and the student collaboratively work to develop a plan, which will enable the student to succeed if at all possible. Please refer to course syllabi for specific grading policies.

**If the student receives a failing grade for a Clinical Education course, that student will be dismissed from the program. A student who has identified deficits, but who in the opinion of the DCE and faculty would likely succeed if given additional clinical time, may be assigned a grade of "Incomplete". If the student receives a grade of "Incomplete", the**

DCE/Program will take the following steps. After identification of specific areas for academic remediation, the student enters in remediation with specific faculty until mutually agreed upon objectives and goals are met. If successful, the student may be assigned another clinical rotation. If the student is successful he/she may continue with the program sequence. The student may, however, experience a delay in program completion if extensive remediation is necessary. If the student fails a second clinical experience, the student will be dismissed from the program.

### ***Clinical Assignments***

While on each clinical education experience, students are given weekly clinical assignments. These assignments are conducted electronically over email and on blackboard. A grading rubric is provided to the student prior to leaving for the clinical education experience which clearly outlines the expectations of each assignment. These assignments are implemented to further their learning experience while on their clinical education experience.

## **APPENDIX**

|                                   |  |
|-----------------------------------|--|
| <a href="#"><u>Appendix A</u></a> | Clinical Check List                              |
| <a href="#"><u>Appendix B</u></a> | Clinical Education Clinical Behaviors            |
| <a href="#"><u>Appendix C</u></a> | Health Information and Medical History Form      |
| <a href="#"><u>Appendix D</u></a> | Biographical Information Data Sheet              |
| <a href="#"><u>Appendix E</u></a> | Infection Control                                |
| <a href="#"><u>Appendix F</u></a> | Hepatitis A/B                                    |
| <a href="#"><u>Appendix G</u></a> | Student Information and Release Form             |
| <a href="#"><u>Appendix H</u></a> | Waiver and Verification Form                     |
| <a href="#"><u>Appendix I</u></a> | Substance Abuse Policy                           |
| <a href="#"><u>Appendix J</u></a> | Verification of TB Mask Fitting                  |
| <a href="#"><u>Appendix K</u></a> | Latex Allergies and Sensitivities                |
| <a href="#"><u>Appendix L</u></a> | Incident Report Form                             |
| <a href="#"><u>Appendix M</u></a> | Code of Honor                                    |
| <a href="#"><u>Appendix N</u></a> | HIPAA Compliance Contract                        |
| <a href="#"><u>Appendix O</u></a> | Photography                                      |
| <a href="#"><u>Appendix P</u></a> | Student Conference Record                        |
| <a href="#"><u>Appendix Q</u></a> | Criminal Background Check                        |
| <a href="#"><u>Appendix R</u></a> | Student Confidentiality Contract                 |
| <a href="#"><u>Appendix S</u></a> | Technical Abilities and Skills                   |
| <a href="#"><u>Appendix T</u></a> | Educational Records Release Form                 |
| <a href="#"><u>Appendix U</u></a> | Video / Photo Consent Form to Release to Publish |



## *Appendix A- Clinical Check List*

Name: \_\_\_\_\_ ID#: \_\_\_\_\_

- \_\_\_\_\_ Waiver and Verification Form (Appendix H)
- \_\_\_\_\_ Medical History Form (Appendix C)
  - \_\_\_\_\_ Proof of Physical Examination (2<sup>nd</sup> Year)
- \_\_\_\_\_ Student Information and Release Information (Appendix G)
- \_\_\_\_\_ Substance Abuse Contract (Appendix I)
- \_\_\_\_\_ Copy of CPR Certification (expiration date \_\_\_\_\_)
- \_\_\_\_\_ Proof of immunization
  - \_\_\_\_\_ Rubeola (measles)
  - \_\_\_\_\_ Rubella (German measles)
  - \_\_\_\_\_ Mumps
  - \_\_\_\_\_ Chicken Poxs (varicella)
  - \_\_\_\_\_ Hepatitis B (Appendix F)
  - \_\_\_\_\_ TB Test
    - \_\_\_\_\_ 1st year
    - \_\_\_\_\_ 2nd year
  - \_\_\_\_\_ TB Mask Fitting (Appendix J)
- \_\_\_\_\_ Critical Behaviors (Appendix B)
- \_\_\_\_\_ Copy of Health Insurance
- \_\_\_\_\_ Copy of Professional Liability Insurance
- \_\_\_\_\_ HIPAA Statement (Appendix N)

**All information is due by the date assigned by the DCE. All items should be brought to the DCE at the same time in a folder.**

## ***Appendix B- Clinical Education Critical Behaviors***

Below are examples of “critical behaviors”. Failure of the student to exhibit certain "critical behaviors" may result in immediate dismissal from the clinical site and possible dismissal from the program.

- A. Conducts all patient care activities with respect for the patient’s rights.
- B. Follows clinical and administrative policies and procedures of the facility.
- C. Accepts responsibility for patient care, recommends referral and/or discharge when necessary.
- D. Manages personal affairs in a manner that does not interfere with professional responsibilities.
- E. Respects the rights of those in authority to make decisions and complies with those decisions.
- F. Provides a safe environment to prevent injury.
- G. Provides appropriate level of supervision for patients.
- H. Ask for assistance when unable to handle patients independently.
- I. Becomes familiar with the risk management policy of the facility.
- J. Demonstrate awareness of risk management issues, which may have legal ramifications.
- K. Uses time constructively in the clinical setting for learning opportunities.
- L. Seeks opportunities to gain knowledge.
- M. Evaluates own performance.
- N. Requests opportunities and/or patients to provide needed learning experiences.

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

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

***Appendix C- Health Information & Medical History Form***

Complete and return to:  
Department of Physical Therapy, College of Nursing and Health Professions  
Arkansas State University, PO Box 910, Jonesboro, AR 72467

SEX: M      F      LAST NAME (Print)      FIRST NAME      MIDDLE

HOME ADDRESS (Number and Street)      CITY/TOWN      STATE      ZIP CODE

DATE OF BIRTH: \_\_\_\_\_

NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN

HOME TELEPHONE NUMBER: \_\_\_\_\_

NEXT OF KIN'S BUSINESS ADDRESS

BUSINESS TELEPHONE NUMBER: \_\_\_\_\_

DO YOU HAVE MEDICAL INSURANCE?      YES      NO

NAME OF COMPANY

| IMMUNIZATIONS COMPLETED | Y | N | DATE OF LAST INJECTION | HAVE ANY OF YOUR RELATIVES EVER HAD ANY OF THE FOLLOWING? | Y | N | RELATIONS HIP |
|-------------------------|---|---|------------------------|---|---|---|---------------|
| Hepatitis B (set of 3)  |   |   |                        | Tuberculosis  |   |   |               |
| Tetanus                 |   |   |                        | Diabetes  |   |   |               |
| Diphtheria              |   |   |                        | Kidney Disease  |   |   |               |
| Small Pox               |   |   |                        | Heart Disease   |   |   |               |
| Mumps                   |   |   |                        | Arthritis   |   |   |               |
| Rubella                 |   |   |                        | Stomach Disease   |   |   |               |
| Polio                   |   |   |                        | Asthma, Hay Fever   |   |   |               |
| Typhoid                 |   |   |                        | Epilepsy, Convulsions                                     |   |   |               |
| Other                   |   |   |                        | Other   |   |   |               |

**Health Information Form**



**PERSONAL HISTORY -- PLEASE ANSWER ALL QUESTIONS**

Comment on all positive answers below or on an additional sheet.

