LSU Health Sciences Center-New Orleans

Department of Physical Therapy
Student Manual

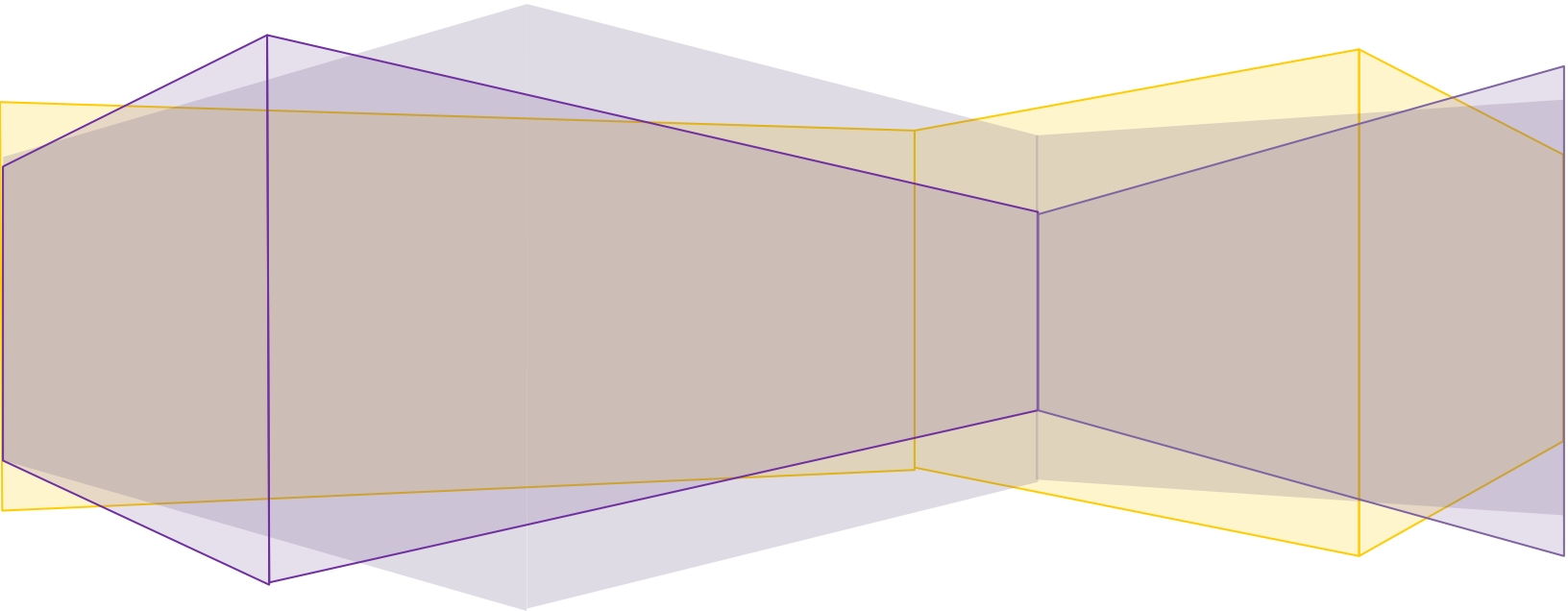


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1. Mission and Vision Statements

1.1 LSU Health Purpose, Mission, and Vision Statements

LSU Health Science Center – New Orleans Purpose:

LSU Health New Orleans exists to educate, to care for patients, and to discover. For these purposes, we ensure a continuous supply of trained Louisiana health care professionals who will train future generations of health care professionals, provide patient care to their communities, and lead in the discovery of medical and scientific breakthroughs.

LSU Health Science Center – New Orleans Mission:

LSU Health New Orleans will be the #1 health sciences university in the Southeast, surpassing all other health science universities. We will be #1 in student, faculty, and staff achievement. We will be the #1 choice for residency training. We will be #1 in patient satisfaction. We will be #1 in Genomics-based research in the Southeast.

LSU Health Sciences Center New Orlenas - Core Values and Beliefs

LSU Health New Orleans is dedicated to Excellence in Patient Care, Mastery in Teaching, and Continuous Learning. We believe in the relentless pursuit of Knowledge and Discovery in order to improve health care. We are committed to Serving – our students, our patients, each other, and our communities. All our energies should lead to Improving Health and Wellbeing of our patients and our communities. Being part of this team is a commitment to perform our duties with Compassion and Respect for others. Everything we do should reflect Professionalism at its highest level. Being part of LSU Health New Orleans is about Commitment:

- To the institution and its mission
- To our individual roles and responsibilities
- To advancing the wellbeing of all our stakeholders

We believe in going The Extra Mile.

1.2 LSU Health New Orleans School of Allied Health Mission and Vision Statements

School of Allied Health Professions Mission:

The School of Allied Health Professions (SAHP) at LSU Health Ne w Orleans (LSUHSC-NO) is committed to educating and empowering the future healthcare workforce by leading advancements in education, research and scholarship, clinical service, and leadership. EDUCATION To foster innovative learning environments and experiences for the next generation of allied health professionals, we are dedicated to shaping competent and compassionate professionals, advancing clinical practice, research, and ethical care. RESEARCH AND SCHOLARSHIP To advance research and discovery on health issues focusing on rehabilitation across the lifespan, we are dedicated to excellence in research initiatives focused on interdisciplinary rehabilitation, leveraging clinical partnerships and community engagement. SERVICE To promote interprofessional education and collaboration across multiple healthcare disciplines, we aim to provide exceptional, equitable healthcare services and personalized support for individuals with developmental and acquired disabilities, promoting their growth and independence. LEADERSHIP To cultivate leadership skills and opportunities within the allied health professions, we are committed to developing leaders who will drive innovation, advocate for health equity, and inspire positive change in healthcare systems and communities.

School of Allied Health Vision

To be a leader in transforming healthcare through innovative education, research, and clinical service.

1.2 LSU Health New Orleans Department of Physical Therapy Mission and Vision Statements

Department of Physical Therapy Mission

The Department of Physical Therapy at LSU Health Sciences Center – New Orleans is committed to excellence in education, clinical service, research, and leadership in alignment with the missions of the School of Allied Health Professions and LSU Health Sciences Center.

We strive to:

- **Educate** compassionate, ethical, and evidence-informed physical therapists who are skilled in critical thinking, clinical decision-making, and lifelong learning.
- **Foster** innovative and supportive learning environments that prepare graduates to meet the various needs of individuals and communities across the lifespan.
- **Advance** the science and practice of physical therapy through collaborative research focused on rehabilitation, wellness, and functional recovery.

- **Promote** person-centered care and needs-based community engagement, with an emphasis on serving underserved populations and addressing health disparities.
- **Cultivate** professional leadership, advocacy, and interprofessional collaboration to drive positive change in healthcare systems and society.
- **Model** excellence through faculty service, scholarship, and clinical practice that support the growth of our students, profession, and communities.

Through these commitments, we aim to empower the next generation of physical therapists to lead, serve, and innovate in an evolving healthcare landscape.

Department of Physical Therapy Vision

Transforming Louisiana by optimizing human movement.

2. PHILOSOPHY OF THE PROGRAM

2.1 DPT PROGRAM

Physical therapy is a dynamic and essential health profession dedicated to meeting the evolving health and wellness needs of individuals and society. Rooted in the values of compassion, fairness, and evidence-informed practice, the profession is guided by a deep respect for human dignity and the belief that every individual has the right to attain their highest level of function and quality of life.

At the LSU Health Sciences Center – New Orleans, the Department of Physical Therapy embraces a transformative vision for education, research, and clinical service. We are committed to preparing physical therapists who are skilled, reflective, and resilient leaders equipped to thrive in dynamic healthcare environments. Our program fosters innovation, lifelong learning, cultural humility, and community engagement, with a strong focus on reducing health disparities and advancing person-centered care.

We believe that physical therapy education is a collaborative, inclusive, and interactive process. The faculty serve not only as educators and scholars but also as mentors, role models, and leaders who promote excellence in the classroom, clinic, and community. Students are expected to be active participants in their own professional development, embracing opportunities to cultivate clinical reasoning, ethical decision-making, advocacy, and interprofessional collaboration.

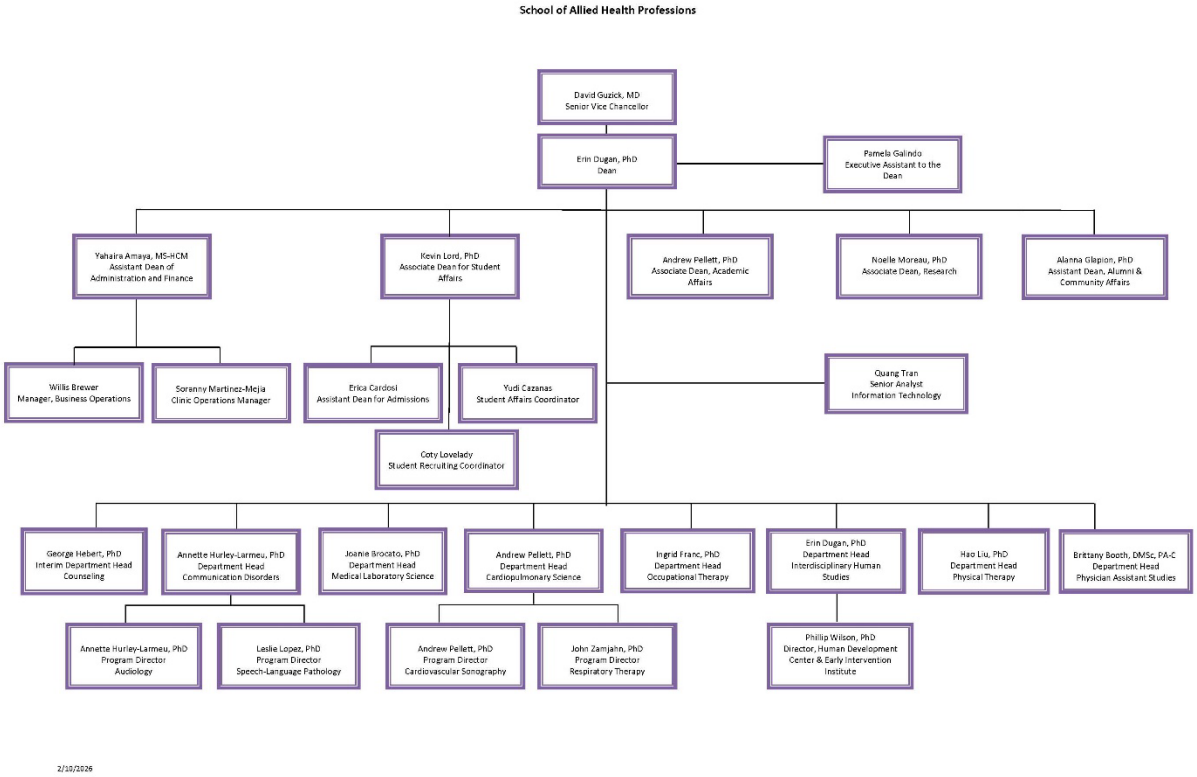
The curriculum is designed to deliver the comprehensive knowledge, clinical competence, and professional behaviors essential for entry-level practice and ongoing leadership in the profession. We strive to create a learning environment that values diversity, promotes inquiry, and supports wellness and growth for all members of our academic community.

Our department values scholarship, service, and innovation as foundational elements of physical therapy education. We seek to empower our graduates to be agents of change who deliver high-quality, equitable care, contribute to the scientific foundation of the profession, and advocate for health and wellness at the individual, community, and systems levels.

Through this integrated and forward-thinking approach, the Department of Physical Therapy remains dedicated to educating compassionate, competent, and visionary physical therapists who are prepared to lead and serve in an increasingly complex and interconnected world.

3. FACULTY AND STAFF

3.1 SCHOOL OF ALLIED HEALTH PROFESSIONS ORGANIZATIONAL CHART



3.2 FACULTY AND STAFF LISTING

Howe Liu, PT, PhD, MS, FGSA
Department Head
Professor

Ha Hoang, PhD, PT, DCE
Associate Professor of Clinical Physical Therapy

Ngozi Akotaobi, PT, DPT, COMT, FAAOMPT
Assistant Professor of Clinical Physical Therapy

Noelle Moreau, PhD, PT
Professor

Luther Gill, PhD, PT, DPT
Assistant Professor of Clinical Physical Therapy

Katherine Atiyeh, PT, DPT, OCS
Assistant Professor of Clinical Physical Therapy

Rachel Wellons, PT, DPT, NCS
Associate Professor of Clinical Physical Therapy

Kevin Giordano, PT, PhD, CSCS
Assistant Professor of Physical Therapy

Chrissy MacMaster, PT, DPT, PCS
Assistant Professor of Clinical Physical Therapy

Lisa Claton
Coordinator of Non-Academic Area

4. LSU HEALTH SCIENCES CENTER – NEW ORLEANS POLICIES

4.1 FEDERAL REGULATIONS

The LSUHSC-NO student policies related to federal regulations can be found online in the *LSUHSC-NO Catalog/Bulletin*: http://catalog.lsuhsc.edu/content.php?catoid=10&navoid=1983.

4.1.1 CAMPUS SECURITY

Information relative to the authority, mission composition, and function of the University Police Department for the Health Sciences Center is included in the University Police section of the *LSUHSC-NO Catalog/Bulletin*. Beginning September 1, 1992, and annually thereafter, data on specific incidents of crime required under Title II of the Crime Awareness and Campus Security Act of 1990 will be provided upon request by the **University Police Department**.

- PHONE: (504) 568-8999
- WEBSITE: http://www.is.lsuhsc.edu/police/

4.1.2 EQUAL OPPORTUNITY

The LSU System assures equal opportunity for all qualified persons without regard to race, color, religion, sex, sexual orientation, national origin, age, disability, marital status, or veteran's status in the admission to, participation in, or employment in the programs and activities, which the LSU System operates. Anyone having questions or complaints regarding equal opportunity at the LSUHSC-NO should contact:

Office of Human Resource Management
433 Bolivar Street
New Orleans, LA 70112-2223
(504) 568-3916

Persons believing they have been discriminated against contrary to federal law are entitled to make an inquiry or file a complaint with the:

United States Equal Employment Opportunity Commission
701 Loyola Avenue
New Orleans, LA 70113

or

United States Department of Health and Human Services
Office for Civil Rights
1301 Young Street
Suite Number 1169
Dallas, TX 75202

4.1.3 FAMILY EDUCATIONAL RIGHTS & PRIVACY ACT

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their educational records. These rights include:

- The right to inspect and review the student's education records within forty-five days of the day the University receives a request for access.
- The right to request the amendment of the student's education records that the student believes is inaccurate.
- The right to consent to disclosures of personally identifiable information contained in the student's education records except to the extent that FERPA authorizes disclosure without consent.
- The right to file a complaint with the U.S. Department of Education concerning alleged failures by LSUHSC to comply with the requirements of FERPA.

The act further provides that LSUHSC-NO may release certain information about the student, designated as directory information, unless the student has informed the institution in writing that such information should not be released. Directory information is the information in the education record of the student that generally would not be considered harmful or an invasion of privacy if disclosed.

Directory information includes the student's name, address, telephone listing, electronic mail address, photograph, date and place of birth, major field of study, participation in officially recognized activities and sports, dates of attendance, enrollment status, degrees, honors and awards received, expected graduation date, planned post-completion placement (e.g. AAMC match), and the most recent educational agency or institution attended by the student.

A student who desires that any or all of the above listed information not be released must submit a written request to the Office of the Registrar no later than the 10th day of the academic term. For further information, consult the LSUHSC-NO website.

Related Document:

Family Educational Rights & Privacy Act (Appendix 19.1)

4.1.4 HEALTH INSURANCE PORTABILITY & ACCOUNTABILITY ACT

LSUHSC-NO is a covered entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA). All faculty, staff, and students are responsible for familiarizing themselves with the following University policies:

Chancellor's Memorandum (CM) 53 HIPAA Privacy Policy:
https://www.lsuhsc.edu/administration/cm/cm-53/
Permanent Memorandum (PM) 36 LSU System Information Security Plan:

https://www.lsuhsc.edu/administration/pm/pm-36.pdf
CM-42 Information Technology (IT) Infastructure:
https://www.lsuhsc.edu/administration/cm/cm-42.pdf

Students are required to complete training modules on protection of patient privacy and security of electronic information. Training is offered in various formats including orientation sessions, web-based, and, self-study. Please direct all inquiries regarding HIPAA to the **Office of Compliance Programs.**

- PHONE: (504) 568-2350
- WEBSITE: http://www.lsuhsc.edu/no/administration/ocp/.

4.1.5 SEXUAL HARASSMENT

Sexual harassment is a form of unlawful discrimination on the basis of sex, and is defined as unwelcome verbal or physical behavior of a sexual nature that is prohibited by both LSUHSC-NO policy and federal law.

The Health Sciences Center reaffirms and emphasizes its commitment to provide a learning environment that is free of discriminatory, inappropriate, and disrespectful conduct or communication. Sexual harassment threatens this environment in that it inhibits the individual's ability to function effectively as a student and violates acceptable standards of behavior. For these reasons, the Health Sciences Center will not tolerate any form of sexual harassment.

Sexual harassment may involve:

- Submission to verbal or physical conduct of a sexual nature.
- Unwelcome sexual advances.
- Requests for sexual favors when these are made-either explicitly or implicitly a term or condition of an individual's academic status.

Sexual harassment may also include:

- Unwelcome verbal or physical conduct of a sexual nature when this conduct interferes with an individual's ability to function effectively in an academic setting by creating an intimidating, hostile, or offensive environment.

All categories of students, including graduate assistants and student-employees, are governed by

the Health Sciences Center's sexual harassment policy.

To help the recipient determine how best to remedy sexual harassment, as well as to ensure that appropriate measures are taken when warranted, anyone who believes they have been subjected to sexual harassment may address questions or complaints to their academic advisor, Department Head, the Dean of Students for the student's respective school, or the Human Resources Department. The recipient of such a complaint shall notify Human Resource Management and seek that office's assistance in connection with an investigation of the complaint.

4.2 STUDENT POLICIES

The LSUHSC-NO general student policies can be found online in the *LSUHSC-NO Catalog/Bulletin*: http://catalog.lsuhsc.edu/content.php?catoid=10&navoid=1986.

4.2.1 ALCOHOL USE

The use of alcohol is prohibited in classroom buildings, laboratories, auditoriums, library buildings, faculty and administrative offices, athletic facilities, and all other public campus areas. Alcohol may be served for special events on campus sponsored by the institution with written authorization from the Dean, Chancellor, or their authorized designee and when the LSUHSC-NO's Guidelines for Responsible Use of Alcohol are followed. These Guidelines also apply to the use of alcohol at LSUHSC-NO sponsored functions off campus.

The Guidelines are contained in CM-36 (Guidelines for the Responsible Use of Alcohol at the LSU Health Sciences Center) at http://www.lsuhsc.edu/no/administration/cm/cm-36.aspx.

4.2.2 VIOLENCE-FREE WORKPLACE

Everyone has a reasonable expectation to perform their assigned duties in an atmosphere free of threats and assaults. Recognizing the increasing incidence of violence in the workplace, the Governor of the State of Louisiana issued an executive order committing the State of Louisiana to work toward a violence-free workplace. Louisiana State University Health Sciences Center at New Orleans fully supports this effort and is committed to a violence-free workplace. In response, LSUHSC-NO issued CM-44 (Violence in the Workplace Policy, and Workplace Violence Prevention Plan) at http://www.lsuhsc.edu/no/administration/cm/cm-44.aspx.

