

**COLLEGE OF THE SEQUOIAS  
PHYSICAL THERAPIST ASSISTANT PROGRAM**



**STUDENT LAB MANUAL  
2018-2019**

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\*This handbook is an addendum to College of the Sequoias Catalog of Courses and its Student Handbook and applies only to the Physical Therapist Assistant (PTA) Program and its students. Policies that are addressed in the College Catalog of Courses and the Student Handbook apply to the PTA Program and its students

# PTA Lab Manual

## **Lab Instruction**

The PTA Skills labs are a place for students to practice beginning through advance skills. Lab time will be scheduled for each course and held in two sections. It will be necessary for the PTA student to schedule for either lab section A or B. Student to instructor ratio for the COS PTA program is 14:1. There are three locations- HR 126, HR 113, and POT 112.

### **First Year Labs:**

PTA 125 Basic Principles of Patient Management/First Semester - HR126

Lab A - 14 students

Lab B - 14 students

PTA 128 Kinesiology/First Semester/HR126

Lab A - 14 students

Lab B - 14 students

PTA 130 Physical Agents and Modalities/Second Semester/HR126

Lab A - 14 students

Lab B - 14 students

PTA 148 Orthopedics /Second Semester/HR126 & POT112

Lab A - 14 students

Lab B - 14 students

Lab Finals in PTA 125, 128, 130 and 148 must be passed in order to progress to PTA 150 Clinical

### **Second Year Labs:**

PTA 145 Neurorehabilitation/Third Semester/HR126/POT112

Lab A - 14 students

Lab B - 14 students

PTA 152 Cardiopulmonary Rehabilitation/Third Semester/HR126

Lab A - 14 students

Lab B - 14 students

PTA 155 Therapeutic Exercise/Third Semester/HR126 & POT112

Lab A - 14 students

Lab B - 14 students

Integrated lab practical from PTA 145, 152 and 155 must be passed in order to progress to PTA 160/161 Clinical Affiliations/Full time

**In order to attend clinical affiliations, the student must have passed all the preceding courses with a grade of 72% or higher.**

**Lab Grade will be 20% of each course where there is a lab component.**

Midterm	25%
Final	40%
Lab Score	20%
Assignments and Quizzes	10%
Standard of Conduct	5%

**ANY STUDENT WHO DOES NOT RECEIVE AT LEAST 72% OR C GRADE FOR ANY COURSE AND A PASS GRADE ON THE FINAL LAB PRACTICAL WILL FAIL THE PROGRAM**

**See Lab Practical Examination Grading Criteria and Lab Practical Rubric at the back of this manual for clarification about what makes a passing grade.**

### **Skills Practice Lab**

The Skills Lab is located in Hospital Rock, room 113 or 126. Lab time can be used for independent and small group study/practice, demonstration by faculty and peers to validate your learning. The Skills lab is reserved for PTA students with a lab instructor who is a licensed PT or PTA at the following times:

Monday	8:00-10:00 am	HR 113
Monday	7:00-9:00 pm	HR 126
Wednesday	7:00-9:00 pm	HR 126
Thursday	4:00-6:00 pm	HR 126 (not offered in the Spring semester)

To reserve a space in this Skills lab please register each semester for one section of PTA 400, Skills Lab. If your lab instructor feels you need further practice time or remediation, you will be referred for Lab Remediation and required to attend practice session per the PTA Student Handbook.

### **Lab Instruction/Skill Attainment and Practice (i.e. Piano Lesson)**

1. Students will be instructed to practice only those skills for which they have had prior instruction.
2. Students are expected to come to lab appropriately prepared for each skill/technique to be practiced.
3. Students should at all times practice safe techniques. Standard precautions should be followed at all times.
4. Students will be instructed in and are expected to use proper/safe body mechanics at all times.
5. Students are responsible for reporting to faculty any equipment problems/maintenance issues such as frayed electrical cords, cracked plugs, broken parts, missing parts, etc.