| HAVE YOU HAD?  | Y | N |   | Y | N |  | Y | N |                            | Y | N |
|--|---|---|---|---|---|--|---|---|----------------------------|---|---|
| Scarlet Fever  |   |   | Insomnia  |   |   | Chest Pain/Pressure                      |   |   | Tumor, Cancer, Cyst        |   |   |
| Measles  |   |   | Nervous Disorder  |   |   | Diabetes                                 |   |   | Stomach/Intestinal Trouble |   |   |
| German Measles   |   |   | Frequent Depression   |   |   | Chronic Cough                            |   |   | Recurrent Diarrhea         |   |   |
| Mumps  |   |   | Seizures  |   |   | Palpitations (heart)                     |   |   | Rupture, Hernia            |   |   |
| Chicken Pox  |   |   | Recurrent Headaches   |   |   | High Blood Pressure                      |   |   | Recent Weight Gain/Loss    |   |   |
| Malaria  |   |   | Recurrent Colds   |   |   | Lung Disease                             |   |   | Dizziness, Fainting        |   |   |
| Gum or Tooth Trouble   |   |   | Head injury with Unconsciousness  |   |   | Rheum, Fever/Heart Murmur                |   |   | Weakness, Paralysis        |   |   |
| Sinusitis  |   |   | Hay Fever, Asthma   |   |   | Disease or Injury of Joint               |   |   | Venereal Disease           |   |   |
| Eye Trouble  |   |   | Tuberculosis  |   |   | Other Injuries                           |   |   | Kidney Disease             |   |   |
| Ear, Nose, Throat Trouble  |   |   | Shortness of Breath   |   |   | Back Problems                            |   |   | Albumin/Sugar in Urine     |   |   |
| Surgery -- Appendectomy, Tonsillectomy, Hernia Repair, Other (what?) |   |   | Allergy -- Penicillin, Serum, Sulfonamide, Food (which?), Other (What?) |   |   | Jaundice, Gallbladder Trouble/gallstones |   |   | Frequent Urination         |   |   |

|   | Y | N |
|---|---|---|
| A. Has your physical activity been restricted during the past 5 years?<br>(Give reasons and duration)   |   |   |
| B. Have you had difficulty with school, studies, or teachers? (Give Details)  |   |   |
| C. Have you received treatment or counseling for a nervous or emotional condition or personality or character disorder?   |   |   |
| D. Have you had any illness or injury or been hospitalized other than already noted?<br>(Give details)  |   |   |
| E. Have you consulted or been treated by clinics, physicians, healers, or other practitioners within the past 5 years? (Other than routine exams)                           |   |   |
| F. Have you been rejected from or discharger from military service because of physical, emotional or other reasons? (If so, give reasons)                                   |   |   |
| G. Do you have any questions in regard to your health, family history, or other matter that you would like to discuss now with a member of the staff of the Health Service? |   |   |

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### HEALTH INFORMATION FORM

TO THE EXAMINING PHYSICIAN: PLEASE PROVIDE THE INFORMATION REQUESTED BELOW. BE ADVISED THAT THIS INFORMATION IS NECESSARY IN ORDER FOR THE STUDENTS TO ATTEND MANDATORY CLINICAL EDUCATION EXPERIENCES IN VARIOUS CLINICAL SETTINGS. ALL STUDENTS SIGN AN AUTHORIZATION THAT ALLOWS HEALTH PROFESSIONS PROGRAMS TO SHARE HEALTH INFORMATION WITH CLINICAL AFFILIATES. THE INFORMATION BELOW WILL BE USED FOR THAT PURPOSE ONLY.

SEX: M            F

\_\_\_\_\_  
Student's Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle

HEIGHT:

WEIGHT:

| URINALYSIS                     | ARE THERE ABNORMALITIES OF ANY OF THE SYSTEMS LISTED BELOW?      | YES | NO | DESCRIBE FULLY ALL ABNORMALITIES. USE ADDITIONAL SHEET IS NECESSARY |
|--------------------------------|--|-----|----|---|
| Sugar                          | 1. Head, Ears, Nose, or Throat                                   |     |    |   |
| Albumin                        | 2. Respiratory   |     |    |   |
| Micro.                         | 3. Cardiovascular  |     |    |   |
| Hemoglobin (if indicated) GM % | 4. Gastrointestinal  |     |    |   |
| Other Laboratory Tests:        | 5. Hernia  |     |    |   |
|                                | 6. Eyes  |     |    | HAVE YOU ANY GENERAL COMMENTS?                                      |
|                                | 7. Genitourinary   |     |    |   |
|                                | 8. Musculoskeletal   |     |    |   |
|                                | 9. Metabolic/Endocrine   |     |    |   |
|                                | 10. Neuropsychiatric   |     |    |   |
|                                | 11. Skin   |     |    |   |
|                                | Is there loss or seriously impaired function of any paired organ |     |    |   |

## HEALTH INFORMATION FORM

REQUIRED LABORATORY FINDINGS: PPD (MANTOUX)      NEGATIVE      POSITIVE

DATE OF TEST:

DATE OF CHEST X-RAY IF ABOVE IS POSITIVE?

ARE THERE ANY RESTRICTIONS OF PHYSICAL ACTIVITY INDICATED BY YOUR EXAMINATION?

Yes      No

IS THE STUDENT ON ANY MAINTENANCE MEDICATION? PLEASE STATE SPECIFICALLY.

---

---

I DO FURTHER CONFIRM THAT ON THIS DATE I FOUND THIS INDIVIDUAL TO BE FREE FROM HEALTH IMPAIRMENT THAT WOULD BE OF POTENTIAL RISK TO PATIENTS OR PERSONNEL.

TO THE BEST OF MY KNOWLEDGE AND BASED ON THE FINDINGS OF A COMPLETE PHYSICAL EXAMINATION AND MEDICAL HISTORY, ON THE DATE NOTED BELOW, I FOUND NO EVIDENCE OF ANY HABITUATION OR ADDICTION TO DEPRESSANTS, STIMULANTS, NARCOTICS, ALCOHOL, OR OTHER DRUGS OR SUBSTANCES WHICH MIGHT ALTER THE INDIVIDUAL'S BEHAVIOR.

NAME OF PHYSICIAN (PRINTED): \_\_\_\_\_

SIGNATURE OF PHYSICIAN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_

*Appendix D- Biographical Information Data Sheet*

**Arkansas State University  
Programs in Physical Therapy  
Student Information Sheet**

---

**Name:**



**Email Address:**

**Mailing Address:**

**Phone Number:**

**My primary goals for this clinical experience are as follows:**

- 1.
- 2.
- 3.

**Previous physical therapy clinical education experiences:**

**(Type of facility and a brief description of the activities performed.)**

- 1.
- 2.
- 3.
- 4.

## *Appendix E- Infection Control*

### **ARKANSAS STATE UNIVERSITY COLLEGE OF NURSING AND HEALTH PROFESSIONS**

#### **Policy/Procedure Guidelines for Infection Control (05/15/2009)**

#### **INTRODUCTION**

The policy guidelines herein are of a general nature and deal with HIV-related infections as well as other blood borne pathogens. They apply to all students/faculty/staff in the College of Nursing and Health Professions (CNHP). Due to differences in the various programs, individual CNHP programs may have specific rules and/or guidelines that are modifications of those in the general policy; however, the specific policies of the various programs will be consistent in their intent with the guidelines noted herein. This policy shall be reviewed annually and modified as necessary based on the current information from the CDC and other resources.

#### **ADMISSIONS**

The HIV/HBV (Human Immunodeficiency Virus/ Hepatitis B Virus) or any significant blood borne pathogen status of an applicant should not enter into the application process. Applicants applying for healthcare programs should, however, be informed that certain diseases may necessitate either a modification of their program, or in the extreme may necessitate their dismissal from a program if they cannot perform procedures and/or tasks that are considered essential to their educational experience.

