

PHYSICAL THERAPIST ASSISTANT PROGRAM

STUDENT HANDBOOK 2010–2012

ORANGE COUNTY COMMUNITY COLLEGE
MIDDLETOWN, NEW YORK 10940

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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 PTA Faculty:

Maria Masker, PT, DPT
Assistant Professor
Department Chairperson

Karen Stephens, PT, DPT
Professor

TBA
Academic Coordinator of Clinical Education

Gretchen Meier, PT
Adjunct Faculty
Clinical Liaison

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

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.

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 make 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 life long 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 life long 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.
- demonstrate 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 Department 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, 2019. 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 requires that those wishing to register to practice as a Physical Therapist Assistant in 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, socio-economic, 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 Disability Services located on the 3rd floor of the George Shepard Student Center, (845) 341-4077, 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.

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 P.T.A. 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-1st Year)

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

Second Semester (Spring-1st Year)

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

Third Semester (Fall-2nd Year)

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

Fourth Semester (Spring-2nd Year)

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

Summer Session (2nd Year)

PTA220 - Clinical Education III - August Graduation - 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 (#PTA 220) 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, students 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 you 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 "0" will result.

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 AMA formatting. Assignments handed in past the deadline will be lowered ten points 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 a "0."

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 I-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, II, or III: 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 clinical site with the understanding that it may not be possible for the Program to fulfill 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 Acknowledgment 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.

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 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 re-admission 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

Currently, several of our clinical sites require independent criminal background checks of the student assigned to that clinical site. The student may incur the cost of the criminal background check which could include fingerprinting and follow through of paperwork by the student. The clinical site reserves the right to dismiss a student based on the result of his/her criminal background check. Attempts will be made but not guaranteed to place the student at another clinical site. As a result, the student runs the risk of waiting a full academic year when that specific Clinical Education course is offered again. Auditing Core courses and Lab Practical testing will be assigned per the Department Chair's discretion during the waiting period.

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.

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: white short or long sleeve, polo or button-up shirt, navy pants (dress or docker-style). The above uniform will not expose the shoulders or 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 and may be videotaped, audio taped or photographed for instructional purposes during demonstrations, lab experiences, skills’ checks, and laboratory 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 laboratory practical. This should be done during the first week of classes, or as soon as a condition becomes apparent, whichever comes first. Please see page 21, SURGICAL/MEDICAL CONDITIONS. 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 members 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, as well as a 10 panel urine drug screen, prior to beginning the core classes. Following the initial physical and drug test, the students will be required to have annual physicals only until the core program is completed. This should be done in the month of July (not earlier) and 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 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. (Refer to Drug Testing Policy.) Physicals are good for one year. Students who fulfill their Clinical Education III requirements during second Summer Session will be required to have a third physical and Mantoux prior to beginning Clinical Education III.

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 of 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.

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 many-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 appropriate number of credits, taking into consideration your other responsibilities like a 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 and 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 AND 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:

I 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.

PHYSICAL THERAPIST ASSISTANT PROGRAM
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 skill.

The purpose of this form is to document the students progress on integrating those attitudes, values and behaviors needed to assume their 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 their placement in clinic.

<u>PROFESSIONAL DEVELOPMENT SKILL</u>	<u>RATING</u>	<u>COMMENTS</u>
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A Communication Skills:

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 appropriate questions & seeks assistance when in doubt	0	1	2
5. Writes effectively & professionally	0	1	2

B Responsibility for Learning:

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

C Interpersonal Skills:

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 with authority figures	0	1	2

D Problem-Solving Skills:

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

PROFESSIONAL DEVELOPMENT SKILL	RATING	COMMENTS
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- | | | |
|---|-------|--|
| 4. Demonstrates critical thinking & recognizes biases | 0 1 2 | |
| 5. Can self-assess & self-correct | 0 1 2 | |

-

E Professionalism:

- | | | |
|---|-------|--|
| 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 | |

F Stress Management Skills:

- | | | |
|--|-------|--|
| 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 with unexpected situations | 0 1 2 | |
| 4. Manages personal emotions maturely | 0 1 2 | |
| 5. Demonstrates 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 laboratory 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 laboratory 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 student's 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 student's 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 (ABC's: 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 3 pm on Monday, Wednesday, Thursday and Friday, and 8am to 4pm on Tuesday. As many as 50 students may be using the lab in a given semester. While our maintenance department handles the floors and the garbage, 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 desks.
4. No food is to be left out. Any food which is left out will be disposed.
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 parts 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 7:30 a.m.-3:30 p.m., Monday through 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 circumstances** 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 7:30 a.m.-3:30 p.m., Monday through 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 and 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 will also be required to pass the written final exam for each course that they 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 1st semester, \$200 for 2nd semester, \$275 for 3rd semester and \$100 for 4th 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 3 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 must be performed by one of the laboratories indicated: Partners-In-Safety (Middletown) and Omni Medical Care (Newburgh) (Cost: \$45)
- Criminal Background Check fees-to be determined at time of request by clinical assignment (\$60 – 100)
- 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 BT 109.

Office Hours - Department faculty members hold office hours each week. Students are encouraged to use these hours for advising, assistance with course work, 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 and 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 Disability 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 to 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 1 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 will not be able to attend clinic on his assigned day. If the student is going to be absent from his clinical affiliation, he is to notify the clinical instructor at his 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 7:00 a.m. if possible. The College office must also be contact 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 setting should begin a minimum of two days early or discuss the feasibility of using Fridays as make-up days with their Clinical Instructor. Consult with the clinical instructor regarding the facility's calendar, since more than 2 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. Clinical instructors are authorized to lower final grades for chronic lateness as follows:

3 lates/leaving early	lowered up to 1 full letter grade
6 lates/leaving early	lowered up to 2 full letter grades
9 lates/leaving early	lowered up to 3 full letter grades

TELECOMMUNICATION DEVICES

The active use of any device classified as a “Telecommunications device,” including but not limited to pagers, cellular phones, PDA’s, 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 laboratory rules. The College also maintains professional liability insurance to cover PTA students when enrolled in Clinical Education courses. Students 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 costs 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 and Physiology 1 and/or 2, as this will have serious implications 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 laboratory 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.