### **Lab Skills Practice and Remediation: PTA 400 (Piano Practice)**

1. The PTA program maintains a practice laboratory which is open to students and instructors, and which has the following functions:
  - a. Enhances the PTA curriculum by providing learning activities which reinforce lab skills and objectives.
  - b. Provides an environment within which students can practice lab skills prior to performing these skills in actual patient-care settings.
  - c. Provides a mechanism for the remediation of lab skills when students need extra training opportunities.
  - d. Assists students in completing lab objectives when they don't have opportunities to do so in actual lab sessions.
2. The skills lab provides the following resources for students and instructors:
  - a. Lab equipment and supplies for practicing procedures (i.e. BP cuff, goniometers, modalities, transfer equipment, gait training equipment, etc.)
  - b. Anatomical and clinically-focused models, charts, and diagrams
  - c. Computer-assisted instruction (CAI) programs/iPads
  - d. Skills lab instructors to provide one-on-one and group instruction and tutoring during scheduled hours
3. Lab Practical Remediation:
  - a. If a student does not perform a skill at the "pass" level on a lab practical, then a remediation plan will be established by the lab instructor. The referral form is then sent to the Skills Lab Instructor who will complete the remediation plan with the student. The Skills Lab instructor may require three (3) signatures of different students to confirm the skill is component. Once the remediation plan has been completed successfully, the form will be signed and placed in the student file as well as a copy provided to the original instructor to ensure the student is safe to continue with lab activities and will then be allowed to repeat the lab practical exam or portion thereof.
4. Lab Practical Reexamination:
  - a. If a student does not perform multiple skills at the "pass" level on a lab practical, then a reexamination plan will be established by the lab instructor. The referral form is then send to the skills lab instructor who may assist with the skills and possible the review of the missing components of the lab practical. The student will repeat the practical with the lab instructor of the respective course.
5. Lab Practical Reexamination + additional case
  - a. If a student does not perform multiple skills at the "pass" level on a lab practical, that involves critical safety, red flag, places the student or the patient in danger a student will receive a practical reexamination form as per section #4 (above), put will also be required to perform an additional case, selected at random.
6. Skills lab activities, equipment, and supplies are coordinated by the PTA Program Director and the Skills Lab Instructor.

### **Resources Available**

The PTA Skills lab houses a variety of equipment and supplies to assist the student in learning and mastering skills and knowledge. Each PTA student is required to purchase a “PTA Student Kit” from the COS bookstore in order to have the basic tools to practice in lab as well as outside of lab. Students are encouraged to use instruments to practice measuring ROM, blood pressure, reflexes and sensation. Models and lab supplies are available for your use. PTA 400 Skills lab faculty and Program Director/Lab Coordinator are available to facilitate student learning.

### **Competency Verification**

PTA Students are required to have their competency in performing certain skills validated. Students first receive instruction in the skill by their lab instructor. Students are then responsible to practice the skill in the lab. Evaluation of skill will be one by self, peer and lab instructor.

Competency will be verified through practical lab examinations. Practical examinations give the student opportunity to demonstrate understanding of course material and the psychomotor skills necessary to complete the physical therapy intervention. Practical examinations are graded on a Pass/Fail on established criteria. Criteria for successful lab practical exam are presented in the Lab Practical Scenarios provided before the Lab Midterm and Final. In order to pass the practical examination all patient safety and crucial elements must be completed at 100 % and other specific skill must be completed at 70% level or better. Each student will have 2 opportunities to pass the lab practical final (initial exam and 1 re-take), in the form of remediation or re-examination. Retakes of the exam must include a remediation or reexamination plan developed by the lab instructor requiring further practice in PTA 400 to retake. Students must pass practical lab examinations in order to pass the course. Students who fail a practical examination for a course upon retake will earn either a “D” or “F” in the course depending on the didactic grade.

**In order to attend clinical affiliations, the student must have passed all the preceding courses with a grade of 72% or higher.**

### **Dress Code for Lab**

COS PTA Students participating in skills lab practice or lab practical examinations are required to wear appropriate clothing such as shorts for men and shorts and sports bra/halter top for women. This is necessary to access body parts necessary while preserving modesty. One student will be role-playing as the patient and the other the Student PTA. Warmer clothing may be worn while not in the patient role. Please dress for lab prior to coming. There is a restroom for changing in Hospital Rock building. There are NOT locker facilities in the Allied Health Skills lab. A small gym bag for your personal clothes and hand towel is recommended.

The dress code provides for an effective learning environment and promotes the safety of students and their lab partners. Students are required to dress in an appropriate manner for all class and laboratory sessions. The intention of this code is that students be neat and clean. Attire should not be visually distracting to others or disruptive to the educational experience.

Fingernails must be trimmed sufficiently to allow you to practice techniques of physical therapy without risking damage to the skin of your lab partner or patients. Jewelry should be limited to one ring per hand, medical alert bracelets, watches, and only one pair of small stud earrings. Hair must be clean and neat and not interfere with patient care.

