

**PHYSICAL THERAPIST ASSISTANT PROGRAM**

**STUDENT HANDBOOK  
2012-2014**

**ORANGE COUNTY COMMUNITY COLLEGE  
MIDDLETOWN, NEW YORK 10940**

**An Equal Opportunity/Affirmative Action College**

**ORANGE COUNTY COMMUNITY COLLEGE  
PHYSICAL THERAPIST ASSISTANT PROGRAM  
STUDENT HANDBOOK**

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## **SECTION I**

**WELCOME**  
**TO THE**  
**PHYSICAL THERAPIST ASSISTANT PROGRAM**

We are pleased that you have decided to pursue a career as a Physical Therapist Assistant. We hope you will enjoy the next two years as you learn more and more about a most exciting human services' profession.

To help you in your initial adjustment to the College and to our program, we have prepared this handbook which we hope will answer many of your questions. You may also obtain information from our department website at <http://www.sunyorange.edu/pta>.

We look forward to a mutually rewarding two years:

**The Full-Time PTA Faculty:**

**Maria Masker, PT, DPT**  
**Assistant Professor**  
**Department Chairperson**

**Karen Stephens, PT, DPT**  
**Professor**

**Edward Leonard, PT, MPS**  
**Academic Coordinator of Clinical Education**

**NOTE:** The policies within this handbook are subject to change. Students will be notified of changes if and when they occur.

## SECTION II

## **SUNY ORANGE MISSION, VISION & VALUES**

### **Mission**

We are a community of learners dedicated to reaching out to all citizens of Orange County to enrich their lives through the highest-quality education possible. Intellectual rigor, personal commitment and enhanced citizenship distinguish a SUNY Orange education which will enhance students' economic opportunities, deepen their appreciation of culture and of their place in history while broadening their sense of responsibility in a democratic society.

### **Vision**

We will be the best college in the SUNY System, the college of choice for all Orange County citizens. We welcome all as individuals, ensure academic and intellectual challenge, and mentor all in a caring, supportive environment. Students will remember the College as one of their most richly rewarding experiences, the compass that guides their continued development. We consistently renew our promise to be a most rigorous and caring academic institution, to provide visionary leadership, and to create a symphony of opportunity for personal and professional growth. We aspire to be the most efficient in shepherding public resources and to be a strategic force in enhancing the quality of life in Orange County and beyond.

### **Values**

As community college educators our professional lives are informed by shared values of mutual respect, integrity in the rigorous and honest pursuit of academic inquiry, and a commitment to the highest standards of excellence in all we do. We further value a spirited dedication to service, a celebration of culturally rich campus environs, and the gathering to our community of the most varied mixture of maturity, ethnicity, patterns of thought, language and spirituality. Our sense of ethical and democratic responsibility bonds us to one another. All those who come here will experience at SUNY Orange a sense of belonging to a special community of learners and will speak with pride of our openness and inspiration in the creation of the strongest sense of local and global community.

### **SECTION III**

## **OUR PTA PROGRAM**

### **MISSION**

Orange County Community College Physical Therapist Assistant Program strives to recruit and admit a full class of qualified candidates from our community; to provide each student with an enriching educational experience; to enhance and to deepen the appreciation of our diversified culture. Our faculty seeks to instill personal commitment of the students to graduate, ready their ability to obtain employment, and establish their place within the health care system.

### **PHILOSOPHY**

The Orange County Community College Physical Therapist Assistant Department bases its educational approach on the vision and values of the greater college. It is the philosophy of our department to embrace the culturally diverse population encountered in the community college setting fostering a caring and supportive environment based on mutual respect and integrity between faculty to student, and student to student. We strive to provide excellence in PTA education and are committed to maintaining the educational standards set forth by the American Physical Therapy Association (APTA). This is accomplished by providing an enriching and nurturing environment populated by faculty, staff and students, diverse and multicultural, offering a mixture of both professional and life experiences.

The faculty members, staff and clinical educators of Orange County Community College Physical Therapist Assistant Department made every effort to acknowledge, respect and accommodate every type of learning, style of learner, and stage of learning ensuring that all students receive a challenging and rewarding academic, clinical and intellectual experience. We recognize that the student population contains an assortment of individuals who span various age groups, cultural backgrounds, and value systems. We are committed to providing all students with appropriate professional role modeling with the intention to promote the importance the PTA possesses in the connection with the PT and their patients/clients. Our focus is on lifelong commitment to the profession, dedication to the surrounding communities and personal career development. Our intention is to instill the value which the PTA brings to the PT and his/her patient/client.

### **ROLE OF THE PTA**

The physical therapist assistant (PTA) works with, and under the direction and supervision of, the physical therapist in a wide variety of health care settings. These settings include hospitals, private offices, rehabilitation centers, nursing homes, schools, fitness centers, and home care settings.

PTs/PTAs provide a wide variety of physical therapy services to people of all ages who have limitations in their ability to move and perform functional activities in their daily lives, due to medical problems or other health-related conditions. The PT/PTA relationship is one in which the PT provides supervision and role modeling with an emphasis of continual communication. The physical therapist evaluates the patient/client and establishes a plan of care in which selected interventions are designated. These interventions are applied and progressed by the physical therapist assistant. Through on-going monitoring and data collection of patient/client responses, the PTA recognizes if and when treatments should not be administered secondary to the patient/client status or condition and thus communicates same to the PT. Moreover, the PTA must possess the ability to distinguish whether an intervention procedure is outside of his/her scope of practice and will pursue clarification with the physical therapist.

Potential interventions provided by a PTA may include training techniques and education to improve strength, coordination, and balance; exercises to improve activities of daily living and mobility, for example, walking with devices such as crutches, walkers or canes; manual techniques to reduce pain and increase range of motion; the use of modalities or physical agents and various forms of electrical stimulation. Intervention is not limited to the application of physical treatment alternatives, but the PTA also affords education to patients/clients, family members, caregivers and other health care professionals including PTA students.

The PTA relates information with regard to treatments, responses, education, and billing in the form of verbal and/or non-verbal communication and documentation.

## **OUTCOMES & GOALS**

### Student Learning Outcomes:

1. Graduates of our program will possess entry level skills as deemed appropriate for the Physical Therapist Assistant by the Commission on Accreditation in Physical Therapy Education;
2. Graduates of our program will be able to work under the direction and supervision of a licensed physical therapist in an ethical, legal, safe, and effective manner becoming an integral member of the health care team;
3. Graduates of our program will demonstrate appropriate critical thinking and problem solving skills in their role as a physical therapist assistant;
4. Graduates of our program will demonstrate an understanding of the New York State Education Law as it relates to the provision of Physical Therapy services;
5. Graduates will also demonstrate an awareness of the existence of varying practice laws from state to state;
6. Graduates of our program will successfully complete the National Physical Therapy Examination for PTAs;
7. Students/graduates of our program will develop the skills necessary to pursue lifelong learning needed for personal and professional growth;
8. Students/graduates of our program will be aware of their responsibility to promote the profession through membership in the APTA, attending local and national meetings and conferences, and participation in community events;
9. Students/graduates will interact with patients, families, and co-workers in a manner which demonstrates an appreciation of cultural and socioeconomic diversity;
10. Graduates of our program will possess a broad general education background which includes humanities, mathematics, social sciences, biological sciences, physical education, and technologies.

### Program Goals:

1. Provide role modeling for relationships of PT/PTA and PTA/PTA;
2. Provide role modeling by full-time faculty/instructors in the pursuit of lifelong learning for personal and professional growth including but not limited to membership in the APTA, attending local and national meetings and conferences, and participation in community events;
3. Encourage faculty members' development in both teaching and professional skills, so that they can continue to revise their courses and help in program evaluation and revisions;

4. Provide the student with a variety of clinical experiences in order that he/she may have an opportunity to practice the complete range/variations of competencies/skills included in our curriculum;
5. Provide the student with the opportunity to gain additional information on professional topics by making resources, on hand, readily available;
6. Continual ongoing program assessment to insure that all aspects of the program are kept up to date and appropriate.

### **COMPREHENSIVE CURRICULUM**

The physical therapist assistant curriculum includes, or its prerequisites include elements of general education, including basic sciences that include biological, physical, physiological, and anatomical principles, and applied physical therapy science. The course work is designed to prepare the students to think independently, to clarify values, to understand fundamental theory, and to develop critical thinking and communication skills.

The technical education component of the curriculum includes learning experiences to prepare the entry-level physical therapist assistant to work under the direction and supervision of the physical therapist. Courses within the curriculum include content designed to prepare program graduates to meet the described performance expectations.

#### **COMMUNICATION**

- Communicates verbally and non-verbally with the patient, the physical therapist, health care delivery personnel, and others in an effective, appropriate, and capable manner.

#### **INDIVIDUAL AND CULTURAL DIFFERENCES**

- Recognizes individual and cultural differences and responds appropriately in all aspects of physical therapy services.

#### **BEHAVIOR AND CONDUCT**

- Exhibits conduct that reflects a commitment to meet the expectations of members of society receiving health care services.
- Exhibits conduct that reflects a commitment to meet the expectations of members of the profession of physical therapy.
- Exhibits conduct that reflects practice standards that are legal, ethical and safe.

#### **PLAN OF CARE**

- Communicates an understanding of the plan of care developed by the physical therapist to achieve short and long term goals and intended outcomes.
- Demonstrates competence in implementing selected components of interventions identified in the plan of care established by the physical therapist. Interventions include:

##### **Functional Training**

- Activities of daily living
- Assistive/adaptive
- Body mechanics

- Developmental activities
- Gait and locomotion training
- Prosthetics and orthotics
- Wheelchair management skills

#### **Infection Control Procedures**

- Isolation techniques
- Sterile technique

#### **Manual Therapy Techniques**

- Passive range of motion
- Therapeutic massage

#### **Physical Agents and Mechanical Agents**

- Thermal agents
- Biofeedback
- Compression therapies
- Cryotherapy
- Electro therapeutic agents
- Hydrotherapy
- Superficial and deep thermal agents
- Traction

#### **Therapeutic Exercise**

- Aerobic conditioning
- Balance and coordination training
- Breathing exercises and coughing techniques
- Conditioning and reconditioning
- Posture awareness training
- Range of motion exercises
- Stretching exercises
- Strengthening exercises

#### **Wound Management**

- Application and removal of dressing or agents
- Identification of precautions for dressing removal

### **DEMONSTRATES COMPETENCY IN PERFORMING COMPONENTS OF DATA COLLECTION SKILLS ESSENTIAL FOR CARRYING OUT THE PLAN OF CARE**

#### **AEROBIC CAPACITY AND ENDURANCE**

- Measures standard vital signs
- Recognizes and monitors responses to positional changes and activities
- Observes and monitors thoracoabdominal movements and breathing patterns with activity

### **ANTHROPOMETRICAL CHARACTERISTICS**

- Measures height, weight, length and girth

### **AROUSAL, MENTATION AND COGNITION**

- Recognizes changes in the direction and magnitude of patient's state of arousal, mentation and cognition

### **ASSISTIVE, ADAPTIVE, ORTHOTIC, PROTECTIVE, SUPPORTIVE, & PROSTHETIC DEVICES**

- Identifies the individual's and caregiver's ability to care for the device
- Recognizes changes in skin condition while using devices and equipment
- Recognizes safety factors while using the device

### **GAIT, LOCOMOTION, AND BALANCE**

- Describes the safety, status, and progression of patients while engaged in gait, locomotion, balance, wheelchair management and mobility

### **INTEGUMENTARY INTEGRITY**

- Recognizes absent or altered sensation
- Recognizes normal and abnormal integumentary changes
- Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations, or that can produce associated skin trauma
- Recognizes viable versus nonviable tissue

### **JOINT INTEGRITY AND MOBILITY**

- Recognizes normal and abnormal joint movement

### **MUSCLE PERFORMANCE**

- Measures muscle strength by manual muscle testing
- Observes the presence or absence of muscle mass
- Recognizes normal and abnormal muscle length
- Recognizes changes in muscle tone

### **NEUROMOTOR DEVELOPMENT**

- Recognizes gross motor milestones
- Recognizes fine motor milestones
- Recognizes righting and equilibrium reactions

### **PAIN**

- Administers standardized questionnaires, graphs, behavioral scales
- Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations

### **POSTURE**

- Describes resting posture in any position
- Recognizes alignment of trunk and extremities at rest and during activities

### **RANGE OF MOTION**

- Measures functional range of motion
- Measures range of motion using a goniometer

### **SELF-CARE AND HOME MANAGEMENT AND COMMUNITY OR WORK REINTEGRATION**

- Inspects the physical environment and measures physical space
- Recognizes safety and barriers in home, community and work environments
- Recognizes level of functional status
- Administers standardized questionnaires to patients and others

### **VENTILATION, RESPIRATION AND CIRCULATION EXAMINATION**

- Recognizes cyanosis
- Recognizes activities that aggravate or relieve edema, pain, dyspnea, or other symptoms
- Describes chest wall expansion and excursion
- Describes cough and sputum characteristics

### **PERFORMANCE EXPECTATIONS CONTINUED:**

- Adjusts interventions within the plan of care established by the physical therapist in response to patient clinical indications and reports this to the supervising physical therapist
- Recognizes when intervention should not be provided due to changes in the patient's status and reports this to the supervising physical therapist
- Reports any changes in the patient's status to the supervising physical therapist
- Recognizes when the direction to perform an intervention is beyond that which is appropriate for a physical therapist assistant and initiates clarification with the physical therapist
- Participates in educating patients and caregivers as directed by the supervising physical therapist
- Provides patient-related instruction to patients, family members, and care givers to achieve patient outcomes based on the plan of care established by the physical therapist
- Takes appropriate action in an emergency situation
- Completes thorough, accurate, logical, concise, timely, and legible documentation that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies
- Participates in discharge planning and follow-up as directed by the supervising physical therapist
- Reads and understands the health care literature

### **EDUCATION**

- Under the direction and supervision of the physical therapist, instructs other members of the health care team using established techniques, programs, and instructional materials commensurate with the learning characteristics of the audience
- Educates others about the role of the physical therapist assistant

### **ADMINISTRATION**

- Interacts with other members of the health care team in patient-care and non-patient care activities
- Provides accurate and timely information for billing and reimbursement purposes
- Describes aspects of organizational planning and operation of the physical therapy service
- Participates in performance improvement activities (quality assurance)

### **SOCIAL RESPONSIBILITY**

- Demonstrates a commitment to meeting the needs of the patients and consumers
- Demonstrates an awareness of social responsibility, citizenship, and advocacy, including participation in community and service organizations and activities

### **CAREER DEVELOPMENT**

- Identifies career development and lifelong learning opportunities
- Recognizes the role of the physical therapist assistant in the clinical education of physical therapist assistant students

### **ACCREDITATION STATUS**

Orange County Community College is accredited by the Middle States Commission on Higher Education.

The Physical Therapist Assistant Program at Orange County Community College is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: [accreditation@apta.org](mailto:accreditation@apta.org); website: <http://www.capteonline.org>.

The PTA Program admitted its first class in 1975 and received initial accreditation by the Commission on Accreditation in Physical Therapy Education in 1977. The most recent self-study occurred in 2008 with the PTA Program granted accreditation for the period of April 19, 2009-June 30, 2018. The Program has maintained its accreditation status since 1977.

### **CERTIFICATION/LICENSURE OF PHYSICAL THERAPIST ASSISTANTS**

Individual states have different policies/codes concerning the requirements that will permit an individual to practice as a physical therapist assistant. For information about licensure/certification, a student will have to write to the various state boards of medical examiners in order to receive specific information for a particular state. Please contact the Department Chairperson for the addresses of the various state boards of medical examiners. Effective in February 2003, New York State must pass the National Physical Therapy Exam for PTAs as part of the registration process.

Upon initiating the application to the New York State Department of Education for Certification Form 1, Questions 10 through 14 are directed at determining a candidate's moral character. The New York State Department of Education maintains the right to both determine and provide an appeal process of the determination of good moral character. For more information, please refer to <http://www.op.nysed.gov/title8/part28.htm>.

### **TRANSFER OPTIONS**

Orange County Community College's Physical Therapist Assistant Program prepares the student to enter the workforce as an entry-level Physical Therapist Assistant. Should a student desire to transfer into a program which supports the Bachelors degree required to progress on to the Masters or Doctoral Level, individual counseling is available.

### **CAREER OPPORTUNITIES**

Physical Therapist Assistants enjoy the ability to work in a variety of practice settings including: hospitals, private practices, nursing homes, rehabilitation centers, schools and out-patient settings. In addition, Physical Therapist Assistants may teach in Physical Therapist Assistant programs. They may serve as director of a Physical Therapist Assistant program, provided that they have a Masters degree.

Depending on the employment site, Physical Therapist Assistants may have the availability of full-time, part-time, and per diem work. Work hours may vary from 7 a.m.-8 p.m., as well as weekends.

Physical Therapist Assistants may choose to further their education in a variety of fields. Many of our graduates have gone on to degrees in: Physical Therapy, Biology, Athletic Training, Exercise Physiology, Chiropractic, Massage Therapy, Education, Physician Assistant, etc.

### **OFFICE OF CAREER & INTERNSHIP SERVICES**

Orange County Community College offers assistance with employment opportunities through the Career Services Department. College-wide job fairs and Health Field Career Days are offered periodically on campus.

Students are eligible to receive one-on-one consultation within Office of Career & Internship Services. In addition, resume writing and interview skills are taught during a guest lecture seminar within the fourth semester course: Contemporary Practice.

Materials concerning PTA employment opportunities received through Office of Career & Internship Services can be accessed via the Career Portal link on the Office of Career & Internship Services web page. Additional employment information can be found located within a 3 ring binder in a plastic receptacle on the office door to BioTech 323.

### **FINANCIAL AID/SCHOLARSHIPS**

Students enrolled in the Physical Therapist Assistant program are eligible to apply for any financial aid programs in which the College participates. Students are also encouraged to apply for scholarships. There are three scholarships that are only available to Physical Therapist Assistant students, as well as numerous others that are available to the College community. Please refer to the College Catalog for specific financial aid and scholarship information.

### **ESSENTIAL FUNCTIONS OF THE PHYSICAL THERAPIST ASSISTANT STUDENT**

The field of Physical Therapy is demanding. Physical Therapist Assistant students are required to fulfill all program requirements, which are guided by the Commission on Accreditation in Physical Therapy Education. In order to meet these requirements, the Physical Therapist Assistant Department has identified the following essential functions which students must possess. These

functions are not all-inclusive nor do they reflect what may be required for employment of the graduate Physical Therapist Assistant.

**Observation Skills:**

1. Possesses the visual ability to observe a patient's response to treatment, read or set parameters on physical therapy equipment, observe and assess the environment, gather information from medical records and professional literature;
2. Possesses the auditory ability to recognize and respond to a patient's or co-workers voice, equipment timers, and alarms;
3. Able to use equipment to assess blood pressure, pulse rate, and breath sounds;
4. Possesses the tactile ability to palpate surface anatomy, palpate pulses, detect skin temperature, and adjust physical therapy equipment.

**Communication Skills:**

1. Able to communicate in English in both written and oral fashion with faculty, patients, fellow co-workers and family members using appropriate terminology, accuracy, and efficiency;
2. Possesses the ability to recognize, interpret, and respond to nonverbal behavior of self and others.

**Motor Skills:**

1. Has the motor control necessary to safely transfer a 150 lb. patient from the bed to the wheelchair with maximal assist;
2. Has the motor control necessary to safely walk with patients and provide gait training with and without assistive devices;
3. Has the ability to lift 50 lbs. and carry 25 lbs.
4. Has the motor control necessary to adjust knobs on physical therapy equipment, perform manual therapy techniques, adjust equipment such as wheelchairs, and utilize physical therapy equipment such as goniometers, grip gauges, and free weights;
5. Able to obtain and maintain CPR certification for the Professional Rescuer;
6. Able to use proper body mechanics for all skills related to physical therapy;
7. Able to demonstrate the ability to apply universal precautions when rendering physical therapy treatment;
8. Has the motor control necessary to provide for the patient's safety in all physical therapy activities;
9. Possesses the endurance necessary to perform 40 hour work week during their clinical education courses.

**Intellectual Conceptual Skills:**

1. Able to attain a C or better in all Physical Therapist Assistant core courses as well as a "C" in Anatomy and Physiology I and II, and Basic Exercise Physiology;
2. Able to prioritize multiple tasks, integrate information, and make decisions;
3. Able to collect, interpret, and assess data about patients.