PTA DEPARTMENT PHONE NUMBERS & E-MAIL ADDRESSES

Dr. Maria Masker	845/341-4290 - maria.masker@sunyorange.edu
Dr. Karen Stephens	845/341-4309 - karen.stephens@sunyorange.edu
Mrs. Gretchen Meier	845/341-4291 – gmeierpt@yahoo.com
Mrs. Peggy Boyle, dept. secretary	845/341-4291 - margaret.boyle@sunyorange.edu

SECURITY

SECURITY OFFICE:	Located in Orange Hall, Room 110
SECURITY TELEPHONE:	341-4710

EMERGENCY PHONE LOCATIONS:

BioTech Building:	341-4673 (3rd Fl. near Room 314)
	341-4674 (1st Fl. near Computer Center)
	341-4675 (2nd Fl. near Room 254)

George Shepard Student Ctr:	341-4676 (2nd Fl. near Student Act.)
	341-4677 (3rd Fl. near Counseling)

Harriman:	341-4678 (Near Room 205)
	341-4027 (2nd Fl. near Chair Lift)
	341-4028 (3rd Fl. near Chair Lift)

Hudson:	341-4679 (Near Room 106)
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LRC:	341-4680 (1st Fl. Lobby Area)
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Orange Hall:	341-4681 (Outside of Theater)
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Phys Ed:	341-4682 (Main Lobby)
	341-4683 (Pool Area)

Sarah Wells:	341-4684 (Main Floor)
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Horton:	341-4685 (Main Floor)
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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 p.m. to 11:00 p.m., Monday through Friday; dial extension 77 for an emergency OR 4710, 4932, for non-emergency.

HEALTH SERVICES

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

OFFICE HOURS: Monday - Friday.....8:30 a.m. – 4:30 p.m.
TELEPHONE: 341-4870
FAX: 341-4872

Staff:

All members of the professional staff of Health Services are Registered Professional Nurses. Our job title is Nurse/Counselor. We have experience in both physical and mental health treatment and referral.

Mission:

The goal of Health Services is to promote Wellness on campus. Wellness is more than simply the absence of illness. It is a way of life that emphasizes healthy habits and choices that lead to reducing your risk of disease and injury; it promotes responsible self-care, but is not a substitute for medical care. Wellness encompasses the choices we make regarding nutrition, physical activity, how we handle stress, fulfill our spiritual needs, develop our intellects and pursue our career goals. As such, we define our mission in health services in terms of helping each member of the campus community to achieve a state of positive physical and mental health.

Services:

To achieve our goals we offer a variety of services to students and staff:

- First Aid - Anyone who is injured on campus must report the injury to the Nurse. We will provide emergency first aid at the site of the injury if necessary. Please call ext. 4870 to request first aid assistance if unable to report to the Health Office. All serious injuries are referred for medical evaluation and treatment.

- Accident Insurance - Full time students are covered by this policy 24 hours a day. Part time students are covered for accidents that occur while in school, traveling to and from school or while participating in a school sponsored and supervised activity. Information and forms are available in the Health Office and an accident report must be filed with the College Nurse within 72 hours of the accident.

- Primary Nursing Care - Limited primary nursing care for illness and injury is available. A Nursing assessment and evaluation can provide information that will be used to recommend appropriate self-care or medical referral and treatment.

We maintain a current listing of low cost and sliding scale providers for those with little or no health insurance coverage.

- Self Care - We maintain a supply of over-the counter drugs which are available to you at no charge, including:

pain relievers	cough and cold medications
antacids	topical anesthetics
throat lozenges	decongestants

- Crisis Intervention and Referral - We are here to listen and make appropriate referrals to help you cope with a variety of issues that block your ability to perform well in school and on the job including:

Family Violence	Parenting
Depression	Stress Management
Eating Disorders	Rape and Sexual Abuse
Substance Abuse	Recovery

- Health Education Programs - Throughout the year we provide a variety of health education programs that are offered free to students, as well as sponsor an annual Blood drive in the Fall and a Wellness Fair in the Spring.

- Smoking Cessation - We offer the American Cancer Society's "*Living Well, Fresh Start*" support program for smokers who wish to quit.

- CHA CHA - "Changing **H**abits **A**nd **C**hoosing **H**ealth **A**lternatives" is an individually designed program to help you lose weight, get in shape and learn the habits you need to make it a way of life. Weekly weigh-ins and individual consultations with a registered nurse.

- Health and Immunization Records - All student Immunization records are to be presented to us prior to registration for six or more credits. All Health Professions' students are required to complete an annual physical in accordance with New York State Hospital Code and be cleared by the nurse for attendance at clinic and participation in laboratory sessions.

- Health Maintenance - We encourage any student or staff member with a chronic health problem to visit our office so we can be aware of your special needs and be able to respond quickly and effectively in any emergency. Our office can be utilized to perform any treatments that must be done while on campus and we can provide a quiet place to rest. Anyone with any questions concerning possible health problems is encouraged to visit our office.

EMERGENCY/FIRST AID PROCEDURES

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

1. Contact the Health 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 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

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 laboratory 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 laboratory 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 & Psychology will be required to successfully complete Physical Therapist Assistant 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 course work. Students are expected to keep track of their grades according to the course syllabus. Successful completion of a 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 course work, 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. Students may also arrange to meet with faculty at mutually convenient hours.
4. Keep student apprized 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 regarding 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 & Boissonnault, PATHOLOGY: IMPLICATION FOR THE PT

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 & Boissonnault, PATHOLOGY: IMPLICATION FOR THE PT

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 THE PTA

PTA201 - PTA III

Goodman & Boissonnault, PATHOLOGY: IMPLICATION FOR THE PT

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

ALL TEXTBOOKS PURCHASED TO DATE

PTA208 - CONTEMPORARY PRACTICE IN PHYSICAL THERAPY

Curtis, THE PTA HANDBOOK

SUGGESTED TEXTBOOKS

Andrews, REHABILITATION OF INJURED ATHLETE

Effgen, MEETING THE PHYSICAL THERAPY NEEDS OF CHILDREN

Giles, A GUIDE TO SUCCESS

Irwin & Tecklin, 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: 2010–2012 AY