### **General Guidelines**

1. COS policy does not allow food or drinks in the classroom or labs.
2. Students will practice only skills for which they have had prior instruction.
3. Students will be instructed and expected to use proper body mechanics.
4. Students are responsible for reporting to faculty any equipment issues or other safety concerns.
5. Labs will be locked when not under direct supervision of an instructor.
6. All lab equipment must remain in the lab and stored in designated places when not in use.
7. Students must be knowledgeable of the care, handling and proper use of the equipment prior to using it.
8. The student should report any illness, injury, disability or pregnancy to the lab instructor before the lab begins. The lab instructor will determine if the student can safely participate in the lab or if they need to make up the session during PTA 400. A doctor's note may be required for special accommodations.
9. Beds must be remade with clean linen at the end of the lab session.
10. If treatment tables, chairs, or desks have been moved around, please return them to their original position.
11. Do not place any audiovisual or computer equipment on the floor.
12. If equipment is not working or supplies run low, please contact the lab instructor who will notify the PTA office.
13. Students are required to purchase a Skills lab kit at the beginning of their first semester. Kits have been custom designed to development of psychomotor skill procedures and to facilitate classroom and laboratory learning. By each student having their own Skills lab kit, they can practice these skills independently as well as in the lab.
14. PTA 400 is a busy learning center and labs will start and end on time. Please arrive 5 minutes early so that you can be ready to participate when lab starts.
15. PTA 400 is intended for laboratory practice. The volume of students using the space requires that the space be used for laboratory skill practice and not other academic or social activities.

### **Safety Guidelines**

1. Students will be consistently monitored by faculty for practice of safety skills.
2. If students are not following safe practices in the lab, it will be brought to the student's attention and re-instructed if necessary. IF the student continues to act in an unsafe manner, they will be asked to leave the lab and will be counted as absent. The student is responsible for making up the lab time as remediation in PTA 400.
3. Students who show repeated disregard for the safe laboratory behavior will not be permitted to participate in the lab practical, which will ultimately lead to failure of the class and removal from the PTA program.

4. Manuals for each piece of equipment are stored in the PTA cabinet in HR 113 or PTW 112. It will be easily accessible to users.
5. All electrical equipment in the PTA labs is inspected annually in and calibrated in August/September. The company will provide the documentation of the equipment testing and calibration and labels are placed on each piece of equipment to verify such testing. Repairs recommend will be done before students are allowed to use the equipment.
6. Wheelchairs and other non-electrical equipment will be inspected each semester by the PTA faculty and repairs or replacements will be ordered as necessary.
7. Standard OSHA workplace inspections will occur as part of the COS campus policy. MSDS manual is present in the PTA cabinet in HR 113 and PTW 112.
8. Unauthorized personal are not allowed in the PTA 400 Skills lab or computer lab.
9. Emergency information and evacuation maps are posted in each lab.

### **Infection Control**

All students and lab instructors will practice proper hand washing technique and hand hygiene while using the lab. Clean linens will be provided on the linen cart. Soiled linen should be placed in the hamper. Tables are to be cleaned with disinfectant spray at the end of each lab session. Cleaning supplies are located in the storage closet in HR 113, HR 126 and PTW 112.

### **Infection Control Precautions**

1. Handle the blood and body fluids of all clients as potentially infectious.
2. Wash hands before and after all client or specimen contact.
3. Wear gloves for potential contact with blood or body fluids.
4. Wear gloves if splash with blood or body fluids is anticipated.
5. Wear an agency-approved filtration mask if airborne transmission is possible.
6. Wear protective eye wear if splatter with blood and body fluid is possible. Wear gown if clothing apt to be soiled.
7. Place used syringes immediately in nearby impermeable sharps container.  
Do not recap or manipulate needles in any way.
8. Treat all linen soiled with blood/body secretions as potentially infectious.
9. Process all laboratory specimens as potentially infectious.
10. Follow agency policy regarding resuscitation during respiratory arrest.

### **OSHA Guidelines following Percutaneous or per mucosal Exposure**

#### **A significant occupational exposure is defined as:**

- A needle stick or cut caused by a needle or sharp that was actually or potential contaminated with blood/body fluid.
- A mucous membrane exposure to blood or body fluids (i.e. splash to the eyes, ears, mouth)
- A cutaneous exposure involving large amounts of body fluid or prolonged contact with body fluid, especially when the exposed skin is chapped, abraded, or afflicted with dermatitis, or compromised/broken in any way.