### **Behavioral Social Skills:**

1. Able to interact appropriately with individuals of all ages, genders, races, socioeconomic, religious, and cultural backgrounds;
2. Able to cope with heavy workloads, patient demands, changes in schedule, and patients who may be terminally ill;
3. Able to recognize and respond appropriately to potentially dangerous situations;
4. Adheres to the Orange County Community College Student Code of Conduct in all academic and clinical settings;
5. Maintains patient confidentiality;
6. Possesses the emotional health and stability required to fully utilize intellectual capabilities, demonstrate good judgment, and render physical therapy treatment.

The Physical Therapist Assistant Department fully supports the provision of reasonable accommodations to students with special needs. Program requirements are not altered. Instead, it is the policy of Orange County Community College and the Physical Therapist Assistant Program to provide reasonable accommodations to students with special needs who request them so that they can meet the program requirements. Students are encouraged to contact the Department Chair and course instructor as early as possible to discuss their particular situation.

If you have a documented disability and anticipate needing special accommodations in this course, please make arrangements to meet with the Department Chair or course instructor as soon as possible. Please contact the Office of Accessibility Services located on the 3<sup>rd</sup> floor of the George Shepard Student Center, 845/341-40177, follow their guidelines regarding submitting documentation and bring your official Accommodation Notice to instructor as soon as possible. Provision of accommodations is **not** retroactive. Any grades prior to notifying the instructor of your accommodations will be counted in the calculation of final grades.

### **EQUAL OPPORTUNITY/AFFIRMATIVE ACTION**

Orange County Community College is an equal opportunity/affirmative action institution. In accordance with Federal regulations, the New York State Human Rights Law and Section 504 of the Rehabilitation Act of 1973, Orange County Community College does not discriminate on the basis of age, color, religion, creed, disability, marital status, veteran status, national origin, race, gender or sexual orientation in employment or in the educational programs and activities which it operates.

## **SECTION IV**

## PROGRAM CONTENT

The Physical Therapist Assistant Program is a two-year curriculum leading to an A.A.S. Degree in Physical Therapist Assistant. There are a total of 72 credits in the program, 41 PTA credits and 31 non-core course credits.

The PTA course of study includes: biological, physical and social sciences; humanities; physical therapy technical courses; laboratory instruction on/off campus; supervised clinical experience and instruction in health care facilities located within New York State (Orange, Sullivan, Ulster, Putnam, Westchester, Rockland & Dutchess Counties), New York City, Pennsylvania, New Jersey and Connecticut.

## CURRICULUM SEQUENCE

### First Semester (Fall – 1<sup>st</sup> Year)

ENG101	Freshman English I	3
BIO111	A&P I	4
PTA103	Intro to Physical Therapy	2
PTA101	PTA I	4
PTA105	Medical Conditions for the PTA	3
PES100	Concepts of Phys. Wellness	<u>1</u>
		17

### Second Semester (Spring – 1<sup>st</sup> Year)

ENG102	Freshman English	3
BIO112	A&P II	4
PTA102	PTA II	4
PTA104	Kinesiology	4
MAT101	Elementary Algebra	<u>3</u>
		18

### Third Semester (Fall – 2<sup>nd</sup> Year)

PSY101	General Psychology I	3
PED202	Basic Exercise Physiology	3
PTA201	PTA III	4
PTA207	Tests & Msrments for the PTA	4
PTA205	Clinical Education I	<u>3</u>
		17

### Fourth Semester (Spring – 2<sup>nd</sup> Year)

PSY220	Developmental Psychology	3
PTA202	PTA IV	4
PTA208	Cont. Practice for the PTA	3
PTA206	Clinical Education II	3
COM101	Foundations of Communication	3
PES ---	Physical Education	<u>1</u>
		17

### Summer Session (2<sup>nd</sup> Year)

PTA220 – Clinical Education III – August Graduations – 3 credits

**TOTAL PROGRAM CREDITS: 72**

**NOTE: Support Module #PTA010 – “Clinical Applications for the PTA” is a 1 unit course which is intended to provide support for students taking first semester PTA program courses.**

**NOTE: Support Module #PTA012 – “Kinesiology Support Module” is a 1 unit course which is intended to provide support for students taking second semester Kinesiology. The support module courses listed above are optional and are not applicable to the Associate Degree.**

Students will be allowed to participate in May graduation ceremonies provided that they have successfully completed all course and clinical requirements with the exception of course #PTA220. Students will be required to register and pay for the third and final Clinical Education course (#PTA220) which is offered in the summer session. Payment needs to be received by the Bursar **prior** to attending any/all clinical education courses in order to insure activation of liability insurance.

Students may take non-core courses (except Basic Exercise Physiology) prior to beginning the Physical Therapist Assistant courses. **Once enrolled in the core PTA courses, student must complete all courses in sequence, as courses within each semester are related, and courses build from semester to semester.** The summer session between the first and second year can be used to off-load general education courses that are part of the second year, however, they must be completed no later than the semester they fall into sequence with the core courses. Please note that every student is required to take the Concepts of Physical Wellness Course even if they have previous physical education course work.

**Students who elect to take Anatomy & Physiology I and/or II prior to beginning the core PTA courses must complete these within five years of beginning the PTA courses. Courses that are more than five years old but less than ten years old will be accepted, provided that students successfully complete comprehensive exams.**

### **GRADES**

An overall C average (2.0 CQPA) is required for graduation. A minimum grade of C is also required in all PTA core courses. A grade of "C" is also required in **Anatomy & Physiology I & II and Basic Exercise Physiology.** Students who have not received a "C" will be required to repeat these courses as part of the curriculum sequence. A numerical average between 60-74% is **NOT** passing for any PTA core course. Failure to receive a 75% in any core PTA course will prevent you from progressing to the next course in the PTA curriculum sequence. For Non-core courses, receiving a failing grade in sequential courses will prevent student from progressing to the next course in that particular sequence. For example, a failure in Anatomy & Physiology I will prevent you from going on to the second semester courses within the program as the material in these courses is based on an understanding of the material covered in Anatomy & Physiology I. Students may petition the department chair to repeat A&P I in the second semester if needed, however, the decision of the department chair is final.

### **Grade Equivalents for the PTA Department:**

93 & Above	= A	70 – 74	= C-
90 – 92	= A-	67 – 69	= D+
87 – 89	= B+	63 – 66	= D
83 – 86	= B	60 – 62	= D-
80 – 82	= B-	Below 60	= F
77 – 79	= C+		
75 – 76	= C		

### **Lab Practicals:**

Students must pass all lab practicals with a 75% or better. If a practical has separate sections, the student must pass each section with a 75% or better to pass the practical. In the event of a failure, you may retake a practical or a section(s) once. Failure to obtain a 75% on the second attempt will result in removal from the course with a grade of F and removal from the clinic with a grade of W. When the student passes the practical/section on the second attempt, a score of 75% (no higher) will be awarded for the whole practical.

### **Written Examinations:**

1. Students are expected to be on time for all classes and exams. If you arrive late for an exam, you will not be allowed extra time. If you arrive more than 15 minutes late, the instructor is authorized to give you a grade of zero for that examination;
2. Students are not allowed to leave the examination room once the examination begins. Please take care of personal needs prior to the start time of the examination.
3. If you feel that you must miss an examination due to illness or personal difficulty, you must speak directly with the instructor **prior** to the beginning of the examination. The instructor will determine if the excuse is acceptable. If the excuse is acceptable, you must take a make-up examination prior to the next scheduled class meeting. If the excuse is deemed unacceptable by the course instructor, you are expected to take the examination at the scheduled time, or a grade of "O" will result.
4. In the case of a Take Home Exam; students are expected to return the exam at the beginning of the class the exam was written for unless otherwise indicated by their instructor. Missing the deadline for submission of a Take Home Exam will reflect the policy written above #3.

### **Quizzes:**

Quizzes may be announced or unannounced. It is your responsibility to arrive at class on time, as some quizzes are given at the start of class and may be in the form of oral questioning. Make-up of missed quizzes due to lateness or absence is at the discretion of the course instructor. If a make-up is allowed, the quiz must be made up before the next class.

### **Written Assignments:**

Students are expected to hand in assignments on time. Written assignments must be type written, double-spaced unless other instructions are given by the instructor. They will be graded for content and correct usage of written language with correct footnoting and referencing following AAA formatting. Assignments handed in past the deadline will be lowered ten point immediately and an additional ten points every twenty-four hours until they are received. All assignments **must** be handed in or a grade of incomplete will be given (unless student has already earned an "F" as a final course grade). Assignments turned in during finals' week will receive an "O."

### **COURSE SYLLABI**

It is the policy of the PTA Program at the beginning of a course to provide each student with a detailed course syllabus which includes a course description, behavioral objectives, assigned and suggested readings, and calendar (assignments, lectures, examination schedules). It also contains information concerning grading policies, absences and outlines of each individual lecture and lab session, instructor's name, office extension and location, instructor withdrawal policy, etc. Students are expected to be thoroughly familiar with this document.

### **USE OF INSTRUCTIONAL TECHNOLOGY**

The PTA Program is committed to graduating students who have the skills to enhance their knowledge using the Internet. Furthermore, the PTA Program seeks to meet the needs of a variety of learning styles by using several methods of instructional technology. Several of the PTA core courses will utilize the Internet to enhance classroom instruction. The course instructor will

provide an orientation to the System during the first week of classes. The following courses may contain an optional web-enhanced portion: Clinical Education I and II. Students may access the web-enhanced component of the course from their homes or while on campus. Quizzes and weekly assignments may take place online. Supplemental course information is made available for these two courses via the web.

Physical Therapist Assisting 1-4, Medical Conditions for the PTA, Introduction to Physical Therapy, and Contemporary Practice for the PTA encourages the use of the Internet as a means of research and discovery adding upon information gained through the lecture components of these courses enhancing student knowledge.

### **CLINICAL EDUCATION POLICIES & PROCEDURES**

Starting with the third semester, students will be assigned to a total of three clinical education sites throughout the final year of the program (Fall: Clinical Education I, Spring: Clinical Education II, Summer Session I: Clinical Education III). The PTA faculty meets to discuss each student's clinical needs, however, final site assignments are the decision of the Academic Coordinator of Clinical Education (ACCE). The ACCE makes his/her decision in keeping with the philosophy of the program that we wish to expose our students to as great a variety of clinical experiences as possible. Students are asked to complete a "Clinical Affiliation Preference List" during the first semester in which they can indicate their first and second choices for a specialty such as pediatrics, sports, etc. An attempt will be made to place the student in at least one of his/her choices. Students may request a specific request. Trading of clinical assignments will not be considered. Announced placements are considered tentative and subject to change. Hours may vary depending on the clinical site, i.e., 9-5, 7-3, 12-8, etc. Another variation would be a 10 hour day with a 2 hour lunch break. If a clinic is operative less than 7 hours/day, it will be the ACCE's decision as to whether student will need to supplement the shorter clinic hours by attending extra clinic days. It is the student's responsibility to inform the ACCE if the assigned clinic hours are less than eight hours per day. Since many of our clinical education sites are located in facilities that require some traveling, it is important that students understand that making arrangements for transportation to reach the clinical site is completely the student's responsibility. Students are financially responsible for cost of gas, tolls, parking fees, etc. Students must adjust their work and family commitments to meet their clinic schedules. Students may travel up to seventy-five (75) minutes each way, depending on their site assignment.

Students who are assigned to a pediatric clinical affiliation will be required to attend clinic several days prior to the official beginning date of the semester due to potential snow closings/holidays or to use Fridays as make-up days only if agreeable with clinic and if school schedule allows.

Students are required to sign an Acknowledgement Form which documents that they have read and understand the policies described in the Clinical Education Course Outline and the Clinical Education Policies and Procedures handout.

Clinical Education is graded on a Pass/Fail basis, therefore, is not calculated in student's GPA.

If a student is removed from clinic due to performance which indicates: failure to comply with facility policies and procedures, a lack of clinical safety, poor judgment, or unprofessional

behavior, the student will receive a grade of “F.” If this behavior occurs in another clinical education course, the student will be removed from clinic, receive a grade of “F,” **and** be permanently separated from the program.

Students will be allowed to participate in May graduation ceremonies provided that they have successfully completed all course and clinical requirements with the exception of course #PTA220, Clinical Education III. Students will be required to register and pay for Clinical Education III which includes all fees as required by the College. Payment needs to be received by the Bursar **prior** to attending the clinical education courses in order to assure activation of liability insurance.

### **DRUG TESTING POLICY**

All accepted students are required to comply with a 10 panel plus synthetics urine drug screen in order to enter into the PTA Program. The student is responsible for the costs associated with this test and will receive the required information with his/her first year physical forms. Any student who refuses to participate in this test or who does not complete the test by the announced deadline will not be allowed to begin classes in the PTA Program. Additionally, students who receive a positive drug test will not be allowed to begin the PTA Program. Attempted readmission to the PTA Program will be possible only when the course is offered again and only if the student then successfully passes the urine drug test. Students will be able to continue attending general education courses while waiting for their next attempt at admission. Failure to successfully pass a drug test for a second time will result in permanent removal from the PTA Program.

In all instances, the PTA Program is to be completed within three years of beginning the core PTA courses. (This policy is subject to change.)

### **CRIMINAL BACKGROUND CHECKS & URINE DRUG SCREENING/HEALTH PROFESSIONS DIVISION POLICY**

**Policy Statement** – Students selected for admission to any Health Professions Program will be required to undergo a criminal background check and urine drug screen.

**Purpose** – Education of health profession students at SUNY Orange requires collaboration between the college and clinical affiliates. Education of health profession students cannot be complete without a quality clinical education component. The college shares an obligation with the clinical affiliates to protect the affiliate’s patients to the extent reasonably possible from harm. The college wishes to ensure that the health and safety of students and patients are not compromised and that clinical affiliation agreements exist to provide students with quality clinical educational experiences.

In establishing clinical affiliation agreements, healthcare educational programs are contractually obligated to comply with the requirements set forth by clinical affiliates. Students selected for admission to health care educational programs must conform to the rules, policies and procedures of the clinical affiliate in order to participate in clinical learning experiences. It is therefore the policy of the Health Professions Division at SUNY Orange that students accepted into any health professions program submit to a criminal background check and urine drug screen.

**Policy** – Students selected for admission to any Health Professions Program will be required, at their own expense, to undergo a criminal background check and urine drug screen. Students will be notified of the procedure to follow for the criminal background check and urine drug screen in their letter of admission. Admission will be withdrawn for students who refuse to comply with this policy. Admission will be withdrawn for students who in the judgment of the Associate Vice President for Health Professions have been convicted of or has pending a charge that would not be acceptable to our clinical agencies. Admissions will be withdrawn for students who present a positive result from the urine drug screen.

**Confidentiality** – The Health Professions Division through Castle Branch, Inc. DBA Certified Background have established policies and procedures dedicated to maintaining the privacy of personal information while providing the Division with the necessary information to make informed decisions. The information provided to the Division by Certified Background will only be reviewed by College officials in accordance with the Family Educational Rights and Privacy Act (FERPA).

**Health Professions Division Review** – The results of the criminal background check and urine drug screen will be reviewed by the Associate Vice President for Health Professions. Admission will be withdrawn for students who in the judgment of the Associate Vice President for Health Professions have been convicted of or has pending a charge that would not be acceptable to our clinical agencies. Admissions will be withdrawn for students who present a positive result from the urine drug screen.

**Criminal Background Check Review** – Students who have received a “not passed review” result must make an appointment with the Associate Vice President for Health Professions to discuss his/her eligibility. Admission will be withdrawn for students who in the judgment of the Associate Vice President for Health Professions have been convicted of or has pending a charge that would not be acceptable to our clinical agencies. Under extenuating circumstances, the Associate Vice President for Health Professions may convene an ad hoc committee to determine the appropriate action to be taken by the College. Please note, review by committee may delay processing of admission to the health professions program.

**Urine Drug Screen** – Students who received a “not passed review” result will be withdrawn from the admissions process and contacted by Health Services to inform them of the support services available.

**Results** – Students who receive a “not passed review” result will be contacted by the Associate Vice President for Health Professions within five (5) days of the deadline date as indicated on the admissions information packet.

**Health Professions Criminal Background Committee** – Under extenuating circumstances, the Associate Vice President for Health Professions may convene an ad hoc committee to determine the appropriate action to be taken by the College. The ad hoc committee will act as the hearing panel and may consist of:

- A. Two full-time faculty or staff members from the same discipline.
- B. One full-time faculty or staff member from a different discipline.

- C. One full-time faculty or staff member from student services.
- D. One representative from the appropriate administrative office.

The ad hoc committee shall have the responsibility of recommending a decision about the students' suitability for program admission. To this end, written or oral statements may be initiated or solicited from the student in review. In addition, the student in review may have an advocate at the hearing. When all the information pertinent to the case has been presented to the Committee, the Committee will convene without the student in attendance to discuss the case.

The Committee will have ten (10) working days to complete its deliberation. The recommendations of the Committee are to be presented in writing to the Associate Vice President for Health Professions within three (3) working days after the completion of the deliberations. A decision and supportive rationale shall be communicated in writing by the Associate Vice President for Health Professions to the principals, and to the Chairperson of the Committee.

**Final Appeal** – The decision of the Associate Vice President for Health Professions may be appealed for final disposition to the President of the College. The decision of the President is final.

In reviewing the criminal background check and any information submitted by the student, the ad hoc committee will consider the following factors in making its decision:

- The nature and seriousness of the offense or event
- The circumstances surrounding the offense or event
- The relationship between duties to be performed as a part of the educational program and the offense committed
- The age of the person when the offense or event occurred
- Whether the offense or event was an isolated or repeated incident
- The length of time that has passed since the offense or event
- Past employment and history of academic or disciplinary misconduct
- Evidence of rehabilitation
- The accuracy of the information provided by the student in the application materials, disclosure forms and other materials
- Experiential site or state board licensure policies

**Incorrect Records** – Occasionally, a criminal background check may contain incorrect information. If a student finds that his/her record is incomplete, incorrect, contains errors and omissions, or misidentifies a student for someone else, the student may appeal this to the Associate Vice President for Health Professions. The student should also contact the chosen agency/approved provider with appropriate documentation to correct the errant information. The Associate Vice President for Health Professions will then request to the chosen agency/approved provider to verify this information and supply a copy to the student and department chairperson. Depending on the circumstances, the student may or may not be referred to appear before the Health Professions Review Committee pending the outcome of the request.

**Note to Students** – Student should also be aware that hospitals and other agencies with whom they will have a clinical experience or with whom they may seek employment in the future may also undertake similar background checks and urine drug screens; and conviction of certain felonies may render an applicant ineligible for future clinical placement or for licensure in their respective health profession in New York State and other states.

### **CRIMINAL RECORDS**

Any individual who has charges pending or has ever been convicted of a felony or misdemeanor and/or has been found guilty of professional misconduct or negligence may not be eligible to be licensed/certified as a Physical Therapist Assistant. These matters may be discussed before applying for admission to the Physical Therapist Assistant Program at the Office of Professional Discipline, New York State Education Department. (For information pertaining to states other than New York, the student is responsible for contacting the individual state education department.)

Further information regarding criminal records and determination of good moral character in the professions can be found on the Office of the Professions website: [www.op.nysed.gov/title8/part28.htm](http://www.op.nysed.gov/title8/part28.htm).

### **MANDATORY DRESS CODE FOR PTA STUDENTS ATTENDING CLINICAL EDUCATION**

Students must dress in a neat, professional and appropriate manner when participating in Clinical Education Courses.

1. Students must conform to the Physical Therapist Assistant Program's clinical uniform attire: uniform school shirt, navy, black or khaki pants (dress or docker-style). The above uniform will not expose stomach;
2. Students may wear a white lab coat over their program uniform (if required by the facility);
3. Sneakers/shoes must be white, black or tan, clean, neat, low in heel height, and closed in;
4. Students must wear their Orange County Community College PTA student name tag at all times;
5. Students must wear an ID badge if provided by the facility;
6. Students are expected to practice good personal hygiene habits at all times;
7. Jewelry, if worn, must be modest in appearance; a maximum of two earrings in each ear lobe is acceptable. Others are not allowed due to infection control policies. Bracelets, rings and necklaces must be simple and not interfere with treatment or professional appearance;
8. Any other body piercing (tongue, umbilicus, etc.) must be removed or secured and covered when at all possible;
9. Tattoos must be covered when at all possible;
10. All hair must be neat in appearance. Long hair must be worn up or tied back off the face. Hats and other hair coverings will only be allowed for religious observation;
11. Certain clinics may require that male students maintain neatly clipped facial hair or be clean shaven.
12. Excessive/extreme make-up, nail polish, perfume, after shave is not allowed;
13. Nails must be short in order to perform techniques such as massage and joint mobilization. False nails must be removed;
14. Gum chewing is not allowed.