CM-44 contains LSUHSC-NO's Firearms and Weapons Policy. This policy states that it is illegal and

expressly prohibited to engage in the unauthorized carrying of a firearm, or a dangerous weapon, by a student or non-student on University property at anytime. This includes but is not necessarily limited to school sponsored functions or in a firearm-free zone. Violators will be arrested and

prosecuted to the fullest extent of the law. Other topics covered under CM-44 include the following:

- Hazard Prevention and Control
- Personal Conduct to Minimize Violence
- How to Deal with Bomb Threats

4.2.3 SUBSTANCE ABUSE

Authorized use of, possession of, or being under the influence of alcohol and the illegal use, abuse, possession, manufacture, dispensation, distribution of, or being under the influence of controlled or illegal drugs is prohibited while at work, on call, on duty, at school, or engaged in LSUHSC-NO business on or off LSUHSC-NO premises. LSUHSC-NO provides for an on-going alcohol and drug-testing program for reasonable suspicion/for cause, post accident, periodic monitoring or aftercare, and random testing.

The schools of the Health Sciences Center actively maintain programs dealing with all aspects of chemical dependency, such as prevention, intervention and rehabilitation. Education in substance abuse is provided through workshops and seminars, and has become an integral part of the curriculum of each school.

This Substance Abuse Policy applies to all faculty, staff, residents, and students of LSUHSC-NO. Students must understand that initial and continued enrollment is contingent upon compliance to this policy. The complete policy is in CM-38 (Substance Abuse Policy and Procedures) and is located at http://www.lsuhsc.edu/no/administration/cm/cm-38.aspx.

4.2.4 INFORMATION TECHNOLOGY

Users of the Information Technology infrastructure are expected to exhibit responsible behavior and comply with all federal and state laws, LSUHSC-NO rules and policies, terms of computing contracts, and software licensing rules. Students should not engage in any activity that jeopardizes the availability, performance integrity, or security of the IT infrastructure. For example, students should not:

- Use peer-to-peer (P2P) applications that take up bandwidth for the downloading of music, games, and video.
- Deliberately or recklessly overload access links or switching equipment by using streaming media such as web radio and other mechanisms.

CM-42 contains the entire LSUHSC-NO Information Technology (IT) Infrastructure Policy and is located at http://www.lsuhsc.edu/no/administration/cm/cm-42.aspx.
By using a computer on the LSUHSC-NO IT infrastructure, students acknowledge that they are subject to the terms of CM-42 and that they give their unrestricted consent to the monitoring, copying, and unrestricted distribution of any transmission/communication or image generated, received by, sent by, or stored in the computer. Noncompliance could result in disciplinary action up to and including dismissal from an academic program, and civil or criminal liability.

4.2.5 WEATHER RELATED EMERGENCY PROCEDURES

During a weather event that requires closing of the campus, LSUHSC-NO will not function as an evacuation site for students. CM-51 (Policy on Weather Related Emergency Procedures for LSUHSC-NO) at http://www.lsuhsc.edu/no/administration/cm/cm-51.aspx has information about disaster preparedness. Students are encouraged to familiarize themselves with this information.

4.3 STUDENT HEALTH

The LSUHSC-NO student policies related to student health can be found online in the *LSUHSC-NO Catalog/Bulletin*: http://catalog.lsuhsc.edu/content.php?catoid=10&navoid=1857.

Student Health Insurance

The Health Sciences Center offers a group health insurance program for students. At the time of registration, students must either purchase coverage from this plan or must be prepared to show evidence of coverage by another plan, in which case the requirement to purchase may be waived. Students who receive medical treatment or who are referred to outside hospitals or clinics will be responsible for their bills. Students will be expected to pay the charges and then file a claim with their insurance carrier.

Student Health Services & Records

LOCATION: Administration

2020 Gravier Street, 7th floor
StudentHealthStaff@lsuhsc.edu
Student Clinics
3700 St. Charles Avenue, 2nd Floor
https://www.lsuhsc.edu/orgs/studenthealth/geninfo.aspx

PHONE: Administration
(504) 525-4839
Student Clinic
(504) 412-1366 or AFTER HOURS: (504) 412-1366
http://www.lsuhsc.edu/orgs/studenthealth/

Out-patient care for episodic illnesses, emergencies, and chronic illnesses is provided by student health clinic. The cost of primary care services for student out-patient visits at student health is supplemented with a portion of the University Fee. Students, and/or their insurance carriers are responsible for costs related to laboratory, X-ray, medications, hospital bills, consultants and other non-reimbursed fees. A physician is on call 24 hours a day, including weekends and holidays.

Registration in the Health Sciences Center is not complete until a student submits the completed Student Health History and Physical Examination form, and the student's health has been determined to be adequate for the performance of assignments and duties. Documentation of titer level or date of immunization for the following is required: Measles, Mumps, Rubella, Varicella, Diphtheria, Tetanus Poliomyelitis and Meningitis Vaccine. In addition, a tuberculin skin test, or chest x-ray if the skin test is positive, is required within 90 days of registration and Hepatitis B vaccination is required for admission to clinical curricula in the Schools of Dentistry, Graduate Studies, Medicine, Nursing and Allied Health Professions. All students must have tuberculin skin tests on a yearly basis. All students must provide written documentation of the satisfaction of all health requirements at least two weeks prior to the first day of registration. Those students not in compliance with student health requirements will not be allowed to register for classes until student health requirements are completely satisfied.

Under the auspices of the Student Health Service there is no provision for dental care, or the treatment of visual problems or chronic physical disabilities, which are present and amenable to correction. These problems should be corrected before matriculation.

Student Health Service is not responsible for the care of students who withdraw or resign from the University.

Students who wish to be treated by health care providers other than those furnished by the Student Health Service relieve the Health Service of responsibility for their welfare. There is no refund of any portion of the University fee if this option is selected.

Short-term mental health crisis/stress counseling services are available to enrolled students through partial funding from student health fees. Counselors are available on and off campus.

A health promotion program is also partially funded as a component of Student Health Services. Programs are offered in aerobics, stress management, time management, and other wellness promotion topics. A health analysis is available to assist in lifestyle modifications for an improved health status. An active student/faculty committee has developed this component.
Complete details on the available Student Health Services will be provided to students at registration.

When leaving the University, graduates may pick up a copy of their records from Student Health Service. Records are kept on active file for five years after the student graduates.

Billing & Payment

There is a requisite student health fee at registration. This fee includes the Fitness Center registration.

LSUHSC requires that students purchase and maintain health insurance either through our agent or independently. If purchased independently, the policy obtained by the student must offer comprehensive medical insurance coverage comparable to or exceeding the level of coverage offered through the Health Sciences Center. Students are encouraged to purchase health insurance for their dependents through LSU or independently.

Privacy of Student Health Records

Student health records are protected by HIPAA (Health Information Portability and Accountability Act) and are kept separate from other student records in the Office of Student Health Services.

Campus Assistance Program

The LSUHSC-NO Campus Assistance Program (CAP) is a free service provided by the LSU Health Sciences Center to assist faculty, staff, residents, students and immediate family members in the resolution of personal problems.

LSUHSC recognizes that everyone, at some time, needs a "helping hand" or assistance. Whether it is a simple or complex problem, the LSUHSC-NO Campus Assistance Program (CAP) can help. CAP provides the following resources:

- CRISIS LINE: (504) 568-8888 with a CAP counselor on-call 24 hours a day, 365 days a year.
- Services provided for problems with anxiety, depression, stress, marriage and family, relationships, legal or financial referrals, grief, alcohol or drugs and other concerns impacting academic performance.
- Short-term counseling for problem clarification is available. If after talking with the counselor, a referral to a specialist within the community is needed, one will be made for the best cost-effective treatment for your problem.
- Additional information about the LSUHSC-NO Campus Assistance Program (CAP) can be found at: http://www.lsuhsc.edu/orgs/campushealth/cap.aspx.

4.4 COMPLIANCE TRAINING

LSUHSC-NO's Office of Compliance Programs (OCP) was established in March 2002 to provide consistency in compliance with federal and state laws and regulations and University's policies and procedures across all the University's schools and administrative areas.

Compliance with such requirements is vital to the organization's operations to avoid administrative sanctions ranging from stringent program oversight to the suspension of federal program funding and criminal/civil prosecution. Federal Sentencing Guidelines provide for the mitigation of penalties to organizations that have an effective program in place for detecting and preventing violations of law and regulations.

Our mission is to contribute to the institution's overall excellence by increasing faculty, staff and student awareness of, and compliance with, applicable statutory, regulatory and policy requirements. This is necessary to minimize the institution's exposure to fraud, waste, and liability, through education, reporting and monitoring.

All faculty, staff and students shall promptly complete all training assigned to them by the OCP in a timely manner. It shall be the responsibility of the OCP to notify workforce members and affiliates of training requirements, maintain evidence of, and track completion rates for, all mandated compliance training, coordinate delivery of training and provide departments with reports on the status of training of their workforce members and affiliates. Each university department head shall ensure that all employees and students in their department complete all mandated training timely. It shall be the responsibility of each school's associate or assistant dean

of students to ensure that all students in their respective schools complete all mandated training in a timely manner. Deans and vice-chancellors shall ensure that any incidents of non-compliance with this policy are investigated and appropriate corrective action is taken.

The LSUHSC-NO Fiscal Compliance Officer is the final authority on Compliance Training requirements. Compliance Training Standards shall be created for one of the following reasons:

- Training is required by federal or state laws or regulations.
- Training is part of a corrective action plan to address an identified deficiency.
- Training is requested by a University official or department head to address a particular issue in order to reduce fraud, waste and/or abuse.

The content of Compliance Training assigned to an individual shall be the minimum practicable based upon their role and responsibilities. Any individual may request additional training by making a request to OCP.

Students are required to access the LSUHSC-NO online compliance training website, https://intranet.lsuhsc.edu/ctms/kds/ComplianceTrainingOnLine, and complete all modules within 2 weeks of initial email notice. Failure to complete the compliance training modules can result in disciplinary action up to and including termination of enrollment.

4.5 FREEDOM OF SPEECH & EXPRESSION

Purpose

LSUHSC-NO is fully committed to the principle that the free expression of ideas among students, faculty, staff, and visitors is fundamental to education, discovery, and dissemination of knowledge. Supporting this culture of freedom of speech includes a responsibility to allow expression of all ideas and opinions, including, without limitation, those which some may find unwelcome, disagreeable, or even deeply offensive, and to welcome all people into the discussion.

Policy Statement

In accordance with the First Amendment of the Constitution of the United States of America, with Article I, Section 7 of the Constitution of Louisiana, with other applicable laws and regulations, with LSUHSC-NO's PM-79 and CM-66 Freedom of Speech and Expression, all students, faculty, and staff at LSUHSC-NO, along with visitors lawfully present on campus, are

free to discuss any topic, assemble, and/or engage in spontaneous expressive activity as long as such discussion, assembly, or activity is not unlawful and does not materially and substantially disrupt the functioning of the LSUHSC-NO. Outdoor areas on campus that are generally accessible

to the majority of students, faculty, and staff are deemed traditional public areas under state law that are open on the same terms to any speaker.

Due to the compact nature of its campus, LSUHSC-NO reserves the right to impose limitations on the time, manner, and place of expressive activities on groups of any size, without regards towards the content of the views expressed, for the purposes of ensuring:

- The safety of faculty, staff, students and visitors.
- The free speech rights of all parties.
- The unimpeded flow of pedestrian and vehicular traffic on campus or into campus facilities.
- The undisrupted continuance of the normal activities of the educational mission.

Policy Administration

All definitions and policy requirements of PM-79 and CM-66 are hereby incorporated into this LSUHSC-NO campus policy, which will be administered and enforced by the Vice Chancellor for Academic Affairs, the University Police, and such other campus officials as may be designated by the Chancellor.

Information about this policy shall be included in the LSUHSC-NO Faculty Handbook, the LSUHSC-NO Catalog/Bulletin, annual training required of all students, faculty and staff, and in any other forms of publication that LSUHSC-NO may deem necessary to ensure wide understanding of the campus support for free speech and expression.

Visitors to the campus and all others violating this policy regarding time, place, and manner of speech and demonstration shall be subject to immediate eviction or removal from the campus without further warning by University Police, and may be subject to appropriate legal action.

Any person aggrieved by a violation of this policy may file a written appeal of the decision or action to the Vice Chancellor for Academic Affairs within fourteen calendar days of the decision or action. Students may file an appeal in accordance with CM-56 Student Responsibilities and Rights. LSUHSC-NO shall reply in writing within fourteen days of receipt of the appeal, unless, for good cause, additional time is needed to ascertain all pertinent facts. The decision of the Vice

Chancellor for Academic Affairs on the appeal shall be final.

Information regarding LSUHSC-NO's Freedom of Speech and Expression statements listed above can be found at:

PM-79: https://www.lsuhsc.edu/administration/pm/PM-79.pdf
CM-66: https://www.lsuhsc.edu/administration/cm/CM-66.pdf.

5. SCHOOL OF ALLIED HEALTH PROFESSIONS POLICIES

5.1 OFFICE OF ACADEMIC AFFAIRS

5.1.1 ACADEMIC STANDARDS

Listed below are the Academic Standards for the School of Allied Health Professions. Departmental standards may differ. Students should defer to departmental academic standards and policies.

Graduate Professional Scholastic Requirements

- A minimum cumulative GPA of 3.0 is required for graduation.
- The minimum scholastic requirement for course work is a grade of C. However, no more than 6 credit hours of C grades may be counted toward a degree unless otherwise established by the department.
- In courses designated Pass/Fail or Satisfactory/Unsatisfactory, a grade of Pass or Satisfactory is required.

Provisions for Academic Progression

- If an unacceptable grade is recorded in a non-prerequisite course, the student must satisfactorily complete the course when next regularly offered.
- If an unacceptable grade is recorded in a course designated as a prerequisite course the student must satisfactorily complete the prerequisite course before continuing the program sequence.
- Students may not participate in clinical, fieldwork or preceptorship courses until all prerequisite course work has been completed successfully.

- Students who earn a grade of Unsatisfactory or Fail in clinical, fieldwork, or preceptorship courses will be placed on scholastic probation.
- Students who fall from 1-10 quality points below a 3.0 cumulative GPA will be placed on scholastic probation.
- Students placed on scholastic probation must repeat those courses in which an unacceptable grade was earned when next regularly offered and earn a satisfactory grade. Students will remain on scholastic probation until this requirement is met and the minimum scholastic requirement for cumulative GPA is achieved. Failure to meet this requirement will result in dismissal from the School.
- A course, including those designated clinical, fieldwork, and preceptorship, may be repeated one time only. Students who repeat a course but earn an unacceptable grade will be dismissed from the School.
- Students who fail to attain a minimum 3.0 cumulative and/or semester professional GPA in two consecutive semesters can be dismissed from the School.
- Students who fall more than 10 quality points below a 3.0 cumulative GPA will be dismissed from the School.
- Students on scholastic probation are not eligible for graduation.
- Students must complete the program in a specified period of time (time frame to be completed by each department).
- Grades recorded in repeated course work do not replace the original grade. Both the original grade and repeated grade will appear on the academic transcript and both grades will be used in the computation of the academic grade point average.
- Students dismissed from the School for academic reasons must reapply to the program to be considered for readmission.

5.1.2 STUDENT RESPONSIBILITIES & RIGHTS

Preamble

LSUHSC-NO is dedicated to providing its students, residents, faculty, staff, and patients with an environment of respect, dignity, and support. The diverse backgrounds, personalities, and learning needs of individual students must be considered at all times in order to foster appropriate and effective teacher-learner relationships. Honesty, fairness, evenhanded treatment, and respect for students' physical and emotional well-being are the foundation of establishing an effective learning environment.

Student Responsibilities

Students are responsible for complying with all policies, procedures, rules and regulations and other information published by the Health Sciences Center. In addition, students are expected to abide by all federal, state and local laws.

Students are expected to:

- Exhibit the highest standard of personal, academic professional and ethical behavior.
- Treat faculty, staff, peers, clients, patients, and others with dignity and respect.
- Abide by the Code of Conduct that applies to their specific professional discipline.

Students who violate any of the above when involved in any school or school related activity/function, whether on or off campus, will be subject to disciplinary action.

Students' Rights

Mistreatment and abuse of students by faculty, residents, staff or fellow students is contrary to the educational objectives of the LSUHSC-NO and will not be tolerated. Mistreatment and abuse include, but are not limited to, berating, belittling, or humiliation; physical punishment or threats; intimidation; sexual harassment; harassment or discrimination based on race, gender, sexual preference, age, religion, physical or learning disabilities; assigning a grade for reasons other than the student's performance; assigning tasks for punishment or non-educational purposes; requiring the performance of personal services; or failing to give students credit for work they have done.

Students have rights as guaranteed by the U.S. Constitution and all appropriate federal, state and local laws. Primary among those is the right to a fair and impartial hearing, if the student is accused of misconduct or violating university regulations. Additionally, students have the right to file a complaint for alleged mistreatment. The Health Sciences Center has existing policies and procedures that relate to the following: financial aid; sexual harassment; final grade appeal; student housing; parking; drugs; alcohol; firearms; student's access to records, and privacy; computer/internet use; dress and professional conduct; health insurance; and liability insurance. Issues that relate to these specific policies, which may be found on the Health Sciences Center website, should be addressed to the appropriate office. The Office of Student Affairs of the appropriate school can help students with information about those policies.

Procedure for Addressing Student Complaints

If the Health Sciences Center or specific school already has a policy concerning the student's complaint, procedures indicated in that policy should be used; if the Health Sciences Center or specific school has no specific policy, the following procedure should be used. Specific school policies should include the following basic elements:

Informal Conflict Resolution

1. Discuss the conflict with the person against whom the complaint is made. In the event that the complainant does not feel comfortable doing so, the complaint should be directed to the Office of the Associate Dean for Academic Affairs of the specific school.
2. The Associate Dean of Academic Affairs will meet with the individual against whom the complaint has been made in an effort to resolve the conflict.

Filing a Formal Complaint

If the conflict cannot be resolved informally, the complainant must make a formal written complaint to the Associate Dean of Academic Affairs. The written complaint must include the following:

- A statement of the complaint
- Identification of individual/office against whom the complaint is made
- The relief sought
- The complaint must be signed by the complainant

Upon receipt of the formal written complaint, the Associate Dean of Academic Affairs of the appropriate school must take immediate action to resolve the conflict.

If the conflict cannot be resolved to the complainant's satisfaction within a period of ten working days, the matter will be referred to the Vice Chancellor for Academic Affairs of the Health Sciences Center by the Associate Dean. The referral will include the complainant's formal written request plus a statement of actions taken by the Associate Dean to resolve this matter.

Referral to the Vice Chancellor of the Academic Affairs

The Vice Chancellor for Academic Affairs:

- May make a decision as to how the matter can be resolved. This decision shall be communicated to all concerned parties in writing.
- If for any reason the Vice Chancellor for Academic Affairs chooses not to render a decision, they may empanel an ad hoc committee comprising three faculty members, at least one of which is from the pool of elected members of the Faculty Senate and two students appointed by the appropriate Student Government Association President. The Committee shall meet in an effort to resolve the matter within a period of ten working days. The Committee may meet with the concerned parties and others who can provide information that is helpful in resolving the matter. The Committee meetings will be closed, and information provided during the meeting shall be held in strictest confidence.
- The Committee shall reach a decision as to the resolution of the matter and make its written recommendation to the Vice Chancellor of Academic Affairs within five working days.
- The Vice Chancellor for Academic Affairs, upon receipt of the Committee's recommendation, will make a decision and communicate this decision in writing to all concerned parties and the Dean of the appropriate school.
- The decision of the Vice Chancellor for Academic Affairs is final and non-appealable.