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

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 12550
Lisa Hess, PT
845/564-1855

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
1st Avenue & 16 Street
New York, NY 10003
212/870-9466
Shereese Perez, PT- 212/420-2741

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 Shakaure, 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
Jane Tice, PT
858-7000

Burke Rehabilitation Center
785 Mamoroneck Avenue
White Plains, NY 10605
Pamela Jones, PT
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
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Catskill Regional Medl Center-PT Dept.
PO Box 800, Harris-Bushville Road
Harris, NY 12742
Kristine Conologue, MS, PT
845/794-3300 x2141

Center for Spectrum Services (Children's Annex)
40 Kikuk Lane
Kingston, NY 12401
Lori Hopkins, OTR
336-2616 x125
Location: 70 Kukuk Lane, Kingston 12401)

Danbury Hospital
24 Hospital Avenue, PM & R
Danbury, CT 06810
Keri Supper, PT
203/739-7272

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
John Pawlowski, PT
845/291-3743

&

Elant @ Newburgh
172 Meadow Hill Road
Newburgh, NY 12550
Ed Leonard, PT
564-1700 x5644

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

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

Good Samaritan Hospital
Route 59
Suffern, NY 10901
Howard Wilen, PT
845/368-5254

Health Alliance of the Hudson Valley:
Benedictine Hospital
Physical Medicine 7 Rehab
2 Spellman, 105 Mary's Avenue
Kingston, NY 12401
Kevin Rudolph, PT
338-2500 x4933
&
Kingston Hospital
396 Broadway - 4th Floor (Rehab)
Kingston, NY 12401
Barbara Engel, OTR
334-2870

Helen Hayes Hospital
Route 9W
West Haverstraw, NY 10993
Mary Nishimoto, PT
845/786-7492

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

Kingston Phys. Therapy & Sports Rehab PC
340 Plaza Road
Kingston, NY 12401
Charissa Makish, PTA
845/339-4722

Monroe Physical Therapy & Wellness
505 Route 208
Monroe, NY 10950
Jessica Bach, PT
782-3200

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

&
Port Jervis Physical Therapy & Wellness
181 Jersey Avenue
Port Jervis, NY 12771
Shannon Albanese, PT
858-9999

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 Memorial Hospital
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

Orange Lake P.T.
239 Lakeside Road #2
Newburgh, NY 12550
Louis Catalucci, PT
566-4303

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

Orange Regional Medical Center (Arden Hill Campus)
Harriman Drive
Goshen, NY 10924
Ann McEnroe-O'Connor, PT (In-Pt)
(In-Pt) 845/294-4825

Orange Regional Medical Center (Horton Campus)
60 Prospect Avenue
Middletown, NY 10940
Ann McEnroe-O'Connor, PT
845/342-7211 (Rehab & Acute)
&

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

Orthopedic Assoc. of Dutchess County
400 Westage Business Center Drive
Fishkill, NY 12524
Heather Fassell, DPT
897-1070

&

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400 Westage Business Center Drive
Fishkill, NY 12524
897-1070

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

&

Peak P.T. Inc.
84 East Main Street
Washingtonville, NY 10992
Charles Walker, PT
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 22
MAILING: PO Box 46
Pt. Jervis 12771
Laura Mulhare, PT
856-5623

T. Piserchia, M.D., P.C.
PO Box 1017, 22 Canal Street
Port Jervis, NY 12771
Garry Hazen, PT
845/858-8567

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

Sports Phys. Therapy of NY, PC - Somers
293 Route 100, Suite 107
Somers, NY 10589
Phil De Mase, PT
914/276-2520

&

Sports Phys. Therapy of NY, PC
19 Perlman Drive
Spring Valley, NY 10977
Aimee Alexander
518/583-7537

Laura Stevens, PT
550 Route 32, PO Box 729
Highland Mills, NY 10930
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St. Anthony Community Hospital Ctr. For Physical Rehab
153 South Route 94
Warwick, NY 10990
Stewart Ross, PT
845/987-5150

&

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

St. Francis Hospital (In Pt OT/PT)
241 North Road (5 Spellman Classroom)
Poughkeepsie, NY 12601
Brenda Koepp, 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 Campus)
19 Laurel Avenue
Cornwall, NY 12518
Susan Claudio, PT
845/458-4549

&

St. Lukes-Cornwall Hospital (Out-Pt Satellite)
279 Main Street
New Paltz, NY 12561
Sue VanDerBogart, PT
256-0253

&

St. Luke's-Cornwall Hosp. (Out-PT Satellite)
575 Hudson Valley Avenue, Suite 100
New Windsor, NY 12553
John Dillinder, PT
784-3777

&

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

&

St. Luke's/Cornwall Hospital Outpatient Care Center
5029 Route 9W
Newburgh, NY 12550
Dave Mohr, PT

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

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

Vassar Brothers' Hospital
Reade Place
Poughkeepsie, NY 12601
Jackie Lamando, PT
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Wayne Memorial Rehab Svcs
Buist Road
Milford, PA 18337
Karen Chabak, PT
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Westchester Medical Center
Physical Therapy Dept. - Main Hospital
Valhalla, NY 10595

Gail Cherry, PT
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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
440-1600 x673