#### **RETENTION**

If it is determined that a student is sero-positive for HIV/HBV, or any other significant blood borne pathogen, or is clinically manifesting symptoms of a related disease process, that student should receive counseling about personal health care concerns and about interaction with others, especially clients. The student should be counseled by a designated faculty member in his/her respective program. The function of the designated faculty member is to counsel the student as to whether the program of education should be modified, another educational program considered, or in the extreme, whether the student should be dismissed from a program because of the inability to perform procedures and/or tasks crucial to the educational program. When considering the possibility of modifying clinical experiences or whether to dismiss, the designated faculty member will request that the Infection Control Committee convene to consider the specific student situation.

#### **INFECTION CONTROL COMMITTEE**

The Infection Control Committee will be comprised of at least one representative from each of the programs in the College of Nursing and Health Professions. The dean will be charged with appointing faculty to serve on this committee after consultation with chairs or directors of the various programs. Once the committee is established, a chair shall be elected by the members. In addition, a community member who is an expert in infectious disease will be designated as a consultant to the committee.

The committee shall function to consider the specific student/faculty/staff situations outlined in the HIV/HBV Guidelines. In addition, this committee will function to review the HIV/HBV Guidelines on an annual basis. The committee will coordinate annual instruction on Infection Control Updates for the

faculty. This committee will also serve the programs by making recommendations for infection control policy that may impact the student/faculty/staff populations. Information regarding such policy will be included in the various programs' Student Handbook and the CNHP Faculty/Staff Handbook.

When the Infection Control Committee convenes to consider specific student/faculty/staff situations, a timely response is in order. Individuals will be provided a letter outlining the committee recommendations within a one-week period after convening. During this time period the student/faculty/staff person shall not engage in direct client contact. Should an individual wish to appeal the decision of the committee, the established University Grievance process should be followed (See A-State Student/Faculty Handbooks).

## **COUNSELING**

It is the responsibility of the programs to provide counseling to a student/faculty/staff member who is determined to be sero-positive for HIV/HBV, or any significant blood born pathogen, or who manifests symptoms of a related disease process. The counselor interaction with the student/faculty/staff member should be reported to the Infection Control Committee only when the person's health status necessitates a modification in the clinical program or dismissal. It will be the responsibility of the counselor to verify that the student is aware of options for testing, counseling and health care. In addition, the counselor will verify that the student has been provided with specific information that relates to client contact.

The following information is provided in order to refer students when necessary to outside agencies for assistance and follow-up. This information should be reviewed and updated annually.

### HIV Infection Services provided by A-State Student Health Center:

Students at Arkansas State University who desire HIV testing will be referred to the Craighead County Public Health Department for testing. This insures privacy and integrity of specimen collection.

The Student Health Center has developed a media library (videos, pamphlets) for persons coming in with questions about HIV infection. The Center is located adjacent to the football stadium and can be reached at ext. 2054.

### Services offered by the Public Health Department

The Craighead County Public Health Department is open from 8:00 a.m. until 4:30 p.m. for testing. The department offers pre- and post-test counseling as well as HIV testing. The cost of the service is \$5.00 which pays the record maintenance fee. The Public Health Department can be contacted by calling 933-4585. Offices are located in the Arkansas Services Center on 611 E Washington Ave, Ste B, Jonesboro, AR 72401.

An individual who desires testing should allow about one hour for the procedure because pre-counseling is extensive.

The Public Health Department will provide the Hepatitis B vaccine for persons up to age 19. They will not provide testing for Hepatitis B.

The Public Health Department will provide follow-up care for any individual with a positive TB skin test or one with a diagnosis of tuberculosis.

Services offered by Northeast Arkansas Regional AIDS Network (NARAN)

This organization offers free confidential testing. Pre- and post-counseling is provided by certified counselors. They also provide direct care services to those persons who need them, including financial counseling. NARAN is also a network agency for persons living with AIDS. A referral can be made by contacting the office at 931-4HIV (4448).

The counselor should not neglect to refer the student/faculty/staff member to his/her private physician for guidance.

Students/faculty/staff outside of Craighead County should seek specific referral information from the Chair of the Infection Control Committee or from a faculty member designated as counselor at the distant sites.

**HIV/HBV GUIDELINES  
FOR ON-CAMPUS LABORATORY AND CLINICAL SETTINGS**

In accordance with sections 503 and 504 of the Rehabilitation Act of 1973, schools must provide equal treatment to persons who have contracted the HIV/HBV virus. Furthermore, schools may not discriminate against any individual based on the perception that he/she is infected.

**TRANSMISSION INFORMATION**

All CNHP students and faculty will employ Standard Precautions while in the clinical setting. CNHP students will receive instruction and annual evaluation regarding transmission of blood-borne pathogens and the use of Standard Precautions. The Infection Control Committee will coordinate instruction on Standard Precautions for faculty on an annual basis. It will be the responsibility of faculty members to document annual instruction through the Infection Control Committee.

**POLICY**

Students, faculty, and staff with HIV/HBV, or any significant blood borne pathogen, should be allowed equal access, as long as their medical condition permits, to university facilities or campus activities, including participation in clinical experiences or other academic and social activities offered by the university.

All confidential medical information is protected by statute and any unauthorized disclosure may create legal liability. The duty of the health care providers to protect this confidentiality is superseded by the necessity to protect others in very specific circumstances.



An infected student/faculty who is symptomatic may be excluded from providing direct client care, determined on a CASE-BY-CASE basis by the Infection Control Committee (appropriate supervisory personnel). In addition, should an individual sero-convert and express concern regarding clinical practice, the committee will convene to review the case.

Students may be asked to serve as source partners in on-campus laboratories for procedures involving needle sticks or other forms of vascular access. For criteria related to laboratory participation, see the specific program handbook.

### **EXPOSURE (Laboratory and Clinical Settings)**

Students and faculty in the College of Nursing and Health Professions may be exposed to blood borne pathogens such as HIV and HBV. In the clinical and classroom laboratory settings, students/faculty are expected to utilize Standard Precautions, hand washing and protective clothing/gear to prevent contact with blood and other potentially infectious materials.

Exposure means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that result from one's duties as a CNHP student or faculty member. An exposure incident involving a student/faculty/staff/visitor i.e. volunteer, invited guest in the CNHP, while in a clinical facility or campus laboratory is treated in a similar manner to any type of accident occurring within the agency.

### **On-Campus Laboratory or Clinical Setting: Blood Borne Pathogen Post Exposure Protocol**

Should a student or faculty member be exposed to blood borne pathogen in an on-campus laboratory or clinical setting, the following post-exposure protocol is recommended:

1. The student will notify the faculty member supervising the learning experience. If the exposed individual is a faculty member, he/she will notify the chairperson of the specific program in the CNHP.
2. As soon as possible following the exposure, the college incident form will be completed by the faculty member/student.
3. The exposed individual will be referred to the Student Health Center for evaluation if the event occurs during operating hours. If the exposure occurs when the Health Center is closed, the faculty member will determine the individual's primary care options and refer the person to those resources.
4. It is suggested that the post-exposure protocol be managed by the individual's primary care provider at the individual's expense.
5. If there is a delay in reporting an exposure incident, it is recommended that the same protocol be followed.

### **Off-Campus Laboratory or Clinical Setting: Blood Borne Pathogen Post Exposure Protocol**

If a student/faculty member is exposed to blood or other potentially infectious materials in the off campus setting, this Blood Borne Pathogen protocol is to be followed.