In the event that the formal written complaint involves a violation of CM-44 Campus Security Policy, the Vice Chancellor of Academic Affairs shall empanel an ad hoc committee as described above.

- All members of the committee shall have completed annual training on the issues related to campus violence and how to conduct an investigation and hearing process that protects the safety of the victims and promotes accountability.
- The Committee shall meet with the concerned parties and others who can provide information that is helpful in resolving the matter. Each concerned party may be accompanied by an advisor of their choice.
- The Committee meetings will be closed, and information provided during the meeting shall be held in strictest confidence.
- Once the Committee has reached its decision, the concerned parties shall be notified in writing of the decision.

- Either party may appeal the decision in writing to the Vice Chancellor for Academic Affairs within five working days of receiving notice of the decision.
- The Vice Chancellor for Academic Affairs shall make a decision on the appeal within ten working days of receipt of the written notice. Written notification of the decision shall be sent simultaneously to all concerned parties.
- The decision of the Vice Chancellor for Academic Affairs is final and non- appealable.

References for the statements listed above can be found at:

CM-56 Student Responsibilities and Rights:
https://www.lsuhsc.edu/administration/cm/cm-56.pdf.
CM-44 Campus Security Policy:
https://www.lsuhsc.edu/administration/cm/cm-44.pdf

5.1.3 STUDENT CONDUCT

Universities have a responsibility to protect: their educational purposes, the academic environment of the campus, and all members of the University community. To meet these responsibilities, a University must establish and enforce standards of conduct for its students. A University is obliged to establish reasonable standards for student conduct, for membership and continued membership in the University community, to deny membership to those applicants who do not meet these standards, and to impose reasonable disciplinary sanctions on students who are found guilty of violating these standards.

Policy

It is the prerogative of the School of Allied Health Professions, through the faculty, administrators, and other employees, to make decisions on the correct application of general policy statements and procedures to specific students under specific sets of circumstances. In making these decisions, both the rights of the student and the needs of the School in accomplishing its mission and educational goals must be considered.

To this end, acts of academic or other misconduct, e.g. cheating, plagiarism, code of professional conduct violations, commission of a crime, etc., may subject the offending student to disciplinary action. To insure the consistent observance of due process, the following policy and procedures apply.

Definitions

- “University” refers to the Louisiana State University (LSU) system.
- “Health Sciences Center” refers to the LSUHSC-NO.
- “School” refers to the School of Allied Health Professions at LSUHSC-NO.
- “Department” refers to the specific department within the School of Allied Health Professions in which a given student is enrolled.
- “Days” refers to official LSUHSC-NO working days.
- Any reference herein to the singular shall also include the plural.

General Provisions

- Equal treatment guaranteed to students by the 14th Amendment to the U.S. Constitution requires that the same policies, procedures, and practices be used to consider all allegations of misconduct and also requires the imposing of "like sanctions for like violations" on all students found guilty of misconduct. This obligation of the School can be fulfilled only if each instructor reports suspected misconduct to the designated office in accordance with the provisions of this document. Consistent with this obligation, no disciplinary sanction shall be imposed upon a student except in accordance with the provisions of this document. Thus, it is contrary to School policy for an instructor to assign a disciplinary grade, such as an "F" or zero on an assignment, test, examination, or course as a sanction for admitted or suspected academic dishonesty, in lieu of formally charging the student with academic misconduct under the provisions described herein.
- Any time limit set forth in this procedure may be extended by mutual written agreement of the Dean and the student.
- Infractions shall be reported to the Associate Dean of Academic Affairs.
- The Dean may appoint someone other than the Associate Dean of Academic Affairs to serve in their place.

Academic & Professional Conduct

Students are expected to:

- Exhibit the highest standard of personal, academic, professional and ethical behavior.
- Treat faculty, staff, peers, clients, patients, and others with dignity and respect.
- Abide by the Code of Conduct that applies to their specific Allied Health discipline.

- Comply with rules, codes, policies, technical standards set by the Department, School, campus and University.

Students who violate any of the above when involved in any School or School related activity/function whether on or off campus will be subject to disciplinary action as prescribed in this document.

Academic Misconduct

Academic misconduct, includes, but is not limited to, the following:

- Copying from another student's test paper.
- Using the course textbook or other materials such as a notebook normally brought to a class meeting but not authorized for use during a test by the person giving the test. Having such forbidden material open and in sight of the student will be considered prima facie evidence of use.
- Attempting to commit, or to be an accessory to the commission of, an offense listed above.
- Collaborating during a test with any other person by giving or receiving information without authority.
- Using specially prepared materials, e.g., notes, formula lists, notes written on the student's clothing or body, during a test. Bringing such forbidden material to a test will be considered prima facie evidence of use or attempted use.
- Stealing, buying or otherwise obtaining, all or part of an unadministered test, including answers to an unadministered test.
- Possession/distribution of all or part of an unadministered test.
- Bribing any other person to obtain an unadministered test or information about a test.
- Substituting for another student, or permitting any other person to substitute for oneself, to take a test.
- Submitting as one's own, in fulfillment of academic requirements, any theme, report, term paper, essay, other written work, drawing, or other scholastic work prepared totally or in part by another.
- Selling, giving or otherwise supplying to another student for use in fulfilling academic requirements any theme, report, term paper, or other work.
- Changing, altering or being an accessory to the changing and/or altering a grade in a grade book, on a test paper, on other work for which a grade is given, on a "drop slip" or other official academic records.

- Proposing and/or entering into an arrangement with an instructor to receive a grade of "F" or any other reduced grade in a course, on a test or any other assigned work in lieu of being charged with academic misconduct under the provisions of this policy.
- Plagiarizing is the unacknowledged inclusion, in work submitted for credit, of someone else's words, ideas or data. When a student submits work for credit that includes the words, ideas or data of others, the source of this information must be acknowledged through complete, accurate and specific references, and, if verbatim statements are included, through quotation marks. Failure to identify any source, published or unpublished, copyrighted or uncopyrighted, from which information, terms, phrases or concepts have been taken, constitutes plagiarism. By placing their name on work submitted for credit, the student certifies the originality of all work not otherwise identified by appropriate acknowledgments through appropriate referencing.
- Falsification, fabrication or dishonesty in reporting clinical, laboratory and research reports.
- Submitting substantially the same work for credit in more than one course.
- Violation of course rules as established by the School, Department or course instructor.
- Attempting to commit, or to be an accessory to, the commission of an offense listed above.
- Violation of any other LSUHSC-NO academic rules or regulations.

Students who violate any of the above when involved in any School or School related activity/function whether on or off campus will be subject to disciplinary action as prescribed in this document.

Professional Misconduct

To protect the University's educational purposes and the University community, a student may be formally charged with a violation of this policy and be subject to the sanctions herein when:

- Strong and convincing evidence that the student's continued presence at the University is potentially dangerous to the health and safety of the University community.
- The student is convicted of a felony.
- The student is formally charged by civil authorities with the commission of a felony of such nature that the student's continued presence at the University is potentially dangerous to the health and safety of the University community.
- The student is in possession of dangerous weapons/devices including but not limited to firearms, explosives, toxic substances, etc. on school property or other property e.g. clinical site where a school activity/function is conducted.

- The student engages in acts of sexual misconduct including but not limited to sexual harassment, lewd, indecent, and/or obscene behavior.
- The student engages in behavior that disrupts the learning environment including but not limited to refusing to comply with instructions, course requirements, behaving in a physically threatening manner, making oral/written threats, etc.
- The student violates any other LSUHSC-NO rules or regulations pertaining to Professional Conduct.

Reporting Student Misconduct

- Anyone with knowledge/evidence sufficient to justify a charge of misconduct, shall report the alleged misconduct to the Office of the Associate Dean of Academic Affairs within five days of the alleged misconduct.
- An allegation of misconduct must be in writing and signed by the individual making the allegation in order to proceed to the next step.
- The Associate Dean/the Dean or their designee will discuss the circumstances and evidence surrounding the alleged violation with the person reporting the misconduct.

Charging a Student with Misconduct

- After reviewing the evidence pertaining to the alleged misconduct, the Associate Dean of Academic Affairs will then discuss the allegation with the accused student. If the evidence is sufficient to justify such action, the student will be informed that the School of Allied Health Professions will bring formal charges against them.
- The student will be provided with a written statement of the formal charge against them.

Referral to a Hearing Panel

After being informed of the formal charge, if the student does not request that the charge be resolved administratively, or the Dean does not accept jurisdiction, the Associate Dean of Academic Affairs will refer the charge to a hearing panel of the Committee on Student Conduct within five days.

Interim Grade

A grade of "I" (incomplete) will be assigned, if necessary, until the Dean has rendered their final decision.

Committee on Student Conduct

- An Ad Hoc Committee, which shall be advisory to the Dean and consist of the Associate Dean of Academic Affairs who shall serve as Chairperson, three faculty members, and two students shall meet to consider the case within ten days of referral to the hearing panel of the Committee on Student Conduct.
- Faculty members of the Committee on Student Conduct shall be selected by the Chairperson, from the pool of full time faculty members within the School of Allied Health Professions. No more than one faculty member of the Committee may be a member of the accused student's department.
- Student members shall be appointed by an officer of the Student Government Association of the School of Allied Health Professions. Students serving on the hearing panel may not be from the accused student's Department. Graduate students will review allegations of misconduct against graduate students and undergraduate students will review allegations of misconduct against undergraduates.
- The Chairperson of the Committee will be responsible for setting up the hearing, informing concerned parties and the Committee member of the time and place of the hearing.
- The accused student may be accompanied by an advisor at the hearing. The advisor may speak to their advisee during the hearing but may not speak for the accused student or question committee members or those offering evidence.
- At the hearing, evidence of alleged misconduct will be presented. The accused student may present evidence in their defense; question those who present evidence against them and; refute evidence against themself. The Committee may question all those who offer evidence. The Chairperson will insure that the scope of the hearing and evidence presented relate to the charge of misconduct.
- After all evidence has been presented the Committee will meet in executive session to deliberate and formulate its recommendation to the Dean. The Committee may choose one or more sanctions listed in this document as its recommendation.
- The Committee Chairperson shall submit a written report to the Dean including: the Committee's finding, recommendation, summary of the evidence presented, and dissenting opinions within five days of the hearing.

The Administrative Hearing

- As noted earlier under the section titled "Charging a Student with Misconduct", after the student is formally charged with academic misconduct, a request for an administrative hearing before the Dean can be made. This request must be made within two days of receipt of the formal charge.
- The following specific conditions must be met before the Dean can accept jurisdiction.
- The student must:
    - Request in writing that the Dean take jurisdiction and the Dean must be willing to accept the case as being appropriate for administrative resolution.
    - Officially plead guilty in writing to the specific charge as prepared by the Assistant Dean of Academic Affairs.
    - Waive their right in writing to have the charge considered by a hearing panel of the Committee on Student Conduct.

Action by the Dean

- Independent of the method used, i.e., hearing panel or administrative hearing, the Dean will render a final decision consistent with the following schedule:
    - Within five days of receipt of the hearing panel's report, or
    - Within ten days of accepting administrative jurisdiction

- The Dean has the authority to impose sanctions other than those recommended by the Committee on Student Conduct, and determine when sanctions will be imposed, e.g., immediately, at the end of the semester, etc.
- The Dean’s final decision, including, if applicable a copy of the Committee’s report, shall be distributed to the student involved, the Associate Dean of Academic Affairs, and other appropriate administrators.

Appeal

As a matter of right a student may appeal the decision of the Dean. An appeal must be made to the Vice-Chancellor for Academic Affairs of the LSUHSC-NO within fifteen days of the decision of the Dean.

The written appeal must include:

- A justification for the appeal, e.g. evidence of abuse of process, evidence of procedural error, etc.

- The Dean's final decision plus a copy of the committee's report the Vice-Chancellor for Academic Affairs shall decide within two weeks after receipt of appeal whether further action should be taken. In reaching this decision, this official may ask other parties to the appeal to make written reply to the request for a review or these parties, on their own, may make a written reply. If the decision is reached that a review is not justified, the student and all other parties will be so notified. If the Vice Chancellor for Academic Affairs decides to respond favorably to the petition for review, this official will hold a formal meeting with all parties and their advisors, if desired, and reach a decision based on discussions at this meeting, as well as on all written materials furnished. Once a decision is reached, the Vice Chancellor for Academic Affairs will notify all parties, plus the Dean, of the decision. The decision of the Vice Chancellor for Academic Affairs shall conclude the matter, subject to the right of the Chancellor to review the case. The Chancellor will consider the case only on the basis of a petition for review following the procedure outlined above.

Sanctions for Academic Misconduct

Sanctions imposed on the student may include one or more of the following disciplinary actions:

- Be required to show active participation in the work of counseling.
- Retake test, or repeat work in question.
- Lower letter grade by one letter, e.g. A to B.
- Lower letter grade by two letters, e.g. A to C.
- Complete given activities/assignments consistent with the Dean's decision.
- Receive a failing grade for the course in which the infraction occurred. If this sanction is imposed and the policy of the Department stipulates that when "a student receives a less than satisfactory grade in a course he or she may not continue in the program sequence," then the Department policy shall also apply.
- Suspension from the School of Allied Health Professions. Period of suspension to be determined by the Dean.
- Dismissal from the School of Allied Health Professions.

Sanctions for Professional Misconduct

Sanctions imposed on the student may include one or more of the following disciplinary actions:

- Be required to show active participation in the work of counseling.

- Disciplinary Warning: verbal or written notification that the student has not met the School's standards of conduct, and that a repeat offense will result in more serious disciplinary action. It is not the case that first offenses automatically receive a warning; most first offenses receive a stricter response, with warnings reserved for cases with unusual mitigating circumstances.
- Reprimand: a written statement censuring a student for violating School regulations, and stating that another offense will result in more serious action.This is normally considered a lenient response, even for first offenses.
- Restitution: requirement that the student compensate the School or other persons for damages, injuries, or losses. Failure to comply results in canceled registration and a hold on future registration.
- Disciplinary Probation: an action that places conditions on the student's continued enrollment in the School, including the statement that further violation of School policies will likely result in dismissal. The Committee fixes the term and conditions of academic probation. First offenses often result in probation.
- Suspension from the School of Allied Health Professions. Period of time to be determined by the Dean.
- Dismissal from the School of Allied Health Professions.

5.1.4 ACADEMIC ACCOMODATIONS

Guidelines for Students with Disabilities (Revised February 2008)

LSUHSC-NO and the School of Allied Health Professions commit to providing for the needs of admitted and enrolled students who have disabilities under Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA) by providing reasonable accommodations to such students. Reasonable accommodations will be made to students with disabilities on an individual and flexible basis. It is the responsibility of students, however, to review the technical standards for a given program and make their needs known.

Technical Standards

The School of Allied Health Professions has established Technical Standards for its programs of study delineating the minimum physical, cognitive, emotional, and social requirements necessary to participate fully in all aspects of academic and clinical education expected by a specified program of study. One's ability to meet the technical standards is a prerequisite for admission and continuation in a program of study. Applicants and enrolled students must be able to meet

all technical standards with or without reasonable accommodations. Technical Standards can be found in the current edition of the *LSUHSC-NO Catalog/Bulletin* that is available at: http://catalog.lsuhsc.edu.

General Guidelines

- Students are required to determine if they are capable of meeting all the technical standards with or without reasonable accommodations.
- Upon acceptance to a program of study, all students will be required to sign a statement indicating that they are able to meet all technical standards.
- Newly enrolling LSUHSC-NO students with disabilities who are requesting reasonable accommodations are required to register with the Office of Disability Services (students with disabilities who are not requesting reasonable accommodations are not required to register). This action should take place as soon as possible after notification of acceptance.
- Currently enrolled students are required to register their need for accommodation as soon as their need is identified.

Accommodation Procedures

The form titled "Student Intake Form" is the document students must complete in order to register. Students requesting accommodations are responsible for providing necessary documentation. Costs associated with documentation are the responsibility of students. Information regarding one's disability is confidential and shared only on a professional need-to-know basis.

Determination and documentation of disability must be made by a licensed professional evaluator or medical professional qualified to assess the functional implications of the particular disability. Documentation must include the following:

- Specific diagnosis
- Detailed testing results
- Current functional limitations
- Evidence of any past accommodations or medications
- Recommendations for academic accommodations
- Credentials of the professional

Following approval for academic accommodations from the Office of Disability Services, the student will be required to:

- Participate in an Intake Meeting with Disability Services to set up an accommodation plan
- Provide the accommodation letter and set up accommodation arrangements with faculty members and school
- Request a new accommodation letter every term/semester.

Students may choose to decline academic accommodations. If a student declines any requested accommodation, the student is required to complete and submit a Declination of Academic Accommodations form to the appropriate faculty at least two days prior to the activity (Appendix 19.3).

Related Documents:

Student Intake Form can be found at:
Declination of Academic Accomodations (Appendix 19.2)

5.2 OFFICE OF STUDENT AFFAIRS

5.2.1 REGISTRATION

Current students have to fill out the following required forms each Fall and anytime changes need to be made. The following required forms must be submitted back to the Bursar's by the given deadline date. These forms can be found at:
https://alliedhealth.lsuhsc.edu/admin/currentstudentregistration.aspx

Required Forms:

- Optional Fees
- Student Accident and Sickness Plan
- Title IV Funds

Mail all required forms to:

LSUHSC Business Office

433 Bolivar St., Room 144
New Orleans, LA 70112

Required Health Physical Forms:

- Instructions for Immunization
- Health Questionnaire
- Influenza Vaccine Waiver
- Flu Vaccine Attestation* (If you received the vaccine but do not have proof)
- Meningitis Refusal and Release Form
- PPD Screening
- TB Skin Test

Mail all health physical forms to:

LSU Health Science Center
Student Health Services
2020 Gravier St - 7th floor
New Orleans, LA 70112

Optional

- Request for Financial Aid
- Housing Application
- Request for Academic Accommodation Application

If you have any questions regarding registration, please contact Yudi Cazanas in the Office of Student Affairs at 504-568-6299 or via email at: sahpsa@lsuhsc.edu.

5.2.2 ACADEMIC CALENDARS

Important dates throughout the semester and the school year are reported in academic calendars. The School of Allied Health Professions as well as each department within the School have their own academic calendars to accommodate for differences in the timing of clinical rotations, fieldwork, and/or preceptorship courses. Students should defer to the departmental calendars in the event that a discrepancy in academic dates or scheduling occurs.

- School of Allied Health Professions Academic Calendar can be found at:

https://alliedhealth.lsuhsc.edu/admin/academiccalendar.aspx.

- The Department of Physical Therapy Academic Calendar will be provided to the students by the Department Head prior to the start of each semester.

6. DEPARTMENT OF PHYSICAL THERAPY

6.1 CURRICULUM

The curriculum utilizes a hybrid educational model that combines a traditional program and a case-based educational approach in the first two years with a move to a more problem-based approach in the third year. Learning experiences are used to reinforce simple concepts with progression to experiences that require more complex thoughts and integration of material.

The educational process involves active, responsible participation by both faculty and students, with the physical therapy educator becoming a role model and guide. Students are provided the opportunity to engage in service learning as well as teaching and learning experiences that further develop their professional growth.