Wingate @ Dutchess
3 Summit Court
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Rebecca Hamann, PTA
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 and 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 Techniques for Facilitation of UE Motion of Stroke Pt.
- 009 --- Head Injury - Functional Outcomes & Community Re-entry-Prt. 1 & 2
- 010 --- Head Injury - Functional Outcomes & Community Re-entry-Prt. 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 and Tx Planning - Child with C.P.
- 017 --- Bobath - Assessment and Tx Planning - Adult with 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 with;
- 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 --- C.E.S. - Basic Physiological Response to;
- 039 --- C.E.S. - Systematic Approach to Clinical Application of;
- 040 --- Parkinsons' Disease
- 041 --- Treat Your Own Back - Robin MacKenzie
- 042 --- Muscle Testing - Prgm. 1 - Trunk & Hip Muscles - Length Tests
- 043 --- Muscle Testing - Prgm. 2 - Trunk & Hip Muscles - Strength Tests
- 044 --- Muscle Testing - Prgm. 3 - Shoulder Joint & Shoulder Girdle Muscles
- 045 --- Muscle Testing - Prgm. 4 - Elbow, Forearm & Hand Muscles
- 046 --- Muscle Testing - Prgm. 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 and 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 Pt. 1
- 072b --- Head Trauma: A System of Care Pt. 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 Parents' 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 on Aging, #1, 2, 3, 4
- 096 --- Post-Polio Syndrome
 - 097 --- Station, Gait & Cerebellar 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 (videos are housed in the OT Lab - Please see Instructor if you wish 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 with 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 I
- 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 Gymnic 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 --- " " - Body Mechanics
- 141c --- " " - Massage Manipulations
- 141d --- " " - 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 with Disabilitis
- 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 & Reseach Center
- 154 --- Barrier Free Lifts of New England "Helping You Achieve Greater Mobility"
- 155 --- A Walk with Laura
- 156 --- Adapted Aerobic Video, American Heart Assoc.
- 157 --- Danbury Hospital Phys. 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 Life Span
- 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
AGING: THE HEALTH CARE CHALLENGE, 2nd Ed. & 3rd Ed., Lewis
ALZHEIMER'S - A CARE GIVERS GUIDE & SOURCE BOOK, Gruetzner
AMERICAN RED CROSS RESPONDING TO EMERGENCIES
AMPUTATIONS & PROSTHETICS: A CASE STUDY APPROCH & INSTRUCTOR'S GUIDE, May
ANATOMY & HUMAN MOVEMENT, STRUCTURE & FUNCTION, 2nd Ed., Palastanga, Field, Soames
ANATOMY FLASHCARDS FOR HEALING MASSAGE TECHNIQUES, Johnson & Latterell
ANATOMY OF CLINICAL RESEARCH, Stein
ANATOMY OF MOVEMENT, Calais-Germain
ANATOMY: PALPATION & SURFACE MARKINGS, Field
ANATOMY TO COLOR & STUDY, Poritsky
APPLIED ANATOMY & KINESIOLOGY, Brown
APPLIED KINESIOLOGY, Jansen & Schultz
AQUATIC EXERCISE, Sova
AQUATICS, 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, Van Deusen & Brunt
AT ARM'S LENGTH: GOALS FOR ARM & HAND FUNCTION, Siegling & Click
ATHLETE'S SHOULDER, Andrews/Wilk
ATLAS OF LIMB PROSTHETICS, 2nd Ed., Ed. by Bowker & Michael
ATLAS OF PATHOPHYSIOLOGY, 2nd Ed., Anatomical Chart Company
ATTENTION DEFICIT DISORDER: STRATEGIES FOR SCHOOL-AGE CHILDREN, Jones
ATYPICAL INFANT DEVELOPMENT, 2nd Ed, Ed. By Hanson

B

BACK IN BALANCE, Headley
BALANCE, APTA
BALANCED BODY, 2nd Ed., Sceumann
BARRIER FREE DESIGN: THE LAW, VOL. II, Eastern Paralyzed Veterans
BARR'S HUMAN NERVOUS SYSTEM: AN ANATOMICAL VIEWPOINT, 8th Ed., Kiernan
BASIC BIOMECHANICS, Hall
BASIC CLINICAL MASSAGE THERAPY, 2nd Ed., Clay & Pounds
BASIC HUMAN ANATOMY, O'Rahilly
BASIC HUMAN NEUROPHYSIOLOGY, Guyton
BASIC REHABILITATION TECHNIQUES, 3rd Ed., Aspen Publication
BEARD'S MASSAGE, Wood & Becker
BEGINNINGS: PT & THE APTA, APTA
BIOFEEDBACK & RELATED THERAPIES IN CLINICAL PRACTICE, Mercer
BIOMECHANICS & MOTOR CONTROL OF HUMAN MOVEMENT, 3rd Ed., Winter
BIOMECHANICAL BASIS OF HUMAN MOVEMENT, 2nd Ed., Hamill & Knutzen
BIOMECHANICS OF SPORT & EXERCISE, McGinnis
BIOPHYSICAL FOUNDATIONS OF HUMAN MOVEMENT, 2nd Ed., Abernethy et al
BODY MECHANICS MANUAL
BONES AND JOINTS, CLINICAL PEDIATRICS VII, Foote
BRAIN INJURY: SURVIVOR & CAREGIVER EDUCATION MANUAL, Aspen Reference Group
BREAST MASSAGE, Curties
BRUNNSTROM'S MOVEMENT THERAPY IN HEMIPLEGIA, A NEUROPHYSIOLOGICAL APPROACH, 2nd Ed., Sawner & LaVigne
BUILDING A MEDICAL VOCABULARY, Leonard

C

CARDIAC REHABILITATION, Stippig, Berg & Keul
CARDIOPULMONARY PHYSICAL THERAPY, 3rd Ed., Edited by Irwin & Tecklin
CARDIOPULMONARY REHABILITATION: BASIC THEORY & APPLICATION, 2nd 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 MEDICAL CONDITIONS FOR PHYSIOTHERAPISTS

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, Edited by Hislop & Sanger
 CHILD ABUSE, MEDICAL GNOSIS & MANAGEMENT, 2nd 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 PRINCIPLES & PRACTICE OF CARDIPULMONARY PHYSICAL
 THERAPY, 3rd Ed., Dean & Frownfelter
 CLINICAL DECISION MAKING IN PHYSICAL THERAPY, Wolf
 CLINICAL DECISION MAKING FOR THE PHYSICAL THERAPIST ASSISTANT, Skinner & McVey
 CLINICAL DECISION MAKING IN THERAPEUTIC EXERCISE, Sullivan & Markos
 CLINICAL DECISIONS IN THERAPEUTIC EXERCISE, Nyland
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D