1. The student will notify the clinical faculty. If the exposed individual is a faculty member, s/he will notify the chairperson of the specific program at the CNHP.
  2. The student, clinical faculty or chairperson will notify the supervisor of the area where the exposure occurred. Thereafter, post-exposure protocols for the clinical institution will be followed.
  3. The infection control staff member/epidemiologist of the clinical facility will be notified of the exposure immediately by the student or if possible by the clinical faculty member. If a faculty member has been exposed, this individual will notify the infection control staff/epidemiologist.
  4. As soon as possible following a report of an exposure incident the clinical faculty and infection control staff/epidemiologist should provide the student with counseling about an immediate confidential medical evaluation and follow-up at the student's expense. In the case of a faculty member's exposure, the individual is expected to communicate directly with the infection control staff/epidemiologist. The medical evaluation and follow-up should include, at a minimum, the following requirements:
    - (a) Documentation of the route(s) of exposure and the circumstances under which the exposure incident occurred.
    - (b) Identification and documentation of the source individual unless the clinical facility staff establishes that the identification is infeasible or prohibited by state or local law.
- (1) The source individual's blood shall be tested as soon as possible after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the clinical facility shall establish that the source individual's consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood shall be tested and the results documented.
  - (2) When the source individual is already known to be infected with HIV or HBV, testing for the source individual's HIV or HBV status need not be repeated.
  - (3) Results of the source individual's testing shall be made available to the exposed individual who should also be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
    - (a) The exposed student/faculty member's blood should be tested as soon as possible.

(b) It is suggested that the post-exposure protocol be managed by the student/faculty member's personal healthcare provider.

CNHP  
Infection Control Committee  
5/15/09

**Appendix F- Hepatitis A/B**  
Department of Physical Therapy  
Arkansas State University

Hepatitis A/B Vaccine

I have been instructed in the benefits of receiving the hepatitis aA/B vaccine and agree to take responsibility to ensure that I receive the hepatitis A/B vaccine. I understand that it is my responsibility to pay for the cost of the vaccinations.

\_\_\_\_\_ Student \_\_\_\_\_ Date

\_\_\_\_\_ Program

(The student must submit documentation of receiving the vaccination series when performed for their clinical file)

.....  
I have already been immunized with the complete hepatitis A/B vaccine series by

\_\_\_\_\_ on \_\_\_\_\_,

\_\_\_\_\_, and \_\_\_\_\_.

(The student must submit proof of vaccination series for their clinical file)

Or

I am considered immune because of a past blood test for antibodies to hepatitis A/B virus.

\_\_\_\_\_ Student \_\_\_\_\_ Date

(The student must submit proof of their immunity for their clinical file)

.....

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis A/B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis A/B vaccine, at my own expense. However, I decline hepatitis A/B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis A/B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis A/B vaccine, I can receive the vaccine series at my own expense.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

07/13/11

*Appendix G- Release Form*

**STUDENT INFORMATION AND RELEASE FORM**

NAME: \_\_\_\_\_

CURRENT LOCAL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

LOCAL PHONE #:

**HEALTH INSURANCE INFORMATION**

HEALTH INSURANCE CARRIER:

IDENTIFICATION #:

**EMERGENCY CONTACT PERSON**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE #: HOME \_\_\_\_\_ WORK: \_\_\_\_\_

RELATIONSHIP:

**PERSONAL LIABILITY INSURANCE INFORMATION**

PROVIDER NAME:

EFFECTIVE DATES:

**RELEASE OF INFORMATION**

I understand that health insurance; physical examination; CPR and liability insurance information may be required by clinical facilities to which I am assigned as part of the PT curriculum. I hereby authorize release of this information as necessary for this purpose only.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## ***Appendix H- Waiver and Verification Form***

### **WAIVER AND VERIFICATION FORM**

Please read and initial each statement in the space provided, sign at the bottom and return to the department secretary by the end of orientation.

\_\_\_\_\_ 1. I understand that students will be expected to apply physical therapy modalities and perform treatment skills on each other in laboratory courses that are part of the PT curriculum. I understand the risks and am willing to participate in these activities. This agreement is voluntary and by signing I acknowledge this fact. I further understand that this is not a binding contract and I reserve the right to change my decision at a later date. I acknowledge, however, that rescinding this decision may have a negative effect on my progress in the program.

\_\_\_\_\_ 2. I acknowledge that I have received a current copy of the A-State DPT Student Handbook provided by the Physical Therapy programs on \_\_\_\_\_ (date).

\_\_\_\_\_ 3. I further acknowledge that I have read and understand the contents of the A-State DPT Student Handbook and I agree to abide by the rules and regulations contained therein.

\_\_\_\_\_ 4. I hereby voluntarily agree to have photographs/videos taken of my person to be used for educational and marketing purposes. I understand there will be no financial remuneration involved and stipulate that the reproductions be used only for the sole purpose of education or marketing.

\_\_\_\_\_ 5. I acknowledge that the DPT faculty conduct ongoing research for program assessment. In that process, admissions data as well as data collected during the program (Nelson-Denny Reading Test scores, Professional Behaviors Assessment measurement, grade point average, GRE scores, PEAT scores) and after graduation (licensing examination scores) will be analyzed. The results of the analysis may be published. In the event of publication, all data will be reported in aggregate and individual students will not be identified. I hereby voluntarily agree that my data may be used in a study submitted for publication.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

*Make sure you have initialed all blanks and signed in the space provided*

***Appendix I- Substance Abuse Policy***  
Substance Abuse Policy  
College of Nursing and Health Professions  
**Arkansas State University**

**POLICY**

The College of Nursing and Health Professions recognizes its responsibility to provide a healthy environment within which students may learn and prepare themselves to become members of a health occupation. Within each profession there are codes and standards for conduct by which all members of the profession are expected to function. Thus, when engaged in educational activities whether on campus or in the clinical setting health professionals are expected to be free from the abusive influence of chemical substances/drugs<sup>1</sup>. When students are under the influence of drugs and alcohol, they present a threat to patients, other students and the employees and visitors of clinical facilities. It is the responsibility of the student to report any medication/s taken which would adversely affect her/his ability to perform safely in class or clinic. Written documentation will be required for verification of medications taken and will be placed in the student's file. As a condition of admittance and retention in any professional program in the Arkansas State University College of Nursing and Health Professions all students must sign a SUBSTANCE ABUSE COMPLIANCE CONTRACT agreeing to adhere to the *Substance Abuse Policy & Procedures* when conducting any activity associated with their educational program. As the contract notes, it is inclusive of testing for substances and appropriate release of that information.

**PROCEDURES**

1. *If a faculty member or supervisor observes a student demonstrating behavioral changes giving probable cause to believe the student is under the influence of drugs or alcohol while performing course activities*, the student will immediately be asked to submit to body fluid testing for substances at a lab designated by the College of Nursing and Health Professions who have identified procedures for collection (see attached). The cost of the test will be borne by the student. Refusal to submit for testing warrants immediate program dismissal.

At the time the specimen is released to the testing lab, the student will sign a release statement requesting that the test results be sent to the Dean's Office, College of Nursing and Health Professions, and to the student. If the results are negative, no further action will be taken and the student will only be allowed to make up work missed. If the results

---

<sup>1</sup> The generic meaning of the term "drug" is broadly defined as any chemical substance which affects living systems. For the purposes of this policy, substance and/or drug abuse are used interchangeably and defined as socially unacceptable use of drugs or other chemical substances for non-therapeutic purposes. The substance alcohol (ethanol), by its properties and actions, is a drug and is used as such in this policy. Drugs prescribed by a physician licensed to practice medicine and surgery, as long as the drug is taken in accordance with the provider's instructions and do not impair the student's ability to perform his/her duties, are exempt from this policy.

**Reference:**

Reiss, B. & Melick M. (1987). *Pharmacological Aspects of Nursing Care* (2nd Ed.). Albany, NY: Delmar Publishers, pp. 2, 627, 631-633.

are positive (and substantiated by a second or confirmation test), the student will be dismissed from the professional program. Laboratory results will be disclosed to individuals whose duties necessitate review of the test results and confidentiality will be adhered to as stringently as possible.