The first year includes basic science courses that utilize a traditional lecture approach. Physical therapy courses use other educational methods (faculty facilitated group work, experiential clinical learning including real patient cases, etc.) to assist students in integrating content. Students then spend eight weeks in the clinic (PHTH 7280 Clinical Experience) where they practice skills learned in the first year.

Clinical science courses comprise the second year of the program. These include Diagnosis and Management courses and other foundational courses such as PHTH 7240 Motor Behavior and PHTH 7233 Therapeutic Interventions. Traditional lecture/labs are utilized, as well as integrated, case-based, application laboratories and learning experiences in the clinic setting. Students then complete a ten week Clinical Internship (PHTH 7381 Clinical Internship I) where they can apply and practice skills learned in the first two years of the program.

By the third year, there is a shift towards a problem-based teaching and learning approach to prepare for entry in the profession where students will become responsible for their own learning. Integrated within the third year are the final twenty weeks of full-time clinical experience.

The technical portion of the curriculum is based on the following education principles:

- Progression of skills from simple to complex.
- Division of curriculum into achievable blocks of material.
- Frequent formative and summative student assessment.
- Regular student assessment of clinical skills to assure technical competence and procedural knowledge prior to performance of skills in the clinic.
- Coordination and synchronizing presentation of scenarios across the curriculum.
- Development of critical thinking and decision making through case scenarios with stimulus questions and direct patient experiences.
- Frequent faculty advising and mentoring of student progress.
- Faculty modeling of professionalism and service to the community, viewing PTs as patient advocates.
- Knowledge of student learning styles and personality types to provide learner-centered education and therapeutic communication which binds these concepts all together.

6.1.1 CLINICAL EDUCATION

Clinical education is an essential component in the physical therapy curriculum. Clinical affiliations provide the integration of the student's didactic and laboratory coursework into a real clinical practice setting. The student will integrate their cognitive, psychomotor, and affective skills in an environment that facilitates them to develop and become a competent entry-level physical therapist. It is through a cooperative effort between the University, clinical site, and student that the clinical education program meets its goal of ensuring quality full-time clinical experiences for our students.

The Clinical Education Program provides the student with a series of clinical experiences, which exposes the student to a variety of practice settings. It is through the integrated and full-time clinical affiliations that the student achieves curricular goals which lead to entry-level competence.

Students have several different types of clinical experiences in our program. The first type occurs throughout the curriculum. The student participates in clinical experiences based on the didactic information presented in the classroom. Students are introduced to patient populations in courses such as evidence-based physical therapy, pathophysiology, neurosciences, movement science, motor behavior, and all the diagnosis and management courses. In these courses, students have multiple opportunities to visit local clinical sites to observe, examine, evaluate,

and/or treat specific patient populations. During the clinic visits, the students are supervised by faculty or clinical faculty.

The second type of clinical experience is the integrated and full-time clinical affiliations which total approximately thirty-eight weeks. The clinical affiliations provide the student with

opportunities to learn the foundation of patient care, to develop skills in patient/staff education, health promotion/prevention, and administration.

The first course, PHTH 7180, is an introductory course to clinical education that occurs in the first semester of the first year. The course is designed to cover general information about the role of a physical therapist in the clinic, professional development in the clinical setting, introduction to the clinical education process, expectations of clinical education (school, student, and clinic responsibilities), evaluation tools, and an introduction to the legal ramifications of patient care and student learning.

The first clinical affiliation, PHTH 7280 – Clinical Experience, occurs during the summer in the first semester of the second year after successful completion of all required academic coursework. The affiliation is eight weeks in length and the students are usually placed in an acute care hospital, sub-acute facility, or outpatient clinic. The student is supervised by a licensed physical therapist and will have the opportunity to apply the knowledge learned during the full year of the program. Emphasis is placed on safe and effective physical therapy practice, applying principles of professional conduct, competence with basic tests/exam, basic patient management skills, competence in communication skills, and documentation.

The second clinical affiliation, PHTH 7381 – Clinical Internship I, occurs during the summer in the first semester of the third year and is ten weeks long, following successful completion of all required academic coursework. A student may choose from a variety of clinical settings such as acute care, outpatient, orthopedics, geriatrics, neurology, pediatrics, or rehabilitation. During this affiliation, the emphasis is on the student mastery of patient examination/evaluation, re-evaluation, patient management skills, and interventions.

The third clinical affiliation, PHTH 7382 – Clinical Internship II, occurs during the second half of the fall semester of the third year and is ten weeks long, following successful completion of all required academic coursework. A student may choose from a variety of clinical setting such as acute care, outpatient, orthopedics, geriatrics, neurology, pediatrics, or rehabilitation. The emphasis for the students is clinical competence in all areas of patient care.

The fourth clinical affiliation, PTHT 7383 – Clinical Internship III, occurs during the first half of the spring semester of the third year and is ten weeks long, following successful completion of all required academic coursework. Students may choose a specialty area of interest or improve their skills by participating in another affiliation in an area they have already experienced.

PHTH 7280: Clinical Experience

An eight-week affiliation scheduled from late May-mid July, which is usually an acute, sub-acute, or outpatient affiliation. Students participate in this affiliation after successful completion of the first three semesters.

PHTH 7380: Clinical Internship I

A ten-week affiliation scheduled from late May-July. Students participate in this affiliation after successful completion of the first two years of coursework and PHTH 7280.

PHTH 7381: Clinical Internship II

A ten-week affiliation scheduled from early October-mid December. Students participate in this affiliation after successful completion of the first two and a half years of coursework and PHTH 7380.

PHTH 7383: Clinical Internship III

A ten-week affiliation scheduled from January – early March. Students participate in this affiliation after successful completion of the first two and a half years of coursework and three previous clinical affiliations.

Related Documents:

DPT Curriculum Document (Appendix 19.3)
DPT Course Description
http://catalog.lsuhsc.edu/preview_program.php?catoid=10&poid=917 - Physical Therapy
DPT Clinical Education Manual
https://alliedhealth.lsuhsc.edu/pt/docs/LSUHSC-PT-ClinicalEducationMANUAL.pdf?2022

6.1.2 EXPECTATIONS OF THE LEARNER

The student is encouraged to see themself as a perpetual learner and to respect the professional aspirations of the other class members. Each student is expected to participate and assist in creating a learning atmosphere in all classroom and laboratory sessions.

6.2 PROFESSIONALISM

Students are expected to act in a professional manner at all times. Although professionalism is difficult to define, it includes such things as honesty, integrity, respect of others, treating others with dignity, being helpful and courteous in the classroom and clinic, prompt attendance at all scheduled classes and meetings, behaving in the appropriate and necessary manner which is consistent with a clinical/academic setting. In other words, it is behavior which reflects your view of yourself and your profession.

Students must maintain a professional attitude at all times, including, above all honesty and integrity. Students must also demonstrate respect for others at all times, including during classes, labs, clinics, etc. Students must also uphold the Code of Ethics and the Guide for Professional Conduct of the American Physical Therapy Association (APTA) (Appendices 19.5, 19.6 & 19.7).

Related Documents:

Preamble to APTA Code of Ethics (Appendix 19.4)
APTA Code of Ethics (Appendix 19.5)
APTA Guide for Professional Conduct (Appendix 19.6)

6.3 SCHEDULE

The academic calendar for the Department may be different from that published in the *LSUHSC-NO Catalog/Bulletin* and so is provided to students by the Department Head. Prior to the beginning of each semester, the Department Head, in consultation with the core faculty, identifies all major program, curriculum, and examination dates well in advance, in order to allow appropriate reading/preparation time between such events/activities. The program faculty make every effort to distribute the events/activities in a way that best benefits the students' learning and progression in the program. In order to accommodate clinical internships, the Department may modify the dates to meet the program requirements.

If a faculty member changes the dates of an event or activity, students will be notified of the changes and make-up dates. Students should make every effort to review the master schedule

as well as the individual course schedules for all required elements, assignments, and activities/events. Students are not allowed to make any changes to the schedule for any reason.

6.4 COURSE & PROGRAM EVALUATIONS

Each semester, students have an opportunity to provide feedback on each course in which they are enrolled and the instructors that participated in the course. Students are strongly encouraged to provide feedback so that the faculty can continue to enhance the program and curriculum. Invitation and reminder messages are sent to students during the evaluation period, typically in the three weeks preceding the date when course grades are submitted to the Registrar's Office.

Program evaluation is an ongoing and continual process by individual faculty, course coordinators, full faculty, and departmental committees. The program assessment process is thorough, on-going, and includes regular, biweekly faculty meetings that allow continuous improvement and problem-solving as well as specific, periodic assessments of admissions, curriculum, and the faculty. The University assessment process is formal and occurs annually with timelines, requirements and reports on selected aspects of the program.

In the program evaluation process, there are multiple sources of data including curriculum review and assessments of the admissions process, program enrollment, core and associated faculty, clinical education faculty, program resources, and policies and procedures. Annually, the University assessment process consists of core faculty from the program reviewing all data to:

- Identify areas of strength and weaknesses
- Develop action plans to address each weakness
- Plan for future assessment

Based on the data from the program evaluation process, suggestions or changes to the program or curriculum are shared with faculty in a faculty meeting or a special meeting may be called. The faculty is committed to a flexible curriculum – one which adapts to the needs of the profession and the needs of our students.

6.5 ACADEMIC POLICIES

All courses in each semester are prerequisite for the following semester and for continued enrollment (except Independent Study, which is an elective, see below). In all courses, students are expected to demonstrate professional behaviors. Professional behaviors include class

attendance, student attitude, contribution to creating a learning atmosphere in the course, submitting written assignments on time, quality of discussion concerning topics contained in outside readings or other assignments, proper attire, and interpersonal relationships with faculty members, classmates and staff.

The doctoral student of physical therapy will find that the expectations, requirements and responsibilities of the clinical graduate program far exceed those of undergraduate school. The following sections outline some of the students' academic responsibilities and the process by which students are evaluated and curricular objectives are carried out.

6.5.1 STATEMENT OF REQUIREMENTS & NOTIFICATION OF PROGRESS

At the start of each course including elective and optional courses, students will be informed, in writing, of the standard performance expected of them by the faculty of that course. The standard of performance includes how grades are derived, and a description of the student's responsibilities in the course such as attendance at classes, laboratories and other course activities. A current syllabus outlining these requirements is to be posted on the Department share drive prior to the start of the semester.

On an annual basis following the summer semester, the promotions committees meet to review each student's performance in the curriculum as determined by examinations, faculty and staff reports, as well as other available means of appraisal. During this meeting, the promotions committees formally vote to promote or not promote a student to the next academic year. Following this meeting, the students are notified of their promotion status in a written letter from their respective promotions committee.

6.5.2 PROMOTIONS

All of the following criteria must be met satisfactorily for a student enrolled in the Department of Physical Therapy to be eligible for promotion to the next academic year or graduation:

- Satisfactory completion of all course work and requirements specified for the academic level.
- Fulfilling all requirements established by the faculty of each course within the academic year.
- Approval for promotion by the appropriate promotions committee.

Should a student's cumulative GPA fall below a 3.0 (with the consequence of being placed on academic probation by the school), an individual plan of action is prepared by the promotions

committee with input from the student, such that the student may, based on their circumstances, make an informed decision and take appropriate steps towards increasing their GPA or other outcomes. The student then has two consecutive didactic semesters of coursework (excluding summer semesters comprised solely of clinical education coursework) to raise their cumulative GPA to at least a 3.0 and thus be considered in satisfactory academic standing (not on academic probation). If the student fails to remediate their GPA in the allotted time, they will most likely be dismissed from the program.

6.5.3 REQUIREMENTS FOR GRADUATION

- Satisfactory completion of all course work and requirements specified in the curriculum with a final cumulative GPA of 3.0 or greater. In courses designated Pass/Fail a grade of Pass is required. The minimum scholastic requirement for course work is a grade of C; however, no more than twelve hours of C are allowed. Students who earn more than twelve hours of C in the first two years of the curriculum will be removed from the program.
- No more than two failed practical examinations are allowed in the first two years of the curriculum. Students who have more than two failed practical examinations will be removed from the program.
- Approval by the Promotions Committee and recommendation by the faculty of the Department of Physical Therapy for conferring of the degree, Doctor of Physical Therapy.
- Satisfactory status concerning obligations to the LSU System.

6.6 TECHNICAL STANDARDS FOR ADMISSION, PROMOTION & GRADUATION

Overriding Behaviors: Students must demonstrate professional behaviors, interpersonal skills, and safety concerns.

1. Observation: Independently the student must be able to observe a patient accurately.

2. Communication: The student must be able to utilize verbal, non-verbal, and written communication.

3. Sensorimotor: The student must be able to safely, reliably, and efficiently perform physical therapy assessment and treatments and possess speed, strength, coordination, and endurance for safely handling self, classmates, and patients.

4. Intellectual/Conceptual: The student must be able to problem-solve rapidly, demonstrate the ability to learn and reason, and to integrate analyze and synthesize data concurrently in a multi-task setting, comprehend 3-dimensional relationships and understand spatial relationships of structures.

5. Judgment: The student must be able to practice in a safe, ethical, and legal manner; respond to emergencies, demonstrate management skills, including planning, organizing, supervising, and delegating.

Related Document:

Technical Standards with Examples (Appendix 19.7)

7. PROGRAM PROGRESSION

7.1 STATEMENT OF SATISFACTORY ACADEMIC PROGRESS

A student who is allowed to continue enrollment in the Department of Physical Therapy is considered making satisfactory academic progress. Student promotions committees meet at the end of the summer semester and early in the spring semester to review the qualitative and quantitative academic progress of each student. A student not satisfactorily completing all course requirements will go through a full review by the appropriate promotions committee and a decision will be made regarding possible disciplinary or remedial actions that will be taken. Each student must complete the three year curriculum in no more than five years after initial enrollment. Time granted for a leave of absence will not be included in the maximum time period for completion of the program.

7.2 PROMOTIONS COMMITTEES

Individual promotions committees, established for each of the three years of the doctoral program, perform full scale reviews of the performance of students enrolled in that particular year of the program. Each committee will be appointed by the Department Head and will consist of two to three Department of Physical Therapy faculty members who are course directors of courses taught in the respective year. The Department Head will assign a chairman of each committee (Appendix 19.9). The promotions committees have regular meetings biannually (after the fall and summer semesters). However, the promotions committees may call additional meetings any time throughout the year if deemed necessary by the promotions committee or

departmental faculty/Department Head. During these meetings, the promotions committees may vote and make decisions on current enrollment status of any student in the respective year.

During the fall meeting, the promotions committees review the student records of all students in the respective year of the program and discuss the performance of the student in all three domains (academic, clinical, and professional). The committee writes up individual reports on each student summarizing their performance and potential for promoting to the next academic year given current performance levels. If a student's performance is considered to be marginal or below minimal course standards, the student's faculty advisor and/or a member of the promotions committee may arrange for a personal conference with the student involved to discuss deficiencies observed and to suggest corrective measures to be taken.

The promotions committees meet after the summer semester to formally vote on the promotion status of each student of the respective years of the program. (The third year promotions committee meets after the spring semester to vote on eligibility for graduation). A majority vote is required in order to promote a student to the next academic year or dismissal from the department. A unanimous vote is required in order to determine a student eligible for graduation. These rulings are then furthered to the Department Head for final approval.

Promotions committees have the responsibility for final action relating to student promotions. They also have an obligation to conduct a comprehensive review of the records of students who have acquired deficiencies, using all pertinent data available from any appropriate source, such as student files. In order to assure that the committee has adequate information for making a proper decision, it may seek comments from a student's faculty advisor or any other faculty member.

In reaching a decision on action to be taken in connection with a student who has incurred deficiencies, the committee shall give due consideration to the nature, extent, and significance of the deficiencies manifested. It shall take into account the relationship of the activity and time required for completion of the measures for removal of deficiency specified by the departments or faculty involved. It shall also evaluate the influence of other factors which relate to the best interest of the student and the department.

The committee may designate an appropriate course of action as described below:

- Promotion with no deficiencies noted
- Promotion after removal of all deficiencies as specified

- Dismissal for failure to meet the requirements in a satisfactory manner
- Special procedures which may be indicated in exceptional cases*

*Students who are in poor academic standing may petition the promotions committee for permission to repeat coursework in order to improve their academic record. The petition letter should include the student's perceived rationale for poor academic performance as well as a specific plan to remediate those factors the student believes led to their poor performance. The Promotions Committee will have one week to determine if the student's perceived reason(s) for poor performance, as well as the identified remediation plan, has a high potential for ensuring successful matriculation. If the promotions committee accepts the petition, the petition goes to the Office of Academic Affairs and then to the Dean. If the Dean approves, the student may be allowed to repeat coursework.

To further specify students' levels of achievement with regards to the promotions committee, guidelines have been devised for designation of differing tiers of promotion. These include:

- Promotion with accolades
- Promotion
- Marginal promotion
- Promotion with remediation

The level of promotion is dependent upon a student's composite performance across four major areas. These areas are 1) Academic performance, 2) Practical/Clinical performance, 3) Professional conduct, and 4) Consistency of performance.

7.3 PROMOTION WITH REMEDIATION

If the promotions committee renders a decision of "Promotion with remediation," this is indicative of deficiencies (academic, clinical or professional) on the part of the student. All academic deficiencies must be removed before a student is eligible for graduation. This requires additional work or some corrective action on the part of the student. Permission to remove a deficiency is granted the student by the appropriate promotions committee. The manner in which a deficiency may be removed and the length of time to be allowed for the removal is to be specified by the promotions committee. The student may be allowed to continue in the program as usual while remediating the identified deficiencies and continue to promote regularly contingent upon satisfactory remediation of these deficiencies.

7.4 ACADEMIC DISMISSAL

If the promotions committee concludes that a student should be dismissed because the student has failed to meet academic requirements satisfactorily, a recommendation for dismissal will be sent to the Department Head followed by the Associate Dean of Academic Affairs for the School of Allied Health Professions. Appeals of decisions of the promotions committee must be initiated by the student within thirty days after the beginning of the next academic semester. The following procedure is to be followed:

- The student shall make a written request to the Department Head asking for a meeting with the Department Head and promotions committee. The written request should clearly state the purpose of the meeting; however, it should not go into detail as to the justification for the appeal.
- The Department Head shall arrange a meeting within two weeks from the date of receipt of the request. At this meeting, the student may be accompanied by their faculty advisor.
- At the close of the meeting, or within seven days thereafter, the Department Head shall make a decision. If a decision is made at the close of the meeting, it is to be given orally to all present. If the matter is taken under advisement, the Department Head shall inform all parties of the decision in writing.
- If the decision reached requires change in an official record, the promotions committee must comply with all regulations and procedures necessary to accomplish the change.

If the student is not satisfied with the decision reached, the student may appeal to the Dean of the School. The student's appeal must be in writing and must contain the following information:

- An explanation of the complaint
- The relief requested
- Specific statement of the reasons supporting the relief sought

Upon receipt of the request, the Dean will forward copies to the Department Head, who must promptly reply with an individual written statement supporting their previous actions. When the reply from the Department Head has been received, the Dean may take one of the following actions:

- Decide the question on the basis of the written appeal and the written reply of the Department Head.

- Meet with all parties concerned, who may be accompanied by advisors if desired, and, after discussion, reach a decision.
- Refer the appeal to a hearing panel for its recommendation.