Please remember that you are representing the medical profession and Orange County Community College when you are in clinic. Your conduct and appearance is expected to demonstrate that at all times. Failure to adhere to the clinic dress code will result in a written warning from the ACCE and the Clinical Instructor. If this warning is not heeded, removal from clinic will result, with a grade of "F" given.

Any student who arrives at his/her clinical affiliation NOT wearing the required dress code is to be sent home, and we request the Clinical Instructor to notify our PTA Department. The student will need to make up the missed day.

### **DRESS CODE FOR LAB**

Specific clothing is required for the laboratory sections of the following PTA courses: PTA101, PTA102, PTA201, PTA202, PTA104, PTA207. Privacy and modesty are of the utmost importance, however, one must be able to practice observation skills, data collection and direct treatments in the lab setting. Shorts and t-shirts are acceptable for men. Shorts and a halter top/sports bra are acceptable for women. This manner of dress is also required for all laboratory practical exams. Students must be changed **before** the start of the laboratory session, otherwise they will be marked "tardy" for the class. Securable lockers and changing space are available in the PTA lab. Students who do not dress appropriately for lab will be required to wear a hospital gown during lab, as needed. For lab sessions which do not require exposure of large portions of body surface, students should wear loose fitting clothing.

### **PATIENT SIMULATION BY STUDENTS**

All students are required to participate in an may be videotaped, audio taped or photographed for instructional purposes during demonstrations, lab experiences, skills' checks, and lab practicals, as part of the preparation for clinical education courses. Students will experience data collection and treatment interventions similar to that which they will render to patients in the clinic. Course instructors will take care to ensure that a safe practice environment is maintained during laboratory classes, open lab sessions, and laboratory practicals. It is solely the students' responsibility to notify the course instructor and department chairperson of medical conditions which may prevent safe participation in a demonstration, lab experience, skills' check, and/or lab practical. This should be done during the first week of classes, or as soon as a condition becomes apparent, whichever comes first. Please see SURGERY/MEDICAL CONDITIONS section. Each situation will be addressed on a case-by-case basis.

### **INFECTION CONTROL**

Students will receive lecture and laboratory instruction in infection control and pathogen exposure procedures in the course entitled, "Physical Therapist Assistant I." Furthermore, students will be required to attend a review of infection control procedures during the Review Day in the third semester in order to attend clinical education courses.

Students must adhere to infection control procedures during all lecture, laboratory, open lab, and clinical education courses. Failure to do so will result in a written warning from the department chair for the first offense. Failure to comply in a second instance will result in removal from the course with a grade of "F."

## **PRIVACY**

### **Patient Privacy**

Students will receive instruction in patient confidentiality, privacy, and HIPAA regulations in the course entitled, "Introduction to Physical Therapy." Students will sign a confidentiality statement prior to beginning the PTA core curriculum.

### **Student Responsibility Regarding Academic Privacy**

Students must maintain confidentiality of all students and faculty member with whom they come in contact. Failure to do so will result in a written warning from the department chair for the first offense. Failure to comply in a second instance will result in removal from the course with a grade of "F."

### **Faculty Responsibility Regarding Student Academic Privacy**

The PTA Program Faculty is committed to maintaining student privacy and confidentiality. All information related to student performance, advising, and counseling is kept confidential within the department. Student records are kept in a secure location in faculty offices. No one, including the student's parent(s), has access to the student records except faculty of the PTA Program, without express written permission of the student.

## **PHYSICALS**

It is required that each student has a complete physical examination prior to beginning the core classes. Following the initial physical, the students will be required to have annual physicals until the core program is completed. Announcements will be made as to timing of and deadlines for annual physicals. The completed forms must be submitted to the Health Center by the date indicated on your physical form. If physicals are received after this date, a **\$25 penalty** will apply. Each student should obtain a copy of his/her "Health Clearance Form" from the School Health Nurse following submission of physical exam form so that this information can be submitted to each of his/her three clinical affiliations. The Health Clearance Form will be **mailed** to students who submit their physical exam forms with ALL required information by the due date. Students with **incomplete or late** physicals will need to obtain the Health Clearance Form "in person" from the Health Office after submitting required information and/or late physical exam form plus late fee. Failure to comply with the above will prevent a student from being allowed to participate in classes or in his/her clinical affiliation. Physicals are good for one year.

## **SURGERY/MEDICAL CONDITIONS**

In the event that a student has surgery, a hospitalization or emergency room visit, a significant change in medical status, or becomes pregnant, the student must notify the department chair immediately. The department chair requires that the student have permission from his/her medical physician to participate in class, laboratory, or clinical experiences; specifically the medical clearance **must** indicate that the student is able to lift 50 lbs. off the floor, carry 25 lbs. and perform a dependent transfer to a person weighing 150 lbs. Please note that certain medical conditions may require the postponement or rescheduling of class, laboratory or clinical experiences and can result in a later completion of the program/graduation. A form is available in Mrs. Boyle's office should a health occurrence arise.

If an injury occurs in the clinical education setting, student may be required by the facility to seek medical attention for that injury; the financial responsibility will still belong to the student (whether by personal health insurance or by personal payment).

## **CPR**

**All students must maintain current professional level CPR Certification** (American Red Cross: CPR for the Professional Rescuer or American Heart Association BLS for Health Care Provider) in order to participate in clinical education. Failure to do this will result in the immediate removal from clinic with a resulting grade of "F."

## **STUDENT ADVISEMENT**

Each student will be assigned a department faculty member as an advisor. If for some reason you have been assigned to a non-PTA faculty advisor, please bring this to our attention and we will correct the error with the Admissions Office. Once students are enrolled in our curriculum, advising is provided by all faculty members due to the smaller class sizes and nature of the program.

The role of the advisor is man-fold. The effectiveness of this interaction is dependent on the student as well as the advisor. Among other things, your advisor:

1. Counsels you on course selection;
2. Makes referrals for you to appropriate student services such as the tutorial program, counseling center, career center, etc.;
3. Works with you to develop a program that you can handle, i.e., deciding on an appropriate number of credits, taking into consideration your other responsibilities, such as job, family, etc.

Office hours for every instructor are posted on the office door. When your schedule conflicts with your advisor's office hours, every effort will be made to arrange a more suitable time for an appointment.

## **STUDENT CONDUCT**

The students in the Physical Therapist Assistant Program are expected to adhere to the Code of Student Conduct as stated in the College Student Handbook. This code applies for both academic and fieldwork experiences. The faculty and students are also expected to follow the APTA Standards of Practice for Physical Therapy, New York State Education Law and New York State Practice Act, and Standards of Ethical Conduct for the PTA. Failure to adhere to these principles will result in immediate removal from the program with a grade of "F" for all courses enrolled in that semester.

Orange County Community College Board of Trustees, administration, faculty and staff have a primary concern with academic achievement, standards, and personal integrity of its students. We recognize our obligation to protect College property and we take a special interest in the mental and physical health and safety of our community. We are committed to preserving the peace, uplifting campus morale, and creating a civil climate on our campuses. The College has adopted the following policies and procedures as an expression of its expectations of student conduct.

Refer to the complete "Student Code of Conduct" in the Orange County Community College's Student Handbook. The following information is from Article II, Section B – Conduct – Rules & Regulations. Any student or organization found to have committed or to have attempted to commit any of the following acts of misconduct is subject to the disciplinary sanctions outlined in Article II:

1. Acts of dishonesty, including, but not limited to:
  - a. Cheating, including cybercheating
  - b. Fabrication
  - c. Facilitating academic dishonesty
  - d. Plagiarism, including internet plagiarism
  - e. Forgery
  - f. Bribery
  - g. Multiple submission (submitting the same assignment to more than one instructor without the permission of the instructors). Please refer to the College Academic Policy for other means of resolution for academic dishonesty issues.
2. Violation of any provisions of the professional and/or ethical codes of programs in the fields of Allied Health, Nursing, Kindercollege or any other applicable programs.
3. Interference with the College approved operation of any College recognized student organization.
4. Disorderly conduct, including but not limited to: disruption or obstruction of teaching, research, administration, disciplinary proceedings, other College activities, and other campus activities.
5. Conduct which alarms, threatens or in some manner disrupts the learning process of another student and/or the ability of faculty to teach.
6. Physical abuse, verbal abuse, threats, intimidation, stalking, coercion and/or other conduct which threatens or endangers the health, wellbeing or safety of any person.
7. Sexual misconduct (see Sexual Assault and Sexual Harassment Policies).
8. Harassment which serves to degrade the status of another person. Most often, harassment focuses on a personal attribute, singling it out for ridicule, attack or disparagement. Attributes include, but are not limited to: race or ethnic origin, gender, physical or mental disability, age, religion, economic class, and sexual orientation. Harassment may include physical contact, written or verbal comments or suggestions, obscene or offensive pictures or "jokes," hostile or threatening gestures or other forms of degradation. This includes acts of harassment carried out by one or more students on behalf of and/or at the request of another student.
9. Theft of and/or damage to property of the College, property of a member of the College community, or other personal or public property.
10. Hazing, which is an act which endangers the mental or physical health or safety of a student, or involves the forced consumption of liquor or drugs, or which destroys or removes public or private property for the purpose of initiation, admission into, affiliation with, or as a condition for continued membership in a group or organization. Consent of the participants is not a defense against a complaint of hazing.
11. Failure to comply with directions of a College employee or emergency or service personnel acting in performance of their official duties.
12. Failure to identify oneself to a College employee or emergency or service personnel acting in performance of their official duties when requested to do so.

13. Unauthorized possession, duplication or use of keys, combinations, or access cards to any College premises or unauthorized entry to or use of College property.
14. Violation of published College policies, rules or regulations found in, but not limited to, the Student Handbook, the Rights and Responsibilities booklet, Parking and Traffic Regulations, Individual Department Handbooks, Academic Policy, and the College Catalog.
15. Use, possession or distribution of illegal drugs, narcotics or other controlled substances, and drug-related paraphernalia, except as permitted by federal, state and/or local law.
16. Public intoxication or the use, possession or distribution of alcoholic beverages except as expressly permitted by federal, state and/or local law and College regulations (see the College Alcohol Policy).
17. Possession of firearms, explosives, or other weapons, or unauthorized use of dangerous chemicals or substances on College premises.
18. Participation in a campus demonstration which disrupts the normal operations of the College and infringes on the rights of other members of the College community; leading or inciting others to disrupt scheduled and/or normal activities within any campus building or area.
19. Intentional obstruction of the free flow of pedestrian or vehicular traffic on College premises or at College sponsored or supervised functions.
20. Conduct which is disorderly, lewd, or indecent; breach of peace; or aiding, abetting, or procuring another person to breach the peace on College premises or at functions sponsored by, or participated in, by the College.
21. Theft or other abuse of computer resources, including, but not limited to:
  - a. Commercial use of computing resources;
  - b. Data interception;
  - c. Forgery;
  - d. Willfully engaging in practices that place undue burdens on college resources (ie. spamming);
  - e. Engaging in or disseminating illegal, obscene, threatening, discriminating, fraudulent, defamatory, intimidating, harassing, embarrassing or unwelcome electronic communication;
  - f. Copying, modifying or destroying college network or internet-based files; and,
  - g. Accessing or attempting to access the college network or internet resources for which the user is not authorized or granted explicit permission.
22. Abuse of the judicial system, including but not limited to:
  - a. Failure to comply with the directive to appear before a hearing panel or disciplinary conference administrator after having received appropriate notification of such a directive.
  - b. falsification, distortion, or misrepresentation of information before a hearing panel or disciplinary conference administrator.
  - c. Disruption or interference with the orderly conduct of a judicial proceeding.
  - d. Knowingly instituting a judicial proceeding without cause.
  - e. Influencing or attempting to influence another person to commit an abuse of the judicial system.
  - f. Attempting to discourage an individual's proper participation in, or use of, the judicial system.
  - g. Attempting to influence the impartiality of a member of a hearing panel or of a

- disciplinary conference administrator prior to and/or during the course of a judicial proceeding.
  - h. Harassment (verbal or physical) and/or intimidation of any person involved in a judicial proceeding.
  - i. Failure to comply with a sanction imposed under the Student Rights and Responsibilities.
  - j. Failure to comply with an agreed upon informal resolution.
23. Engaging in gambling activities defined as illegal by federal, state or local law and/or by College regulations.
24. Behavior prohibited by federal, state and/or local laws.

### **Alcohol & Other Drugs Policy**

In compliance with "THE DRUG-FREE SCHOOLS & COMMUNITIES AMENDMENTS OF 1989" as mandated by Section 22 of Public Law 101-226, and the DRUG-FREE WORKPLACE ACT of 1988, Orange County Community College will make the following information available to all its students and employees annually:

### **STANDARDS OF CONDUCT**

**Employees:** As an employee of Orange County Community College, a Unit of the State University of New York, one should be aware of the following policy which must be adhered to as a condition of employment:

1. The unlawful use, possession, manufacture, dispensation, or distribution of controlled substances at all Orange County Community College work locations is prohibited.
2. Advance written approval and authorization is required from the President of the College for the consumption of alcohol at faculty functions.
3. Employees who unlawfully manufacture, distribute, possess, or use a controlled substance will be subject to disciplinary procedures consistent with applicable and collective sanctions outlined in Section II, Disciplinary Sanctions.
4. Employees must notify the Personnel Office of any criminal drug statute conviction for a violation occurring in the workplace, or at a work site, no later than five (5) working days after such a conviction.

**Students:** In accordance with the Orange County Community College Student Code of Conduct:

1. The unlawful purchase, manufacture, possession, use, distribution, or consumption of alcohol and other drugs on all Orange County Community College campus sites or college-sponsored events is prohibited.
2. No alcoholic beverages may be bought, manufactured, possessed, used, distributed, or consumed on campus or elsewhere as part of college activities unless written approval is received in advance by the President of the College.
3. As of December 1, 1985, the legal minimum age to purchase alcoholic beverages in New York State was changed to 21. Under the law, no person can sell, deliver, or give away any alcoholic beverage to any person under the age of 21.
4. The forced consumption of liquor or drugs for the purpose of initiation, admission into, affiliation with, or as a condition for continued membership in a group or organization is prohibited.

**Visitors:** of all Orange County Community College campus sites are expected to adhere to the Standards of Conduct regarding alcohol and other drugs required of Orange County Community College employees and students.

### **STUDENT EMPLOYMENT**

While it is acknowledged that many students work part-time while completing their PTA degree, students must realize that this takes away from valuable study time, and may have a negative effect on the grades that a student attains.

If a student is employed in a physical therapy setting, the student must function as a PT Aide. Under no circumstance is the student to render direct patient care while employed, as this will violate New York State Education Law. Students may only render direct patient care while on clinical affiliation.

## PROFESSIONAL DEVELOPMENT ASSESSMENT FORM

Student: \_\_\_\_\_ Course: \_\_\_\_\_

### Rating Scale

**0 = UNSATISFACTORY:** The student does not demonstrate the required level of professional skill.

**1 = NEEDS IMPROVEMENT:** The student, while beginning to demonstrate the required level of professional skill, needs improvement in either the extent to which the skill has developed or the consistency of its usage (or both).

**2 = SATISFACTORY:** The student demonstrates the required level of professional skills.

The purpose of this form is to document the student's progress on integrating those attitudes, values and behaviors needed to assume his/her role as a PTA student and entry level paraprofessional. This form will be utilized in PTA I-IV. Ratings are based on observations of the student in class, lab and other professional contacts. The results will be discussed with the student at midterm and again at the end of the semester, if necessary. These results will be factored into the miscellaneous section of each skills course (PTA I-IV). If an area of concern develops, remediation will be recommended in the form of a Learning Contract.

In the event the student has one or more areas deemed unsatisfactory at the end of the second, third or fourth semester, it could delay the student's placement in clinic.

PROFESSIONAL DEVELOPMENT SKILL	RATING			COMMENTS
<b>A Communication Skills:</b>				
1. Listens and speaks at appropriate times	0	1	2	
2. Gives and receives feedback appropriately	0	1	2	
3. Demonstrates appropriate non-verbal behavior (posture, gestures, facial expressions)	0	1	2	
4. Asks approp. questions & seeks assistance when in doubt	0	1	2	
5. Writes effectively & professionally	0	1	2	
<b>B Responsibility for Learning:</b>				
1. Arrives on time & ready to learn for classes, labs & meetings	0	1	2	
2. Pays attention during instruction exhibiting a positive & motivated manner	0	1	2	
3. Notifies faculty ahead of time of circumstances which prevent attendance	0	1	2	
4. Satisfactorily makes-up missed assignments on own initiative	0	1	2	
5. Completes assignments fully and on time	0	1	2	
<b>C Interpersonal Skills:</b>				
1. Cooperates with peers/faculty/staff	0	1	2	
2. Displays functional level of self-confidence	0	1	2	
3. Displays honesty with self and peers	0	1	2	
4. Relates tactfully, diplomatically with empathy to others, respecting cultural diversity	0	1	2	
5. Demonstrates ability to work productively w/authority figures	0	1	2	
<b>D Problem-Solving Skills:</b>				
1. Uses resources & time effectively	0	1	2	
2. Maintains open mind to new perspectives	0	1	2	
3. Logically evaluates the facts	0	1	2	
4. Demonstrates critical thinking & recognizes biases	0	1	2	
5. Can self-assess & self-correct	0	1	2	

PROFESSIONAL DEVELOPMENT SKILL	RATING	COMMENTS
<b>E Professionalism:</b>		
1. Maintains appropriate hygiene/attire	0 1 2	
2. Assumes responsibility for own actions	0 1 2	
3. Demonstrates respect for peers/faculty/self	0 1 2	
4. Demonstrates ability to be a cooperative & contributing member of the class & the profession	0 1 2	
5. Displays integrity in academic & professional matters	0 1 2	
<b>F Stress Management Skills:</b>		
1. Demonstrates ability to manage own time by meeting deadlines, prioritizing self & tasks, etc.	0 1 2	
2. Works to achieve lifestyle balance incorporating student role	0 1 2	
3. Demonstrates ability to be flexible w/unexpected situations	0 1 2	
4. Manages personal emotions maturely	0 1 2	
5. Demonstrate ability to modify behavior in response to feedback	0 1 2	

Additional Comments:

Student Comments on Assessment:

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

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

## **LABORATORY EQUIPMENT & FACILITIES**

Students are encouraged to use the laboratory equipment and facilities to practice their skills. This is essential for their success in the PTA curriculum. The following rules **must** be adhered to:

### **Laboratory Rules**

1. All students must sign in and out on the sign-in sheet in the lab if they wish to use the lab for additional practice when it is not scheduled for teaching. Students are also required to sign in and out of the lab and computer room, when using them for extra practice.
2. A student may use a piece of equipment only if he/she has been instructed in its use. The student must possess a working knowledge of the equipment, including indications and contraindications.
3. No electrical equipment is to be used unless a member of the PTA faculty is in attendance and/or has given permission. However, if the equipment remains unplugged, the student may practice with the modalities any time the lab is free.
4. Each student is responsible for the equipment he/she is using.
5. Students are to remove their shoes when utilizing the treatment tables and floor mats.
6. Report any damage of equipment immediately to the lab instructor.
7. Each student is required to clean the treatment area and equipment upon completion of use.
8. All equipment must be returned to the shelf, cabinet, etc., where it is usually stored.
9. All of the safety rules you have been instructed in when using various pieces of equipment and/or performing various procedures must be adhered to.
10. If you wish to receive additional instruction from department faculty in any procedures, you must make arrangements that are mutually convenient.
11. To insure the students' privacy and to protect them against any embarrassment, no unauthorized visitors will be permitted in the PTA lab during class session. This also applies to other course lab sessions when deemed appropriate by the instructor.
12. To insure the students' safety, it is recommended that when practicing in the lab, they do so in the company of at least one other PTA student and with the door closed.
13. Students may bring in non-alcoholic food and beverages into the lab. Food and beverages must remain in the classroom portion of the lab, away from all equipment. Students must clean up after themselves. Anything stored in the refrigerator must be labeled with the student's name and date. The department chair may assign a clean-up schedule for the PTA students if cleanliness becomes a problem.

### **SAFETY IN THE PTA LAB**

The PTA faculty is committed to maintaining a safe environment for students enrolled in the program and visitors to the lab. At the beginning of each year, faculty members will review the location of the nearest exits, fire extinguisher, eye wash equipment, restrooms, first aid kit, material safety data sheets (MSDS) and infection control materials. Faculty members will also instruct students in the handling of fire emergencies, medical emergencies, and matters related to personal safety. The following statements summarize the safety procedures to be followed in the PTA Lab:

1. The first aid kit, eye wash equipment, MSDS notebook and infection control materials are located along the wall where the sink is located.