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 DIFFERENTIAL DIAGNOSIS IN PHYSICAL THERAPY, 2nd Ed., Goodman & Snyder
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 DORLAND'S POCKET MEDICAL DICTIONARY
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F

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H

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 HANDBOOK OF HAND SPLINTS
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I
 ILLUSTRATED ESSENTIALS IN ORTHOPEDIC PHYSICAL ASSESSMENT, Evans
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J
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 JOINT STRUCTURE & FUNCTION, 2nd Ed., Norkin & Levangie
 JOURNAL OF REHABILITATION RESEARCH & DEVELOPMENT #2, March 1990, Dept. of Veteran Affairs

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K

KELLER'S OFFICIAL OSHA HANDBOOK
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L

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LOWER EXTREMITY AMPUTATION, 2nd Ed., Rehabilitation Institute of Chicago
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M

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MASSAGE THERAPIST'S GUIDE TO PATHOLOGY, Werner
MASSAGE THERAPY & CANCER, Curties

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 MOTOR DEVELOPMENT PROGRAM FOR SCHOOL AGE CHILDREN, Sellers
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 MUSCULOSKELETAL SYSTEM, Poland
 MUSCULOSKELETAL SYSTEM, Rosse & Clawson
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N

NEURO NOTES: CLINICAL POCKET GUIDE, Fenderson & Ling
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2005 NURSING DRUG GUIDE, Lippincott

O

OBSTETRIC & GYNECOLOGIC CARE IN PT, Gourley
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OCCUPATIONAL THERAPY FOR PHYSICAL DYSFUNCTION, 2nd Ed., Ed. by Trombly
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P

PAIN MANAGEMENT BY PHYSICAL THERAPY, Wells, Frampton & Bowsher
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PATIENT CARE SKILLS, 2nd Ed., Minor & Scott
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 PHYSICAL REHABILITATION, O'Sullivan & Schmitz
 PHYSICAL REHABILITATION ASSESSMENT & TREATMENT, 3rd Ed., O'Sullivan & Schmitz
 PHYSICAL REHABILITATION FOR DAILY LIVING, Buchwald
 PHYSICAL REHABILITATION LABORATORY MANUAL, O'Sullivan & Schmitz
 PHYSICAL REHABILITATION OF THE INJURED ATHLETE, 2nd Ed., Andrews, Harrelson, Wilk
 PHYSICAL REHABILITATION OUTCOME MEASURES, Cole, Finch, Gowland & Mayo
 PHYSICAL THERAPIST'S GUIDE TO HEALTH CARE, Curtis
 PHYSICAL THERAPY, Scully & Barnes
 PHYSICAL THERAPY ADMINISTRATION & MANAGEMENT, 2nd Ed., Ed. by Hickok
 PHYSICAL THERAPY AIDE, A WORKTEXT, Weiss
 PHYSICAL THERAPY EDUCATION & SOCIETAL NEEDS, GUIDELINES FOR PT EDUCATION: THE
 PROFESSIONALIZATION OF PT - 1919-1990
 PHYSICAL THERAPY ETHICS, Gabard & Martin
 PHYSICAL THERAPY EXAM REVIEW BOOK, Vol. 1 & 2, Hershey & Siebert
 PHYSICAL THERAPY FOR CHILDREN, Campbell
 PHYSICAL THERAPY MANAGEMENT, AN INTEGRATED SCIENCE, Walter
 PHYSICAL THERAPY MANAGEMENT OF MUSCULAR DYSTROPHY, The Parent Project for MD Research
 PHYSICAL THERAPY MANAGEMENT OF PATIENTS WITH HEMIPLEGIA SECONDARY TO CEREBRO-VASCULAR
 ACCIDENT, Rancho Los Amigos
 PHYSICAL THERAPY PROCEDURES, Downer
 PHYSICAL THERAPY PROTOCOLS, Ed. by Benzer & Roger
 PHYSICAL THERAPY REFERENCE GLOSSARY OF TERMS, Dotzler
 PHYSICIAN'S GUIDE TO THERAPEUTIC MASSAGE, Yates
 PHYSICS: HEALTH & THE HUMAN BODY, Gustafson
 PHYSIOLOGY OF MUSCULAR ACTIVITY, Scheider & Karpovich
 PHYSIOLOGY: THE BASIS OF CLINICAL PRACTICE, Irion
 PHYSIOTHERAPY IN ORTHOPAEDICS, Atkinson, Coutts, Hassenkamp
 PLAIN & SIMPLE GUIDE TO THERAPEUTIC MASSAGE & BODYWORK CERTIFICATION, Allen
 POCKET CLINICAL DRUG REFERENCE, Tejani & Sanoski
 POCKET GUIDE TO MUSCULOSKELETAL ASSESSMENT, Baxter
 POSITIONAL RELEASE THERAPY: ASSESS. & TX OF MUSCULOSKELETAL DYSFUNCTION, D'Ambrogio, Roth
 POSITIONING IN A WHEELCHAIR, Mayall & Desharnais
 POST-STROKE REHABILITATION, US Dept. of Health & Human Services
 POSTURE & PAIN, Kendal & Boynto
 PRACTICAL EXERCISE THERAPY, Hollis, Sanford & Waddington
 PRACTICAL GUIDE TO CARDIAC REHABILITATION, Karam
 PRACTICAL JOINT ASSESSMENT, LOWER QUADRANT, 2nd Ed., Hartley
 PRACTICAL JOINT ASSESSMENT, UPPER QUADRANT, 2nd Ed., Hartley
 PRACTICAL KINESIOLOGY FOR THE PTA, Ed by Konin
 PRACTICAL MANUAL OF PHYSICAL MEDICINE & REHABILITATION, Tan
 PRACTICAL REHABILITATION TECHNIQUES FOR GERIATRIC AIDS, DiDomenico & Ziefer
 PRACTICE ISSUES IN PHYSICAL THERAPY, Matthews
 PRESSURE ULCER TREATMENT, CLINICAL PRACTICE GUIDELINE #15, US Dept of Health & Human Services
 PRIMARY ANATOMY, 7th Ed., Basmajian
 PRIMER ON LYMPHEDEMA, Kelly
 PRIMER ON MEASUREMENT: AN INTRODUCTORY GUIDE TO MEASUREMENT ISSUES, Rothstein, Echtermach
 PRINCIPAL NERVOUS PATHWAYS, 4th Ed., Rasmussen