Hearing panels to consider appeals will be appointed by the Dean or their designee and shall be composed of three faculty members selected by the Dean, or their designee with no more than two from the same department, and two students appointed by the student government president of the School. The Dean or their designee shall appoint a chairperson for the panel. The panel will conduct a hearing to elicit facts from the concerned parties. After deliberation, the panel will make its recommendation in writing to the Dean. Copies of the recommendation and the Dean's final decision must be given to all parties. Regardless of the method used, the Dean must make a decision within thirty days from the date of receipt of the student's appeal. The decision must be written, listing the reasons supporting the decision; copies must be given to all parties. If the decision requires change in an official record, the department must comply with all regulations and procedures necessary to accomplish the change.

If any party to the appeal seeks resolution of the matter through any agency outside the Health Sciences Center, whether administrative or judicial, the Health Sciences Center shall have no obligation to continue the appeal process, subject to constraints of law. If any party to the appeal believes that a serious procedural error occurred or that there was an abuse of discretionary authority in reaching the decision, that person may file with the Vice Chancellor for Academic Affairs a written petition for review. This petition, which must be filed within seven days after receipt of the decision in Step Three, must contain a complete statement of the alleged serious procedural error, or examples of abuses of discretionary authority complained of, and also must contain reasons for the relief sought. The petition must be accompanied by all documents produced in the appeal. Copies should be sent to all parties to the appeal and to the Dean.

The Vice Chancellor for Academic Affairs shall decide within two weeks after receipt of the petition whether further action should be taken. In reaching this decision, this official may ask other parties to the appeal to make written reply to the request for a review or these parties, on their own, may make a written reply. If the decision is reached that a review is not justified, the student and all other parties will be so notified. If the Vice Chancellor for Academic Affairs decides to respond favorably to the petition for review, this official will hold a formal meeting with all parties and their advisors, if desired, and reach a decision based on discussions at this meeting, as well as on all written materials furnished. Once a decision is reached, the Vice Chancellor for Academic Affairs will notify all parties, plus the Dean, of the decision. The decision of the Vice Chancellor for Academic Affairs shall conclude the matter, subject to the right of the Chancellor to review the case. The Chancellor will consider the case only on the basis of a petition for review

following the procedure outlined above. The appeals process described above is for promotion committee decisions only; students who wish to appeal grades received for examinations, quizzes, laboratories, or clinical-practicum experiences, must resolve their appeals within the Department of Physical Therapy or through the School of Allied Health Policy for Grade Appeals. The instructor of record will have the final authority for assignment of grades in all departmental courses and activities.

7.5 DISCIPLINARY ACTION

For a student who has engaged in cheating, unprofessional conduct, or other improper behavior, occurring within or outside the confines of the teaching program, dismissal or other specified disciplinary action may be recommended after review by the Department Head and followed by Associate Dean of Academic Affairs and/or a committee convened by the Associate Dean of Academic Affairs for that purpose.

Accusations against students are to be submitted in writing to the Associate Dean of Academic Affairs to be managed as specified in the *School of Allied Health Professions Policy And Procedures Related To Student Conduct.*

Related Document:

Table of DPT I, II & III Promotions Committees (Appendix 19.8)

7.6 ANECDOTAL RECORD

Anecdotal records are used to document exemplary (e.g. outstanding participation in class, devoting extra time in lab to assist other students, etc.) and non-exemplary (e.g. exhibiting unprofessional behaviors, tardiness, using email in class, etc.) behaviors by students. An anecdotal record can be made by a student or faculty member. The writer of the anecdotal record will record it electronically using a link provided on Moodle. If a student receives an anecdotal record they will be notified via email containing specific information about the record, including brief description of the observed action or behavior and an interpretation of the student action or behavior. Faculty may also meet with the student about the anecdotal record. Anecdotal records will be used in promotions decisions.

7.7 LEAVE OF ABSENCE

A leave of absence for a short period of several weeks up to one year may be granted to a student in good standing, subject to the discretion of the Department Head and the Dean, because of illness or other appropriate reasons. Students taking short-term leave of absence of less than one week must make acceptable arrangements with the faculty involved for completion of course work and other assignments which will be missed. Leave of absence of a longer duration may be granted students in good standing for reasons of a personal nature or to participate in a special program of research or other activity designed to augment the student's academic training. Specific arrangements must be made on an individual basis with the Department Head and the Dean before beginning a leave of absence. The University policy governing the processing of leave of absences are applicable and are described in the general information section of the *LSUHSC-NO Catalog/Bulletin*.

Related Document:

DPT Student Leave Request Form (Appendix 19.10)

7.8 WITHDRAWAL

Students are permitted to withdraw from the Doctor of Physical Therapy program at any time. If a student who has voluntarily withdrawn wishes to be considered for readmission to the program, they must file an application for readmission with the Departmental Admissions Committee via PTCAS.

7.9 READMISSION PROCESS

Students who have voluntarily withdrawn or who have been dismissed from the Doctor of Physical Therapy program may elect to apply for readmission. If the student elects to apply for admission, they must file an application for readmission with the Departmental Admissions Committee via PTCAS.

8. GRADING & EVALUATION OF PERFORMANCE

8.1 GRADING POLICY

In each course in the curriculum, the student's performance is evaluated by examination as well as other means, and a grade is submitted by way of a grade sheet to the School of Allied Health

Professions' Office of Student Affairs and, from there, to the Office of the Registrar, within a two-week period after completion of the course. The single final grade to be assigned to a student on completion of the course work should be determined by considering all important attributes of that student's performance in the course. A descriptive comment concerning student performance in the areas of knowledge, deportment, interpersonal relationships, attitude toward course work, and other factors which, in the opinion of the course faculty, are important to the student's future role as a physical therapist, is encouraged for all courses. Such descriptive comments become a part of the student's permanent record.

Official permanent grades to be recorded for each student upon completion of a course are:
A, B, C, F, I, W and P.

"A" is given to all students whose quality of performance is considered to be excellent and who have demonstrated a degree of understanding and ability which is considered above the level of adequacy required for passing status.

"B" signifies that all work in a given course has been completed at a level above the minimal requirement but below that of "A."

"C" is indicative that minimal requirements for completion of the course work have been met. A grade of C is not considered satisfactory graduate work within the Doctor of Physical Therapy program. In the event a student earns a C in a course, the faculty should alert the promotions committee for that class as well as the faculty advisor for that student. The committee will discuss the matter on an individual basis and notify the student according to promotion committee procedures.

"F" is the grade assigned to students who are considered to be inadequate in meeting the minimum course requirements and have demonstrated a degree of deficiency which makes them ineligible to be promoted, or in some instances, to continue in school without appropriate remedial action.

The "**P"** grade indicates a Pass. Certain courses are graded on a Pass or Fail basis, instead of the letter grades A,B, C, or F. A grade of Pass indicates satisfactory completion of course requirements and has no numerical correlation.

The grade of "**W"** (Withdrew) will be issued to all students who enroll in a course and who attend up to eighty percent of the actual class prior to withdrawing.

The grade of **"F"** (Fail) will be issued to all students who enroll in a course and who attend eighty percent or more of the actual class and withdrew before completion of the course. A brief statement describing the basis for each grade of **F** (Fail) issued will be placed in the student's file.

Each Course Director must specify in the course syllabus, the specific percentages assigned to each grade and the standards for acquiring those specific percentage points within the course. A grade of temporary significance which may be issued by the Department of Physical Therapy but which is not recorded on the student's permanent record is "**I**"(Incomplete).

A grade of **"I"** (Incomplete) is assigned when, for reasons beyond the student's control or because of some acceptable circumstance, the student has been unable to complete the course requirements in the usual time or manner. This grade does not imply a deficiency on the part of the student. On completion of the required course work, the grade of "**I"** will be changed to an appropriate grade as described above.

Students with Incomplete status in a course must finish all required work in a manner specified by the Department. In general, this should be done in a relatively short period of time after the regular termination of the course. The Department may allow a longer period of time for reasons which are considered appropriate. A student cannot be promoted until all incomplete grades have been removed. Unless there is an acceptable reason for further delay, a grade of **"I"** (Incomplete) which is not removed by the date for registration for the next school year will be recorded on the record as "**F"** (Fail).

Letter grades are assigned on the basis of the following distribution:

90 - 100%	**A**
80 - 89.99%	**B**
70 - 79.99%	**C**
<69.99%	**F**

The Departmental grading policy and procedure follows the stipulations outlined in the Graduate Professional Scholastics Requirements of the *LSUHSC-NO Catalog/Bulletin*:

- A minimum cumulative GPA of 3.0 is required for graduation.
- The minimum scholastic requirement for course work is a grade of C. In courses designated Pass/Fail a grade of Pass is required.

Provisions for academic progression are further outlined in the *LSUHSC-NO Catalog/Bulletin* and include, but are not limited to the following details regarding scholastic probation:

- Students who fall from 1-10 quality points below a 3.0 cumulative GPA will be placed on scholastic probation.
- Students who earn a grade of Fail in clinical or didactic courses will be removed from the program.
- Students who fall more than 10 quality points below a 3.0 cumulative GPA will be removed from the program.

Students will remain on scholastic probation until the minimum scholastic requirement for cumulative GPA is achieved. Failure to meet this requirement within the allotted time frame will result in removal from the program.

9. EXAMINATIONS

9.1 WRITTEN EXAMINATIONS

Cumulative written examinations are taken twice a semester, at mid-term and at the end of the semester. These examinations include questions from all courses that are taught within the Physical Therapy Department. Courses taught outside of the Department administer their own examinations and coordinate those examinations with those administered within the Physical Therapy Department. All written examinations are taken online using Moodle.

9.2 PRACTICAL EXAMINATIONS

The purpose of the comprehensive practical examination for DPT I and DPT II students is to ensure that the student has demonstrated basic safety, psychomotor, and cognitive performances to proceed in the program. The comprehensive practical examination evaluates

cognitive and affective behaviors, clinical skills, clinical integration, and problem solving abilities commensurate with didactic and clinical coursework.

Schedules

Practical examinations are administered at the end of fall and spring semesters in the first and second year of the program. Each DPT I and DPT II student will be required to complete a

comprehensive practical examination. By week three of the semester, a faculty member will make available a schedule with the student's assigned date and time. **Students are not allowed to make any changes to the schedule for any reason.**

DPT I students need to report to the Coordinator of Non-Academic Area's office at their designated time. Once they receive the case information they are to proceed to the faculty conference room to prepare. DPT II students need to report to the Coordinator of Non-Academic Area's office at the assigned time. This allows for fifteen minutes for the student to receive their case information and prepare. Once they receive the case information they are to proceed to the faculty conference room to prepare.

Minimum Requirements to Pass the Exam

Students must fulfill two requirements sufficient for passage of the practical exam to ensure that the student can provide safe and effective patient care:

- DPT I (fall semester):
    - Final grade of **70% (C)** or better
    - Final score of 4/5 or higher on the Safety criteria
- DPT I (spring semester):
    - Final grade of **75% (C)** or better
    - Final score of 4/5 or higher on the Safety criteria
- DPT II:
    - Final grade of **80% (B)** or better
    - Final score of 4/5 or higher on the Safety criteria

If the primary faculty has determined the student has not met the two requirements, a secondary faculty will be asked to review the student's video performance and provide an assessment. To ensure the secondary faculty's objectivity with grading, the primary faculty's assessment will not be disclosed to the secondary faculty. If the secondary faculty's assessment concurs with the primary faculty's assessment of failing to meet the two requirements, the student will be provided a practical examination remediation plan. If the secondary faculty's assessment differs with the primary faculty, a formal discussion will occur to allow for consensus on the final practical examination grade.

A student who is unsuccessful in one or both of these areas be offered a plan to remediate their practical exam. No more than **TWO** failed practical examinations are allowed throughout the entire program. After failure and retake of a second practical examination by the student, the

student will receive a formal letter warning that a failure on a third practical exam within the program will result in dismissal from the program.

If the student is unsuccessful in passing the practical exam, the student will be informed and proceed to the remediation phase. Dates for the remediation phase will be specified at the beginning of the semester. The student who is in the remediation phase will be required to complete the remediation specified by department.

Remediation

A student who is unsuccessful in the practical exam will be offered an opportunity to remediate. The student must successfully complete the remediation plans to progress in the program. There are two ways to remediate the exam: Provisional Pass and Exam Retake. The primary grading faculty member with the oversight of the promotions committee will decide if the student is offered a provisional pass or exam retake. The remediation dates are on the DPT Academic Calendar and in all course syllabi. The dates for remediation are generally scheduled the week following the practical exam. Students are expected to be available so that remediation can occur should a student be unsuccessful on the practical exam.

Provisional Pass

The purpose of the provisional pass is to offer the student the opportunity to self-assess their comprehensive practical examination performance. A provisional pass will allow the student to self-assess their performance, identify areas of strengths and weaknesses including all major mistakes and errors, and provide strategies to address and improve deficits. The student will have one hour to watch their practical examination video. The student will provide a written narrative of their performance: areas of strengths/weaknesses including all major mistakes and errors and strategies to address and improve deficits. If the student provides adequate documentation including specific deficits and strategies to improve, the student will receive a grade of “P” pass for the practical exam. If the student is unable to identify the specific deficits contributing to their initial failing performance, they will receive a grade of “F” fail and required to retake the comprehensive practical exam.

Exam Retake

Prior to the exam retake, the student will self-assess their own performance, identify all major mistakes and errors in performance, and provide appropriate suggestions for improvement and correction. The student will have one hour to watch the video of their practical examination. The

student will list identified mistakes/errors and suggested improvements/corrections. The student will be provided the opportunity to discuss their performance with the primary faculty. The student will be given at least two days to prepare for the exam retake.

10. APPEAL OF FINAL GRADES

As per the *LSUHSC-NO Catalog/Bulletin*, the School of Allied Health Professions Policy for Appeal of Final Grades is outlined as follows:

Appeals of final grades must be initiated by the student within thirty days after the beginning of the next academic semester. The following procedure is to be followed.

The student should meet with the faculty member concerned to discuss the situation and attempt to arrive at a solution. Although each may have an advisor present, under most circumstances the meeting will be more productive if only the student and the faculty member are present. If an administrative officer (Department Head, Dean, or Vice Chancellor for Academic Affairs) is the faculty member who assigned the grade which is appealed, that person should be excused from the appellate process; that place in the procedure will be taken by a faculty member appointed ad hoc by the Vice Chancellor for Academic Affairs or the Chancellor, as appropriate. If the decision reached requires change in an official LSU System record, the faculty member must comply with all University System regulations and procedures necessary to accomplish the change.

If the matter is not resolved between the student and the faculty member, and the student wishes to pursue the appeal, the student shall make a written request to the Department Head in which the course was taught asking for a meeting with the Department Head and faculty member. The written request should clearly state the purpose of the meeting and should indicate the faculty member's name; however, it should not go into detail as to the justification for the appeal. The Department Head shall arrange a meeting within two weeks from the date of receipt of the request. At this meeting, both the student and the faculty member may be accompanied by an advisor. At the close of the meeting, or within seven days thereafter, the Department Head shall make a decision. If a decision is made at the close of the meeting, it is to be given orally to all present. If the matter is taken under advisement, the Department Head shall inform all parties of the decision in writing. If the decision reached requires change in an official record, the faculty member must comply with all regulations and procedures necessary to accomplish the change.

If the student is not satisfied with the decision reached, the student may appeal to the Dean of

the School. The student's appeal must be in writing and must contain the following information:

- An explanation of the complaint
- The relief requested
- A specific statement of the reasons supporting the relief sought

Upon receipt of the request, the Dean will forward copies to the Department Head and faculty member concerned, who must promptly reply with an individual written statement supporting their previous actions. Either may request that a hearing panel be convened. When the Department Head's and faculty member's replies have been received, the Dean may take one of the following actions.

- Decide the question on the basis of the written appeal and the faculty member's and Department Head's written replies.
- Meet with all parties concerned, who may be accompanied by advisors if desired, and, after discussion, reach a decision.
- Refer the appeal to a hearing panel for its recommendation.

If a hearing panel has been requested by the student, the faculty member, or the Department Head, the Dean will convene such a panel. Hearing panels to consider grade appeals will be appointed by the Dean or their designee and shall be composed of three faculty members selected by the Dean, or their designee with no more than two from the same department, and two students appointed by the student government president of the School. The Dean or their designee shall appoint a chairperson for the panel. The panel will conduct a hearing to elicit facts from the concerned parties. After deliberation, the panel will make its recommendation in writing to the Dean. Copies of the recommendation and the Dean's final decision must be given to all parties. Regardless of the method used, the Dean must make a decision thirty days from the date of receipt of the student's appeal. The decision must be written, listing the reasons supporting the decision; copies must be given to all parties. If the decision requires change in an official record, the faculty member must comply with all regulations and procedures necessary to accomplish the change.

If any party to the appeal seeks resolution of the matter through any agency outside the Health Sciences Center, whether administrative or judicial, the Health Sciences Center shall have no obligation to continue the appeal process, subject to constraints of law. If any party to the appeal believes that a serious procedural error occurred or that there was an abuse of discretionary authority in reaching the decision, that person may file with the Vice Chancellor for Academic Affairs a written petition for review. This petition, which must be filed within seven days after receipt of the decision in Step Three, must contain a complete statement of the alleged serious

procedural error, or examples of abuses of discretionary authority complained of, and also must contain reasons for the relief sought. The petition must be accompanied by all documents produced in the appeal. Copies should be sent to all parties to the appeal and to the Dean.

The Vice Chancellor for Academic Affairs shall decide within two weeks after receipt of the petition whether further action should be taken. In reaching this decision, this official may ask other parties to the appeal to make written reply to the request for a review or these parties, on their own, may make a written reply. If the decision is reached that a review is not justified, the student and all other parties will be so notified. If the Vice Chancellor for Academic Affairs decides to respond favorably to the petition for review, this official will hold a formal meeting with all parties and their advisors, if desired, and reach a decision based on discussions at this meeting, as well as on all written materials furnished.

Once a decision is reached, the Vice Chancellor for Academic Affairs will notify all parties, plus the Dean, of the decision. The decision of the Vice Chancellor for Academic Affairs shall conclude the matter, subject to the right of the Chancellor to review the case. The Chancellor will consider the case only on the basis of a petition for review following the procedure outlined above. The appeals process described above is for final course grades only; students who wish to appeal grades received for examinations, quizzes, laboratories, or clinical practicum experiences, must resolve their appeals within their own departments. The instructor of record will have the final authority for assignment of grades in all departmental courses and activities.

11. STUDENT ADVISING

As each DPT class is accepted into the program, students are assigned a faculty advisor by the Department Head. During the first semester, the advisor meets with all of their advisees to inform them of the advisory process.

Each semester after that, the student and faculty and advisor meet at least once during the semester to discuss major topic areas including, but not limited to:

- Current and past academic performance
- Deficiencies noticed
- Comprehensive exam performances
- Promotions committee documentation
- Description of action plans devised to assist students in meeting desired outcomes

It is the responsibility of the student to contact their advisor to initiate the meeting. The advisor

will obtain the student's folder for the meeting. Faculty advisors will review all items of the student's file with the student during advisor/advisee meetings as described above. Minutes are to be recorded of each formal advisory meeting. These minutes are to be signed by both the student and the faculty advisor and placed in the student's record.