2. The fire extinguisher is located along the front wall, next to the refrigerator.
3. There is only one exit from the PTA lab – the double brown doors. At that point, either make a right or a left to exit directly out of the building. Please follow the “Emergency Exit Signs.”
4. Restrooms are located outside the PTA lab. Make a right after leaving the lab. The restrooms are down the hall on the left.
5. In the event of a fire emergency, students should activate the RACE plan. (Remove individuals from the immediate vicinity, announce the fire, attempt to contain the fire, escape.) When in doubt, announce and escape.
6. In the event of a medical emergency in which the instructor is present, the instructor will take charge of the situation. Students are to listen for instructions, which may include: activating the EMS system, obtaining equipment and supplies, assisting with CPR, removing other individuals from the area.
7. In the event where the medical emergency involves the instructor, or the instructor is not present, the student(s) must take charge. Provide emergency first aid (ABCs: airway, breathing, circulation – then bleeding).
8. In the event that the physical safety of a student and/or faculty member is threatened, the security department should be notified as soon as possible. Dial 77.
9. Students are to maintain appropriate infection control procedures when in the lab and everywhere else.
10. Students are to notify faculty members when they have a medical condition which may prevent participation as a subject or patient-simulator in the lab setting.

### **CLEANLINESS IN THE PTA LAB**

In order to maintain a clean and orderly work environment for all students using the PTA lab, this serves to outline the responsibilities of the students in regards to maintenance of the lab.

It is essential that all students work together to maintain an optimal learning environment so that time is not wasted during lab classes. The lab is in constant use from 8am to 3pm on Monday, Wednesday, Thursday and Friday, and 8am to 4pm on Tuesday. As many as 60 students may be using the lab in a given semester. While our maintenance department handles the floors and the trash, they do not clean specific equipment and facilities in a specialized lab such as ours.

### **General Rules:**

1. All shoes must be removed when sitting on the treatment tables or while working on floor mats.
2. Do not use the treatment tables as a writing surface; the ink does not come off.
3. Food is only to be eaten at the tables.
4. No food is to be left out. Any food which is left out will be disposed of.
5. Food placed in the refrigerator must be labeled with your name and date. Food that is in the refrigerator for more than two weeks will be removed by the “fridge patrol” (your fellow classmates).
6. Do not use any equipment unless you have been trained by a faculty member in its use.
7. Do not turn on any electrical stim equipment unless a faculty member is present in the lab.
8. Clean out the microwave, coffee pots, and toasters after each use.
9. The lab must be put back in its original condition after each lab. The instructors will not do this for you. That means:

- a. All treatment tables must be put back against the wall, with pats back in place. Do not store extra items under the treatment tables.
- b. All stools must be placed along the wall by the weight equipment.
- c. All equipment must be placed back in its original storage area **after each lab session** - this includes wheelchairs, BP cuffs, ADL equipment, folding treatment tables, etc. It is not fair to the next class if equipment is in their way.
- d. All tables and chairs must be returned so that the room is ready for a lecture class.
- e. The storage area/practice area must be left neat, so that it is available for studying and practice.

**Of Special Note:**

**All first year PTA students are responsible for doing the laundry created by the PTA Program.**

Thank you in advance for your cooperation with keeping our facilities neat and attractive. At the end of each semester, we also perform a “major” cleaning of the lab. All equipment should be wiped down and neatly put away. This should be completed during finals week.

**PTA First Year Students:** The storage area with the equipment and extra tables. The classroom side of the room: desks, chairs, mat table, white board, refrigerator, sink and everything on the side wall.

**PTA Second Year Students:** The wheelchair storage room, the locker room, the stairs, treadmill, traction table, bike, weight cart, therapy balls.

**POLICY TO SIGN OUT EQUIPMENT, TEXTS, VIDEOS, JOURNALS, ETC.**

- A. Students are encouraged to utilize texts, journals and videos from the PTA Department Library. The following procedures must be followed:
  1. Obtain item to be borrowed between the hours of 7:30am-3:30pm, Monday thru Friday. The department secretary will provide access if faculty members are not available.
  2. Sign item out in BT326 (department secretary’s office).
  3. All items must be returned within specified time periods or further borrowing privileges will be revoked:
 

**Textbooks – 1 week; Journals – 1 week; Videos – 1 night**
  4. The student is responsible for returning all items borrowed in the original condition in which they found them.
  5. The student will incur any costs associated with replacing or repairing a lost or damaged item. In addition, students who have not returned borrowed items will not be cleared for graduation until this is done or proper reimbursement has been received.
- B. Lab equipment is also available for students to borrow overnight. This includes: BP Cuffs, Stethoscopes, Ace Wraps, Crutches, Walkers, Canes, Wheelchairs. **Under no circumstance** is a student to borrow a piece of equipment from the lab without instructor approval **and** without being trained in the use of the equipment. The following procedures must be followed:
  1. Obtain item to be borrowed between the hours of 7:30am-3:30pm, Monday thru

Friday. The department secretary will provide access if faculty members are not available.

2. Sign item out in BT326 (department secretary's office).
3. All items must be returned within 24 hours.
4. The student is responsible for returning all items borrowed in the original condition in which they found them.
5. The student will incur any costs associated with replacing or repairing a lost or damaged item. In addition, students who have not returned borrowed items will not be cleared for graduation until this is done or proper reimbursement has been received.

### **REPEAT POLICY**

Departments in the Allied Health & Nursing curricula may, with the approval of the Vice President for Academic Affairs, designate courses with an (R-1) at the end of the course description in the College Catalog, meaning that they may be repeated only once. All courses in the core Physical Therapist Assistant curriculum are designated as such. If a student withdraws from a course for any reason or fails to attain at least a C (75%), the student may petition to retake a course. The student must seek permission from the Department Chairperson **in writing** to retake the course. Permission to retake a course (or two in the **same** semester) may be granted only once, and only if space allows. The core Physical Therapist Assistant courses must be completed within three years of beginning the core curriculum.

Students will be required to audit, as appropriate, sequential Physical Therapist Assistant courses (PTA I-IV) and the Tests & Measurement Skills course. Student must pass the lab practicals on the first attempt while auditing a core course. Students who are required to or choose to officially audit a course will also be required to pass the written final exam for each course that they officially audit. The faculty also reserves the right to require a student to repeat an entire course which has undergone significant curriculum revision as well as repeat a clinical education course.

\* Repeating and auditing courses may have financial aid implications.

### **COSTS OF THE PROGRAM**

Students will be responsible for tuition, lab fees, activity fees, accident/health insurance and any and all additional costs including: APTA Student Membership fees, all transportation to clinics, shoes, uniforms, pins, name tags, patches, etc.

- Textbooks - approximately \$400 for 1<sup>st</sup> semester, \$200 for 2<sup>nd</sup> semester, \$275 for 3<sup>rd</sup> semester and \$100 for 4<sup>th</sup> semester for PTA core courses, non core courses may run an additional \$100-300 per semester
- APTA Membership - \$85 annually
- PTA Pin - \$50
- Transportation Costs - students must pay for all costs associated with attending clinic. This includes gas, tolls, parking, meals, etc. At some clinical sites, parking could range up to \$200
- Lab Coats - some clinics require that students wear these (\$30-40 each)
- Name Tags - \$8

- Additional Study Aids - BP cuff and stethoscope (\$40), CD-ROMs, review books (\$64), goniometer (\$10), etc.
- Physicals, Testing, and Immunizations - \$425-590 for 2 year program (this includes each annual physical and a total of three PPDs); there is an optional Hepatitis B vaccination series at an additional cost of approximately \$210. These prices are reflected by each year's pricing proposal by Partners-In-Safety. Students may choose to have their physicals performed by their family physicians accessing their family insurance.
- Drug Testing & Criminal Background Check (\$119)
- Subject to change (Cost of Certification & National Physical Therapy Exam for PTAs):
  - \$103 application fee for Certification
  - \$370 National Physical Therapy Exam for PTAs plus additional \$55.60 fee

### **STUDENT SUPPORT SERVICES**

**Department Resources** – the PTA Department maintains an extensive in-house library of texts, journals, videos, and CD-ROMs. A student computer with Internet access is available in the PTA lab. Students may also access the BAT CAVERN which is a computer aided learning facility maintained by the Biology Department, located in BT109.

**Office Hours** – department faculty members hold office hours each week. Students are encouraged to use these hours for advising, assistance with coursework, or anything else related to the field of Physical Therapy.

**Tutoring** – tutoring is available through the College's Tutoring Center, located in the LRC. The PTA Department maintains a current list of adjunct instructors, recent graduates, and current students who are available for tutoring.

**The Counseling & Guidance Center** – numerous programs and services are available through this center which is located in the George Shepherd Center. These include academic advising, counseling, testing services, career services, Office of Accessibility Services, Student Support Services Program, Office of Special Services, Veteran's Affairs, Center for Adult Lifelong Learning, and the Educational Opportunity Program.

**Financial Aid Office** – a variety of programs, loans, and scholarships are available to students. Eligibility is based on academic progress, family income, and/or assets.

### **REQUIRED ATTENDANCE AT APTA SPONSORED MEETINGS**

All PTA students are encouraged to attend a minimum of two APTA sponsored meetings by the time they complete the course titled Contemporary Practice (one continuing education program and one business meeting). A continuing education course may be substituted at the discretion of the Department Chairperson and/or Contemporary Practice Instructor. Course and meeting information will be posted in the department. A typewritten synopsis of each meeting must be given to the Contemporary Practice Instructor. Failure to do this will result in an **"incomplete"** grade for Contemporary Practice.

## ATTENDANCE POLICY

The College-wide Academic Policy for Attendance states:

**“Attendance:** Attendance is required in all courses. Work missed during any period of absence, regardless of the reason for the absence, must be made up by the student (see course syllabi for details). Instructors are authorized to lower grades for class absences and may withdraw non-developmental students from a course for excessive absences. Instructors shall not lower grades for absences for religious observance nor, provided the instructor’s permission is given in advance, for participation in athletics or other college-sponsored events. You should inform instructor when you anticipate an absence for religious observance so that arrangements can be made for you to make up examination, study or work requirements. If illness, accident or similar circumstances make it possible for a student to attend classes for three or more consecutive days, it is his or her responsibility notify the Office of Records and Registration at once. The Records & Registration office will in turn notify each instructor. However, it is the student’s responsibility to contact each instructor to make up missed work. Current or future awards of financial aid may be affected if a student does not attend classes for which he or she is registered.”

It is the philosophy of the PTA Department faculty and our clinical instructors that good attendance is crucial in order to: obtain all didactic material, observe and practice laboratory skills, demonstrate knowledge of course components, and implement skills/knowledge in the clinical environment.

Attendance in all lecture classes and laboratory sessions is expected. Faculty is authorized by the College to lower grades for poor attendance. The following guidelines have been established by the PTA Department Faculty. Failure to attend classes may lower final grades as follows:

3 hrs. lecture	grade lowered up to one full letter grade
6 hrs. lecture	grade lowered up to two full letter grades
9 hrs. lecture	grade lowered up to three full letter grades
1 lab session	equivalent to missing two hours of lecture
2 lab sessions	grade lowered up to one full letter grade
3 lab sessions	grade lowered up to two full letter grades
4 lab sessions	grade lowered up to three full letter grades

2 episodes of arriving late or leaving early counts as one hour absence

Attendance for all clinic sessions is also mandatory. Any days or hours missed must be made up in order to successfully complete the clinical education course.

A student may find that due to particular circumstances such as illness, or inclement weather causing hazardous road conditions he/she will not be able to attend clinic on his/her assigned day. If the student is going to absent from his/her clinical affiliation, he/she is to notify the clinical instructor at his/her affiliation, the Orange County Community College faculty member scheduled to visit him/her, and the department secretary. Notification to the visiting faculty member must be made by 7:00am if possible. The College office must also be contacted to report early/extra and make-up days.

The student is to arrange make-up time with the clinical instructor and notify the academic clinical coordinator of the scheduled make-up date (note sent to office). Be aware that if Orange County Community College officially closes, you will be responsible for making up the time. Vacation time may have to be used for this purpose (Thanksgiving, Spring/Fall/Winter recess). Students who affiliate in pediatric settings should begin a minimum of two days early or discuss with their Clinical Instructor the feasibility of using Fridays as make-up days. Consult with the clinical instructor regarding the facility’s calendar, since more than two days early may be required and clinic days will need to be made up even if the pediatric setting is officially closed due to weather.

Lateness will not be tolerated in the clinical setting as this is a reflection of the student’s professional demeanor. Lateness or absences may result in failure of clinical education courses.

## **TELECOMMUNICATION DEVICES**

The active use of any device classified as a “Telecommunications device,” including but not limited to pagers, cellular phones, PDAs, and messaging devices, is prohibited in classrooms, as well as in other areas where a classroom atmosphere is assumed (e.g., libraries, labs, theaters, administrative offices), except by special permission of the instructor. Passive use, including silent and vibrate mode, may be used, provided it does not compromise the educational process or promote an unethical situation. Instructors reserve the right to regulate the monitoring of such devices as necessary.

## **PTA CLUB**

All students enrolled in the Physical Therapist Assistant curriculum are automatically entitled to membership in the Physical Therapist Assistant Club. The purpose of the club is to promote physical therapy education, provide assistance to various health facilities and disabled individuals, and participate in activities that help the public to understand the field of physical therapy and its role in health care.

## **PINNING CEREMONY**

A Pinning Ceremony is held each Spring to recognize the second year students’ achievements and welcome them to the field of Physical Therapy. Faculty, administrators, students, family and friends gather to celebrate.

## **APTA MEMBERSHIP**

The American Physical Therapy Association, founded in 1921, serves as the national organization for Physical Therapists, Physical Therapist Assistants, and students in the field of Physical Therapy. Students enrolled in our curriculum are expected to join the APTA in September of each year as the material provided by the APTA will be utilized throughout the curriculum for assigned readings, course projects, and independent learning. Membership benefits include: 1) subscriptions to “Physical Therapy,” our professional journal; and “PT in Motion;” 2) access to “members only” information on the APTA Website; 3) discounts for APTA materials and conferences.

## **PROFESSIONAL LIABILITY INSURANCE REQUIREMENTS**

The College maintains liability insurance for students enrolled in the PTA Program. This policy covers them while on campus taking classes or practicing in the PTA lab. Students must follow all lab rules. The College also maintains professional liability insurance to cover PTA students when enrolled in Clinical Education courses. Student may also choose to purchase their own malpractice insurance through the APTA or another company.

## **ACCIDENT/HEALTH INSURANCE**

The College provides limited “Accident Insurance” for all enrolled students. Refer to the College Catalog for procedures, costs and limitations. **Health** insurance through the College is only available to **full-time** students.

Students are encouraged to maintain their own personal health care coverage at their own expense if they are part-time students. While Clinical Education sites will make emergency medical care available to students, the student is responsible for the costs. Some clinical affiliations will not accept a student unless he/she has health insurance coverage.

## **WITHDRAWAL PROCEDURES**

Students are strongly encouraged to speak with their faculty advisor and the department chairperson in the event that they are considering withdrawing from a PTA course, Basic Exercise Physiology, and/or Anatomy & Physiology 1 and/or 2, as this will have serious implication regarding completion of the PTA program. PTA courses are only offered once each year and must be taken in sequence. In addition, they must be taken with corresponding co-requisite courses.

If the student chooses to withdraw from one or more PTA courses, they must also withdraw from any clinical education courses they are enrolled in. In the event that the student wishes to withdraw from a PTA course after the tenth week of classes, the student may ask the instructor for an "Instructor Withdrawal." It is up to the course instructor to determine if he/she will grant approval for a withdrawal. Instructor Withdrawal policies may vary by instructor and can be located in course syllabi.

Students who wish to resume their studies in the PTA curriculum must meet with the department chair and gain approval. Students will be required to pay for, and audit lab courses that they already completed so that they maintain their skills. Additionally, students who wish to resume their studies in the PTA curriculum must retake and **pass** all technical course lab practicals prior to resumption of the program. All of the PTA core courses must be completed within a three year period.

## **DISMISSAL PROCEDURES**

In the event that the department faculty believe that a student's actions on campus or in the clinical education setting warrant dismissal from the program, the PTA Department will seek to have the student removed from the program. The Department will abide by all due processes afforded to the student. If necessary, the College Board of Inquiry will be convened as per academic policy.

## **DUE PROCESS**

Orange County Community College has established procedures for students to follow in the event that they feel their rights or freedoms have been violated. The PTA Department abides by these procedures, which are found in the College Catalog.

Complaints that fall outside due process should be made to the program director. These will be dealt with on a case-by-case basis. Records of each complaint and the resolution will be maintained in the program director's office.

## **SECTION V**

## **PTA DEPARTMENT PHONE NUMBERS & E-MAIL ADDRESSES**

Dr. Maria Masker	845/341-4290 – <a href="mailto:maria.masker@sunyorange.edu">maria.masker@sunyorange.edu</a>
Dr. Karen Stephens	845/341-4309 – <a href="mailto:karen.stephens@sunyorange.edu">karen.stephens@sunyorange.edu</a>
Mr. Edward Leonard	845/341-4280 -- <a href="mailto:edward.leonard@sunyorange.edu">edward.leonard@sunyorange.edu</a>
Mrs. Peggy Boyle, secretary	845/341-4291 – <a href="mailto:margaret.boyle@sunyorange.edu">margaret.boyle@sunyorange.edu</a>

## **SECURITY**

**Security Office:** Located in Orange Hall, Room 110  
**Telephone:** 341-4710

## **Emergency Phone Locations:**

Bio Tech Building:	341-4673 (3 <sup>rd</sup> floor near Room 314) 341-4674 (1 <sup>st</sup> floor near Computer Center) 341-4675 (2 <sup>nd</sup> floor near Room 254)
George Shepard Center:	341-4676 (2 <sup>nd</sup> floor near Student Activities Office) 341-4677 (3 <sup>rd</sup> floor near Counseling)
Harriman:	341-4678 (near Room 205) 341-4027 (2 <sup>nd</sup> floor near Chair Lift) 341-4028 (3 <sup>rd</sup> floor near Chair Lift)
Hudson:	341-4679 (near Room 106)
LRC:	341-4680 (1 <sup>st</sup> floor Lobby Area)
Orange Hall:	341-468` (outside of Theater)
Phys Ed:	341-4682 (Main Lobby) 341-4683 (Pool Area)
Sarah Wells:	341-4684 (Main Floor)
Horton:	341-4685

To further enhance our campus security, the College has hired an individual to fill the position of Evening Security Supervisor. The hours for the Evening Security Supervisor will be from 3:00-11:00pm, Monday through Friday; dial extension 77 for an emergency OR 4710, 4932 for non-emergency.

## **WELLNESS CENTER/HEALTH SERVICES**

The Health Office at Orange County Community College, located in the George Shepard Student Center, 2<sup>nd</sup> floor, is available to all students, faculty and staff. A Registered Nurse is on duty whenever the office is open.

Office Hours: Monday-Friday.....8:30am-4:30pm  
Telephone: 341-4870  
Fax: 341-4872  
E-mail: [healthservices@sunyorange.edu](mailto:healthservices@sunyorange.edu)  
Web site: <http://www.sunyorange.edu/wellness/>

## **EMERGENCY/FIRST AID PROCEDURES**

In the event of any accident or medical emergency on campus, the following procedures should be followed:

1. Contact the Wellness Center at ext. 4870

**OR**

If there is no nurse on duty, Dial 77 (after switchboard hours, a recording will come on when the recording prompts you to press "O" for Emergencies – do so, it will automatically forward to Security) or call Security at ext. 4710.

**OR**

Call 911 if you feel the situation warrants. (YOU MUST ALSO NOTIFY SECURITY AT EXT. 4710)

2. Please be aware that an accident report must be filled out by the Nurse for insurance claim purposes on all staff and student accidents.

### **Information to Give Nurse or Operator:**

1. Describe the type of emergency and assistance needed to the best of your ability; **if victim is unconscious or not breathing, state that immediately.**
2. Give your name and extension from which you are calling.
3. Give name of victim (if known) and exact location.
4. **Hang up last** to insure that nurse or operator has no further questions.

### **Be Prepared To:**

1. Know the location of nearest First Aid Kit tank in your building.
2. Have someone meet nurse or ambulance attendants at a specified location.
3. Give as much detail as possible regarding situation, e.g., time of occurrence, injuries noted, possible causes.
4. In the event of a life-threatening illness or injury when neither the nurse or security is available, call Mobile Life at 343-1212 or Dial 911.

**STUDENT ACCIDENT INSURANCE PLAN:**

**Full-Time Students Only:** full-time students are covered 24 hours a day for **both health** and **accident** insurance. Accident insurance coverage is through to the end of the academic calendar (August 31); health insurance applies assuming full-time status only.

**Part-Time Students Only:** part-time students are covered for **accident** insurance **only** 24 hours a day through to the end of the academic calendar (August 31).