PRINCIPLES & PRACTICE OF CARDIOPULMONARY PHYSICAL THERAPY, 3rd Ed., Frownfelter, Dean
 PRINCIPLES & PRACTICE OF ELECTROTHERAPY, Kahn
 PRINCIPLES & PRACTICE OF PT: I, II, & III
 PRINCIPLES & TECHNIQUES OF PATIENT CARE, 1st & 2nd Ed., Pierson
 PRINCIPLES OF ANATOMY & PHYSIOLOGY, Tortora, Anagnostakos
 PROBLEM ORIENTED RECORD SYSTEM IN PHYSICAL THERAPY
 PROCEDURES FOR NURSING THE BURNED PATIENT, Jones
 PROFESSIONAL ETHICS: A GUIDE FOR REHABILITATION PROFESSIONALS, Scott
 PROFESSIONAL WHEELCHAIR CONTACT, Invacare Corp.
 PROGRAM GUIDE FOR INFANTS & TODDLERS WITH NEUROMOTOR & OTHER DEVELOPMENTAL DISABILITIES,
 Connor, Williamson & Supp
 PROGRAMMED FUNCTIONAL ANATOMY, Leyshon
 PROGRESSIVE CASTING & SPLINTING FOR LOWER EXTREMITY DEFORMITIES IN CHILDREN WITH NEUROMOTOR
 DYSFUNCTION, Cusik
 PROMOTING LEGAL AWARENESS IN PHYSICAL & OCCUPATIONAL THERAPY, Scott
 PROPRIOCEPTIVE NEUROMUSCULAR FACILITATION, Voss, Ionta & Myers
 PROSTHETICS & ORTHOTICS, Shurr & Cook
 PSYCHOLOGICAL & SOCIAL IMPACT OF PHYSICAL DISABILITY, Dellordo & Marinelli
 PSYCHOLOGY OF THE BODY, Greene & Goodrich-Dunn
 PSYCHOSOCIAL ASPECTS OF HEALTH CARE, Drench, Noonan, Sharby & Ventura
 PTA EXAM: THE COMPLETE STUDY GUIDE, Giles
 PTA HANDBOOK, KEYS TO SUCCESS IN SCHOOL & CAREER FOR THE PTA, Curtis & Newman
 PT ASSISTANT IN THE SCHOOLS, Gombash

Q

QUADRIPLÉGIA AFTER SPINAL CORD INJURY, Duttarer
 QUICK & EASY MEDICAL TERMINOLOGY, 6th Ed., Leonard
 QUICK MEDICAL TERMINOLOGY, 2nd Ed., Smith & Davis
 QUICK REFERENCE DICTIONARY FOR MASSAGE THERAPY & BODYWORK, Denning
 QUICK REFERENCE DICTIONARY FOR PHYSICAL THERAPY, Ed. by Bottomley

R

RAPID EKG INTERPRETATION, Dubin
 REFLEX TESTING METHODS FOR CNS DEVELOPMENT, Fiorentinio
 REHABILITATION FOR THE POSTSURGICAL ORTHOPEDIC PATIENT, Maxey, Magnusson
 REHABILITATION MEDICINE, 3rd Ed., Rusk & Howard
 REHABILITATION OF PERSONS WITH RHEUMATOID ARTHRITIS, Rehabilitation Institute of Chicago
 REHABILITATION OF THE ADULT & CHILD WITH TRAUMATIC BRAIN INJURY, 2nd Ed. & 3rd Ed., Rosenthal
 REHABILITATION OF THE HEAD INJURED ADULT, Ranchos Los Amigos Hospital
 REHABILITATION OF THE SPINAL CORD INJURED PATIENT, Rossier
 REHABILITATION OF THE SPINE, Liebensohn
 REHABILITATION SPECIALISTS' HANDBOOK, 1st & 2nd Ed., Rothstein, Roy, Wolf
 REHABILITATION WITH BRAIN INJURY SURVIVORS: AN EMPOWERMENT APPROACH, O'Hara & Harrell
 RESTORATION OF MOTOR FUNCTION IN THE STROKE PATIENT
 REVIEW BOOK FOR PHYSICAL THERAPY LICENSING EXAM, Meyer
 REVIEW OF GROSS ANATOMY, Pansky & House

S

SAY IT IN SPANISH, A GUIDE FOR HEALTH CARE PROFESSIONALS, Joyce & Villanueva
 SCIENCE & HEALTH, Eddy
 SEATING & MOBILITY, Treffler, Hobson, Taylor, Monahan, Shaw
 SENSIBILITIES, UNDERSTANDING SENSORY INTEGRATION, Trott, Laurel & Windeck
 SENSORY-MOTOR INTEGRATION ACTIVITIES, Fink
 SENSORY INTEGRATION, Fisher
 SENSORY INTEGRATION & THE CHILD, Ayres
 SEXUAL FUNCTION IN PEOPLE WITH DISABILITY & CHRONIC ILLNESS, A HEALTH PROFESSIONAL'S GUIDE, Sipski

&

Alexander
 SHIATSU, Somma
 SHIATSU THEORY & PRACTICE, Beresford-Cooke
 SHORT COURSE IN MEDICAL TERMINOLOGY, Collins
 SHOULDER IN HEMIPLEGIA, Calliet
 SHOULDER PAIN, Calliet
 SOFT TISSUE PAIN & DISABILITY, Calliet
 SPA BODYWORK, A GUIDE FOR MASSAGE THERAPISTS, Williams
 SPA BOOK, THE OFFICIAL GUIDE TO SPA THERAPY, Crebbin-Bailey, Harcup & Harrington