12. DEPARTMENT OF PHYSICAL THERAPY GENERAL POLICIES

- Under no circumstance is anyone who has not obtained prior authorization from the Department of Cell Biology and Anatomy allowed to enter the gross anatomy laboratories (MDL 1 or MDL 2 in the MEB). This includes but is not limited to visiting undergraduate college students, and friends or relatives of students enrolled in gross anatomy courses in any of the schools within the LSUHSC. Under no circumstances are high school students allowed access into the gross anatomy laboratories.
- The laboratory and student computer room has 24-hour swipe access via use of student I.D. cards. Students will be able to access other student areas after hours by checking out a key from Rose Rousselle. The key must be returned the next day (if checked out during the week) or first thing Monday morning if it was checked for weekend use. The student who checks out the key assumes full responsibility for the key and for any issues that may occur while the key is in their possession. If the student gives the key to another student and there are issues, the student who originally checked out the key bears full responsibility for any issues that may have occurred. Under no condition are any students from any other program allowed in these areas after hours. At no time is a student to practice any technique or procedure on anyone other than a classmate. Students are expected to leave the premises clean and orderly. The doors must be locked upon departing from the floor.
- Students must purchase required texts.
- Students are required to purchase the following items before the beginning of the first fall semester: short white lab jackets, name tag, a goniometer, a penlight, a tape measure, a reflex hammer (brush/pin attachment not required), an inclinometer, wax pencil, a stethoscope, and a sphygmomanometer. Other items may be required in specific courses.
- Students should obtain permission from the attending therapist before entering any treatment area. Do not use clinical areas as a passageway through the Department.
- Students are assigned a locker in which all personal items and valuables not carried with you should be secured at all times. Students may not apply stickers or tape to the lockers. Magnets may be used to post necessary messages.
- Due to the disruptive nature of cell phones, all cell phones must be turned off or kept in the silent/quiet mode during all class periods and during all patient care times (observations, clinical internships). Cell phones should be kept in book bags at all times.

If you are expecting an emergency-type call, place cell phone on the silent mode. Leave the room before answering it. Also, prior to the beginning of class, inform the faculty that you may be leaving the room due to a potential emergency call. Cell phones are not to be utilized in any form or purpose during an examination. If you are expecting an emergency phone call during an examination, inform the proctor of the exam and you may leave your phone with the proctor on silent or vibrate to receive the call. At this point you may leave the room to use your cell phone. You are expected to return to the exam as expeditiously as possible.

12.1 BACKGROUND CHECKS & DRUG SCREENS

The Substance Abuse Policy applies to all faculty, staff, residents, and students of the LSUHSC-NO. Students must understand the initial and continued enrollment is contingent upon compliance to this policy. The complete policy on substance abuse is located at: http://www.lsuhsc.edu/no/administration/cm/cm-38.aspx.

Participation in clinical experiences and affiliation is a required part of the curriculum and a requirement for graduation. Clinical rotation sites may deny a student's participation in the clinical experience and rotation because of failure of a required drug test, which would result in delayed graduation or in the inability to graduate from the program. The procedure for alcohol and drug screen located in the *DPT Clinical Education Manual*:
https://alliedhealth.lsuhsc.edu/pt/docs/LSUHSC-PT-ClinicalEducationMANUAL.pdf?2022

Students are required to have a background clearance for matriculation. Additional background clearances may be required to fulfill mandates from clinical sites or to participate in clinical affiliations. Prior to the start of an affiliation, the SCCE will inform the student if a criminal background check is required and the specific level(s) (i.e. multi-state, healthcare provider, elderly/child abuse, etc). The procedures for background clearance are located in the *DPT Clinical Education Manual*:
https://alliedhealth.lsuhsc.edu/pt/docs/LSUHSC-PT-ClinicalEducationMANUAL.pdf?2022

12.2 STUDENT ATTENDANCE

General Attendance

As stated in the *LSUHSC-NO Catalog/Bulletin*, "Students are expected to attend all scheduled appointments in each course. Determination of the number of absences which may be interpreted as excessive, rests with the Department, and is subject to approval by the Dean."

Excessive absence, regardless of the cause thereof, may be construed as sufficient reason for considering a student as academically deficient. Promptness and attendance are mandatory for all classes and laboratory sessions. Each unexcused absence will result in the loss of one (1) percentage point from the student's final grade in the course in which the class or laboratory session was missed.

An absence occurs when a student misses all or part of any one scheduled class or lab session. Tardy means that the student arrives after the class or laboratory session has started. When a student comes to class more than five minutes after the class has started, the student shall submit a note of explanation, either written or electronic, to the course director by the end of the day. The instructor can then decide whether it constitutes an excused/unexcused tardy. The first instance of tardy in a course will result in an anecdotal report and a warning; whereas, each subsequent tardy in that course will result in an anecdotal report and the loss of one (1) percentage point from the student's final grade in the course. Attendance and promptness are also mandatory during all clinical assignments. Absences from any clinical assignments must be rescheduled. A student who is going to be absent or tardy from a clinical assignment must notify the Director of Clinical Education (DCE) and the clinical instructor (CI) as early as possible.

Attendance at all scheduled examinations is mandatory (see policy for Examinations).

Alternate Lab Periods

Alternate labs periods are included in the didactic semester schedules to allow for flexibility in scheduling. Students are expected to reserve this time without scheduling other personal business so that it may be utilized to accommodate unforeseen changes or a guest instructor's schedule. If a faculty member identifies the need to use an alternate lab period to accommodate changes in the regular class schedule, the faculty member must give students at least five business days notice prior to the new class period. Attendance for a class session scheduled during an alternate lab period is mandatory unless otherwise indicated by the faculty member.

Approved Leave

Approved leave must fall into one of the following categories: personal leave, sick leave, bereavement leave, or professional leave.

Personal Leave: During the didactic portion of the curriculum, students may apply to take up to

two days (partial or full days) of “personal leave” per regular length didactic semester, and one day or partial day during the abbreviated semesters of the first year summer and third year fall and spring. Leave requests may be denied if any tests, quizzes, projects, patient laboratories, student presentations, etc., are scheduled on the day for which leave is requested. Course Directors may also designate other specific class periods as “required.” No personal leave may be taken on days when the student is assigned to a clinical site.

Sick Leave: Reasons for an absence to be considered as sick leave include but are not limited to illness, accident, or medical emergency. Regularly scheduled, non-emergent appointments for doctors, dentists, etc., are not considered sick leave but rather fall under the category of personal leave. Any absence due to sickness of any length (including a portion of a day or a class) is considered as an event. Any event that lasts longer than two consecutive days will require documentation (note from a doctor, etc.). Any more than two events in the same semester will require documentation (note from a doctor, etc.). The documentation must be submitted on the first day the student comes back to school and it must be dated with the same date(s) as the absence(s). Failure to provide documentation in these cases may result in the absences being considered as unexcused.

Bereavement Leave: Reasons for an absence to be considered as bereavement leave are for the death of a loved one. This includes leave granted when attending the funeral or burial rites of a parent, step-parent, child, step-child, brother, step-brother, sister, step-sister, spouse, mother-in-law, father-in-law, grandparent, or grand-child; provided such time off shall not exceed two days on any one occasion. Leave granted when attending the funeral or burial rites of any other individuals other than those listed above would not be considered bereavement leave but rather fall under the category of personal leave.

Professional Leave: Reasons for an absence to be considered as professional leave include but are not limited to, attendance of meetings of the professional organization (national, state, or district), continuing education course, research related activities, etc. Leave requested for the purposes of job interviewing or other non-professional development activities are not considered professional leave but rather fall under the category of approved leave. Any absence due to professional leave of any length (including a portion of a day or a class) will require documentation of attendance at the professional event (registration form, certificate of completion, etc.). Leave requests may be denied if any tests, quizzes, projects, patient laboratories, student presentations, etc., are scheduled on the day for which leave is requested. Course Directors may also designate other specific class periods as “required.” Professional leave may be taken on days when a student is assigned to a clinical site; however, approval must be attained from both the DCE and CI at least one month prior to the event. A student approved for

professional leave during a clinical rotation will be required to provide an in-service on the event or activity to the clinical staff.

For any approved absence of personal or professional leave, students must email their professor to request leave and indicate the type of leave (personal, sick, bereavement, or professional). Approval for absence from courses taught outside the department must be obtained by the Departmental course coordinator and the PT department head must be cc'ed. The professor may approve or deny the leave. If the professor approves, the student will fill out the leave request using the link provided in Moodle. The students is expected to fill out the online form within 2 business days receiving permission for leave from the faculty. Failure to submit this form prior to leave will result in the absence being unexcused and the students may be subject to any associated penalties. For any excused absence of sick/bereavement leave, the absence notification email must be submitted as soon as possible, if the event is unforeseeable. The online leave request form must be filled out right after sending the email about absence to your professor.

Attendance for Examinations & Testing

Attendance at all scheduled examinations is mandatory. A student who is unable to take any particular scheduled and required examination is expected to notify the course director (and the PT Department Head in cases of courses taught outside the Department) at once. The reason for your absence must subsequently be submitted in a letter to the course coordinator (and the PT Department Head in courses taught outside the department). A student who does not appear for a regularly scheduled examination may, at the discretion of the Department, be allowed to take a make-up exam, which may be an essay or an oral examination.

Before a make-up examination will be given, a student absent from an examination because of illness must have in writing, from their physician, an explanation of the illness that justifies their absence on the exam day.

All make-up examinations must be taken no later than one week after the student returns to class, or as scheduled by the course director. Absence from an examination for any other reason must be excused by the course director before the time of the scheduled examination. Unexcused absence from an examination results in a score of zero for that exam.

- Absolutely no communication of any type between students will be allowed during an examination.
- Each student must complete the examination prior to leaving the room.

- The student will be permitted to have at their desk only those materials necessary for completing the examination. Food or drink is not permitted during comprehensive examinations.
- Unprofessional conduct of any kind, including cheating on examinations, plagiarism, cheating in any class exercise or unprofessional conduct in classes, laboratories or in the clinical setting will subject the offending student to disciplinary action. This action may include dismissal from the program (See the *School of Allied Health Professions Policy And Procedures Related To Student Conduct*).
- The student's signature on all examination papers indicates that they are abiding by the following *Honor Code: "I have neither received nor given any assistance on this examination, nor have I seen anyone else do so nor will I communicate anything about an examination (includes any format written, practical, oral, etc.) with anyone other than LSUHSC-NO Physical Therapy academic faculty and that doing so will be considered unprofessional conduct which will be reported to the promotions committee."*

Related Document:

DPT Student Leave Request Form (Appendix 19.10)

12.3 STUDENT ATTIRE

Students are required to wear attire which conforms to the image of the professional physical therapist. The Health Sciences Center, and specifically the Physical Therapy Department, is a patient-care setting where patients, other professionals, and the general public form an impression of us which is based on our appearance and conduct. Being neatly dressed and well-groomed is exemplary of professional behavior and is required at all times. Safety and comfort concerns for both the patient and clinician also drive the need for dress modification in the professional setting.

- **Classroom & Laboratory attire** – the following attire is required for all physical therapy classroom settings. For the top, students may wear LSU Physical Therapy Polo shirt OR scrub top. Sweatshirts/fleeces are permitted, but logos should adhere to professional standards which include avoiding violent language or images; images or language depicting drugs or alcohol (or any illegal item or activity) or the use of the same; hate speech, profanity, pornography; or images and/or language that create a hostile or intimidating environment. For the bottom, students will wear scrub bottoms. Uniform attire MUST be CLEAN.
    . Faculty members may require specific dress for a specific class related to activities during class that supersede departmental dress code. Instructors will inform

students of specific dress code and subsequent enforcement policies for those classes. Uniform attire MUST be CLEAN.

- **Clinical attire**
  . For classroom clinical experiences (i.e. PLEX, Neuro Clinic, etc), students should wear their lab coats on top of their classroom/laboratory attire.
  a. For internship experiences, students are responsible for contacting their clinical instructors in advance for any other dress requirements that clinic might have (e.g., lab coats, neckties, scrubs, etc.). Any specific clinic dress code requirements supersede the LSUHSC-NO Physical Therapy Departmental dress code while at that facility.
  b. If a lab coat is worn, the coat must be clean, free of stains, rips, tears, and pressed.

Faculty, clinical instructors, or other clinical supervisors reserve the right to ask a student who is inappropriately attired to leave and return appropriately dressed.

Additional requirements

- **Specific requirements** – clothing should allow for free movement during patient care and should not be tight, short, low cut or expose undergarments. Pant legs should not be form fitting (no skinny or straight leg pants, leggings).
- **Jewelry** – watches, engagement, wedding and class rings are permissible. No excessive jewelry.
- **Nails** – well groomed, clean. In clinical situation- no artificial nails permitted.
- **Tattoos/Body art** – students may exhibit tattoos, however tattoos that depicts any of the following violent language or images; images or language depicting drugs or alcohol (or any illegal item or activity) or the use of the same; hate speech, profanity, pornography; or images and/or language that create a hostile or intimidating environment should be covered.
- **Perfume/Scents** – no excessive use of personal scents, after shave, shampoo, etc. is permitted.
- **Hair** – should be neatly groomed, clean and arranged in a manner that permits optimal patient care.
- **Facial hair** must be neatly groomed and clean at all times.

- **Shoes** – no open-toed shoes are allowed in patient care areas.
- On days when students are on campus but not in the SAHP or in the PT Department (e.g. studying at the library), they may dress in casual but appropriate clothes (e.g. jeans, sweat pants, etc.).
- LSUHSC-NO identification should be worn at all times.
- A student may request an exemption or accommodation to the attire policy that respects their personal circumstances including race, religion, gender, physical/mental condition, nationality, etc.,Enforcement – if an instructor believes that a student is not dressing appropriately in their class or lab, the instructor will meet with the student privately. If a subsequent dress code violation occurs, the student will meet with the Department Head. Consequences of a third violation will be at the discretion of the Department Head.

12.4 COMPUTER USAGE

Computer Room

Computers in the computer rooms must be used carefully and with courtesy for all students. The following are rules for using Departmental, School, or Health Sciences Center computers:

- The person to use a computer last is responsible for appropriately shutting it down before they leave the Department.
- No food or drinks may be near the computers for obvious reasons.
- No one may change the programs or layout of the computer without written approval of the Department Head.
- No one may load or download any programs without written approval of the Department Head.
- Only professional uses of the Internet or other programs will be allowed.

Laptop Computer Use

Students will receive a separate written policy on computer use, however, due to its importance, some of that information is reiterated here:

Computers may be used in the classroom or laboratories for school class-related activities only.

Students found to be using their computers during class for non-class related activities may be removed from the classroom and reported to the Department Head's office, Dean's Office, and/or the respective promotions committee. In addition, students should not communicate (e-mail, instant message, blog, etc.) with others (including professors) during class time or review other lectures or materials other than that being covered in the class in which they are participating.

Students failing to comply with this policy may be subject to removal from the program. It may also be the decision of the promotions committee or faculty member to prohibit the student from utilizing their laptop during designated classes for a designated period of time.

Email Use

The use of lsuhsc.edu e-mail must be related to Health Sciences Center business communications. The use of electronic mail should be consistent with the instructional, research, public service, and administrative goals and mission of the Health Sciences Center. Incidental and occasional personal use of electronic mail may occur when such use does not generate a direct cost to the Health Sciences Center.

Prohibited Use of E-mail

- Personal use that creates a direct cost for the Health Sciences Center is prohibited.
- The Health Sciences Center's electronic mail resources shall not be used for personal monetary gain or for commercial purposes that are not directly related to Health Sciences Center business.
- Sending copies of documents or including the work of others in electronic mail communications in violation of any law, including copyright laws, is prohibited.
- "Snooping" (i.e. obtaining or attempting to access) the files or electronic mail of others, or capturing or attempting to capture and "open" the electronic mail of others, except as required in order for authorized employees to diagnose and correct delivery problems, is prohibited.
- Use of electronic mail to harass or intimidate others, threaten, or to interfere with the ability of others to conduct Health Sciences Center business is prohibited.
- Use of electronic mail systems for any purpose that is restricted or prohibited by laws or regulations is prohibited.
- Unauthorized "Spoofing" (i.e. constructing an electronic mail communication so it appears to be from someone else) is prohibited.

- "Spamming" (i.e. sending unsolicited E-mail to lists of people you do not know) is prohibited. Bulk mailing is almost always considered Spam and places considerable stress on the E-mail system. Bulk mailings can be selectively used for Health Sciences Center related information but must be approved at a level appropriate to the scope of the mailing and the mailing must be handled in such a way that the E-mail systems are not adversely impacted. For example, it would be appropriate that a mailing to all of the School of Allied Health Professions be approved by the Dean's office. The mailing would be carried out in such a way as to avoid causing damage or disruption to the mail system. Authorized bulk mailings will be identified by the inclusion of the statement: "This message has been authorized by LSU Health Sciences Center administration for mass distribution as a service to our faculty, staff, and students."
- Sending or forwarding chain-letters is prohibited. Most E-mail messages that ask you to forward it on to others fall into this category, including virus warnings.

Violations

CM-42 and PM-36 provide oversight to campus-wide Information Technology. Violation of these policies in any part may be sufficient grounds for disciplinary action and/or termination from the program. Disciplinary action may include dismissal of computer privileges on an individual basis, personal liability and/or criminal prosecution. In addition, LSUHSC-NO may require restitution for any use of service, which is in violation of these policies.

Additional information regarding the policies listed in statements above can be found at:

CM-42 Information Technology (IT) Infastructure
https://www.lsuhsc.edu/administration/cm/cm-42.pdf
PM-36 LSU System Information Security Plan
https://www.lsuhsc.edu/administration/pm/pm-36.pdf

12.5 LAB SPACE USAGE

The laboratory classroom in the Department of Physical Therapy is available to faculty, staff, and students for educational purposes. Those classes which are scheduled to meet in the lab have priority for the use of the space and anyone wanting to use the lab during this class time must have the permission of the class instructor. If the lab appears vacant, those persons wishing to

use the lab or its equipment must first obtain permission from the instructor who is scheduled to use the space. If the lab is scheduled to be vacant, Physical Therapy Department faculty, staff, and students may use the lab for educational purposes, with the faculty and staff having priority over student use.

All persons who use the laboratory must maintain the appearance of the space and return any items to their original location after use. Any linen used during classes or for study purposes must be placed in the designated hamper. A rotating schedule of class representatives will be responsible for maintaining the lab's appearance and any issues regarding the cleanliness or order of the lab will be brought to the attention of faculty for resolution.

No eating or smoking is allowed in the lab. Liquids can only be consumed if they are in a container with a closed top. No storage of food or drink is allowed on shelves, countertops, or cabinets.

To protect the equipment from tears or marks, no shoes are to be worn on the examination mats. All students using the lab must be dressed appropriately according to the *LSUHSC-NO Department of Physical Therapy Student Manual.* During after-hours practice, the student assumes the risk of use of therapeutic supplies, physical agents and/or equipment and performance of manual skills. Whether on campus or offsite, students are instructed not to practice application of therapeutic physical agents and modalities, as well as manual therapy skills, on non-students. The Program cannot accept responsibility for injury caused to non-students due to the students' unsupervised behaviors.

After-hours laboratory access is available to all students of the department and require the use of student ID. Students will be asked to sign a DPT Laboratory Consent Form at the beginning of every semester acknowledging these risks and consenting to participate in all activities (Appendix 19.12).

Related Document:

DPT Laboratory Consent Form (Appendix 19.11)

12.6 CLINICAL RESEARCH LABORATORY SPACE

The primary function of the laboratory is to provide equipment and space for research, and to that end, research activities have absolute priority over all other activities.

To gain access to the laboratory area, the area and equipment must first be reserved. Admittance

is possible only via a faculty member who has agreed to be responsible for activities to be performed, and that the lab is locked at all times.