**For additional information, please contact School Nurse @ 341-4870.**

**\*\* For complete emergency procedures, please refer to the Emergency Procedure Index located adjacent to every doorway.**

## **SECTION VI**

## **METHODS FOR SUCCESS**

### **Student Responsibilities:**

In order to facilitate the learning process and make the most of the college experience, students should:

1. **Attend all classes and lab sessions.** You are responsible for all material presented in class. If you miss classes, the instructor is not required to present the material again.
2. **Be on time.** It is recommended that you arrive five to ten minutes early for class to get settled. Arriving late for patient care or meetings in the work environment would not be professional nor would it be tolerated by your employer. Arriving late for class will cause you to miss important material and quizzes, as well as lower your grades.
3. **Be prepared** to spend a minimum of two hours of studying outside of class for every hour in class or lab. In order to master lab skills, you will need to use practice lab time.
4. **Review assigned readings prior to attending class.** You are responsible for all material in the assigned readings.
5. **Maintain a working knowledge of previously presented material.** The Physical Therapist Assistant curriculum is considered cumulative. In addition, information learned in earlier courses such as Anatomy & Physiology and Psychology will be required to successfully complete Physical Therapist core courses. Due to the heavy reliance of the PTA core curriculum on the A&P courses, they must successfully be completed within the five year time span prior to entering the core curriculum. A "C" is required in Anatomy & Physiology I & II and Basic Exercise Physiology to continue in sequence through the program.
6. **Maintain a 75% average in all core coursework.** Students are expected to keep track of their grades according to the course syllabus. Successful completion of PTA --- course requires a C (75%) and is necessary to progress to the next semester.
7. **Complete all assignments on time.** Late assignments will be penalized as outlined in the course syllabus.
8. **Actively participate in all classes and labs.** Ask appropriate questions and provide answers. A portion of your final grade is based on classroom participation.
9. **Access the web-enhanced portions of your classes.**
10. **Adhere to the Code of Student Conduct** published in the Orange County Community College Student Handbook and to the American Physical Therapy Association's GUIDE FOR PROFESSIONAL CONDUCT, STANDARDS OF ETHICAL CONDUCT FOR THE PHYSICAL THERAPIST ASSISTANT, and STANDARDS OF PRACTICE FOR PHYSICAL THERAPY. Failure to adhere to these policies will result in immediate dismissal from the Physical Therapist Assistant program.

### **Faculty Responsibilities:**

In order to facilitate the student's learning experience, the faculty will:

1. **Prepare and present a comprehensive education curriculum** based on the guidelines established by CAPTE and the APTA.
2. **Provide the students with appropriate professional role models.** Faculty will consistently demonstrate good medical ethics, organizational skills, and compassion for others. Faculty will continue to further their knowledge through advanced degree coursework, continuing education courses, reading of professional journals, work in clinical facilities, and educational interaction with their peers.

3. **Be available to meet with students.** Faculty will be available during posted office hours. Student may also arrange to meet with faculty at mutually convenient hours.
4. **Keep student apprised of academic status in each core course.** Faculty will assess academic progress through the use of written oral exams, quizzes, lab practicals, papers, classroom participation and oral presentations. Faculty will grade these in a timely fashion and provide students with feedback. Faculty will hold mid-semester conferences with each student to discuss student performance. Faculty members may elect to develop a Learning Contract for students who are having difficulties with a particular course. Students who are having difficulty will be requested to meet with faculty on a regular basis.
5. **Provide students with information** tutoring, the counseling center, and other academic support services.

## **REQUIRED TEXTS**

### **PTA101 – PTA I**

Curtis & Newman, THE PTA HANDBOOK: KEYS TO SUCCESS IN SCHOOL & CAREER FOR THE PTA  
Goodman, PATHOLOGY FOR THE PHYSICAL THERAPIST ASSISTANT  
Lippert, CLINICAL KINESIOLOGY FOR PHYSICAL THERAPIST ASSISTANTS  
Martin & Kessler, NEUROLOGICAL INTERVENTION FOR PTAs  
Pierson, PRINCIPLES & TECHNIQUES OF PATIENT CARE  
Schmitz & O'Sullivan, PHYSICAL REHABILITATION ASSESSMENT & TREATMENT

### **PTA103 – INTRODUCTION TO PHYSICAL THERAPY**

Curtis & Newman, THE PTA HANDBOOK: KEYS TO SUCCESS IN SCHOOL & CAREER FOR THE PTA  
Martin & Kessler, NEUROLOGICAL INTERVENTION FOR PTAs  
Mosby's MEDICAL NURSING & ALLIED HEALTH DICTIONARY  
Pierson, PRINCIPLES & TECHNIQUES OF PATIENT CARE

### **PTA105 – MEDICAL CONDITIONS FOR THE PTA**

Goodman, PATHOLOGY FOR THE PHYSICAL THERAPIST ASSISTANT  
Leonard, QUICK & EASY MEDICAL TERMINOLOGY  
Martin & Kessler, NEUROLOGICAL INTERVENTION FOR PTAs  
Mosby's MEDICAL NURSING & ALLIED HEALTH DICTIONARY  
Schmitz & O'Sullivan, PHYSICAL REHABILITATION ASSESSMENT & TREATMENT

### **PTA102 – PTA II**

Prentice, THERAPEUTIC MODALITIES FOR PT

### **PTA104 – KINESIOLOGY**

Biel, TRAIL GUIDE TO THE BODY  
Lippert, CLINICAL KINESIOLOGY FOR PHYSICAL THERAPIST ASSISTANTS

### **PTA201 – PTA III**

Goodman, PATHOLOGY FOR THE PHYSICAL THERAPIST ASSISTANT  
Kisner & Colby, THERAPEUTIC EXERCISE: FOUNDATIONS & TECHNIQUES  
Magee, ORTHOPEDIC PHYSICAL ASSESSMENT  
Martin & Kessler, NEUROLOGICAL INTERVENTION FOR PTAs  
Schmitz & O'Sullivan, PHYSICAL REHABILITATION ASSESSMENT & TREATMENT

### **PTA207 – TEST & MEASUREMENT SKILLS FOR THE PTA**

Daniels & Worthingham, MUSCLE TESTING  
Norkin & White, MEASUREMENT OF JOINT MOTION: A GUIDE TO GONIOMETRY

### **PTA202 – PTA IV**

Dole & Chafetz, Pediatric Rehab Notes, Evaluation & Intervention Pocket Guide  
All textbooks purchased to date

### **PTA208 – CONTEMPORARY PRACTICE IN PHYSICAL THERAPY**

Curtis & Newman, THE PTA HANDBOOK: KEYS TO SUCCESS IN SCHOOL & CAREER FOR THE PTA

**SUGGESTED TEXTBOOKS**

Andrews, REHABILITATION OF THE INJURED ATHLETE

Effgen, MEETING THE PHYSICAL THERAPY NEEDS OF CHILDREN

Giles, A GUIDE TO SUCCESS

Gulick, ORTHO NOTES - Clinical Examination Pocket Guide

Irwin & Techlin, CARDIOPULMONARY PHYSICAL THERAPY

Pauls & Reed, QUICK REFERENCE TO PHYSICAL THERAPY

Rothstein, THE REHAB SPECIALIST'S HANDBOOK

Techlin, PEDIATRIC PHYSICAL THERAPY

Various licensure examination study guides

APTA – GUIDE TO PHYSICAL THERAPIST PRACTICE

**\* IT IS STRONGLY RECOMMENDED THAT ALL PTA STUDENTS BECOME MEMBERS OF THE APTA.**

## CLINICAL EDUCATION SITES: 2012-2013 AY

Abilities First  
230 North Road  
Poughkeepsie, NY 12601  
Diane Pedevillamo, PT  
845/452-0774 x515

Access (Monroe) Physical Therapy & Wellness  
505 Route 208  
Monroe, NY 10950  
Jessica Bach, PT  
845/782-3200

&

Access (Montgomery) Physical Therapy & Wellness  
20 Walnut Street, Suite B  
Montgomery, NY 12549  
Montgomery, NY 12549  
Shannon Albanese, PT/Janet Polubjak, PTA  
845-457-5555

&

Access (Port Jervis) Physical Therapy & Wellness  
181 Jersey Avenue  
Port Jervis, NY 12771  
Shannon Albanese, PT  
845/858-9999

AHRC – George Robinson Center  
PO Box 379, Mt. Hope Road  
Middletown, NY 10940  
Teresa Gurrieri, PT  
845/344-2292

AHRC – Pre School Learning Experience  
1145 Little Britain Road, Suite 300  
New Windsor, NY 12553  
Lisa Hess, PT  
845/564-1855

Alliance Hand & Physical Therapy  
330 Franklin Turnpike  
Mahwah, NJ 07430  
Colleen Fitzsimmons, PT, DPT, CCCE  
(201) 684-1444

Allied Services Rehab Hospital  
PO Box 1103, 475 Morgan Highway  
Scranton, PA 18501  
Barbara Murphy, PT  
570/348-1300

Beth Israel Medical Center  
Linsky-Department of Rehab Therapies  
1<sup>st</sup> Avenue & 16 Street  
New York, NY 10003  
212/870-9466

BOCES – Orange/Ulster Counties  
Gibson Road  
Goshen, NY 10924  
Bill Lynch, PT  
845/291-0100

BOCES – Rockland County  
65 Parrott Road  
West Nyack, NY 10994  
Nancy Shakauri, PT  
845/627-4796

BOCES – Sullivan County  
6 Weirk Avenue  
Liberty, NY 12754-2117  
Andrea Falcone, PT  
845/295-4108

Bon Secours Hospital  
160 Main Street  
Port Jervis, NY 12771  
Karen Little, PT  
845/858-7000 x7112

Burke Rehabilitation Center  
785 Mamoroneck Avenue  
White Plains, NY 10605  
914/597-2396

Campbell Hall Health Care Center  
23 Kiernan Road  
Campbell Hall, NY 10916  
David Marks, PT  
845/294-8154

Catskill Orange Physical Therapy  
30 Hatfield Lane, Suite 201  
Goshen, NY 10924  
845/294-3446 x38

&

Catskill Orange Physical Therapy  
75 Crystal Run Road, Suite #135  
Middletown, NY 10940  
Carli Van Wagenen, PT  
845/692-6772 (845/294-3446 x23)

Catskill Regional Medical Center – PT Dept.  
PO Box 800, Harris-Bushville Road  
Harris, NY 12742  
Kristine Conologue, MS, PT  
845/794-3300 x2141

Center for Discovery  
PO Box 840  
Harris, NY 12742  
Liza Gradziel, PT, CCCE  
794-1400

Center for Spectrum Services (Children's Annex)  
40 Kukuk Lane  
Kingston, NY 12401  
Sarah Corrigan, PT  
336-2515 x125

Danbury Hospital  
24 Hospital Avenue, PM & R  
Danbury, CT 06810  
Melissa Cornelis, PT  
203/739-7000 (page 0255)

Drayer PT Institute  
13A Main Street, Suite 4  
Sparta, NJ 07871  
Tara Gerber, PT  
973/726-7400

&

Drayer PT Institute  
100 Wheatfield Drive  
Milford, PA 18337  
Penny Chase, PT  
570/296-5922

Elant @ Fishkill  
130 North Road  
Beacon, NY 12508  
Donna Frazier, OTR  
845/831-8704 x837

&

Elant @ Goshen  
46 Harriman Drive  
Goshen, NY 10924  
Michael Paterno, PT/Lynn Kensell, OTR/L  
845/291-3743

&

Elant @ Newburgh  
172 Meadow Hill Road  
Newburgh, NY 12550  
Rick Linken, PT  
845/564-1700 x5644

&

Elant @ Wappingers  
37 Mesier Avenue  
Wappingers Falls, NY 12590  
Kendra Gleason, OTR  
297-3793

Ellenville Regional Hospital  
Route 209  
Ellenville, NY 12428  
Theresa Marcel, PT  
845/647-6400 x225

Fitness Forum  
982 Main Street, Suite 7  
Fishkill, NY 12524  
Paul Zadvoski, PT  
845/896-0264

Full Range PT  
135 Clove Branch Road  
Hopewell Junction, NY 12533  
Mel Cave, PT  
845/223-7438

&

Full Range PT  
30 Columbia Street  
Poughkeepsie, NY 12601  
Mel Cave, PT  
592-7740

George Giovannone, PT  
1219 Dolsontown Road  
Middletown, NY 10940  
845/344-1899

Good Samaritan Hospital  
Route 59  
Suffern, NY 10910  
Howard Wilen, PT  
845/368-6254

Health Alliance of the Hudson Valley:

Benedictine Hospital  
Physical Medicine 7 Rehab  
2 Spellman, 105 Mary's Avenue  
Kingston, NY 12401  
Kevin Rudolph, PT  
845/338-2500 x4933

&

Kingston Hospital  
396 Broadway – 4<sup>th</sup> Floor (Rehab)  
Kingston, NY 12401  
Barbara Engel, OTR  
845/334-2870

Helen Hayes Hospital  
Route 9W  
West Haverstraw, NY 10993  
Mary Nishimoto, PT  
845/786-4000

Highland Physical Therapy  
280 Route 299, Suite 1  
Highland, NY 12528  
Jeffrey M. Gersch, PT  
845/691-9169

Inspire/CP Center  
2 Fletcher Street  
Goshen, NY 10924  
Debbi Santulli, PT  
845/294-0816

Kingston Physical Therapy & Sports Rehab PC  
340 Plaza Road  
Kingston, NY 12401  
Charissa Makish, PTA/Mark Garcia, PT  
845/339-4772

Moriarity Physical Therapy  
301 Manchester Road  
Poughkeepsie, NY 12603  
Nancy Moriarity, PT  
845/454-4137

Frank Nani Physical Therapy  
345 North Main Street  
New City, NY 10956  
Frank Nani, PT  
845/638-4040

Newton Medical Center  
175 High Street  
Newton, NJ 07860  
Linda J. Jehl, PT/Loretta Ritter, PT  
973/579-8600

Northern Dutchess Hospital  
10 Springbrook Avenue, PO Box 5002  
Rhinebeck, NY 12572-5002  
Kathy Rubsam, CCCE  
845/871-3427

Nyack Manor  
PO Box 256, 476 Christian Herald Road  
Valley Cottage, NY 10989  
Robert D'Elia, PT  
268-6861

Orange Lake Physical Therapy  
239 Lakeside Road #2  
Newburgh, NY 12550  
Louis Catalucci, PT  
845/566-4303

Orange Physical Therapy  
495 Schutt Road Extension, Suite 9  
Middletown, NY 10940  
Aaron Loeffler, PT  
845/342-5170

Orange Regional Medical Center  
707 East Main Street  
Middletown, NY 10940  
Ann McEnroe-O'Connor, PT  
845/333-4360 (Rehab & Acute)

The Rehab Center @ Crystal Run  
110 Crystal Run Road  
Middletown, NY 10940  
Diane Strysko, OTR  
845/695-8731 (Out-Pt)

Orthopedic Assoc. of Dutchess County  
1 Webster Avenue, Suite 401  
Poughkeepsie, NY 12601  
Heather Fassell, DPT/Keith Clare, PT  
845/454-8377

&

Orthopedic Assoc. of Dutchess County  
400 Westage Business Center Drive  
Fishkill, NY 12524  
845/897-1070

Peak PT Inc.  
260 North Street  
Newburgh, NY 12550  
Dan Fishman, PT  
845/565-5054

&

Peak PT Inc.  
84 East Main Street  
Washingtonville, NY 10992  
Charles Walker, PT  
845/496-1616

&

County PT  
40 Sunset Ridge  
New Paltz, NY 12561  
Patrick Clough, PT  
845/256-0820

Phelps Memorial Hospital Center  
701 North Broadway  
Sleepy Hollow, NY 10591  
Matthew Landfield, PT  
914/366-3703

Physical Therapy Professional Care  
78 Front Street, Suite 62  
MAILING: PO Box 46  
Port Jervis, NY 12771  
Laura Mulhare, PT  
845/856-5623

Pike Physical Therapy & Fitness Center  
1346 Route 739  
Dingmans Ferry, PA 18323  
Donna Kleso, Manager  
570/686-4300

T. Piserchia, MD, PC  
PO Box 1017, 22 Canal Street  
Port Jervis, NY 12771  
Garry Hazen, PT  
845/858-8567

Premier Care Physical Therapy  
55 Sturgis Road, Suite 2  
Monticello, NY 12701  
Michael Parlapiano, PT, DPT  
845/707-4371

Rockland Orthopedics & Sports Medicine  
Shop Rite Plaza – 785 Route 17M  
Monroe, NY 10950  
Karen Tooma, PT  
845/782-1900

Sports Physical Therapy of NY, PC – Somers  
293 Route 100, Suite 107  
Somers, NY 10589  
Phil DeMase, PT  
914/276-2520

&

Sports Physical Therapy of NY, PC  
19 Perlman Drive  
Spring Valley, NY 10977  
Aimee Alexander  
845/425-9475

Laura Stevens, PT  
550 Route 32, PO Box 729  
Highland Mills, NY 10930  
845/928-2426

St. Anthony Community Hospital Ctr for Physical Rehab  
153 South Route 94  
Warwick, NY 10990  
845/987-5150

&

St. Anthony Hospital  
15 Maple Avenue  
Warwick, NY 10992  
Agnies Zkapindral, PT  
845/987-5501

St. Francis Hospital (In Pt OT/PT)  
241 North Road (5 Spellman Classroom)  
Poughkeepsie, NY 12601  
Brenda Koeppe, PT  
845/431-8780 (Beeper: 845/455-5528)

&

Therapy Connection (Satellite)  
241 North Road  
Poughkeepsie, NY 12601  
845/485-5087

&

PreSchool Program-Martha Lawrence Site  
23 Spackenkill Road  
Poughkeepsie, NY 12603  
Mary Thompson, PT/Sharon Duffy-Batt, MPS, OTR  
845/483-5000 (13746)  
845/462-0079 (Spackenkill Site)

St. Luke's-Cornwall Hospital (Cornwall)  
19 Laurel Avenue  
Cornwall, NY 12518  
Susan Claudio, PT  
845/458-4549

&

St. Luke's-Cornwall Hospital (Out-Pt Satellite)  
279 Main Street  
New Paltz, NY 12561  
Sue VanDerBoagart, PT  
845/256-0253

&

St. Luke's-Cornwall Hospital (Out-Pt Satellite)  
575 Hudson Valley Avenue, Suite 100  
New Windsor, NY 12553  
John Gillinder, PT  
845/784-3777

&

St. Luke's-Cornwall Hospital (Newburgh)  
70 DuBois Street  
Newburgh, NY 12550  
Jeanne Campbell, OTR  
845/568-2422 (PT Dept: 568-2395) (Hosp.: 561-4400)

Ten Broeck Commons  
One Commons Drive  
Lake Katrine, NY 12449  
Christine MacMorran, OTR/L  
336-6666 x650

VA Hudson Valley Health Care System  
Castle Point Campus  
Castle Point, NY 12511  
Maryann Barnhart, PTA  
845/831-2000 x5312

Valley View Center for Nursing Care  
Glenmere Cove Road, Box 59  
Goshen, NY 10924  
Sam Nagappan, PT  
845/291-4110

Vassar Brothers' Hospital  
Reade Place  
Poughkeepsie, NY 12601  
Jackie Lamando, PT  
845/437-3036 (483-7391 Out-Pt Don)

Wayne Memorial Rehab Services  
Buist Road  
Milford, PA 18337  
Karen Chabak, PT  
570/296-6358

Westchester Medical Center  
Physical Therapy Dept – Main Hospital  
Valhalla, NY 10595  
Gail Cherry, PT  
914/493-7244

West Milford PT Center  
2024 Macopine Road, Suite E  
West Milford, NJ 07480  
Anne Kane, PT  
973/728-5588

Wingate @ Beacon  
10 Hastings Drive  
Beacon, NY 12508  
Karen Chase, PTA  
845/440-1600 x673

Wingate @ Dutchess  
3 Summit Court  
Fishkill, NY 12524  
Rebecca Hamann, PTA/Theresa Vitale  
845/896-1500 x674

Wingate @ Ulster  
1 Wingate Way  
Highland, NY 12528  
Kathy Ahrens, PTA  
845/691-6800 x671