SPECIAL TESTS FOR ORTHOPEDIC EXAMINATION, Konin, Wiksten, Isear
 SPINAL CORD INJURY, APTA
 SPINAL CORD INJURY: A GUIDE TO REHAB NURSING, Rehabilitation Institute of Chicago
 SPINAL CORD INJURY: CONCEPTS & MANAGEMENT APPROACHES, Ed. by Buchanan & Nawoczenski
 SPINAL CORD INJURY: FUNCTIONAL REHABILITATION, & 2nd Ed., Somers
 SPINAL CORD INJURY MANUAL by EPVA
 SPINAL CORD INJURY: MEDICAL MANAGEMENT & REHABILITATION, Rehabilitation Institute of Chicago
 SPINAL CORD INJURY: MEDICAL MANAGEMENT & REHABILITATION, Yarkony
 SPINAL CORD INJURY: PATIENT EDUCATION MANUAL, Aspen Reference Group
 SPINAL CORD INJURY MANUAL, Eastern Paralyzed Veterans Association
 SPINAL MANIPULATION, Bourdelton & Day
 SPINAL ORTHOTICS
 SPLINTING OF BURN PATIENTS, Bon Prince & Yeakel
 SPORTS & EXERCISE NUTRITION, McArdle, Katch, & Katch
 SPORTS INJURY ASSESSMENT & REHABILITATION, Reid
 SPORTS INJURY PREVENTION & REHABILITATION, Shamus & Shamus
 SPORTS THERAPY TAPING GUIDE, Mosby
 STEDMAN'S CONCISE MEDICAL DICTIONARY FOR THE HEALTH PROFESSIONS, 4th Ed
 STEDMAN'S ORTHOPAEDIC & REHAB WORDS
 STEDMAN'S POCKET MEDICAL DICTIONARY
 STRAIN & COUNTERSTRAIN, Jones
 STRENGTH TRAINING ANATOMY, Delavier
 STROKE/HEAD INJURY, Rehabilitation Institute of Chicago
 STROKE PATIENT: PRINCIPLES OF REHABILITATION, Johnstone
 STROKE, PUTTING THE PIECES TOGETHER, NSA
 STROKE REHABILITATION PATIENT EDUCATION MANUAL, Aspen Reference Group
 STROKE REHABILITATION: STATE OF THE ART 1984, Rancho Los Amigos
 STRUCTURE & FUNCTION OF THE NERVOUS SYSTEM, Guyton
 STUDENT'S WORKBOOK FOR LEARNING MEDICAL TERMINOLOGY, Young
 SUCCESS IN MASSAGE THERAPY, Garofano
 SURFACE ANATOMY, 3rd Ed., Lumley
 SURVEY OF FUNCTIONAL NEUROANATOMY, Garoutte
 SURVEY OF HUMAN DISEASE, 2nd Ed., Walter

I

TABER'S CYCLOPEDIA MEDICAL DICTIONARY
 TEACHING AT ITS BEST: A RESEARCH BASED RESOURCE FOR COLLEGE INSTRUCTORS, Nilson
 TECHNIQUES IN MUSCULOSKELETAL REHABILITATION, Prentice & Voight
 TECHNIQUES IN MUSCULOSKELETAL REHABILITATION COMPANION HANDBOOK, Goodyear
 TEACHING PORTFOLIO: A PRACTICAL GUIDE TO IMPROVED PERFORMANCE & PROMOTION/TENURE DECISIONS,
 2nd Ed., Seldin
 TEACHING STRATEGIES FOR VALUES AWARENESS, Dalis & Strasser
 TECHNIQUES FOR THE TREATMENT OF NEGLECT, APTA
 TEST SUCCESS: TEST TAKING TECHNIQUES FOR THE HEALTH CARE STUDENT, Vitale & Nugent
 TETRAPLEGIA & PARAPLEGIA: A GUIDE FOR PHYSIOTHERAPISTS, 5th Ed., Bromley
 TEXTBOOK OF DISORDERS & INJURIES OF THE MUSCULOSKELETAL SYSTEM, 3rd Ed., Salter
 TEXTBOOK OF ORTHOPAEDIC MEDICINE, Volume 2, Ed. Cyriax & Russell
 TEXTBOOK OF PATHOPHYSIOLOGY, Snively & Bedshear
 THEORY & PRACTICE OF THERAPEUTIC MASSAGE, 4th Ed., Beck
 THERAPEUTIC CHAIR MASSAGE, Stephens
 THERAPEUTIC COMMUNICATION, Navara, Lipkowitz, & Navarra Jr.
 THERAPEUTIC EXERCISE, 4th & 5th Eds., Ed. by Basmajian
 THERAPEUTIC EXERCISE, Licht
 THERAPEUTIC EXERCISE, Sullivan & Markos
 THERAPEUTIC EXERCISE & UV RADIATION, Licht
 THERAPEUTIC EXERCISE FOR BODY ALIGNMENT & FUNCTION, 2nd Ed., Daniels & Worthington
 THERAPEUTIC EXERCISE - FOUNDATION & TECHNIQUES, Kisner & Colby
 THERAPEUTIC EXERCISE - FOUNDATION & TECHNIQUES, 3rd Ed, Kisner & Colby
 THERAPEUTIC EXERCISE IN DEVELOPMENTAL DISABILITIES, 3rd Ed, Connolly & Montgomery
 THERAPEUTIC EXERCISE - MOVING TOWARD FUNCTION, Hall & Brody
 THERAPEUTIC EXERCISE, TECHNIQUES FOR INTERVENTION, Bandy & Sanders
 THERAPEUTIC EXERCISES USING THE SWISS BALL, Creager
 THERAPEUTIC INTERVENTIONS IN ALZHEIMER'S DISEASE, Glickstein
 THERAPEUTIC MASSAGE, Holey & Cook
 THERAPEUTIC MASSAGE IN ATHLETICS, Archer
 THERAPEUTIC MODALITIES FOR PHYSICAL THERAPISTS, 2nd Ed., Prentice