Each research advisor/investigator is responsible for providing student investigators with all necessary materials and supplies. No individual is permitted to use any equipment before being properly trained by a faculty member or designee. Students must have faculty supervision, either directly or indirectly when utilizing equipment. All equipment will be maintained as specified in the user's manual of each piece of equipment. Originals of all equipment manuals will be kept in the research laboratory. A faculty member must be present during all data collection, and no data collection on human subjects may proceed prior to Institutional Review Board (IRB) approval.

All lab users are responsible for their own computer files or data banks. It is necessary that data be saved to external storage disks or drives to avoid overloading the computer's own hard drive. All subject files are the responsibility of the principal investigator/advisor. All subject information is confidential and is to remain in a locked area when not in use. The chair of the research committee will survey the faculty annually to determine needs for space and equipment and present this information to the Department Head for budgetary consideration.

Equipment should be calibrated and recalibrated only with the presence of appropriate faculty and labeled to indicate the action performed and date, and initialed by faculty.

13. STUDENT EMPLOYMENT

Due to the exacting requirements of the physical therapy curriculum, it is unwise for students to expect to meet their expenses by outside work. The School does not specifically forbid such additional duties but does definitely discourage them. The Department, furthermore, reserves the right to indicate that such work be discontinued, if in opinion of the faculty, it interferes with the satisfactory completion of prescribed academic activities as described in the *LSUHSC-NO Catalog/Bulletin*.

14. PROFESSIONAL ORGANIZATIONS

The American Physical Therapy Association (APTA) is the national professional organization for physical therapists. To learn more about the APTA, please see http://www.apta.org/. The state physical therapy professional association is the Louisiana Physical Therapy Association (LPTA). For more information about the LPTA, please see http://www.lpta.org/. All students are required to join and maintain membership in the American Physical Therapy Association (APTA)

throughout the duration of the program. There are multiple opportunities for students to become involved in both the national and state organizations.

15. STUDENT ORGANIZATIONS

The Student Physical Therapy Association (SPTA) at LSUHSC-NO is the Departmental student professional organization on campus. Any fulltime DPT student is eligible for membership in the SPTA. The purpose of the Association shall be to assist Student Physical Therapists at LSUHSC-NO by providing support:

- To encourage professional interest among university students in the study of physical therapy.
- To provide a vehicle for student representation in matters of professional concern.
- To provide a means to raise funds to support student attendance at professional conferences.
- To provide a means for members to participate in community service.

The Interprofessional Student Alliance (IPSA) at LSU Health is a University organization to address health disparities in the greater New Orleans area through interprofessional teams of LSUHSC-NO students serving local underserved communities. Any full-time student is eligible to be a general member of IPSA.

The purpose of IPSA is to function as a student-run initiative "incubator" providing interprofessional leadership develop and faculty support that meet four criteria:

- The project must be interprofessionally-oriented in design and execution.
- The project must be community-based and meet an established community need.
- The project must have a measurable community impact.
- The project must have a faculty advisor and should award credit to student volunteers as permitted by their respective schools.

16. PROFESSIONAL LICENSURE

Upon satisfactory completion of the program culminating in graduation, students are eligible to sit for the National Physical Therapy Examination. The examination is administered by the Federation of State Boards of Physical Therapy. For more information, see http://www.fsbpt.org/. Upon successful completion of the National Physical Therapy Examination, students are eligible to receive licensure to practice physical therapy. Each

jurisdiction (state) has their own licensure board and students must follow the guidelines for the state they wish to procure a license. The Louisiana Physical Therapy Board is mandated to license and regulate physical therapists and physical therapist assistants who wish to work in this state. For more information, see https://laptboard.org/.

17. PROGRAM ACCREDITATION

The Commission on Accreditation in Physical Therapy Education (CAPTE) is an accrediting agency that is nationally recognized by the US Department of Education (USDE) and the Council for Higher Education Accreditation (CHEA). The role of CAPTE is to grant specialized accreditation status to qualified entry-level education programs for physical therapists and physical therapist assistants. To learn more about CAPTE, please see http://www.capteonline.org/home.aspx.
The Physical Therapy Program is accredited through December 31, 2029.
http://alliedhealth.lsuhsc.edu/pt/default.aspx

18. COMPLAINTS WITHIN & OUTSIDE OF DUE PROCESS

Due process for reporting complaints are as follows:

- If the complaint is from an individual:
    - The individual should report the complaint to their respective faculty advisor.
    - The faculty advisor may suggest options for handling the complaint or simply forward the complaint to the faculty or Department Head.
    - If, for some reason, the individual student feels that they cannot report to their faculty advisor, then the student should direct the complaint to the class liaison for the respective class who will then forward the complaint to the Department Head or faculty.
    - If, for some reason, the individual student feels that they cannot report to either the faculty advisor or the class liaison (or if they are the same individual) then the student should report the complaint to the Department Head directly.

- If the complaint is from a class as a whole:
    - The class should report the complaint to their respective class president.
    - The class president may suggest options for handling the complaint or simply forward the complaint to the faculty liaison for the respective class.
    - If, for some reason, the class president feels that they cannot report to the class faculty liaison for the respective class then the class president should report the complaint to the Department Head directly.

Procedures for handling a complaint outside of the realm of due process:

- When possible, the Department Head will discuss the complaint directly with the party involved within fourteen business days. If at all possible, the matter is reconciled at this point. A letter from the Department Head acknowledging the resolution of the complaint will be filed with the complaint and a copy sent to the complainant.
- If dissatisfied with the discussion with the Department Head, or if the complaint is against the Department Head, the involved party may submit a written complaint to the Dean of the School of Allied Health Professions. The Dean will meet with each party separately and may schedule a joint appointment with the two parties in order to attempt to resolve the issue. A letter outlining the resolution by the Dean shall be filed with the complaint in the Department Head's office.
- If the party feels that additional complaint is necessary, then the complaint may be brought to the Vice Chancellor of Academic Affairs or the Chancellor of the Health Sciences Center depending on the nature of the complaint.
- If no resolution of the complaint may be reached within the LSUHSC-NO institution, the involved party may report a complaint directly to the:

  Commission on Accreditation for Physical Therapy Education (CAPTE) of the American Physical Therapy Association
  1111 N. Fairfax St. Alexandria, VA 22314
  800-999-2782 or 703-706-3245 or accreditation@apta.org

19. APPENDICES (see documents below)

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT (FERPA)

Notification of Rights under FERPA

The Family Educational Rights and Privacy Act (FERPA) affords students certain rights with respect to their education records. They are:

1) The right to inspect and review the student's education records within forty-five days of the day the University receives a request for access. Students should submit to the Registrar, the Dean, the Department Head, or other appropriate officials, written requests that identify the records(s) they wish to inspect. The University official will make arrangements for access and notify the student of the time and place where the records may be inspected. If the records are not maintained by the University official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

2) The right to request the amendment of the student's education records that the student believes are inaccurate or misleading. Students may ask the University to amend a record that they believe is inaccurate or misleading. They should write the University official responsible for the record, clearly identify the part of the record they want changed, and specify why it is inaccurate or misleading. If the University decides not to amend the record as requested by the student, the University will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

3) The right to consent to disclosures of personally identifiable information contained in the student's education records, except to the extent that FERPA authorizes disclosure without consent. One exception which permits disclosure without consent is disclosure to school officials with legitimate educational interests. A school official is a person employed by the University in an administrative, supervisory, academic or research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the University has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another school official in performing their tasks. A school official has a legitimate

educational interest if the official needs to review an education record in order to fulfill their professional responsibility.

4) The right to file a complaint with the U.S. Department of Education concerning alleged failures by Louisiana State University to comply with the requirements of FERPA. The name and address of the Office that administers FERPA are:

Family Policy Compliance Office
U.S. Department of Education
600 Independence Avenue, SW
Washington, DC 20202-4605

Declination of Academic Accommodations

I have voluntarily chosen to decline my right to academic accommodations provided for in the SAHP Department of Physical Therapy Academic Accommodations Policy:

____Extended time for at-home assignments
____Extended time to complete program
____Alternate Testing
    ____Extended time for in-class tests
    ____Low-distraction testing environment
    ____Different medium
____Preferential class seating
____Special Parking
____Ergonomic equipment

Auxiliary learning aids: ____Enlarged Print____Tape Recorder____Scribe
____Assistive listening devices ____Reader____Interpreter
____Other_____

I also understand that my declination may affect my performance on:
_____

_____ _____
Student Date

_____ _____
Faculty Date

2026-2027
Doctor of Physical Therapy Curriculum

Year 1

Hours

Term 1
Summer
PHTH 7000 Physical Therapy Gross Anatomy 5
PHTH 7110 Introduction to Professional Practice 1
PHTH 7130 Foundational Science of Movement 1
PHTH 7180 Introduction to Clinical Practice 1

Total Summer I 8

Term 2
Fall I
PHTH 7101 Evidence-Based PT I: Clinical Analyses 3
PHTH 7103 Foundational Skills in PT I 3
PHTH 7111 Professional Practice in PT I 3
PHTH 7131 Movement Sciences I 4
PHTH 7135 Human Development Across the Lifespan 3
PHTH 7140 Physical Therapy Neuroanatomy 4

Total Fall I 20

Term 3
Spring I
PHTH 7104 Foundational Skills in PT II 2
PHTH 7112 Professional Practice in PT II 2
PHTH 7120 Physiological Sciences 4
PHTH 7123 Pathophysiology 4
PHTH 7132 Movement Sciences II 4
PHTH 7240 Motor Behavior 3

Total Spring I 19

Year 2

Term 4
Summer II
PHTH 7280 Clinical Experience 3

Total Summer II 3

Term 5 (PHTH 7240 Motor Behavior – DPT 2028)
Fall II
PHTH 7203 Evidence-Based PT III: Clinical Analyses 2
PHTH 7213 Professional Practice in PT III 1
PHTH 7233 Therapeutic Interventions 3
PHTH 7270 Diagnosis & Management in Neuromuscular Dysfunction I 3
PHTH 7250 Diagnosis & Management in Cardiopulmonary Dysfunction 4
PHTH 7261 Diagnosis & Management in Musculoskeletal Dysfunction I 4

Total Fall II 20

Term 6
Spring II
PHTH 7204 Evidence-Based PT IV: Research Analyses 3
PHTH 7234 Prosthetics and Orthotics in PT 2
PHTH 7262 Diagnosis & Management in Musculoskeletal Dysfunction II 4
PHTH 7271 Diagnosis & Management in Neuromuscular Dysfunction II 5
PHTH 7350 Diagnosis and Management of Integumentary Dysfunction 2

Total Spring II 16

Year 3

Term 7
Summer III
PHTH 7381 Clinical Internship I 4

Total Summer III 4

Term 8 (PHTH 7390 Health Policy I – DPT 2027)
Fall III
PHTH 7305 Evidence-Based PT V: Research Analyses 2
PHTH 7315 Professional Practice in PT IV 2
PHTH 7401 Practicum in Integrative Clinical Practice I 2
PHTH 7300 Wellness: Prevention and Health Promotion 2
PHTH 7382 Clinical Internship II 4

Total Fall III 12

Term 9
Spring III

PHTH 7383 Clinical Internship III 4

PHTH 7306 Evidence-Based PT VI: Capstone Completion & Defense 2
PHTH 7316 Professional Practice in PT V 2
PHTH 7392 Administrative Skills in PT 2
PHTH 7393 Health Policy: Macroallocation of Healthcare Goods and Services 1
PHTH 7402 Practicum in Integrative Clinical Practice II 2

Total Spring III 13

TOTAL REQUIRED PROGRAM CREDITS 115

PHTH 7800 Independent Study (optional) ..... (1-12)

APTA Code of Ethics

HOD S06-20-28-25 [Amended HOD S06-19-47-67; HOD S06-09-07-12; HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06- 07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24] [Standard]

Preamble to the Code

The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to: 1. Define the ethical principles that form the foundation of physical therapist practice in patient and client management, consultation, education, research, and administration. 2. Provide standards of behavior and performance that form the basis of professional accountability to the public. 3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities. 4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist. 5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct. No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive. The APTA Guide for Professional Conduct and Core Values for the Physical Therapist and Physical Therapist Assistant provide additional guidance. This Code of Ethics describes the desired behavior of physical therapists in their multiple roles (eg, management of patients and clients, consultation, education, research, and administration), addresses multiple aspects of ethical action (individual, organizational, and societal), and reflects the core values of the physical therapist (accountability, altruism, collaboration, compassion and caring, duty, excellence, integrity, and social responsibility). Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

Principles

Principle #1: Physical therapists shall respect the inherent dignity and rights of all individuals. (Core Values: Compassion, Integrity)

1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

1B. Physical therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

Principle #2: Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients. (Core Values: Altruism, Compassion, Professional Duty)

2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.
2B. Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.
2D. Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.
2E. Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

Principle #3: Physical therapists shall be accountable for making sound professional judgments. (Core Values: Excellence, Integrity)

3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.
3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.
3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.
3D. Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.

3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

Principle #4: Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other healthcare providers, employers, payers, and the public. (Core Value: Integrity)

4A. Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations.
4B. Physical therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g., patients/clients, students, supervisees, research participants, or employees).
4C. Physical therapists shall discourage misconduct by healthcare professionals and report illegal or unethical acts to the relevant authority, when appropriate.
4D. Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.
4E. Physical therapists shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.
4F. Physical therapists shall not harass anyone verbally, physically, emotionally, or sexually.

Principle #5: Physical therapists shall fulfill their legal and professional obligations.
(Core Values: Professional Duty, Accountability)

5A. Physical therapists shall comply with applicable local, state, and federal laws and regulations.
5B. Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.
5C. Physical therapists involved in research shall abide by accepted standards governing protection of research participants.
5D. Physical therapists shall encourage colleagues with physical, psychological, or substance related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
5E. Physical therapists who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.
5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.

Principle #6: Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors. (Core Value: Excellence)

6A. Physical therapists shall achieve and maintain professional competence.
6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, healthcare delivery, and technology.
6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.
6D. Physical therapists shall cultivate practice environments that support professional development, life-long learning, and excellence.

Principle #7: Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society. (Core Values: Integrity, Accountability)

7A. Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.
7B. Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.
7C. Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.
7D. Physical therapists shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.
7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/clients.

Principle #8: Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally. (Core Values: Social Responsibility)

8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.

8C. Physical therapists shall be responsible stewards of health care resources and shall avoid over-utilization or under-utilization of physical therapy services.

8D. Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.

APTA Guide for Professional Conduct

Purpose

This Guide for Professional Conduct (Guide) is intended to serve physical therapists in interpreting the Code of Ethics for the Physical Therapist (Code) of the American Physical Therapy Association (APTA) in matters of professional conduct. The APTA House of Delegates in June of 2009 adopted a revised Code, which became effective on July 1, 2010.

The Guide provides a framework by which physical therapists may determine the propriety of their conduct. It is also intended to guide the professional development of physical therapist students. The Code and the Guide apply to all physical therapists. These guidelines are subject to change as the dynamics of the profession change and as new patterns of health care delivery are developed and accepted by the professional community and the public.

Interpreting Ethical Principles

The interpretations expressed in this Guide reflect the opinions, decisions, and advice of the Ethics and Judicial Committee (EJC). The interpretations are set forth according to topic. These interpretations are intended to assist a physical therapist in applying general ethical principles to specific situations. They address some but not all topics addressed in the Principles and should not be considered inclusive of all situations that could evolve.

This Guide is subject to change, and the Ethics and Judicial Committee will monitor and timely revise the Guide to address additional topics and Principles when necessary and as needed.

Preamble to the Code

The Preamble states as follows:

> The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA).

The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.

2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

Interpretation: Upon the Code of Ethics for the Physical Therapist being amended effective July 1, 2010, all the lettered principles in the Code contain the word “shall” and are mandatory ethical obligations. The language contained in the Code is intended to better explain and further clarify existing ethical obligations. These ethical obligations predate the revised Code. Although various words have changed, many of the obligations are the same. Consequently, the addition of the word “shall” serves to reinforce and clarify existing ethical obligations. A significant reason that the Code was revised was to provide physical therapists with a document that was clear enough such that they can read it standing alone without the need to seek extensive additional interpretation.

The Preamble states that “no Code of Ethics is exhaustive nor can it address every situation.” The Preamble also states that physical therapists “are encouraged to seek additional advice or

consultation in instances in which the guidance of the Code may not be definitive." Potential sources for advice and counsel include third parties and the myriad resources available on the APTA Web site. Inherent in a physical therapist's ethical decision-making process is the examination of his or her unique set of facts relative to the Code.

Topics

Respect

Principle 1A states as follows:

> 1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

Interpretation: Principle 1A addresses the display of respect toward others. Unfortunately, there is no universal consensus about what respect looks like in every situation. For example, direct eye contact is viewed as respectful and courteous in some cultures and inappropriate in others. It is up to the individual to assess the appropriateness of behavior in various situations.

Altruism

Principle 2A states as follows:

> 2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.

Interpretation: Principle 2A reminds physical therapists to adhere to the profession's core values and act in the best interest of patients/clients over the interests of the physical therapist. Often this is done without thought, but sometimes, especially at the end of the day when the physical therapist is fatigued and ready to go home, it is a conscious decision. For example, the physical therapist may need to make a decision between leaving on time and staying at work longer to see a patient who was fifteen minutes late for an appointment.

Patient Autonomy

Principle 2C states as follows:

> 2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.

Interpretation: The underlying purpose of Principle 2C is to require a physical therapist to respect patient autonomy. In order to do so, a physical therapist shall communicate to the patient/client the findings of his/her examination, evaluation, diagnosis, and prognosis. A physical therapist shall use sound professional judgment in informing the patient/client of any substantial risks of the recommended examination and intervention and shall collaborate with the patient/client to establish the goals of treatment and the plan of care. Ultimately, a physical therapist shall respect the patient's/client's right to make decisions regarding the recommended plan of care, including consent, modification, or refusal.

Professional Judgment

Principles 3, 3A, and 3B state as follows:

> 3: Physical therapists shall be accountable for making sound professional judgments. (Core Values: Excellence, Integrity)
>
> > 3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.
> >
> > 3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.

Interpretation: Principles 3, 3A, and 3B state that it is the physical therapist's obligation to exercise sound professional judgment, based upon their knowledge, skill, training, and experience. Principle 3B further describes the physical therapist's judgment as being informed by three elements of evidence-based practice.

With regard to the patient/client management role, once a physical therapist accepts an individual for physical therapy services they shall be responsible for: the examination, evaluation,

and diagnosis of that individual; the prognosis and intervention; re-examination and modification of the plan of care; and the maintenance of adequate records, including progress reports. A physical therapist shall establish the plan of care and shall provide and/or supervise and direct the appropriate interventions. Regardless of practice setting, a physical therapist has primary responsibility for the physical therapy care of a patient and shall make independent judgments regarding that care consistent with accepted professional standards.

If the diagnostic process reveals findings that are outside the scope of the physical therapist's knowledge, experience, or expertise or that indicate the need for care outside the scope of physical therapy, the physical therapist shall so inform the patient/client and shall refer the patient/client to an appropriate practitioner.

A physical therapist shall determine when a patient/client will no longer benefit from physical therapy services. When a physical therapist's judgment is that a patient will receive negligible benefit from physical therapy services, the physical therapist shall not provide or continue to provide such services if the primary reason for doing so is to further the financial self-interest of the physical therapist or their employer. A physical therapist shall avoid overutilization of physical therapy services. See Principle 8C.

Supervision

Principle 3E states as follows:

> 3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

Interpretation: Principle 3E describes an additional circumstance in which sound professional judgment is required; namely, through the appropriate direction of and communication with physical therapist assistants and support personnel. Further information on supervision via applicable local, state, and federal laws and regulations (including state practice acts and administrative codes) is available. Information on supervision via APTA policies and resources is also available on the APTA Web site. See Principles 5A and 5B.