2. *This policy applies only to a student exhibiting behavior creating probable cause to believe drug or alcohol abuse is present. A student may be removed from the clinical environment or educational program for any prohibited behaviors as set out in the university or program handbooks, rules and regulations, whether or not related to substance abuse.*
3. Readmission of the student to the program is contingent upon the following conditions:
  - a. Formal application for readmission to the program.
  - b. Meeting specific program admission criteria as noted in the Undergraduate/ Graduate Bulletin.
  - c. Clinical space availability.
  - d. Documentation that a prescribed treatment program has been completed by the student related to the drug/alcohol condition. The documentation is to be submitted to the Dean's Office, College of Nursing and Health Professions by the designated treatment facility.
  - e. Follow-up program as suggested by the treatment facility that may include, but is not limited to, one or more relapse prevention procedures. The follow-up program will be individual specific and written as part of a contractual agreement with the student.
4. Arkansas State University may be required by state or national regulatory boards to submit information regarding a student's substance abuse history when he/she applies to take the examination for licensure. There is no guarantee that these boards will allow individuals with a substance abuse history to take the examination. Each case is judged individually by each board.
5. Students will be required to abide by individual institutional policies relating to substance abuse in clinical agencies to which they are assigned.



## SUBSTANCE ABUSE COMPLIANCE CONTRACT

### COLLEGE OF NURSING AND HEALTH PROFESSIONS ARKANSAS STATE UNIVERSITY

I, \_\_\_\_\_, have read the Board of Trustee approved *Substance Abuse Policy & Procedures* of the Arkansas State University College of Nursing and Health Professions and agree, as a student in the professional health program, to comply with all aspects of the policy as written, including testing for substances and appropriate release of that information. Furthermore, I agree to abide by the provisions for determining dismissal and to follow the conditions of readmission as outlined.

\_\_\_\_\_  
Student's Name

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

\_\_\_\_\_  
Date

For Student File

## BEHAVIORAL CHANGES ASSOCIATED WITH DRUG ABUSE

The College of Nursing and Health Professions has developed the following list of behaviors that are not all inclusive but, when observed, can be used as indices to identify an individual who at the moment of observation could be under the influence of a "drug" (see the *Substance Abuse Policy* for definition of the term "drug" and for the mechanisms to operationalize the policy). The College of Nursing and Health Professions is guided by behavioral descriptors that are stated in the latest edition of Diagnostic & Statistical Manual of Mental Disorders.

\* Observation of any of these behaviors will result in dismissal from the learning environment (clinical or classroom).

### Attention Deficit/Cognitive Impairment

ataxia

tremors, especially of the hands

- \* slowed response time in a familiar skill
- \* diminished from the usual in coordination/dexterity

### Social Impairment

- \* inappropriate verbal remarks (subjects/words/expletives)
- \* inappropriate behaviors or those beyond the societal norm such as:
  - angry outbursts/unrestrained agitation
  - crying that cannot be explained
  - euphoria
  - paranoia
  - hallucinations
- \* behaviors that are markedly changed from that individual such as
  - introversion
  - extroversion
  - sullen/irritable
  - giddy
  - defensiveness

### Somatic Manifestations/Discomforts

- \* odor of alcohol on breath
- nausea/vomiting/thirst
- frequent trips to bathroom/complaint of urinary frequency or diarrhea
- hiccoughs
- reddened sclera (bloodshot eyes)
- pupil changes/drooping eyelids
- complain of blurred vision or inability to focus

### Speech/Communication Impairment

- \* slurred (thick tongue)
- \* rapid/choppy communication pattern
- \* incoherent speech

## **BEHAVIORAL PATTERNS ASSOCIATED WITH SUBSTANCE ABUSE**

The following is a list of behavioral patterns that may surface when drugs have been abused. While these patterns have many causes, thorough assessment and detailed documentation is needed over a period of time to determine if there is any relationship to drug abuse. Patterns of behavior to observe and validate are:

- ! repeated tardiness
- ! frequent absenteeism
- ! numerous and chronic somatic complaints (colds/GI problems/lack of sleep/weight loss/sluggishness/low energy)
- ! untidy personal appearance or deterioration in quality of grooming
- ! lack of attention to hygiene (hair, nails, skin, oral)
- ! multiple crises in personal life
- ! avoidance/lack of eye contact
- ! isolation/lack of peer support
- ! repeated excuses for below standard performance
- ! forgetfulness with appointments/assignments
- ! slowed response time in familiar activities
- ! behavior shifts/mood swings
- ! lack of trust and suspicious of the motives of others
- ! needle tracks on body surface
- ! behaviors surrounding the administration of narcotics:
  - frequent need to waste "unused" medications
  - recording the administration of larger doses than ordered
  - unauthorized possession of the narcotic key
  - unsupervised entry into narcotic cabinet
  - volunteering to be in situations to gain greater access to narcotics
  - taking frequent breaks/numerous occasions when whereabouts unknown

## CRITERIA FOR URINE DRUG SCREENS

NOTICE: PROVIDE LAB WITH THIS CRITERIA

**ANY DRUG SCREENS SUBMITTED TO ARKANSAS STATE UNIVERSITY, COLLEGE OF NURSING AND HEALTH PROFESSIONS SHALL HAVE MET THE FOLLOWING CRITERIA:**

1. Specimen collection is witnessed.
2. BASIC 10-PANEL\* DRUG SCREEN INCLUDING ALCOHOL, MEPERIDINE AND DRUG OF CHOICE (SEE #7).
3. Laboratory must be CLIA<sup>1</sup> approved.
4. Confirmation of positive results is done by GCMS<sup>2</sup>. If specimen must be sent to another laboratory for confirmation, the chain of custody is maintained.
5. Report, in addition to results, will include:
  - a. Chain of custody;
  - b. Drug history;
  - c. List of drugs screened;
  - d. Confirmation of method used; and
  - e. Specific gravity.
6. The laboratory will retain negative specimens for a minimum of two (2) weeks and positive specimens for a minimum of one (1) year.

\*10-PANEL INCLUDES:

|              |                 |
|--------------|-----------------|
| Amphetamines | Benzodiazepines |
| Cannabinoids | Cocaine         |
| Opiates      | PCP             |
| Barbiturates | Methadone       |
| Methaqualone | Propoxyphene    |

7. THE DRUG SCREEN SHALL TEST FOR THE FOLLOWING:

|                 |                |
|-----------------|----------------|
| Amphetamines    | Methaqualone   |
| Barbiturates    | Phencyclidine  |
| Benzodiazepines | Propoxyphene   |
| Cannabinoids    | Alcohol        |
| Cocaine         | Meperidine     |
| Opiates         | Drug of choice |
| Methadone       |                |

DRUG SCREENS WHICH DO NOT TEST FOR THE ABOVE WILL BE CONSIDERED NON-COMPLIANT WITH THE ORDER.

<sup>1</sup>Clinical Laboratory Improvement Act: Set of Federal Regulations which clinical labs must meet for certification.

<sup>2</sup>Gas Chromatography Mass Spectrometry

Adopted from Arkansas State Board of Nursing, January 1997.

ARKANSAS STATE UNIVERSITY  
COLLEGE OF NURSING AND HEALTH PROFESSIONS  
SUBSTANCE ABUSE POLICY AND PROCEDURES  
Waiver of Release of Medical Information

I, \_\_\_\_\_, am a professional health student at Arkansas State University and have previously received, read and understand the College of Nursing and Health Professions' *Substance Abuse Policy & Procedures*.

I hereby consent to having a sample of my body fluid collected on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, according to the terms set forth in the policy for the purpose of testing for identified substances at my own expense.

I understand that a positive test result will require a subsequent confirmation test. If that result remains positive, it will affect my status in the professional program. I understand that if I am taking any medications which would adversely affect the results of the test, that I should disclose those immediately. Written medical documentation from my physician will be required by me for verification of those medication/s taken.