THERAPEUTIC MODALITIES: THE ART & SCIENCE, Knight & Draper
THERMAL AGENTS IN REHABILITATION, Michervitz
TOPICS IN GERIATRIC REHABILITATION: PRESSURE SORES, Lewis
TRAINING OF THE LOWER EXTREMITY AMPUTEE, Kerr & Brunnstrom
TRAINING PROGRAM FOR EDUCATIONAL AIDES IMPLEMENTING CONSULTATIVE THERAPY ACTIVITIES,
Northwestern Illinois Assoc.
TRANSFERRING & LIFTING CHILDREN & ADOLESCENTS, Jaeger
TREATMENT OF BURN PATIENTS, Trotter & Johnson
TREATMENT OF CEREBRAL PALSY & MOTOR DELAY, Levitt
TUMBLE FORMS, METHODS MANUAL, Comments by Bobath, Bobath & Ayres

U

UNDERSTANDING BALANCE: THE MECHANICS OF POSTURE & LOCOMOTION, Roberts
UNDERSTANDING SPORTS MASSAGE, 2nd Ed., Benjamin & Lamp
UNDERSTANDING THE NATURE OF AUTISM, Janzen
UNDERSTANDING THE SCIENTIFIC BASIS OF HUMAN MOVEMENT, Gowtske & Milner
UNLOCKING MEDICAL TERMINOLOGY, 2nd Ed., Wingerd
USING MEDICAL TERMINOLOGY, A PRACTICAL APPROACH, Nath

V

VITAL SIGNS, McInnes
VOCATIONAL REHABILITATION FOR PERSONS WITH TRAUMATIC BRAIN INJURY, Wehman & Kreutzer

W

WHEELCHAIR SELECTION & CONFIGURATION, Cooper
WORK HARDENING: A PRACTICAL GUIDE, Demers
WORK HARDENING: A PRACTICAL GUIDE, Milliken Physical Therapy Center
WORK INJURY: MANAGEMENT & PREVENTION, Isernhagen
WOUND CARE, A COLLABORATIVE PRACTICE MANUAL FOR Pts & NURSES, Sussman & Bates-Jensen
WRITING PATIENT/CLIENT NOTES, Kettenbach
WRITING SOAP NOTES, 3rd Ed., Kettenbach

PTA DEPARTMENT JOURNAL LIST

Advances in Wound Care
Biomechanics
Cardiopulmonary Physical Therapy Journal
Journal of Physical Therapy Education
Journal of Rehab Research & Development
Orthopedic Physical Therapy Practice

Pediatric Physical Therapy
Physical Therapy
PT Advance
PT in Motion
PT Magazine of Physical Therapy

SUGGESTED WEB SITES

www.APTA.org	www.nypta.org
www.ADA.org	www.cms.hhs.gov
www.americanheart.org	www.woundcarenet.com
www.physicaltherapist.com	www.medicaledu.com
www.medscape.com	www.nutrition.org
www.rehabedge.com	www.physical-therapy.advanceweb.com
www.nih.gov	www.nysed.gov
www.ptcentral.com	

PTA DEPARTMENT CD-ROM LIST

Amputee, The
Auscultation of Breath Sounds
Clinical Upper Extremity Test & Review
ClipART: Medical Clip Art
Computerized PTA Exam Review Access
Dynamic Human
Gait
Goniometry
Guide to Physical Therapist Practice
Interactive Atlas of Clinical Anatomy
Interactive Hand Therapy Edition
Interactive Medical Terminology
Interactive Physiology
Interactive Skeleton: Sports & Kinetic Edition
LifeArt: Medical Clip Art
Manual Muscle Testing, An Interactive Tutorial
Saunders' Visual Guide to Musculoskeletal Assessment
VHI Computerized Home Exercise Programs
Virtual Ultrasound Modalities
Wheelchair Mobility
TEST MASTER (Physical Therapist Assistant Examination) 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 us 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, read 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: text books, 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 2 ½ 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 2 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 they feel like they are going to pass out. The best intervention should be to:

- a. lower the client to the floor gently
- b. hold the client up
- c. walk the client into the waiting room & have them sit in 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 **distractors** are the answers that steer you away from the correct answer. The **correct answer** is just that, however, as we know, if the distractors 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:

- T Break the question down into its components. What is it asking?
- T Underline the important information and key words.
- T Try to answer the questions before you look at the answer options.
- T Cross out the options that you know are the distractors. A guess between two options is better than a guess between four options.
- T Watch out for negative polarity.
- T Watch out for words like best, worst, first, least - these are asking you to make judgments.
- T Watch out for “absolute” words: all, none, never. As there are few absolutes in this world, these are usually false.
- T Look for answers that provide “opposite choices.” Either one will be the correct answer, or they will both be distractors.
- T 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:

- 1. Get a good night sleep
- 2. Cut out the caffeine
- 3. Get to the test ahead of time
- 4. Take care of bathroom needs
- 5. Make sure you have everything you need
- 6. Monitor the time
- 7. Answer the easy questions first
- 8. Make educated guesses

APTA Background Sheet 2010

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

The Physical Therapist

Physical therapists (PTs) are highly-educated, licensed health care professionals who can help patients reduce pain and improve or restore mobility - in many cases without expensive surgery and often reducing the need for long-term use of prescription medications and their side effects.

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]

APTA Background Sheet 2010

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]

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 and 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
- 10 Panel Drug Screen performed upon admission to the Program

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. Physicals should be done early in the month of **July**. (Physicals done prior to July 1st would need to be repeated during the senior year in order to ensure coverage through the first summer session.) Students assigned to Summer Session II/III for their Clinical Education III would need to have had a third physical and PPD and have submitted the physical form to the school nurse when required. (Please note that most students are assigned to their third clinic in Summer Session I, and therefore would not be required to have the third physical.)

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 laboratory 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 the 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 THAT 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 through 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 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, audiotaped, 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 the 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 contracting 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 DEPARTMENT

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 DEPARTMENT

I, _____, am willing to participate
NAME

in demonstrations/video/still pictures and as a patient during Laboratory 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 laboratory session.

SIGNATURE

DATE

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

STUDENT RESPONSIBILITY FOR 2010-2012 PTA STUDENT HANDBOOK

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 2010-2012

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. 2010-2012 PTA Department Student Handbook
 - b. PTA Rules and 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: _____