Integrity in Relationships

Principle 4 states as follows:

> 4: Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public. (Core Value: Integrity)

Interpretation: Principle 4 addresses the need for integrity in relationships. This is not limited to relationships with patients/clients, but includes everyone physical therapists come into contact with professionally. For example, demonstrating integrity could encompass working collaboratively with the health care team and taking responsibility for one's role as a member of that team.

Reporting

Principle 4C states as follows:

> 4C. Physical therapists shall discourage misconduct by healthcare professionals and report illegal or unethical acts to the relevant authority, when appropriate.

Interpretation: When considering the application of "when appropriate" under Principle 4C, keep in mind that not all allegedly illegal or unethical acts should be reported immediately to an agency/authority. The determination of when to do so depends upon each situation's unique set of facts, applicable laws, regulations, and policies.

Depending upon those facts, it might be appropriate to communicate with the individuals involved. Consider whether the action has been corrected, and in that case, not reporting may be the most appropriate action. Note, however, that when an agency/authority does examine a potential ethical issue, fact finding will be its first step. The determination of ethicality requires an understanding of all of the relevant facts, but may still be subject to interpretation.

The EJC Opinion titled: Topic: Preserving Confidences; Physical Therapist's Reporting Obligation With Respect to Unethical, Incompetent, or Illegal Acts provides further information on the complexities of reporting.

Exploitation

Principle 4E states as follows:

> 4E. Physical therapists shall not engage in any sexual relationship with any of their patient/clients, supervisees or students.

Interpretation: The statement is fairly clear – sexual relationships with their patients/clients, supervisees or students are prohibited. This component of Principle 4 is consistent with Principle 4B, which states: Physical therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g. patients/clients, students, supervisees, research participants, or employees).

Next, consider this excerpt from the EJC Opinion titled Topic: Sexual Relationships With Patients/Former Patients: A physical therapist stands in a relationship of trust to each patient and has an ethical obligation to act in the patient's best interest and to avoid any exploitation or abuse of the patient. Thus, if a physical therapist has natural feelings of attraction toward a patient, they must sublimate those feelings in order to avoid sexual exploitation of the patient. One's ethical decision making process should focus on whether the patient/client, supervisee or student is being exploited. In this context, questions have been asked about whether one can have a sexual relationship once the patient/client relationship ends. To this question, the EJC has opined as follows: The Committee does not believe it feasible to establish any bright-line rule for when, if ever, initiation of a romantic/sexual relationship with a former patient would be ethically permissible. The Committee imagines that in some cases a romantic/sexual relationship would not offend ... if initiated with a former patient soon after the termination of treatment, while in others such a relationship might never be appropriate.

Colleague Impairment

Principle 5D and 5E state as follows:

> 5D. Physical therapists shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
>
> 5E. Physical therapists who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report the information to the appropriate authority.

Interpretation: The central tenet of Principles 5D and 5E is that inaction is not an option for a physical therapist when faced with the circumstances described. Principle 5D states that a physical therapist shall encourage colleagues to seek assistance or counsel while Principle 5E addresses reporting information to the appropriate authority.

5D and 5E both require a factual determination on your part. This may be challenging in the sense that you might not know or it might be difficult for you to determine whether someone in fact has a physical, psychological, or substance-related impairment. In addition, it might be difficult to determine whether such impairment may be adversely affecting their professional responsibilities.

Moreover, once you do make these determinations, the obligation under 5D centers not on reporting, but on encouraging the colleague to seek assistance. However, the obligation under 5E does focus on reporting. But note that 5E discusses reporting when a colleague is unable to perform, whereas 5D discusses encouraging colleagues to seek assistance when the impairment may adversely affect their professional responsibilities. So, 5D discusses something that may be affecting performance, whereas 5E addresses a situation in which someone is clearly unable to perform. The 2 situations are distinct. In addition, it is important to note that 5E does not mandate to whom you report; it gives you discretion to determine the appropriate authority.
The EJC Opinion titled: Topic: Preserving Confidences; Physical Therapist's Reporting Obligation With Respect to Unethical, Incompetent, or Illegal Acts provides further information on the complexities of reporting.

Professional Competence

Principle 6A states as follows:

> 6A. Physical therapists shall achieve and maintain professional competence.

Interpretation: 6A requires a physical therapist to maintain professional competence within one's scope of practice throughout one's career. Maintaining competence is an ongoing process of self-assessment, identification of strengths and weaknesses, acquisition of knowledge and skills based on that assessment, and reflection on and reassessment of performance, knowledge and skills. Numerous factors including practice setting, types of patients/clients, personal interests and the addition of new evidence to practice will influence the depth and breadth of professional competence in a given area of practice. Additional resources on Continuing Competence are available on the APTA Web site.

Professional Growth

Principle 6D states as follows:

> 6D. Physical therapists shall cultivate practice environments that support professional development, life-long learning, and excellence.

Interpretation: 6D elaborates on the physical therapist's obligations to foster an environment conducive to professional growth, even when not supported by the organization. The essential idea is that this is the physical therapist's responsibility, whether or not the employer provides support.

Charges and Coding

Principle 7E states as follows:

> 7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.

Interpretation: Principle 7E provides that the physical therapist must make sure that the process of documentation and coding accurately captures the charges for services performed. In this context, where charges cannot be determined because of payment methodology, physical therapists may review the House of Delegates policy titled Professional Fees for Physical Therapy Services. Additional resources on documentation and coding include the House of Delegates policy titled Documentation Authority for Physical Therapy Services and the Documentation and Coding and Billing information on the APTA Web site.

Pro Bono Services

Principle 8A states as follows:

> 8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

Interpretation: The key word in Principle 8A is "or." If a physical therapist is unable to provide pro bono services they can fulfill ethical obligations by supporting organizations that meet the

health needs of people who are economically disadvantaged, uninsured, and underinsured. In addition, physical therapists may review the House of Delegates guidelines titled Guidelines: Pro Bono Physical Therapy Services. Additional resources on pro bono physical therapy services are available on the APTA Web site.

8A also addresses supporting organizations to meet health needs. In terms of supporting organizations, the principle does not specify the type of support that is required. Physical therapists may express support through volunteerism, financial contributions, advocacy, education, or simply promoting their work in conversations with colleagues.

Issued by the Ethics and Judicial Committee
American Physical Therapy Association
October 1981
Last Amended November 2010
Last Updated: 11/30/10
Contact: ejc@apta.org

TECHNICAL STANDARDS

The following list of examples is not inclusive but merely provides examples.

OBSERVATION:	
Independently, the student must be able to observe a patient accurately.	Assess gait deviation of patient ten feet away Observe patient's response, diagnosis, pallor, grimacing. Determine pressure ulcer stage and depth. Read degrees of motion on a goniometer.
COMMUNICATION:	
Utilize verbal and nonverbal communication with patients and care.	Elicit information from patients/caregivers for written history. Explain treatment procedures. Demonstrate exercise programs. Document client responses in the medical record. Establish rapport with the patient, caregivers, and colleagues. Apply teaching/learning theories and methods in healthcare and community environments.
SENSORIMOTOR:	
Safely, reliably, and efficiently perform physical therapy assessments and treatments. Practice in an ethical and legal manner. Move from place to place and position to position.	Respond to a timer, emergency alarms. Discern breath sounds. Perform tests of vital signs, pain, strength, coordination, cranial and peripheral nerves, balance, movement patterns, posture, sensation, endurance, skin integrity, joint motion, wound status, coordination, cognitive/mental status, soft tissue, assistive devices fit/use, reflexes, developmental stages, exertion of torque for manual muscle test, grading, push/pull forces.
Perform physical therapy procedures with speed, strength, endurance for handling self, classmates, and patients.	
Simultaneously, physically support activities and observe a patient with a disability.	Coordinate verbal, manual, gross motor activities. Perform gait assessment on level surfaces, outdoor terrain, curbs, and steps. Assist with bed mobility and transfers from supine to sit, and sit to stand. Administer balance training, cardiopulmonary resuscitation, exercise techniques, activities of daily living, coordination training, prosthetic and orthotic training, joint mobilization, wound debridement and dressing, electrotherapy, soft tissue mobilization, thermal agents, neurosensory techniques, cardiopulmonary rehabilitation, developmental activities, hydrotherapy, tilt table, massage, relaxation techniques, traction, taping and draping techniques, and dependent patient transfers.

INTELLECTUAL/CONCEPTUAL:

- Student must be able to problem solve rapidly and have the ability to learn and reason, and to integrate, analyze, and synthesize data on currently in a multitask setting.
- Student must be able to comprehend three-dimensional relationships and understand the spatial relationship of structures.
- Student must be able to participate in scientific inquiry process.

The following list of examples is not inclusive but merely provides examples:

1. Determine the physical therapy needs of any patient with a dysfunction.
2. Demonstrate ability to apply universal precautions.
3. Identify cause and effect relationships.
4. Perform physical therapy differential diagnosis.
5. Interpret patient responses.
6. Make appropriate modifications to evaluations and treatment. Determine realistic short and long term goals for the patient.
7. Recognize the psychological impact of dysfunction and disability.
8. Integrate the needs of the patient and caregiver into the plan of care.
9. Develop hypotheses, perform literature search and clinical research, perform statistical analyses, develop discussion and conclusions.

JUDGMENT:

- Students must be able to practice in a safe, ethical, and legal manner.
- Students must be able to respond to emergencies.
- Students must demonstrate management skills including planning, organizing, supervising, and delegating.

The following list of examples is not inclusive but merely provides examples:

1. Complies with the American Physical Therapy Association Code of Ethics.
2. Abides by LSU Health Sciences Center School of Allied Health Profession Policy & Procedures on student conduct.
3. Complies with Louisiana State Board of Physical Therapy Examiner Rules and Regulations.
4. Modifies procedures in a manner that is appropriate to the patient's status and desired goals.

BEHAVIORAL/SOCIAL:

- Students must possess the emotional health required for full use of their intellectual abilities, exercise good judgment, and the prompt and safe completion of all responsibilities.
- Students must be able to adapt to change, to display flexibility, and to learn to function in the face of uncertainty and stress.
- Students must possess empathy, integrity, and concern for others.

The following list of examples is not inclusive but merely provides examples:

1. Assess learner's ability to perform tasks. Identify cognitive and emotional needs of self and others.
2. Establish rapport.
3. Interact with individuals, families, groups from a variety of social, emotional, cultural, and intellectual backgrounds.
4. Demonstrate responsibility for lifelong professional growth and development.

OVERRIDING BEHAVIORS POLICY:

- Students must demonstrate professional behaviors, interpersonal skills, and safety concerns.

The following list of examples is not inclusive but merely provides examples:

Professional Behavior:

1. Abides by APTA Code of Ethics and Standards of Practice.
2. Follows state practice act.
3. Abides by institutional policies and procedures.
4. Projects professional image.
5. Attends professional meetings.
6. Accepts responsibility for actions and outcomes.
7. Asks pertinent questions.
8. Seeks assistance of instructor and/or peers to gain a better understanding of concepts learned.
9. Identifies and utilizes resources for learning.
10. Puts new information into practice.
11. Accepts that there may be more than one answer to a problem.
12. Offers own thoughts and ideas.
13. Self-evaluates/critiques own performance.
14. Utilizes own resources before asking for help.
15. Seeks constructive criticism for self-improvement.
16. Utilizes feedback to modify behavior and for self-improvement.
17. Able to focus on tasks at hand without dwelling on past mistakes.
18. Sets up own schedule, sets priorities, and meets external deadlines.
19. Collaborates with others.
20. Coordinates schedule with others.
21. Sets realistic goals.
22. Keeps commitments.
23. Is honest and has the highest integrity.
24. Sets personal and professional goals.

Safety:

1. Identifies and addresses potential and actual safety hazards.
2. Reports unsafe conditions to appropriate personnel.
3. Is able to assess physical and cognitive limitations of self and others and request assistance as necessary.
4. Determines safety and operational status of equipment.
5. Selects treatment interventions considering safety of patient at all times. Does not select treatment interventions in which:
    - Patient's safety is compromised.
    - Other's safety is compromised.
    - Own safety is compromised.

6. Modifies evaluation and treatment based on patients' signs, symptoms, and response to treatment. Modifies when:
    - Safety of patients, others, or self is compromised.
    - Patient's discomfort exceeds levels necessary for procedure.
    - Patient's assistance is necessary and they are no longer able to assist.
    - Equipment becomes faulty.
    - Procedure is not yielding results necessary for evaluating patient's physiologic, neuromuscular, skeletal problems.

Communication and Interpersonal Skills

1. Demonstrates understanding of basic English (verbal and written) and writes legibly; uses correct grammar, accurate spelling, and expression.
2. Recognizes voice quality and avoids vocal distractors (e.g., song-singing, sighing, uh).
3. Maintains eye contact.
4. Summarizes verbal or written message clearly and concisely.
5. Presents verbal or written message with logical organization and sequencing, using accurate professional and/or lay terminology.
6. Gives feedback constructively.
7. Respects personal space of patients and others.
8. Takes responsibility for mistakes, apologizes.

9. Recognizes worth and dignity of each person as demonstrated in the following manner:
    - Exhibits caring.
    - Maintains confidentiality.
    - Modifies response when appropriate.
    - Exhibits courtesy by using polite language, listening without interrupting, tone of voice, body language, and verbal expression.

10. Demonstrates flexibility by being cooperative in changing plans to meet the needs of peers, faculty, patients, the institution.
11. Evidences loyalty by supporting the institution in a positive way to peers, staff, others.

Students are expected to demonstrate overriding behaviors in all courses and clinical experiences. Overriding behaviors will be assessed as part of all didactic courses, lab sessions, lab practical, and clinical science experiences. As students participate in the education program, academic and clinical faculty and the student's adviser will document problems that arise in overriding behaviors. The student will be given opportunities to demonstrate modifications of their behavior and faculty will assist where possible to facilitate strategies for this development.

When behaviors do not meet acceptable standards, depending on the nature and severity of the infraction, one or more of the following actions may be taken at the discretion of the Physical Therapy Department faculty:

- Notify the student about inappropriate behaviors first orally, and then with a written warning. Problem behaviors will be discussed with the student's faculty adviser. If inappropriate behaviors are cited on subsequent occasions, faculty will discuss the incident at faculty meetings for action.
- Clinical or academic faculty may require remedial action on the part of the student as a contingency to continuing in the program or passing the course.
- The faculty may terminate a student from the program because of failure to meet the standards of the overriding behaviors in the academic or clinical settings.

Office of Disability Services

The Office of Disability Services facilitates the process of academic accommodations for students with disabilities, and works in collaboration with the professional schools of the Health Sciences Center in an attempt to ensure full participation in all activities, programs, and services of the institution.

The office operates in accordance with the ADA, ADAA, and Section 504 of the Rehabilitation Act of 1973.

For students who need academic accommodations, contact Leigh Smith-Vaniz, Director at ods@lsuhsc.edu or 504-568-2211.

Table of DPT I, II & III Promotions Committees

DPT I	Ha Hoang (chair) Luther Gill Chrissy MacMaster
DPT II	Ngozi Akotaobi (chair) Rachel Wellons
DPT III	Ha Hoang (chair) Luther Gill

Laboratory Consent Form

Physical therapy laboratory space, clinic, supplies, physical agents and equipment are available to current LSUHSC-New Orleans physical therapy students to aid in developing their psychomotor skills related to patient evaluation and therapeutic intervention procedures. Students will have opportunity to practice skills with various individuals including students, faculty, professional staff, and patients. In order to insure student safety during both supervised and after-hours practice, the following guidelines must be observed. These laboratory safety procedures apply to all faculty, professional staff, and students of the Department of Physical Therapy who use school facilities, supplies, physical agents, and equipment.

Students have the responsibility to inform the course instructor and their practice partners of any personal conditions which might be precautions or contraindications for participating in any laboratory experience. Any course instructor that is made aware of an existing personal condition reported to them by the student will notify the entire faculty in a timely manner to determine an appropriate course of action.

Students will be instructed to use supplies, physical agents and/or equipment only for their intended purposes and only in the manner for which they are designed. In order to insure student safety during scheduled class or laboratory session, the course instructor will supervise student performance of evaluation and/or intervention skills.

The student has the responsibility to use supplies, physical agents and/or equipment only for their intended purposes in the manner for which they are designed and in the manner they were instructed. In the event an injury occurs during practice time, the student is required to report the injury, no matter how insignificant, to the course instructor. The instructor will administer first aid and determine whether the student should be directed to a facility for further observation and/or treatment. Student Health operates during normal business hours on weekdays. It is located on the 7th floor of the Lions Building, 2020 Gravier St., (504) 525-4839 OR 3700 St. Charles Ave., (504) 412-1366. If a serious injury occurs outside normal lab hours, or when the Student Health Service is closed, the student should go directly to the Emergency Room at University Medical Center or call 911.

After-hours laboratory access is available to all students of the department and requires the use of student ID. During after-hours practice, the student assumes the risk of use of therapeutic supplies, physical agents and/or equipment and performance of manual skills. Whether on campus or offsite, students are instructed not to practice application of therapeutic physical agents and modalities, as well as manual therapy skills, on non-students. The Program cannot accept responsibility for injury caused to non-students due to the students' unsupervised behaviors.

Students will be asked to sign a laboratory consent form at the beginning of every semester acknowledging these risks and consenting to participate in all activities.

I have read, understand, and will comply with the above rules and procedures stated above.

_____ Student Name (please print clearly)

_____ _____

Signature Date

AFFIDAVIT

I have read the *Department of Physical Therapy Student Manual*, the *School of Allied Health Professions Policy And Procedures Related To Student Conduct*, the *Louisiana State University Health Sciences Center – New Orleans Student Handbook* and the Departmental Technical Standards. I understand and agree to abide by the regulations as stated.

Consent for laboratories: As a student in the Department of Physical Therapy, I understand that I will be required to participate in laboratory activities on multiple occasions in order to complete course work. These activities will usually be performed by fellow students after demonstration by an instructor or may be performed on me as a subject by an instructor.

I also understand that, if I have any condition for which the activity would be contraindicated, e.g. chronic illness, injury, pregnancy, etc., I must inform the respective faculty member and not put myself or others at risk.

_____ _____

Signature Date

Students will not be considered officially enrolled until this sheet is signed and placed in their files.

OPTIONAL:

Due to the highly specialized nature of the profession, there are occasions when interested persons, e.g. clinical instructors, prospective employers, etc., need information (e.g., academic and clinical strengths and weaknesses) concerning students.

In order to expedite this process, I, _____ (name), give my consent to allow faculty of the Department to release either in writing or verbally, any information regarding my performance as a student.

_____ _____

Signature Date

OPTIONAL: CONSENT FOR PHOTOGRAPHY, INTERVIEW, RECORDING

I, _____, hereby grant permission to LSU Health Sciences Center to photograph, video tape, record, or interview me for print or broadcast media use, for use in LSU Health Sciences Center – New Orleans publications, or for use in teaching by LSU Health Sciences Center – New Orleans faculty.

I hereby transfer to LSU Health Sciences Center – New Orleans all rights and claims I have, or in the future may acquire, with respect to such photographs, video recordings, audio recordings, and/or written materials, agreeing that same shall be the sole and absolute property of LSU Health Sciences Center – New Orlenas. I hereby relieve and release LSU Health Sciences Center – New Orleans from any and all claims whatsoever, and for any and all kinds of remuneration for use of such materials.

_____ _____

Signature Date