**Procedure following exposure:**

1. Wound care/first aid should occur immediately following exposure:
  - a. All wounds should be vigorously cleansed with soap and water immediately.
  - b. Mucous membranes should be flushed with water or normal saline solution immediately.
  - c. Other treatment will be rendered as indicated.
2. Following immediate wound care/first aid measures:
  - a. The student will immediately report to the clinical instructor any incident of exposure.
  - b. The clinical instructor will complete a Notice of Accidental Exposure form and submit it to the PTA Program Director (form available from the Division secretary).
  - c. Clinical instructor or student will notify the Infection Control Officer of the clinical agency involved.
  - d. Specific recommendations will be made according to the type of exposure and infectious agent involved.

**INFORMED CONSENT (Sample only)**

**Student to Act as Simulated Patient**

I understand that PTA practice includes being touched by my fellow classmates and instructors. I understand that as part of the academic and clinical education to become a PTA (Physical Therapist Assistant) I am required to participate in various lecture and lab classes as simulated patient. Instructors and other students will have opportunities to demonstrate and practice on me those skills learned in various classes. These skills include, but are not limited to a variety of: mobility, therapeutic exercises, testing and measurements, and physical agents. I understand that there is some risk of injury resulting from my participation in these skill training classes. I further understand that the college cannot ensure that other students will properly apply skills learned in class nor can the college be held responsible for any pre-existing conditions or injuries that I may have which make me susceptible to injury. If I have any pre-existing conditions or injuries that may make me susceptible to injury from skills training, I will report such conditions or injuries to my instructor, or, if appropriate, to the Disability Resource Center. In the unlikely event that I become injured it must immediately be reported to the instructors of the class and the appropriate college incident report must be filled out. If necessary, appropriate medical intervention and payment for those services are solely my responsibility. I have read and understand the above information.

Student Name \_\_\_\_\_  
Student Signature \_\_\_\_\_  
Date \_\_\_\_\_

THIS FORM MUST BE SIGNED AND ON FILE IN THE PTA OFFICE IN ORDER TO PARTICIPATE IN ANY PTA LAB.



### **Guidelines for Prevent the Transmission of Infectious Disease**

The management of issues related to infectious diseases is of primary concern to PTA faculty and administration. The rapid increase of blood borne diseases has caused an awareness of the need for policies and guidance. This policy is designed to balance the protection from risk for students, faculty, and clients, with the individual rights of privacy and equal opportunity. Each PTA student will be provided with information regarding protection from infectious diseases to which the student may be exposed during his/her education.

Control of microorganisms which cause disease in humans is vital in the health care environment. Although the risk of infection transmission exists, that risk can be minimized by appropriate education and actions taken to avoid transmission. It is the policy of this agency that:

- 1) All students will receive specific information regarding the chain of infection and measures which prevent the transmission of infection before engaging in clinical laboratory experience.
- 2) This information will be repeated and will increase in depth as the student encounters more complex situations.
- 3) All students will be required to acknowledge in writing that they have been provided with information regarding:
  - a. The risk of transmission of infectious disease encountered in the allied health field.
  - b. Infection control measures consistent with Centers for Disease Control (CDC) and OSHA guidelines.

### **GUIDELINES:**

1) Use of Universal precautions is an effective means of preventing transmission of infectious disease. "Since health care workers are unable to identify all clients with blood-borne disease, blood and body fluid precautions should be consistently used for all clients. This approach, recommended by the CDC is referred to as 'universal precautions' or 'universal blood and body fluid' precautions". (Federal Register 12/06/91)

2) Instruction in universal precautions and CDC recommended infection control measures will be given before the student begins clinical experience and will be reinforced at regular intervals throughout the program.

3) The student will be asked to review current information regarding universal precautions and CDC recommended infection control measures each semester and acknowledge receipt of the information by signing the form referred to in this policy.

### **Occupational Exposure Control Protocol**

Students are advised that working in a health profession does expose them to the risk of coming into contact with hazardous substances. The COS PTA program complies with all standards, rules, and regulations issued by the Occupational Safety and Health Administration (OSHA) and the recommendations of the Center for Disease Control (CDC). Students should consistently follow all safe work place practices. The following practices are designed to eliminate or reduce your exposure to blood borne pathogens and other hazardous material.