## VIDEO LIBRARY LIST

001	---	The World of Physical Therapy – APTA
002	---	Effective Communication & Feedback
003	---	Medicare Prospective Payment Systems (DRG's)
004	---	Dynex III – Instructional video
005	---	Understanding the Totality: Margaret Rood
006	---	Urias Stroke Rehab Video
007	---	Cognition After Stroke
008	---	Brunnstrom's Techniques for Facilitation of UE Motion of Stroke Pt
009	---	Head Injury – Functional Outcomes & Community Re-entry – Part 1 & 2
010	---	Head Injury – Functional Outcomes & Community Re-entry – Part 3
011	---	Cognitive Levels of Recovery: Approach to Head Injured Patient
012	---	Evaluation of Pt w/Brain Dysfunction Secondary to Traumatic Head Injury
013	---	Bobath – An Interview
014	---	Bobath – Neurophysiological Basis of Bobath Approach to Treatment - I
015	---	Bobath – Neurophysiological Basis of Bobath Approach to Treatment – II
016	---	Bobath – Assessment & Tx Planning – Child with CP
017	---	Bobath – Assessment & Tx Planning – Adult w/Hemiplegia
018	---	Development of Motor & Reflex Behavior
019	---	Neuromotor Assessment
020	---	Supervision – Development of Therapeutic Competence
021	---	Challenged Equestrians
022	---	Burn Care – A Team Challenge
023	---	Burnscar Management – JOBST
024	---	Ball Dynamics, Spinal Stabilization: Utilizing the Swiss Ball
025	---	Quadraplegia – Physical Therapy of Patient
026	---	Above Knee Amputee – Beginning Prosthetic Training
027	---	Above Knee Amputee – Beginning Prosthetic Training
028	---	Shaping the Residual Limb – Stump Wrapping & Temporary Prosthesis
029	---	Preparation for Functional Activities: Exercise & Ambulation
030	---	Reciprocating Gait Orthosis
031	---	Function In Gait: Facilitating Lower Extremity Part I & II
032	---	Function In Gait: Facilitating Lower Extremity Part III
033	---	Canes & Walkers Part I
034	---	Canes & Walkers Part II
035	---	Assisted Transfers
036	---	Children w/Minor CNS Disorder – Eval & Tx Part I & II
037	---	Children w/Minor CNS Disorder – Eval & Tx Part III
038	---	CES – Basic Physiological Response
039	---	CES – Systematic Approach to Clinical Application
040	---	Parkinsons Disease
041	---	Treat Your Own Back – Robin MacKenzie
042	---	Muscle Testing – Program 1 – Trunk & Hip Muscles – Length Tests
043	---	Muscle Testing – Program 2 – Trunk & Hip Muscles – Strength Tests
044	---	Muscle Testing – Program 3 – Shoulder Joint & Shoulder Girdle Muscles
045	---	Muscle Testing – Program 4 – Elbow, Forearm & Hand Muscles
046	---	Muscle Testing – Program 5 – Lower Extremity Muscles
047	---	The Art of Clinical Instruction
048	---	Cervical Traction
049	---	Lumbar Traction
050	---	Toward Independence: Importance in Wheelchair Seating
051	---	Therapist to Teacher
052	---	Physical Exam of the Musculoskeletal System – Introduction
053	---	Physical Exam of the Musculoskeletal System – The Knee
054	---	Physical Exam of the Musculoskeletal System – The Hip
055	---	Physical Exam of the Musculoskeletal System – Shoulder & Elbow

056 --- New Moves Program 2 – Basic Wheelchair Skills  
 057 --- New Moves Program 3 – Advanced Wheelchair Skills  
 058 --- New Moves Program 4 – Wheelchair Comfort & Performance  
 059 --- Phoresor II (TM) Iontophoretic Drug Delivery System  
 060 --- Amputee Therapy  
 061 --- Upper Extremity Amputee Prosthesis  
 062 --- Medication & Dementia  
 063 --- Assessment of the Geriatric Patient w/Total Hip Replacement  
 064 --- Infant Motor Development: A Look at the Phases  
 065a --- Perspectives of Dying: #1 & #2  
 065b --- Perspectives of Dying: #3 & #4  
 066 --- Temperature, Pulse, & Respiration  
 067a --- Neurodevelopmental Analysis: Neonate – 3 months  
 067b --- Neurodevelopmental Analysis: 4 – 7 months  
 067c --- Neurodevelopmental Analysis: 8 – 12 months  
 068a --- Use of Your TENS  
 068b --- TENS Application Tips  
 069 --- AOTA Ethics  
 070 --- Passive Range of Motion – In-service Education  
 071 --- Positioning, Turning & Transferring  
 072a --- Head Trauma: A System of Care Part 1  
 072b --- Head Trauma: A System of Care Part 2  
 073 --- Knee Rehabilitation  
 074 --- Spinal Cord Injury  
 075 --- Low Back Pain Problem Management  
 076 --- Total Gym  
 077 --- Total Hip Joint Replacement  
 078 --- Modalities of Physical Therapy  
 079 --- A Parent’s View of Technology  
 080 --- Perspectives on Aging  
 081 --- Instruction in Range of Motion  
 082 --- Burn Management - 1  
 083 --- Burn Management - 2  
 084 --- Burn Management – 3  
 085 --- Decubitus Ulcers: Cleansing & Debridement  
 086 --- Infection Control: An AIDS Update  
 087 --- Ten Most Commonly Used Spinal Manipulations  
 088a --- Low Back Pain – Tape 1  
 088b --- Low Back Pain – Tape 2  
 088c --- Low Back Pain – Tape 3  
 088d --- Low Back Pain – Tape 4  
 088e --- Low Back Pain – Tape 5  
 088f --- Low Back Pain – Tape 6  
 088g --- Low Back Pain – Tape 7  
 088h --- Low Back Pain – Tape 8  
 089a --- Spinal Cord Injury & Disease Update – Tape 1  
 089b --- Spinal Cord Injury & Disease Update – Tape 2  
 089c --- Spinal Cord Injury & Disease Update – Tape 3  
 089d --- Spinal Cord Injury & Disease Update – Tape 4  
 089e --- Spinal Cord Injury & Disease Update – Tape 5  
 089f --- Spinal Cord Injury & Disease Update – Tape 6  
 090 --- Block Aids  
 091 --- Health Sciences Consortium – Low Back Flexion Exercises  
 092 --- Health Sciences Consortium – Self-Range of Motion for Lower Extremity Stretching  
 093 --- Easy-Up Handle for Walkers  
 094 --- Sensory Integration Therapy

095	---	Perspectives of Aging, #1, 2, 3, 4
096	---	Post-Polio Syndrome
097	---	Station, Gait & Cerebella Function
098	---	It Won't Happen to Me
099	---	Basic Elements of Clinical Training
100	---	EASYTRANS – Easy Transfer System
101	---	Standing Aid of Iowa
102	---	Assessing Breath Sounds
103	---	Physical Therapy: 1900's
----	---	STROKE VIDEOS FOR PATIENTS, FAMILY & STUDENTS (housed in the OTA Lab-see Instructor to view)
104	---	Basic Nursing Care; Medical Asepsis
105	---	Application of Binders & Bandages
106	---	Medical Asepsis
107	---	Use of Patient Lifters
108	---	Positioning to Prevent Complications
109	---	Transfer Activities & Ambulation
110	---	Topical Treatment of Burns
111	---	Management of the Burned Patient
112	---	Rehabilitation of the Patient w/Stroke
113	---	The Hyperactive Child
114	---	Adapted Aquatics
115	---	The Young Spastic Child
116	---	Verbal Barriers to Communication
117	---	Effective Listening
118	---	Medical Asepsis
119	---	Effective Speaking Program 1
120	---	Eval of Pt w/Brain Dysfunction Secondary to Traumatic Head Injury
121	---	Caring for a Family Member at Home
122	---	EASY DOES IT! Safety-Transfers-Mechanical Lifts
123	---	Proprioceptive Neuromuscular Facilitation: Principles & Techniques
124	---	Ball Dynamics: Orthopedic, Sports Medicine & Fitness Exercises Using the Swiss Gym Ball
125	---	Basic Differences
126	---	Normal Walking: An Overview Based on Gait Analysis
127	---	The Treatment of Attention Deficit Disorder in Adults
128	---	Principles of Pathologic Gait in Cerebral Palsy
129	---	Spinal Injuries: Recovery of Function
130	---	Spinal Injury
131	---	Adapted Aerobic Video, American Heart Assoc., Helen Hayes Hospital
132	---	Hip Replacement Therapy
133	---	Wound Care & Applying Dressings
134	---	Ethics, Residents' Rights, and Dignity
135	---	You're Not Alone
136	---	TV Show, WITHOUT PITY
137	---	Normal Infant Reflexes & Development
138	---	Pediatric Therapy – A Career in Demand
139	---	Proprioceptive Neuromuscular Facilitation: Principles & Techniques
140	---	Rehabilitation of the Injured: Work Capacity Evaluation & Work Hardening
141a	---	Fundamentals of Therapeutic Massage – Massage Overview & Draping Procedures
141b	---	Fundamentals of Therapeutic Massage – Body Mechanics
141c	---	Fundamentals of Therapeutic Massage – Massage Manipulations
141d	---	Fundamentals of Therapeutic Massage – Massage Techniques
142	---	Feldendrais Awareness Through Movement
143	---	The Living Body – The Aging Process
144	---	Living Fully Until Death
145	---	Death

146	---	Reservoirs of Strength
147	---	Living Fully Until Death
148	---	Aquatics for Children w/Disabilities
149	---	The Mobile Prone Stander
150	---	New Dimensions in Health Promotion for Persons w/Spinal Cord Injury
151	---	PT – High Volt Galvanic Stimulator
152	---	Standing Room Only/Making Strides
153	---	Sabolich Prosthetic & Research Center
154	---	Barrier Free Lists of New England “Helping You Achieve Greater Mobility”
155	---	A Walk w/Laura
156	---	Adapted Aerobic Video, American Heart Association
157	---	Danbury Hospital Physical Medicine & Rehab: Your Route to Prof Development
158	---	Jumping Into Plyometrics
159	---	Willowbrook: The Last Great Disgrace (Mental Retardation)
160	---	Viewer’s Guide Normal Development of Walking
161	---	Positioning the Physically Challenged Student
162	---	Who Are They Now?
163	---	Prosthetic Fitting & Self-Care Skills in a Bilateral Above Elbow Traumatic Amputee
164	---	Cultural Diversity in Physical Therapy
165	---	Hands-On Health Care: The Profession of Physical Therapy
166	---	Bodyblade
167	---	People Walking: Pathological Patterns & Normal Changes over the Lifespan
168	---	Grace
169	---	Neuromotor Assessment & Treatment Planning: Cerebral Palsy-Spastic Quadriplegia
170	---	Normal Hand Development: Birth to 15 months
171	---	Advanced Gait Training for Lower Extremity Amputee Patients
172	---	Respiratory Management of the Patient with Quadriplegia
173	---	Aqua Exercise to Reduce “Back Pain”
174	---	Pool Exercise Program
175	---	Therapy & Beyond: Aquatic Therapy for Spinal Cord Injuries
176	---	Functional Training for Physical Rehabilitation
177a	---	Functional Fitness & Rehabilitation Lower Extremity – Video 1
177b	---	Functional Fitness & Rehabilitation Lower Extremity – Video 2
177c	---	Functional Fitness & Rehabilitation Lower Extremity – Video 3
178	---	The ThAIRapy Vest
179	---	Urinary Incontinence in Women
180	---	Bladder Leakage

## PTA DEPARTMENT BOOK LIST

- A**
- ADULT EXERCISE, Pfau, Therapy Skill Builders
  - ADULT HEMIPLEGIA, EVALUATION & TREATMENT, Bobath
  - ADULT HYDROTHERAPY, Reid-Campion
  - ADULT POSITIONS, TRANSITIONS & TRANSFERS, Ossman & Campbell
  - ADVANCED TREATMENT TECHNIQUES FOR THE MANUAL THERAPIST: NECK, Muscolino
  - AGING: THE HEALTH CARE CHALLENGE, 2<sup>nd</sup> & 3<sup>rd</sup> Ed., Lewis
  - ALZHEIMER'S – A CARE GIVERS GUIDE & SOURCE BOOK, Gruetzner
  - AMERICAN RED CROSS RESPONDING TO EMERGENCIES
  - AMPUTATIONS & PROSTHETICS: A CASE STUDY APPROACH & INSTRUCTOR'S GUIDE, May
  - ANATOMY & HUMAN MOVEMENT, STRUCTURE & FUNCTION, 2<sup>nd</sup> Ed, Palastanga, Field, Soames
  - ANATOMY FLASHCARDS FOR HEALING MASSAGE TECHNIQUES, Johnson & Laterell
  - ANATOMY OF CLINICAL RESEARCH, Stein
  - ANATOMY OF MOVEMENT, Calais-Germain
  - ANATONY: PALPATION & SURFACE MARKINGS, Field
  - ANATOMY TO COLOR & STUDY, Poritsky
  - APPLIED ANATOMY & KINESIOLOGY, Brown
  - APPLIED KINESIOLOGY, Jansen & Schultz
  - AQUATIC EXERCISE, Sova
  - ACUATICS, Dulcy
  - AQUATICS: THE COMPLETE REFERENCE GUIDE FOR AQUATIC FITNESS PROFESSIONALS, Sova
  - AQUATIC THERAPY USING PNF PATTERNS, Jamison & Ogden
  - AROMATHERAPY FOR BODYWORKERS, Shutes & Weaver
  - AROMATHERAPY FOR MASSAGE PRACTITIONERS, Martin
  - ASSESSMENT IN OCCUPATIONAL THERAPY & PHYSICAL THERAPY, VanDeusen & Brunt
  - AT ARM'S LENGTH: GOALS FOR ARM & HAND FUNCTION, Siegling & Click
  - ATHLETE'S SHOULDER, Andrews/Wilk
  - ATLAS OF LIMB PROSTHETICS, 2<sup>nd</sup> Ed., Ed by Bowker & Michael
  - ATLAS OF PATHOPHYSIOLOGY, 2<sup>nd</sup> Ed, Anatomical Chart Company
  - ATTENTION DEFICIT DISORDER: STRATEGIES FOR SCHOOL-AGE CHILDREN, Jones
  - ATYPICAL INFANT DEVELOPMENT, 2<sup>nd</sup> Ed, Ed by Hanson
- B**
- BACK IN BALANCE, Headley
  - BALANCE, APTA
  - BALANCED BODY, 2<sup>nd</sup> Ed, Sceumann
  - BARRIER FREE DESIGN: THE LAW, Vol II, Eastern Paralyzed Veterans
  - BARR'S HUMAN NERVOUS SYSTEM: AN ANATOMICAL VIEWPOINT, 8<sup>th</sup> Ed, Kiernan
  - BASIC BIOMECHNICS, Hall
  - BASIC CLINICAL MASSAGE THERAPY, 2<sup>nd</sup> Ed, Clay & Pounds
  - BASIC HUMAN ANATOMY, O'Rahilly
  - BASIC HUMAN NEUROPHYSIOLOGY, Guyton
  - BASIC REHABILITATION TECHNIQUES, 3<sup>rd</sup> Ed, Aspen Publ
  - BEARD'S MASSAGE, Wood & Becker
  - BEGINNINGS: PT & THE APTA, APTA
  - BIOFEEDBACK & RELATED THERAPIES IN CLINICAL PRACTICE, Mercer
  - BIOMECHANICS & MOTOR CONTROL OF HUMAN MOVEMENT, 3<sup>rd</sup> Ed, Winter
  - BIOMECHANICAL BASIS OF HUMAN MOVEMENT, 2<sup>nd</sup> Ed, Hamill & Knutzen
  - BIOMECHANICS OF SPORTS & EXERCISE, McGinnis
  - BIOPHYSICAL FOUNDATIONS OF HUMAN MOVEMENT, 2<sup>nd</sup> Ed, Abernathy, et al
  - BODY MECHANICS MANUAL
  - BONES & JOINTS, CLINICAL PEDIATRICS VII, Foote
  - BRAIN INJURY: SURVIVOR & CAREGIVER EDUCATION MANUAL, Aspen Reference Group
  - BREAST MASSAGE, Curties

BRUNNSTROM'S MOVEMENT THER. IN HEMIPLEGIA, NEUROPHYSIOLOGICAL APPROACH, Sawner & LaVigne  
BUILDING A MEDICAL VOCABULARY, Leonard

- C**
- CARDIAC REHABILITATION, Stippig, Berg & Keul
  - CARDIOPULMONARY PHYSICAL THERAPY, 3<sup>rd</sup> Ed, Ed by Irwin & Tecklin
  - CARDIOPULMONARY REHABILITATION: BASIC THEORY & APPLICATION, 2<sup>nd</sup> Ed, Brannon, Foley, Starr & Black
  - CARE OF THE LOW BACK: A PATIENT GUIDE, Russell & Highland
  - CASE STUDIES IN ALLIED HEALTH ETHICS, Veatch & Flack
  - CASH'S TEXTBOOK OF GENERAL MEDICAL & SURGICAL CONDITIONS
  - CASH'S TEXTBOOK OF PHYSIOTHERAPY IN SOME SURGICAL CONDITIONS
  - CHAIR EXERCISE MANUAL, AN AUDIO ASSISTED PROGRAM OF BODY DYNAMICS, Desca-Garnet
  - CHEST DISORDERS IN CHILDREN: A SYMPOSIUM, Ed by Hislop & Sanger
  - CHILD ABUSE, MEDICAL GNOSIS & MANAGEMENT, 2<sup>nd</sup> Ed, Reece & Ludwig
  - CHILD WITH DISABLING ILLNESS, Downey & Low
  - CHILDREN MOVE TO LEARN, A GUIDE TO PLANNING GROSS MOTOR ACTIVITIES, Kline
  - CHRONIC ILLNESS & THE QUALITY OF LIFE, Strauss
  - CLAYTON'S ELECTROTHERAPY, Tundall
  - CLINICAL APPLICATIONS FOR MOTOR CONTROL, Montgomery & Connolly
  - CLINICAL ASSESSMENT PROCEDURES IN PHYSICAL THERAPY, Palmer & Epler
  - CLINICAL BIOMECHANICS, Dvir
  - CLINICAL CASE STUDY GUIDE TO ACCOMPANY PRIN & PRACTICE OF CARDIOPULMONARY PT, 3<sup>rd</sup> Ed, Dean
  - CLINICAL DECISION MAKING IN PHYSICAL THERAPY, Wolf
  - CLINICAL DECISION MAKING FOR THE PTA, Skinner & McVey
  - CLINICAL DECISION MAKING IN THERAPEUTIC EXERCISE, Sullivan & Markos
  - CLINICAL DECISIONS IN THERAPEUTIC EXERCISE, Nyland
  - CLINICAL EDUCATION: AN ANTHOLOGY, Vol 3, APTA
  - CLINICAL ELECTROTHERAPY, Nelson & Currier
  - CLINICAL ELECTROTHERAPY, 2<sup>nd</sup> Ed, Macker, Robinson
  - CLINICAL EXERCISE TESTING, Jones & Campbell
  - CLINICAL KINESIOLOGY, 3<sup>rd</sup> Ed, Brunnstrom
  - CLINICAL KINESIOLOGY, 5<sup>th</sup> Ed, Smith, Weiss, Lehmkuhl
  - CLINICAL KINESIOLOGY & ANATOMY, 4<sup>th</sup> Ed, Lippert
  - CLINICAL KINESIOLOGY FOR PTAs, 3<sup>rd</sup> Ed, Lippert
  - CLINICAL ORTHOPEDICS FOR THE PTA, Lesh
  - CLINICAL PRACTICE OF PEDIATRIC PT FROM THE NICU TO INDEPENDENT LIVING, Drnach
  - CLINICAL PROCEDURES IN THERAPEUTIC EXERCISE, Sullivan & Markos
  - CLINICAL WOUND MANAGEMENT, Gogia
  - COGNITIVE REHAB WORKBOOK, 2<sup>nd</sup> Ed, Dougherty & Radomski
  - COMBINING NEURO-DEV. TX & SENSORY INTEGRATION PRIN, AN APPROACH TO PED THERAPY, Blanche
  - COMMUNICATING FOR BETTER HEALTH: A GUIDE THROUGH THE MEDICAL MAZES, Beck
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  - COMPUTER PRINCIPLES FOR PHYSICAL & OCCUPATIONAL THERAPISTS, Moran & Brimer
  - CONCEPTS IN KINESIOLOGY, 1<sup>st</sup> & 2<sup>nd</sup> Eds, Groves & Camaione
  - CONCISE SYSTEM OF ORTHOPAEDICS & FRACTURES, Apley
  - CONTEMPORARY CONCEPTS OF STROKE REHAB, Rancho Los Amigos Hospital
  - CONTRACTURES AFTER A STROKE: PATHOPHYSIOLOGY, PREVENTION & TX
  - CONTROLLING MOVEMENT, Baker, Banfield, Killburn & Shufflebarger
  - COPING WITH HEAD INJURY, Slater
  - COURSE SYLLABUS: A LEARNING CENTERED APPROACH, Grunert
  - CULTURE IN REHAB, Royeen & Crabtree