I authorize the release of test results related to the screening or testing of my blood/urine specimen to the Dean, College of Nursing and Health Professions at Arkansas State University, and to myself. I understand that my body fluid specimen will be sent to \_\_\_\_\_ for actual testing.

I hereby release Arkansas State University, its Board of Trustees, officers, employees, and agents from legal responsibility or liability arising from such a test, including but not limited to, the testing procedure, analysis, the accuracy of the analysis, or the disclosure of the results.

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time

\_\_\_\_\_  
Witness

\_\_\_\_\_

\_\_\_\_\_

***Appendix J- TB Mask Fitting***

**Verification of TB Mask Fitting**

This is to verify that the undersigned was fitted for a TB mask. It is understood that students who are assigned to provide services for clients with active tuberculosis are to wear the TB mask when providing direct patient care.

Mask Size: \_\_\_\_\_

\_\_\_\_\_  
Student's Name (Printed)

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

\_\_\_\_\_  
Location fitted

\_\_\_\_\_  
Date fitted

### ***Appendix K- Latex Allergies & Sensitivity***

Some students have previously demonstrated an allergic reaction to the use of latex. The signs include burning, itching and swelling of the exposed part. This can be an emergency situation, however, it is extremely rare. If a suspected allergy is demonstrated, the student should immediately notify the supervising faculty member.

It is the student's responsibility to notify in advance to the faculty member supervising the learning experience that the student is allergic to latex. This substance is commonly used in protective gloves in learning situations found in the anatomy laboratory or during wound care. Latex free gloves will be provided by the department upon written request from the student after documented cases of latex allergies or negative reactions.



***Appendix L- Incident Form***  
**COLLEGE OF NURSING AND HEALTH PROFESSIONS**  
**Incident Report Form**

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

**Time:** \_\_\_\_\_

**Location:** \_\_\_\_\_  
(On Campus/Off Campus)

CLINICAL LABORATORY SCIENCES G  
COMMUNICATION DISORDERS G  
NURSING G  
PHYSICAL THERAPY G  
RADIOLOGIC SCIENCES G  
SOCIAL WORK G

**Student:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**Description of Incident (Name all persons involved):**

---

---

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---

---

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---

---

---

---

**Witnesses of the Incident:**

**Action taken (notification of/by whom):**

---

---

---

---

---

**Review/Comments:**

---

---

---

---

---

**Does this need review by the Infection Control Committee? Yes G No G**

\_\_\_\_\_

\_\_\_\_\_  
Student Date

\_\_\_\_\_ Faculty \_\_\_\_\_ Date

**Follow-up:**

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**If more space is necessary, use additional pages or back of sheet.**

Two copies (one copy in student file; one in Departmental Office file).

### ***Appendix M- Code of Honor***

#### **PROCEDURES FOR COLLEGE STUDENT CODE OF HONOR (*Rev. April 21, 2006*)**

The College Student Code of Honor exists in addition to the University Code of Conduct and the Academic Integrity Policy found in the Student Handbook. An honor offense by the college code is defined as an act of lying, cheating or stealing. These terms are defined as follows:

**Lying** - a false statement (written or oral) made with the deliberate intent to deceive; something intended to or serving to convey a false impression.

**Cheating** - to practice fraud or deceit; academic fraud is a form of cheating and includes such things as plagiarism (including Internet resources), false citation, false data and submission of the same work to fulfill academic requirements in multiple classes.

**Stealing** - to take the property of others without permission or right; to take ideas, credits, words without right or acknowledgement; to accept credit for another's work.

These honor code violations apply whether they are performed individually or in groups. They apply to didactic, laboratory and clinical experiences of the program as well as in situations where you are representing your program/college.

#### **PROCEDURES:**

If a student is aware of an honor offense, the student should report that offense to their ethics committee representative. The representative will accompany the student to the faculty member, program/director or chair's office OR will direct the student to the faculty member of the class in question, the program director or the department chair. An investigation will result.

If there is evidence to bring forward, the student will be notified, in writing, of the specific charges, who the hearing body will be and the time and place of the hearing. Such notification will be delivered at least two working days in advance of the hearing. The date of the hearing, if possible, must be set within 10 working days from the date of notification to the student.

The College Code of Ethics Committee will hear the case. The Ethics Committee will be selected each fall and will be comprised of six CNHP student representatives and two CNHP faculty appointed by the dean. A committee of alternate representatives will be selected by the Dean to include six (6) students and two (2) faculty members\*. Actions by the Ethics Committee may include: 1) dismissal of the case, 2) sanction the student, 3) refer the case to the Dean of Students, Student Affairs. Disciplinary sanctions by the committee may include educative, reprimand, restrictions and restitution. The committee does not have the authority to suspend or expel the student. However, the committee may forward the case to the faculty member or director/chair with a recommendation of suspension or program dismissal. The Dean of Students, or designee, will educate the committee and their alternates on the hearing process and sanctions in the fall semester of each year.

Student rights in this committee process are outlined in the A-State Student Handbook under the caption "Disciplinary Hearings". The student is entitled to one appeal rendered by the Associate Dean for Judicial Affairs. The process for appeal is found in the section on Appeal Process.

\*On each distance campus, one student will be designated as an ethics representative.

ARKANSAS STATE UNIVERSITY  
COLLEGE OF NURSING AND HEALTH PROFESSIONS  
**College Student Code of Honor**

Each student admitted to a professional program in the College of Nursing and Health Professions is charged with the responsibility of honorable conduct. A student is assumed honorable until his/her actions prove otherwise. An honor offense is defined as an act of lying, cheating, or stealing. Formal procedures exist for violations of the honor code.

As a student in a health program, it is fundamental that you act in an honorable and virtuous way so that a community of trust is established among members of the college and your clients. Honor is a practiced ideal that will positively impact your relationship with fellow students, faculty, administrators, patients and other members of the community. As you live an honorable life, you will find that you cannot live without it.

All students in this college are bound by the Honor Code and all are needed to make it work. The atmosphere of trust and integrity that is created by an honor system enables the student to know his/her word will be taken as true, to compete fairly in the classroom and to keep what is rightfully his/hers. The system functions best when all members of the college not only take responsibility for their own actions, but hold their peers to the same standards.

As a student admitted to a health professions program, you must agree to live by and support the basic principles of honesty - no lying, cheating or stealing; be accountable for your actions; and share information about honor offenses. If you are not prepared to accept these responsibilities, you should select a program outside this college.

I have read the explanation of the College Student Code of Honor. I understand that as an admitted student in one of the programs in the college, I have accepted the pledge of honesty and will be expected to meet the standards as set forward.

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Signature

---

Date

***Appendix N- HIPAA Compliance***  
Arkansas State University  
College of Nursing and Health Professions  
HIPAA Compliance Contract

I, \_\_\_\_\_, have read the information provided to me concerning the Health Insurance Portability and Accountability Act (HIPAA) and understand its intention. As a student in a professional health program, I agree to comply by the requirements of HIPAA.

I understand that during clinical experiences, I will have access to protected personal health information (PHI as defined by HIPAA) of individuals and agree to:

- a) Only use or disclose PHI as permitted Clinical Service under HIPAA statute(s);
- b) Use appropriate available safeguards to prevent misuse of PHI;
- c) Make PHI available to individuals as set forth under the HIPAA statute(s);
- d) Return or destroy all PHI upon termination of a clinical assignment; and
- e) Report any improper disclosure of PHI within ten days of discovery to my Clinical Instructor and / or the Director of Clinical Education.

\_\_\_\_\_  
Student 's Name

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

\_\_\_\_\_  
Date

For Student File

***Appendix O- On-line release form***  
Department of Physical Therapy  
Student Consent to Place Photo and Personal Information On-line

I give the A-State Department of Physical Therapy permission to place my name, photograph, email address, and hometown on the department's web site (<http://pt.astate.edu/>). I understand that this information will be used for purposes of communication between my classmates, the faculty, potential employers, others, and myself as well as to aid in recruitment efforts.

Additionally, I give the A-State Department of Physical Therapy permission to place my photograph on social media sites (i.e., Facebook page).

I will not hold the A-State Department of Physical Therapy liable for misuse of this information by parties unaffiliated with the A-State Department of Physical Therapy (e.g., spamming, harassment, etc.). My signature below indicates that I have read and agree to the information in this paragraph.

Student Name (print): \_\_\_\_\_

Email Address: \_\_\_\_\_

Hometown: \_\_\_\_\_

Student Signature: \_\_\_\_\_

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

***Appendix P- Student Conference Record***

Student Conference Record

Student: (Name here)

Date: (Date here)

Re: (Purpose of meeting here)

---

Possible Topics:

1. Courses (Content, instructors, grades, special problems)
2. Directed Experience (Assignments, instruction, classroom/clinic behavior)
3. Specific Problems
4. Students strengths and weaknesses
5. Student's Input
6. Faculty Input
7. Conclusions / Comments

(eliminate non-applicable sections and enter data under applicable section)

---

Student / Date

Faculty / Date

## ***Appendix Q- Criminal Background Check***

### **CNHP students:**

Arkansas State University College of Nursing and Health Professions now requires background checks for students admitted to professional programs if the screening is required by an affiliate requirement. This is to ensure compliance with agreements between the College and Clinical Facilities.

Arkansas State University's College of Nursing and Health Professions has worked with Verified Credentials, Inc. to establish an acceptable screening procedure. This cost of the background check varies by state from \$47 - \$77. Applicants who fail to submit a background check will not be eligible to participate in the clinical experience.

Please follow the directions below for submitting your application to Verified Credentials:

1. Go to <http://student.verifiedcredentials.com/?organization=arkansasstate>
2. **Enter your 10 character program code.**
  - Background Check – AR Clinical Rotation: KMFHX-63942
  - Background Check – MO Clinical Rotation: GFHCJ-43246
  - Background Check – MS Clinical Rotation: WXRPD-97738
  - Background Check – TN Clinical Rotation: JKDDP-63378
  - Drug Test Only – All Clinical Rotations: HHGCT-44273
3. Create a profile and complete all information/application pages pressing DONE when finished with each one.
4. Make your payment selection and pay by credit card, debit card or PayPal.
5. Sign the Disclosure.
6. Submit your Order.
7. Check your email (inbox, junk & spam) for 2 separate emails from **QualifiedFirst@verifiedcredentials.com**
  - 1) Congratulations you have registered with Verified Credentials through QualifiedFirst.
  - 2) A Track your Order receipt once you have completed payment.
  - 3) If you have requested a Drug Test, you will receive a third email from [clientservice@verifiedcredentials.com](mailto:clientservice@verifiedcredentials.com) with your **Donor Registration** and an **Order Reference** number to initiate your Drug Screen.

Upon completion of the background screening, you will be sent a notice that the report is complete. The report will apprise you of the findings as well as your final score of:

- Red—Convictions or Discrepancy found
- Yellow—Possible Discrepancy found
- Green—No Convictions or Discrepancies found

You will be required to share the detailed report with the clinical site. If any information is found that would negatively affect your eligibility for clinical placement in the Program, you will be given an opportunity to challenge the information through the Adverse Action process associated with Verified Credentials. The clinical site will review any information concerning reports that are yellow or red and will determine your eligibility to participate in the clinical experience base on their criteria. If you have any questions, please contact Verified Credentials Client Services at 800.938.6090.

It is important that you submit information in a timely fashion. Thank you for your prompt attention to this request.

### **RELEASE OF SCREENING RESULTS**

I, \_\_\_\_\_, am currently enrolled in one of the Arkansas State University College of Nursing and Health Professions Programs below as indicated by the check mark:

- Nursing
- Clinical Laboratory Science
- Physical Therapy
- Medical Imaging and Radiation Science
- Communication Disorders
- SocialWork
- Nutrition



I realize that the criminal background check policy/process may require that my results be shared with clinical affiliates and if a negative indicator is recorded , determine if I am permitted to participate in the clinical experience. My signature on this document serves as proof that I am granting permission for my criminal background check reports to be released as indicated.

Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE TAKE TO YOUR DEPARTMENT TO BE PLACED IN YOUR STUDENT FILE.

**Objective:** To assist students in meeting requirements for placement in certain health care facilities through documentation of a satisfactory criminal background check.

**Required:** Effective August 1, 2009 students must submit to and demonstrate a satisfactory criminal background check as a prerequisite for clinical practice for certain health care facilities. Students who fail to submit to a background check or to allow the Clinical facilities access to the report will be ineligible for clinical placement. Those who do not pass the background check are afforded the opportunity to explain the circumstances surrounding the situation and if the final determination is that the student is ineligible for clinical placement he/she will be given the opportunity to withdraw from the Program. Attendance in clinical practice is mandatory for successful completion of all of the Nursing or Health Professions Program.

The criminal background check will include but is not limited to: ID Search Plus; Criminal Background; Sex Offender Search; Abuse Registry; OIG Medicare Sanctioned List;

Situations in which a student does not receive a satisfactory background check will be reviewed by the Clinical Facility on a case-by-case basis. Convictions involving the following crimes, but not limited to these crimes, may serve to disqualify a student from participating in the mandatory clinical learning experiences.

- Any felony, whether listed below or not
- Crimes involving drugs, including but not limited to unlawful possession or distribution
- Crimes of physical violence to include any type of abuse (child, spousal, or of the elderly), abduction such as kidnapping, manslaughter, murder, robbery, sexual crimes, possession of a restricted fire arm or any related weapons offenses, assault and battery
- Conviction of a misdemeanor related to abuse, neglect or exploitation

A private company approved to perform Criminal Background Checks will conduct the background check. The cost of the background check will be borne by the student.

#### **Process Guidelines:**

- ❖ Arkansas State University College of Nursing and Health Professions has adopted Verified Credentials as the background screening vendor for those clinical sites that require a background check. This will become effective August 1, 2009. Students will be responsible for all associated costs.
- ❖ Students will be required to complete a background check screening with the Program's vendor. The background check is to be completed prior to participating at the health care facility where such a requirement is stipulated.
- ❖ At present, Verified Credentials completes screening through Criminal Search (County), FACIS (Level I – Individual), IDSearchPlus and the National Sex Offender Public Registry.
- ❖ Through Verified Credentials, students are assigned a GREEN, YELLOW or RED indicator in each of the screening areas listed above. A copy of each student's report will be sent directly to the clinical site for review and/or available for review per Verified Credentials'WEB site. Students will be required to provide all clinical affiliates open access to criminal background check reports.
- ❖ In the event the student receives a **GREEN** indicator(s), the student will be cleared to participate in clinical experiences.
- ❖ In the event the student receives any **YELLOW** indicator(s), the student's Verified Credentials Report will be reviewed by the clinical to determine if they will be permitted to participate in the clinical experience.
- ❖ In the event the student receives any **RED** indicator(s), the student's Verified Credentials Report will be reviewed by the clinical site to determine if the student will be permitted to participate in the clinical experience.

- ❖ Additional background checks with other vendors may be stipulated by some clinical affiliates (e.g. mental/behavioral health). Clinical affiliates reserve the right to refuse entrance of any student based on background check information. In the event, a clinical affiliate declines a student for clinical experience the student may not be able continue in the program since program objectives cannot be met. Students will be provided a copy of the program policy regarding criminal background check screening. In the event changes are made to the background check screening process, students will receive the applicable updates.