- D**
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  - DEATH, SOCIETY & HUMAN EXPERIENCE, 2<sup>nd</sup> Ed, Kastenbaum

DECISION MAKING & OUTCOMES IN SPORTS REHAB, Kumbhare, Basmajian  
DELMAR'S FUNDAMENTALS OF ANATOMY & PHYSIOLOGY, Rizzo  
DETERMINING ABILITIES OF CHILDREN W/CENTRAL NERVOUS SYSTEM DISORDERS: AN ANTHOLOGY, APTA  
DEVELOPING INTEGRATED PROGRAMS, Cloimy  
DIAGNOSIS & TX OF THE SPINE, Winkel, Aufdemkampe, Matthijs, Meijer, Phelps  
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DISUSE SYNDROME: THE PREVENTABLE DISABILITY  
DOCUMENTATION FOR PTAs, Lukan  
DOCUMENTING FUNCTIONAL OUTCOMES IN PHYSICAL THERAPY, Steward & Abeln  
DORLAND'S POCKET MEDICAL DICTIONARY  
DRUG HANDBOOK FOR HEALTH PROFESSIONALS 2000, Saunders  
DUFFIELD'S EXERCISE IN WATER

**E** (THE) EDUCATED HEART, 2<sup>nd</sup> Ed, McIntosh  
EFFECTIVE DOCUMENTATION FOR PT PROFESSIONALS, Shamus/Stern  
EFFICIENCY OF HUMAN MOVEMENT, 3<sup>rd</sup> Ed, Broer  
ELECTROTHERAPEUTIC TERMINOLOGY IN PT, APTA  
ELECTROTHERAPY IN REHABILITATION, Gersh  
ENCYCLOPEDIA & DICTIONARY OF MEDICINE, NURSING & ALLIED HEALTH, 3<sup>rd</sup> & 4<sup>th</sup> Eds, Miller & Keane  
ESSENTIAL EXERCISES FOR THE CHILDBEARING YEARS, Noble  
ESSENTIAL NEUROSCIENCE, Siegel & Sapru  
ESSENTIALS OF CARDIOPULMONARY PHYSICAL THERAPY, 2<sup>nd</sup> Ed, Hillegass & Sadowsky  
ESSENTIALS OF EXERCISE PHYSIOLOGY, 2<sup>nd</sup> Ed, McArdle, Katch & Katch (& Student Study Guide & Wkbk)  
ESSENTIALS OF HUMAN DISEASES & CONDITIONS (& INSTRUCTOR MANUAL), Frazier, Drzymkowski, Doty  
ESSENTIALS OF KINESIOLOGY FOR THE PTA, Mansfield & Neumann  
ETHICAL DIMENSIONS IN THE HEALTH PROFESSIONS, 2<sup>nd</sup> & 3<sup>rd</sup> Eds, Purtilo & Cassel  
ETHICS FOR MASSAGE THERAPISTS, Yardley-Nohr  
ETHICS OF TOUCH, Benjamin & Sohnen-Moe  
EVALUATION, TREATMENT & PREVENTION OF MUSCULOSKELETAL DISORDERS, Vol I: Spine  
EVALUATION, TREATMENT & PREVENTION OF MUSCULOSKELETAL DISORDERS, Vol II: Extremities  
EVIDENCE-BASED THERAPEUTIC MASSAGE, Holey & Cook  
EVIDENCE-BASED GUIDE TO THERAPEUTIC PHYSICAL AGENTS, Belanger  
EXAMINATION OF THE HAND & UPPER LIMB, Tubiana  
EXERCISE PATHOLOGY, McArdle & Katch  
EXERCISE PHYSIOLOGY: EXERCISE, PERFORMANCE & CLINICAL APPLICATIONS, Roberts & Roberts  
EXERCISE PHYSIOLOGY: THEORY & APPLICATION TO FITNESS & PERFORMANCE, 3<sup>rd</sup> Ed, Powers & Howley  
EXERCISE TESTING & TRAINING OF APPARENTLY HEALTHY INDIVIDUALS: A HANDBOOK FOR PHYSICIANS, AHA  
EXPERIMENTS & DEMONSTRATIONS IN PT, AN INQUIRY APPROACH TO LEARNING, DiCarlo & Rosian-Ravas  
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EXTREMITIES, Worfel

**F** FACILITATION TECHNIQUES BASED ON NDT PRINCIPLES, Bly & Whiteside  
FOCUS ON THE BACK, APTA  
FOOT & ANKLE PAIN, Calliet  
FOUNDATIONS OF CLINICAL RESEARCH, 3<sup>rd</sup> Ed, Portney & Watkins  
FUNCTIONAL ANATOMY, Cael  
FUNCTIONAL ANATOMY OF THE BACK & LIMBS, W. Henry Hollinshead, Jenkins  
FUNCTIONAL HUMAN ANATOMY, Beck  
FUNCTIONAL NEUROREHABILITATION THROUGH THE LIFESPAN, Bertoti (& Workbook)  
FUNCTIONAL OUTCOMES: DOCUMENTATION FOR REHABILITATION, Quinn & Gordon  
FUNCTIONAL SOFT TISSUE EXAMINATION & TX BY MANUAL METHODS, 1<sup>st</sup> & 2<sup>nd</sup> Eds, Hammer  
FUNDAMENTAL MOVEMENT: A DEVELOPMENTAL & REMEDIAL APPROACH, McClenaghan & Gallahue  
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FUNDAMENTALS OF ANATOMY & PHYSIOLOGY, Rizzo  
FUNDAMENTALS OF THERAPEUTIC MASSAGE, 2<sup>nd</sup> Ed, Fritz

- G**
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  - GAIT ANALYSIS: THEORY & APPLICATION, Craik & Oatis
  - GAIT WORKBOOK: A PRACTICAL GUIDE TO GAIT ANATOMY, Bruckner
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  - GERIATRIC PHYSICAL THERAPY, 2<sup>nd</sup> Ed, Ed by Guccione
  - GERIATRIC REHABILITATION, Lewis & Bottomley
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  - GUIDE FOR HEALTH CARE PROFESSIONALS, SAY IT IN SPANISH, Joyce & Villanueva
  - GUIDE TO EVALUATIONS FOR THE PHYSICAL THERAPIST, Meyer
  - GUIDE TO EVALUATIONS "WITH FORMS" FOR THE PT, 1<sup>st</sup> Ed., Meyer
  - GUIDE TO GONIOMETRY, Norkin & White
  - GUIDE TO SUCCESS: PTA'S REVIEW FOR LICENSURE, Giles
  - GUIDE TO THE VISUAL EXAMINATION OF PATHOLOGICAL GAIT, 1<sup>st</sup> Ed, Bampton
- H**
- HANDBOOK FOR PARAPLEGIC & QUADRIPLEGICS, National Spinal Cord Injury Assoc.
  - HANDBOOK OF HAND SPLINTS
  - HANDBOOK OF HEALING MASSAGE TECHNIQUES, Tappan & Benjamin
  - HANDBOOK OF ILLUSTRATED EXERCISES
  - HANDBOOK OF MANUAL MUSCLE TESTING, Cutter & Kevorkian
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  - HANDBOOK OF PHYSICAL MEDICINE & REHABILITATION BASICS, Garrison
  - HANDBOOK OF PHYSICAL MEDICINE & REHABILITATION, 2<sup>nd</sup> & 3<sup>rd</sup> Eds, Krusen, Kottke & Ellwood
  - HANDBOOK OF SPORTS INJURIES, Bull
  - HANDLING THE YOUNG CP CHILD AT HOME, Finne
  - HAND PAIN & IMPAIRMENT, Calliet
  - HANDS HEAL: DOCUMENTATION FOR MASSAGE THERAPY, Thompson
  - HEAD & FACE PAIN SYNDROMES, 1<sup>st</sup> Ed, Calliet
  - HEAD INJURY: THE ACUTE CARE PHASE, Manzi & Weaver
  - HEALING MASSAGE TECHNIQUES, Tappan
  - HEALING MASSAGE TECHNIQUES: HOLISTIC, CLASSIC & EMERGING METHODS, 2<sup>nd</sup> & 3<sup>rd</sup> Eds, Tappan
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  - HIV MANUAL FOR HEALTH CARE PROFESSIONALS, Lyons & Pollard
  - HOME CARE THERAPY, Marrelli & Krulish
  - HOME HEALTH & REHABILITATION, CONCEPTS OF CARE, May
  - HOME PROGRAM INSTRUCTION SHEETS FOR INFANT & YOUNG CHILDREN, Therapy Skill Builders
  - HOME REHABILITATION PROGRAM GUIDE, Roggow, et. al.
  - HOW TO PREVENT FALLS, Carpenter
  - HUMAN DEVELOPMENT, Craig
  - HUMAN DEVELOPMENT, 2<sup>nd</sup> Ed, Papalia & Olds
  - HUMAN DISEASE: A SYSTEMATIC APPROACH, 3<sup>rd</sup> Ed, Mulvihill
  - HUMAN MOVEMENT, Higgins
  - HUMAN MUSCLE SYSTEM, Engerbretson
  - HUMAN NERVOUS SYSTEM, Nobock, Strominger & Demarest
  - HUMAN PHYSIOLOGY & MECHANISMS OF DISEASE, Guyton
- I**
- ILLUSTRATED ESSENTIALS IN ORTHOPEDIC PHYSICAL ASSESSMENT, Evans
  - ILLUSTRATED MANUAL OF ORTHOPEDIC MEDICINE, Cox & Cyriax
  - ILLUSTRATED ORTHOPEDIC PHYSICAL ASSESSMENT, 2<sup>nd</sup> Ed, Evans
  - IMPROVING FUNCTIONAL OUTCOMES IN PHYSICAL REHABILITATION, O'Sullivan & Schmitz

IMPROVING MOBILITY IN OLDER PERSONS, Lewis  
INDUSTRIAL REHAB: TECHNIQUES FOR SUCCESS, Saunders  
INDUSTRIAL THERAPY, Key  
INJURED ATHLETE, Kulund  
INSIDER'S GUIDE TO HOME HEALTH CARE, Navarra & Ferrer  
INSTRUCTOR'S GUIDE TO HUMAN DISEASES, 2<sup>nd</sup> Ed, Tamparo & Lewis  
INTEGRATING PHYSICAL AGENTS IN REHABILITATION, Hecox, et. Al.  
INTERDISCIPLINARY MODEL FOR MANAGEMENT OF A PERSON W/SPINAL INJURY, Ranch Los Amigos Hospital  
INTERDISCIPLINARY REHAB OF MULTIPLE SCLEROSIS & NEUROMUSCULAR DISORDERS, Maloney, Burks, Ringel  
INTRODUCTION TO HUMAN DISEASE, 3<sup>rd</sup> Ed, Kent & Hart  
INTRODUCTION TO HUMAN DISEASE, 3<sup>rd</sup> Ed, Crowley  
INTRODUCTION TO KINESIOLOGY, 2<sup>nd</sup> Ed, Hoffman  
INTRODUCTION TO MASSAGE THERAPY, Braun & Simonson  
INTRODUCTION TO OCCUPATION, THE ART & SCIENCE OF LIVING, Christiansen & Townsend  
INTRODUCTION TO PHYSICAL THERAPY, Pagliarulo  
INTRODUCTION TO PHYSICAL THERAPY FOR PTAs, Dreeben  
INTRODUCTION TO THE HEALTH PROFESSIONS, Stanfield  
INTRODUCTORY BIO MECHANICS, Schenek & Cordova

**J** JOINT MOTION & FUNCTION ASSESSMENT, Clarkson  
JOINT RANGE OF MOTION & MUSCLE LENGTH TESTING, Reese & Bandy  
JOINT STRUCTURE & FUNCTION, 2<sup>nd</sup> Ed, Norkin & Levangie  
JOURNAL OF REHABILITATION RESEARCH & DEVELOPMENT #2, March 1990, Dept of Veteran Affairs  
JUMING INTO PLYOMETRICS, Chu

**K** KELLER'S OFFICIAL OSHA HANDBOOK  
KINESIOLOGY, 6<sup>th</sup> & 7<sup>th</sup> Eds, Wells & Luttgens  
KINESIOLOGY: AN APPLIED ANATOMY, Rasch  
KINESIOLOGY: APPLICATION TO PATHOLOGICAL MOTION, 2<sup>nd</sup> Ed, Soderberg  
KINESIOLOGY FOUNDATIONS FOR OTAs & PTAs, Snyder, Conner, Lorenz  
KINESIOLOGY LAB MANUAL FOR PTAs, Minor & Lippert  
KINESIOLOGY: MOVEMENT IN THE CONTEEXT OF ACTIVITY, Greene & Roberts  
KINESIOLOGY OF THE MUSCULOSKELETAL SYSTEM, Neumann  
KINESIOLOGY: SCIENTIFIC BASIS OF HUMAN MOTION, Wells & Ruttgens  
KINESIOLOGY: SCIENTIFIC BASIS OF HUMAN MOTION, Luttgens & Hamilton  
KINESIOLOGY: THE MECHANICS & PATHOMECHANICS OF HUMAN MOVEMENT, Oatis  
KINESIOLOGY: THE SKELETAL SYSTEM & MUSCLE FUNCTION, Muscolino  
KINESIOLOGY WORKBOOK, 1<sup>st</sup> & 2<sup>nd</sup> Eds, Perry, Rohe, Garcia  
KNEE LIGAMENT REHABILITATION, Ellenbecker  
KNEE PAIN & DISABILITY, Calliet  
KNEE PAIN & IMPAIRMENT, Calliet

**L** LAB ACTIVITIES FOR THERAPEUTIC MODALITIES, Brown  
LAB MANUAL FOR PHYSICAL AGENTS, Hayes  
LANGUAGE OF MEDICINE, 2<sup>nd</sup> & 3<sup>rd</sup> Eds, Chabner  
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LEARNING STRATEGIES FOR ALLIED HEALTH STUDENTS, Palau & Meltzer  
LEGAL & ETHICAL ISSUES IN HEALTH OCCUPATIONS, Aiken  
LIEBMAN'S NEUROANATOMY MADE EASY & UNDERSTANDABLE, 6<sup>th</sup> Ed, Gertz  
LIFESPAN DEVELOPMENT, Turner & Helmes  
LIGHT THERAPY, Kovacs  
LIVING WITH A DISABILITY, Rush & Taylor  
LOW BACK PAIN, Finneson  
LOW BACK SYNDROME, Calliet  
LOWER EXTREMITY AMPUTATION, 1<sup>st</sup> & 2<sup>nd</sup> Eds, Rehabilitation Institute of Chicago

LOW VOLT TECHNIQUE, Kahn  
LUMBAR SPINE, McKenzie

**M**

MANAGED HEALTH CARE DICTIONARY, Rognehaugh  
MANAGEMENT OF COMMON MUSCULOSKELETAL DISORDERS, 2<sup>nd</sup> & 3<sup>rd</sup> Eds, Kessler & Hertlin  
MANAGEMENT IN REHABILITATION: A CASE STUDY APPROACH, Schuch & Sekerak  
MANAGEMENT PRACTICES FOR THE HEALTH PROFESSIONAL, 4<sup>th</sup> Ed, Longest  
MANAGING PHYSICAL STRESS W/THERAPEUTIC MASSAGE, Forman  
MANIPULATION & MOBILIZATION, Edmond  
MANUAL EXAMINATION & TREATMENT OF THE SPINE & EXTREMITIES, Wadsworth  
MANUAL FOR FUNCTIONAL TRAINING, 3<sup>rd</sup> Ed, Palmer & Toms  
MANUAL FOR PHYSICAL AGENTS, 6<sup>th</sup> Ed, Hayes & Hall  
MANUAL OF BURN CARE, Nicosia & Petro  
  
MANUAL OF CLINICAL EXERCISE TESTING, PRESCRIPTION & REHABILITATION, Altug, Hoffman & Martin  
MANUAL OF ELECTROTHERAPY, Watkins  
MANUAL OF STRUCTURAL KINESIOLOGY, Thompson & Floyd  
MANUAL OF STYLE, 9<sup>th</sup> Ed, AMA  
MANUAL OF TRIGGER POINT & MYOFASCIAL THERAPY, Kostopoulos & Rizopoulos  
MANUAL ON MANGEMENT OF THE QUADRIPLAGIC UPPER EXTREMITY, Malick & Meyer  
MANUAL THERAPIST'S GUIDE TO SURFACE ANATOMY & PALPATION SKILLS, Byfield & Kinsinger  
MARKETING MASSAGE: HOW TO BUILD YOUR DREAM PRACTICE, Rosenberry  
MASSAGE, Wood  
MASSAGE: A CAREER AT YOUR FINGERTIPS, 3<sup>rd</sup> Ed, Ashley (& Student Workbook)  
MASSAGE AND MANUAL THERAPY FOR ORTHOPEDIC CONDITIONS, 2<sup>nd</sup> Ed, Hendrickson  
MASSAGE CONNECTION: ANATOMY, PHYSIOLOGY & PATHOLOGY, Premkumar  
MASSAGE FOR THE HOSPITAL PATIENT & MEDICALLY FRAIL CLIENT, MacDonald  
MASSAGE FOR THERAPISTS, Hollis  
MASSAGE PRINCIPLES & TECHNIQUES, Beard & Wood  
MASSAGE THERAPIST'S GUIDE TO PATHOLOGY, Werner  
MASSAGE THERAPY & CANCER, Curties  
MASSAGE THERAPY & MEDICATIONS, Persad  
MASSAGE THERAPY CAREER GUIDE, Capellini  
MASSAGE THERAPY, PRINCIPLES & PRACTICE, Salvo (& Instructor's Manual)  
MASTERING HEALTHCARE TERMINOLOGY, Shiland  
MEASUREMENT OF JOINT MOTION, 1<sup>st</sup> & 2<sup>nd</sup> Eds, Norkin & White  
MECHANICAL KINESIOLOGY, Barham  
MECHANICAL LOW BACK PAIN, Saunders  
MECHANICS, HEAT & THE HUMAN BODY: AN INTRODUCTION TO PHYSICS, Goldick  
MEDICAL ASPECTS OF DEVELOPMENTAL DISABILITIES IN CHILDREN BIRTH TO THREE, 3<sup>rd</sup> Ed, Blackman  
MEDICAL MANAGEMENT OF LONG-TERM DISABILITY, Rehab Institute of Chicago  
MEDICAL TERMINOLOGY, 3<sup>rd</sup> Ed, Smith & Davis  
MEDICAL TERMINOLOGY, AN ILLUSTRATED GUIDE, 3<sup>rd</sup> Ed, Cohen  
MEDICAL TERMINOLOGY: A LIVING LANGUAGE, 5<sup>th</sup> Ed, Fremgen & Frucht  
MEDICAL TERMINOLOGY, A SHORT COURSE, 6<sup>th</sup> Ed, Chabner  
MEDICAL TERMINOLOGY: A SYSTEMS APPROACH, Gyls & Wedding  
MEDICAL TERMINOLOGY EXPRESS, Gyls & Masters  
MEDICAL TERMINOLOGY IN A FLASH, Eagle  
MEDICAL TERMINOLOGY SIMPLIFIED, 2<sup>nd</sup> Ed, Gyls & Masters  
MEDICAL TERMINOLOGY SYSTEMS: BODY SYSTEMS APPROACH, Gyls & Wedding  
MEDICAL TERMINOLOGY, THE LANGUAGE OF HEALTH CARE, Willis  
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MEETING THE PHYSICAL THERAPY NEEDS OF CHILDREN, Effgen  
MERCK MANUAL, 15<sup>th</sup> Ed  
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MINIMAL BRAIN DYSFUNCTION IN CHILDREN, US Dept of Health, Education & Welfare  
MOBILITY IN CONTEXT, PRINCIPLES OF PATIENT CARE SKILLS, Johansson & Chinworth  
MOBILIZATION NOTES: A REHABILITATION SPECIALIST'S POCKET GUIDE, Wise & Gulick  
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NORMATIVE MODEL OF PHYSICAL THERAPIST ASSISTANT EDUCATION: VERSION 99, APTA  
NURSING CARE OF THE STROKE PATIENT: A THERAPEUTIC APPROACH, GEE & Passarella  
1999 NURSING DRUG GUIDE, Lippincott  
2005 NURSING DRUG GUIDE, Lippincott

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 OCCUPATIONAL & PHYSICAL THERAPY, A RESOURCE & PLANNING GUIDE, Wisconsin Dept of Public Instruction  
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PHYSICAL THERAPY MANAGEMENT OF MUSCULAR DYSTROPHY, The Parent Project for MD Research  
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QUICK REFERENCE DICTIONARY FOR PHYSICAL THERAPY & BODYWORK, Denning

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<a href="http://www.medscape.com">www.medscape.com</a>	<a href="http://www.nutrition.org">www.nutrition.org</a>
<a href="http://www.rehabedge.com">www.rehabedge.com</a>	<a href="http://www.physical-therapy.advanceweb.com">www.physical-therapy.advanceweb.com</a>
<a href="http://www.nih.gov">www.nih.gov</a>	<a href="http://www.nysed.gov">www.nysed.gov</a>
<a href="http://www.ptcentral.com">www.ptcentral.com</a>	

### **PTA DEPARTMENT CD-ROM LIST**

Amputee, The	Interactive Hand Therapy Edition
Auscultation of Breath Sounds	Interactive Medical Terminology
Clinical Upper Extremity Test & Review	Interactive Physiology
ClipART: Medical Clip Art	Interactive Skeleton: Sports & Kinetic Edition
Computerized PTA Exam Review Access	LifeArt: Medical Clip Art
Dynamic Human	Manual Muscle Testing, An Interactive Tutorial
Gait	Saunders's Visual Guide to Musculoskeletal Assessment
Goniometry	VHI Computerized Home Exercise Programs
Guide to Physical Therapist Practice	Virtual Ultrasound Modalities
Interactive Atlas of Clinical Anatomy	Wheelchair Mobility
TEST MASTER (PTA Exam) on Microsoft Windows	

### **PTA DEPARTMENT DVD**

Murderball

## **PREPARING FOR A WRITTEN EXAM**

While some students may have a “photographic memory,” the reality for most of is that we have to study in order to retain the necessary material and be successful on examinations. Preparation for these examinations takes place the minute you begin the program. It is essential that you consistently attend class, take good notes, ready your textbooks, practice skills, study on a daily basis, and review material learned from previous semesters. “Cramming” should be avoided. While it may help you to pass a unit exam, it will hinder your success on larger exams, as the volume of material to be learned will be too large. More importantly, you owe it to yourself – and your future patients/clients to develop a comprehensive knowledge base so that you become a competent practitioner.