**Arkansas State University  
College of Nursing & Health Professions  
Criminal Background Check**

Student name: \_\_\_\_\_

I understand that criminal background checks may occur as part of my professional education at ASU. Evidence of a previous charge or conviction of a felony/misdemeanor on my record may affect my progress in this program. While the faculty cannot realistically determine whether this will have any future impact on my ability to work in my profession, I do understand that the following issues could arise during my time as a student or as a graduate of the program.

1. Certain rotation sites could deny me access for rotation.
2. Hospitals or other health care institutions could refuse to allow me access for a clinical experience.
3. The above two issues could make it impossible for me to complete the clinical portion of my education and therefore not graduate.
4. Upon graduation, a state licensing agency could refuse to grant me a license.
5. As a licensed professional, certain health care institutions could refuse to grant me privileges.
6. There could be other, unforeseen, impacts of this incident on my ability to practice as a professional.

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Arkansas State University Student Information

Arkansas State University has partnered with Verified Credentials to manage your program requirements including the following:

- Background Report
- Drug Test

To access Verified Credentials- Student go to:

<http://student.verifiedcredentials.com/?organization=arkansasstate>

### HowItWorks:

1. Enter code for the program you will be attending located above the "Get Started!" button on the right side of the page

|                              |
|------------------------------|
| <b>AR Clinical Rotations</b> |
| KMFXH-63942                  |

|                              |
|------------------------------|
| <b>MO Clinical Rotations</b> |
| GHFCJ-43246                  |

|                              |
|------------------------------|
| <b>TN Clinical Rotations</b> |
| JKDDP-63378                  |

|                              |
|------------------------------|
| <b>MS Clinical Rotations</b> |
| WXRPD-97738                  |

|                         |
|-------------------------|
| <b>Drug Screen Only</b> |
| HHGCT-44273             |

|                             |
|-----------------------------|
| <b>Drug Screen – Retest</b> |
| TVBCW-82298                 |

2. Create an account or if you already have a QualifiedFirst account, log back in as a "returning user" and enter the code at the top of your home page.
3. Enter all required information
4. Provide supporting documentation
5. Track your progress
6. Information will automatically be shared with your school

**NOTICE:** If your code includes a drug test, you will receive a notification with a registration number and nearby collection sites within 1 business day of submitting your application.

If you have any questions, our Client Services Team is ready to assist you. Please call us at 800.938.6090 or email us at [ClientServices@verifiedcredentials.com](mailto:ClientServices@verifiedcredentials.com).

### ***Appendix R- Student Confidentiality Contract***

Arkansas State University  
College of Nursing & Health Professions  
Department of Physical Therapy

#### **STUDENT CONFIDENTIALITY CONTRACT**

The confidentiality of patients admitted to contracted clinical agencies of the College of Nursing & Health Professions at Arkansas State University is protected by state and federal laws as well as treatment center policy and ethical consideration. Any student who breeches this confidentiality is subject to immediate termination from the clinical rotation. Such disclosure is also subject to applicable laws and regulations. All information in regard to patients is considered confidential. This includes the following:

- A. The fact that the individual is a patient at a contracted clinical agency.
- B. The patient's name, address, employer, etc.
- C. The nature of the patient's illness or reason for admission to the treatment center.

Students are not allowed to discuss patients with individuals in the community and are not allowed to discuss patients in patient/public areas within the treatment center. Prior to the start of the clinical rotation, each student will review this confidentiality policy.

I, \_\_\_\_\_, understand the information presented to me regarding patient confidentiality and acknowledge that I will assume legal responsibility for any breach I may make. I also understand that if I breach confidentiality in any way I will be immediately terminated from my clinical course at Arkansas State University.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

***Appendix S- Technical Abilities and Skills***

Arkansas State University  
College of Nursing & Health Professions  
Department of Physical Therapy

**ESSENTIAL REQUIREMENTS & FUNCTIONS  
FOR ADMISSION & RETENTION**

The essential requirements identify the minimum technical standards required for admission, retention, and graduation of students. Graduates are expected to be qualified to enter the field of Physical Therapy. It is, therefore, the responsibility of the student with disabilities to request those accommodations that he/she feels are reasonable and are needed to execute the essential requirements. Requirements for accommodations must be fully documented.

I certify that I have read and understand the Arkansas State University Physical Therapy Program's Technical Skills and Abilities Essential Requirements for admission and retention.

\_\_\_\_\_ I can meet the Physical Therapy Program's Technical Abilities and Skills

\_\_\_\_\_ I can meet the Physical Therapy Program's Technical Abilities and Skills reasonable accommodations. I require:

\_\_\_\_\_ I cannot meet the Physical Therapy Program's Technical Abilities and Skills

\_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

***Appendix T- Educational Records Release Form***

Arkansas State University  
College of Nursing & Health Professions  
Department of Physical Therapy

**EDUCATIONAL RECORDS RELEASE FORM**

Student's authorization to disclose information in education records pursuant to Family Educational Rights and Privacy Act (FERPA) of 1974, as amended

I, \_\_\_\_\_, hereby authorize  
Arkansas State University to disclose the following information, documents, etc.,  
contained in my education record:

\_\_\_\_\_  
(specify)

\_\_\_\_\_  
to

\_\_\_\_\_  
(person or organization to whom authorization is given)

for the purpose of

\_\_\_\_\_  
(state purpose for which information may be disclosed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date



*Appendix U- Video / Photo Consent Form and Release to Publish*



**Department of Physical Therapy**  
**PO Box 910 State University, AR 72467**  
**Office: (870) 972-3591 Fax: (870) 972-3652**

**Video / Photo Consent Form and Release to Publish**

Both the Department of Physical Therapy and Arkansas State University (A-State) are frequently involved in professional, research, and community activities that require visual images to effectively communicate with various audiences.

The Department of Physical Therapy and A-State desire your participation in such professional and community activities through the use of your photograph or video image. You are being asked to allow your image to be included in a document that may be published and disseminated to a wide audience for the purposes of research, teaching, or publicity.

You are under no obligation to give consent and permission to use your image. By signing this document at the indicated location below, you are consenting to the use of your image and affirming the way in which your image will be used has been explained and all your questions and concerns to that end have been resolved. Your signature indicates that you are freely giving the Department of Physical Therapy and A-State the right to include your image. Be assured that no names will be associated with any photographs and / or video images.

I, \_\_\_\_\_, give permission for photographs and/or video images to be taken and used as described above.

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (Parent/Guardian if minor)

\_\_\_\_\_  
Date

Client File# (if applicable): \_\_\_\_\_

### ***Appendix V- Treatment Consent Form***

I hereby give my consent and authorization to receive physical therapy services as provided through the Arkansas State University Physical Therapy Department. I understand that student physical therapists or student physical therapist assistants under the supervision of a licensed physical therapist may provide the services through the A-State PT Department. I also acknowledge that the physical therapy services provided through this department are primarily intended for research and to enhance student learning and are not intended to take the place of traditional outpatient physical therapy services. I recognize that my consent to participate is voluntary and release the attending students and their instructional staff, Arkansas State University, and the State of Arkansas from any and all claims, which may arise from my participation.

I hereby acknowledge that students conduct case reports and other research related to patient care activities and that in this process, outcomes data related to my physical therapy treatment may be analyzed. The results of the case report or other research endeavors may also be published. In the event of publication, all data will be reported anonymously and patients will not be identified by name. Other patient related data will be reported only if it is essential to the description of the research. I hereby voluntarily agree that my data may be used in a study submitted for publication.

Date \_\_\_\_\_

\_\_\_\_\_  
Patient's Name

\_\_\_\_\_  
Patient's Signature

\_\_\_\_\_  
Signature of Witness over 18 years of age

## HANDBOOK SIGNATURE PAGE

I have received, read and understand all policies as stated in the DPT Student Handbook.

---

Signature

---

Date

*This form and all forms that require a signature within the DPT Student Handbook should be turned into the academic advisor within 1 week of orientation.*