### **Study Suggestions:**

- Create daily and weekly schedules that include work hours, class hours, study hours, “play time,” family time, meals, sleep and anything else that you deem necessary.
- Set up a study area which is quiet and comfortable, and as distraction-free as possible.
- Identify the breadth and depth of the material that you will need to cover in the time period that you have set aside to prepare for the exam. Develop a schedule of what you need to accomplish, so that you leave the last three days for daily review.
- Organize the materials that you will need for studying: textbooks, review guides, class notes, paper, pens, highlighters, etc.
- Get the refreshments that you need: water, chocolate, popcorn, gum, etc.
- Create lists of what you want to accomplish in your study hours.
- Schedule smaller chunks of study time, rather than large blocks of time. For example, study for 45 minutes three times per day, rather than 2½ hours in a row.
- Study material in units or chunks. For example, focus on the muscles of the upper extremity during one session and the muscles of the lower extremity during another session.
- Take frequent two minute stretch breaks every 15 minutes or so. Use the time for bathroom breaks, quick exercises, etc.
- Establish a rewards system for yourself – for example, I will watch my favorite TV show tonight if I study for two hours during the day.
- If time allows, take a day off once per week.
- Capture moments in time where you can get some quick “study time” in. For example, you’re getting a perm: study while you are under the hair dryer.
- Make flash cards and keep them with you. Use them while you are waiting on line at the store, or when you are riding (not driving) in a car.
- Develop acronyms for a series of statements or facts.
- Use Alphabet Cues: ABC’s of CPR.
- Develop small study groups.
- Make up practice examinations.
- Study what you don’t know yet, don’t get in the habit of constantly studying what you do know.
- Practice taking tests: make up questions, access review questions. Review the answers.

## **Taking a Multiple Choice Exam**

Multiple choice examinations, when written well, can test many levels of cognitive ability. Healthcare professionals are expected to demonstrate knowledge, comprehension, application and analysis of information. You can expect that course examinations and state/national examinations will utilize multiple choice examinations which assess these four levels of cognitive development.

### **Knowledge Questions: test your rote memory of facts and figures**

Example: What is the normal range of the adult radial pulse at rest?

- a. 40-60 bpm
- b. 70-85 bpm
- c. 90-105 bpm
- d. 110-125 bpm

### **Comprehension Questions: test your ability to understand information. In order to answer these questions, you must have the knowledge necessary and must be able to apply, interpret, or determine what to do with that knowledge. These are the how and why questions.**

Example: To understand the human circulatory system one must recognize that blood moves from the:

- a. right ventricle to the pulmonary artery
- b. superior vena cava to the left atrium
- c. left atrium to the right ventricle
- d. left ventricle to the pulmonary vein

### **Application Questions: test your ability to use information, especially in a new situation. These are the show, modify, change, use, solve questions.**

Example: Upon rising from the table after a massage session, the client becomes weak and states that he feels like he is going to pass out. The best intervention should be:

- a. lower the client to the floor gently
- b. hold the client up
- c. walk the client into the waiting room and have him sit in a chair
- d. call 911

### **Analysis Questions: test your ability to interpret data, evaluate, investigate.**

Example: You are seeing one of your regular clients who is 78 years old. The client's vital signs upon arrival in your office are: Pulse: 124 bpm, BP: 180/90, Respirations: 26 breaths/min. They are also complaining of a headache. What should you do?

- a. render the massage session as requested
- b. cancel the session, encourage the client to seek help
- c. call 911
- d. call his/her physician

Multiple Choice questions (items) have three parts. The first part is the **stem**. It may be a complete statement, a partial statement, or a question. The **options** are all of the possible answers. The **distracters** are the answers that steer you away from the correct answer. The **correct answer** is just that, however, as we know, if the distracters are doing their job, then it can be difficult to choose the correct answer. Some questions have positive polarity: meaning that you are asked for the true answer. Some questions have negative polarity: meaning that you are asked for the false answer.

**Specific Test Taking Strategies:**

- Break the question down into its components. What is it asking?
- Underline the important information and key words.
- Try to answer the questions before you look at the answer options.
- Cross out the options that you know are the distracters. A guess between two options is better than a guess between four options.
- Watch out for negative polarity.
- Watch out for words like best, worst, first, least – these are asking you to make judgments.
- Watch out for “absolute” words: all, none, never. As there are few absolutes in this world, these are usually false.
- Look for answers that provide “opposite choices.” Either one will be the correct answer, or they will both be distracters.
- Skip questions that you don’t know, the answer may come to you later, as you answer other questions.

**What to Do When the Test Has Arrived:**

- Get a good night sleep
- Cut out the caffeine
- Get to the test ahead of time
- Take care of bathroom needs
- Make sure you have everything you need
- Monitor the time
- Answer the easy questions first
- Make educated guesses

## **SECTION VII**

## APTA Background Sheet

**Attention Consumers:** Need a PT? Utilize these services: [Choosing a PT](#) | [Find a PT](#)

### The Physical Therapist

PTs examine each individual and develop a plan, using treatment techniques to promote the ability to move, reduce pain, restore function, and prevent disability. In addition, PTs work with individuals to prevent the loss of mobility before it occurs by developing fitness- and wellness-oriented programs for healthier and more active lifestyles.

Physical therapists provide care for people in a variety of settings, including hospitals, private practices, outpatient clinics, home health agencies, schools, sports and fitness facilities, work settings, and nursing homes. State licensure is required in each state in which a physical therapist practices.

All PTs must receive a graduate degree from an accredited physical therapist program before taking the national licensure examination that allows them to practice. The majority of programs offer the doctor of physical therapy (DPT) degree.

### WHAT DO PHYSICAL THERAPISTS EARN?

More than 175,000 physical therapists are licensed in the U.S. today. The median salary for a physical therapist is \$80,000 depending on position, years of experience, degree of education, geographic location, and practice setting.

### WHERE DO PHYSICAL THERAPISTS PRACTICE?

Although many physical therapists practice in hospitals, over 80 percent practice in:

- Outpatient clinics or offices
- Inpatient rehabilitation facilities
- Skilled nursing, extended care, or subacute facilities
- Homes
- Education or research centers
- Schools
- Hospices
- Industrial, workplace, or other occupational environments
- Fitness centers and sports training facilities

### WHAT ARE THE EDUCATIONAL REQUIREMENTS FOR BECOMING A PT?

The minimum educational requirement is a post-baccalaureate degree from an accredited education program. While some programs offer a master's degree, a growing majority of programs offer the Doctor of Physical Therapy (DPT) degree. Currently, 199 colleges and universities nationwide support 212 accredited professional physical therapist education programs; 96% now offer the DPT and the remaining programs are planning to convert.

### WHAT ARE THE LICENSURE REQUIREMENTS FOR BECOMING A PT?

After graduation, candidates must pass a state-administered national exam. Other requirements for physical therapy practice vary from state to state according to physical therapy practice acts or state regulations governing physical therapy.

### WHAT IS THE EMPLOYMENT OUTLOOK FOR PHYSICAL THERAPY?

According to the [Bureau of Labor Statistics](#), employment of physical therapists is expected to grow by 30 percent from 2008 to 2018, much faster than the average for all occupations. According to the American Physical Therapy Association (APTA), with just a 0.2 percent unemployment rate, physical therapists are now experiencing the best employment conditions since enactment of the Balanced Budget Act of 1997.

For more information on a career in physical therapy, [click here](#), or contact APTA Public Relations, 1111 North Fairfax Street, Alexandria, VA 22314-1488, telephone: 703/706-3248, fax: 703/706-8578.

[Last updated: 03/03/10 | Contact: [public-relations@apta.org](mailto:public-relations@apta.org)]

## APTA Background Sheet

### The Physical Therapist Assistant

Physical therapist assistants (PTAs) provide physical therapy services under the direction and supervision of a physical therapist. PTAs help people of all ages who have medical problems, or other health-related conditions that limit their ability to move and perform functional activities in their daily lives. PTAs work in a variety of settings including hospitals, private practices, outpatient clinics, home health, nursing homes, schools, sports facilities, and more.

PTAs must complete a 2-year associate's degree and are licensed, certified, or registered in most states. Care provided by a PTA may include teaching patients/clients exercise for mobility, strength and coordination, training for activities such as walking with crutches, canes, or walkers, massage, and the use of physical agents and electrotherapy such as ultrasound and electrical stimulation.

### WHAT DO PHYSICAL THERAPIST ASSISTANTS EARN?

The median income for a physical therapist assistant is \$46,000 depending on position, years of experience, degree of education, geographic location, and practice setting.

### WHERE DO PHYSICAL THERAPIST ASSISTANTS WORK?

Today, physical therapist assistants provide health care services to patients of all ages and health conditions in a variety of settings, including:

- Outpatient clinics or offices
- Hospitals
- Inpatient rehabilitation facilities
- Skilled nursing, extended care, or subacute facilities
- Homes
- Education or research centers
- Schools
- Hospices
- Industrial, workplace, or other occupational environments
- Fitness centers and sports training facilities

**WHAT ARE THE EDUCATIONAL REQUIREMENTS FOR BECOMING A PTA?** To work as a PTA, an individual must graduate with an associate degree (two years, usually five semesters) from an accredited PTA program at a technical or community college, college, or university. Graduates must pass the national examination for licensing/certification/regulation in most states to be eligible to work. PTAs work under the direction of a physical therapist (PT).

The PTAs' duties can include assisting in instructing patients in exercises and activities of daily living (including physical modalities), using special equipment, collecting data on the patient's progress, and documenting and reporting on the patient's response. There are currently 235 institutions supporting 252 PTA programs across the country.

**WHAT ARE THE LICENSURE REQUIREMENTS FOR BECOMING A PTA?** Forty-eight states and the District of Columbia PTAs to be licensed, registered, or certified. States requiring licensure stipulate specific educational and examination criteria.

**WHAT IS THE EMPLOYMENT OUTLOOK FOR PHYSICAL THERAPIST ASSISTANTS?** According to the [Bureau of Labor Statistics](#), employment is expected to grow much faster than average because of increasing demand for physical therapy services. Job prospects for physical therapist assistants are expected to be very good. The American Physical Therapy Association's (APTA's) most recent data indicate an unemployment rate of 3.9 percent.

For more information on a career in physical therapy, [click here](#), or contact APTA Public Relations, 1111 North Fairfax Street, Alexandria, VA 22314-1488, telephone: 703/706-3248, fax: 703/706-8578.

[Last updated: 03/03/10 | Contact: [public-relations@apta.org](mailto:public-relations@apta.org)]

## **SECTION VIII**

## **HEALTH REQUIREMENTS PRIOR TO BEGINNING THE PROGRAM**

\* **Pre Registration:** All Health Professions' students are required to meet the New York State Department of Health immunization and screening requirements for healthcare workers. These requirements **exceed** those for enrollment at College and apply **regardless of age**.

### **All PTA Students:**

- Physical Exam (**annually**, which includes: boosting
  - Mantoux (annual except for "second" dose the first year)
  - Tetanus immunization (within 10 years)
  - Hepatitis Vaccine Series completed, started or waived
  - Lab titers for Rubella, Rubeola, Mumps & Chicken Pox (copies of all lab titers must be attached to physical exam form)
  - All students are required to complete a **Meningitis Information Response Form** indicating they have either received the vaccine in the past 10 years, or that they have read the information and have chosen not to receive the vaccine

A completed physical exam form including **ALL** the above information must be received by school nurse by the date indicated on the physical form prior to **each year** in the core program.

Upon submission of the physical exam form to the nurse's office, students will be issued a "Health Clearance Form." This form is to be retained by the student for the entire school year. No student will be permitted to attend clinical at any site without this form; participation in lab sessions will also not be permitted if student has not obtained this form. Non-participation (observation) in lab is considered an absence. A copy of this Health Clearance Form **must be sent by student** to his/her assigned clinical education site at least three (3) weeks prior to attending for proof of required health clearance. **IT IS THE STUDENT'S RESPONSIBILITY TO SEE THT THE ABOVE CHAIN OF EVENTS TAKES PLACE** to assure that student will be able to start clinic on assigned day or even earlier. Not having a Health Clearance Form in time to begin clinic on the assigned date may result in termination of clinical affiliation assignment with reassignment postponed.

### **Reminder to Students Regarding the Hepatitis B Series:**

If you chose not to have the Hepatitis B series, or plan to but have not as yet completed the series, you must sign the waiver on page 3 of the Physical Examination Form.

Be sure to submit proof of completion of Hepatitis B series to nurse's office whenever series is complete.

Immunizations are not provided on campus. They are available to prospective college students free of charge thru the Orange County Department of Health. The schedule for clinic locations, dates and times is available from the campus Nurse.

If you have any questions about these requirements, please contact the Health Services Office at 845/341-4870.

ORANGE COUNTY COMMUNITY COLLEGE  
Middletown, New York 10940  
PHYSICAL THERAPIST ASSISTANT PROGRAM

**CONFIDENTIALITY STATEMENT**

I understand that I will have access to confidential patient health information while enrolled in Clinical Education courses and/or when observing patient care in the clinical setting. I further understand that this patient information is private, must be kept confidential, and that unauthorized release of this information is punishable by law. I will abide by all policies, procedures, rules, and regulations related to the Health Information Privacy Act (HIPAA), as well as any additional policies and procedures of the clinic to which I am assigned.

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

SIGNATURE: \_\_\_\_\_

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

**INFECTION CONTROL STATEMENT**

I understand that I will be working with faculty, classmates and patients in the classroom and clinical environment. I understand that I may be exposed to various infectious agents such as, but not limited to, open wounds, bleeding emergencies, viruses, and bacteria. I understand that I must utilize infection control procedures, as established by the specific institution/facility, at all times, otherwise I will be removed from that setting.

I understand that, should I have a specific infectious agent, I must follow all infectious control policies of the institution/facility to avoid contaminating others.

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

SIGNATURE: \_\_\_\_\_

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

ORANGE COUNTY COMMUNITY COLLEGE  
Middletown, New York 10940  
PHYSICAL THERAPIST ASSISTANT PROGRAM

**INFORMED CONSENT**

Throughout the program, PTA students practice data collection and intervention skills in the controlled setting of the PTA Lab. PTA students serve as subjects for the instructors and as patient-simulators for their classmates. PTA students may also be videotaped, audio taped, or photographed for instructional or promotional purposes.

All students must participate in these activities in each class. If a student has a condition, which may preclude participation in specific techniques, it is the responsibility of the student to speak with the instructor privately before that class meeting so that arrangements can be made

Students may not practice any skills on any individual unless they have been taught the skill in class or in the clinical setting. Students are responsible for contacting the instructor if additional instruction in a technique is required. Students are not permitted to turn on any modality equipment without permission of the instructor, and only when an instructor is in the BioTech Building.

While every effort will be made by the instructors to maintain a safe environment, it is solely the responsibility of the student to apprise instructor of conditions which may preclude participation and to avoid practicing those skills in which the student has not yet been taught. Following these rules will keep the risk of injury in the program to a minimum.

I have read the above information, understand it, and agree to abide by it.

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

SIGNATURE: \_\_\_\_\_

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

ORANGE COUNTY COMMUNITY COLLEGE  
Middletown, New York 10940  
PHYSICAL THERAPIST ASSISTANT PROGRAM

**AUTHORIZATION TO PROVIDE PROFESSIONAL REFERENCES**

Employers frequently contact the College for professional references in addition to those listed by the prospective employee. In order to provide a reference, we must have the student's permission in writing. References will be provided only for students who have filed this form with the department chairperson.

I, \_\_\_\_\_, give permission for the faculty of the  
Print Name

PTA Department at Orange County Community College to provide references to prospective employers who initiate contact with the department.

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

\_\_\_\_\_  
Date

ORANGE COUNTY COMMUNITY COLLEGE  
Middletown, New York 10940  
PHYSICAL THERAPIST ASSISTANT PROGRAM

I, \_\_\_\_\_, am willing to participate  
NAME

in demonstrations/video/still pictures and as a patient during Lab portions of various Physical Therapist Assisting courses. I understand that it is solely my responsibility to notify my instructors and classmates if I have a condition which prevents participation in any component of a lab session.

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

\_\_\_\_\_  
Date

ORANGE COUNTY COMMUNITY COLLEGE  
Middletown, New York 10940  
PHYSICAL THERAPIST ASSISTANT PROGRAM

**STUDENT RESPONSIBILITY FOR 2012-2014 PTA STUDENT HANDBOK**

I have read and understand the Policies specified in the Orange County Community College Student Handbook and the PTA Student Handbook. I will abide by them in order to continue in the accredited Physical Therapist Assistant Program at Orange County Community College.

---

Student Signature

---

Date

**NOTE:**

Both Section 504 of the Rehabilitation Act, 29 U.S.C.A. Section 794, and the Americans with Disabilities Act prohibit discrimination against "otherwise qualified" persons with a disability. If an applicant can perform those "essential functions," he or she is "otherwise qualified" under the law and must be treated the same as people without a disability. A person who cannot perform the "essential functions" is not "otherwise qualified" and may be denied access to the program without being subject to legal action for discrimination.

ORANGE COUNTY COMMUNITY COLLEGE  
Middletown, New York 10940  
PHYSICAL THERAPIST ASSISTANT PROGRAM

**STUDENT RESPONSIBILITIES FOR 2012-2014**

1. In order to participate in the Physical Therapist Assistant Program at Orange County Community College, I have received a copy of and agree to follow the rules, regulations, policies and procedures listed below:
  - a. 2012-2014 PTA Department Student Handbook
  - b. PTA Rules & Regulations Manual
  - c. Orange County Community College Student Handbook
  
2. In addition:
  - a. I understand that I may be required to provide my social security number to a designated person at my clinical education assignment prior to my attending so that a general background check and/or a NYS Nurse Aide Registry background check may be performed; some clinical affiliations require students to obtain/pay for the background check and submit it to the clinical affiliation prior to attending.
  - b. I have received, read and was granted the opportunity to ask questions relating to and now understand the criminal record policies and the possible need to participate in a criminal background check.
  - c. I understand that I may be required to undergo additional substance abuse testing after I have been assigned to a clinical education assignment prior to my attending. Some affiliations require students to obtain/pay for the testing and submit it prior to attending.
  - d. I have been informed as to the registration process in order to become a practicing PTA in New York State.

**NOTE:**

Both Section 504 of the Rehabilitation Act, 29 U.S.C.A. Section 794, and the Americans with Disabilities Act prohibit discrimination against "otherwise qualified" persons with a disability. If an applicant can perform those "essential functions," he or she is "otherwise qualified" under the law and must be treated the same as people without a disability. A person who cannot perform the "essential functions" is not "otherwise qualified" and may be denied access to the program without being subject to legal action for discrimination.

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

SIGNATURE: \_\_\_\_\_

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