The following standards have been set for the COS PTA program:

1. Students are required to either obtain the Hepatitis B vaccination series or sign a declination statement.
2. Students will be required to pass a test covering universal standard precautions for dealing with blood and other potentially infectious materials.
3. Personal Protective Equipment must be worn when engaged in all activities where exposure is possible.
4. Material Safety Data Sheets (MSDS) are maintained in all areas where potentially hazardous chemicals are utilized.
5. Sharps containers and biohazard disposal containers are located in laboratory and clinical areas.
6. First aid stations are available in each laboratory.

Any PTA student who sustains a needle stick or other occupational injury resulting in exposure to blood, bodily fluids, or other hazardous substance should follow the following protocol:

1. Immediately wash the affected area with soap and water.
2. Cover the area with a dressing, if possible.
3. For an ocular exposure, flush thoroughly with water or the eye wash that is available in the first aid station.
4. Inform the instructor immediately.
5. Complete an incident report to be filed in the PTA/Allied Health Division office
6. It is highly recommended that the student see a healthcare provider who is trained in assessing the risk of the exposure immediately, but certainly within 48 hours.

Recommendations for appropriate healthcare providers can be obtained from the Student Health Center. All expenses related to testing and treatment incurred as a result of a needle stick or other occupational exposure will be the responsibility of the student. Therefore, it is highly recommended that the student acquire and/or maintain a health insurance policy to cover these expenses,

<b>Performance Criteria</b>	<b>Highly Professional</b>	<b>Professional</b>	<b>Participating</b>	<b>Unprofessional</b>
<b>Time Management</b>  Attendance Promptness Responsibility	Always arrives on time & stays for entire class; regularly attends class; all absences are excused; always takes responsibility for work missed; no deadlines missed; does not seek exceptions from class or college policies except institutional excuses	Late to class only 1x or 2x; almost never misses a class; no unexcused absences. Usually takes responsibility for material & work missed; no more than one deadline missed; does not seek exceptions from class or college policies except institutional excuses	Late to class more than once every month (averaged) & regularly attends class; or misses more than one deadlines; seeks exceptions to class or college policies, that are not including institutional excuses	Late to class more than twice/month or does not regularly attend class; has missed multiple deadlines; demands or expects to have exceptions to class or college policies not including institutional excuses
<b>Respect</b>  Social Skills	Careful not to distract others (socializing, sleeping, leaving early or during class, reading unrelated material, doing homework for another class or wearing inappropriate attire); never uses electronic devices inappropriately (social media/YouTube) in class; is respectful towards peers, faculty, & the learning environment both in & out of class.	Has exhibited behavior that distracts others 1x or 2x at MOST during the semester or has used electronic devices to check social media, instead of a respectful & appropriate manner; is almost always respectful towards peers, faculty, & the learning environment both in & out of class	Recurring behavior that distracts others; or recurring use of electronic devices to distract self or others, but not useful for learning; or is not consistently respectful of peers, faculty, & the learning environment both in & out of class	Has been asked to leave class due to behavior that distracts others; is often extremely disrespectful to peers, faculty, & the learning environment both in & out of class
<b>Preparedness</b>  Motivation Contribution	Almost always participates in class discussions; contributions reflect exceptional preparation & are always substantive, well supported, & persuasively presented; <b>does not dominate discussion</b>	Regularly participates in class discussions; contributions reflect good preparation & are generally substantive, fairly well substantiated, & moderately persuasive; when called upon, can usually answer questions & refer to readings; occasionally dominates discussion	Rarely participates in class; contributions reflect adequate or less than satisfactory preparation & are occasionally substantive, somewhat substantiated & occasionally persuasive; when called upon, often cannot answer questions in depth or refer to readings; may dominate discussion	Never participates in class; no evidence of preparation; when called upon, can't answer questions in depth or refer to readings; any comments or questions made are usually irrelevant
<b>Quality of Work</b>  Persistence Integrity	Provides work of the highest quality that reflects best effort; makes strong effort to improve work; shows positive, proactive behavior; is always honest & encourages other to do the same; always adheres to class & college academic dishonesty policies	Provides high quality work that often reflects best effort; makes moderate effort to improve work; shows positive, proactive behavior; is always honest; always adheres to class & college academic dishonesty policies	Provides work that reflects a good effort & occasionally needs to be checked or redone; rarely shows negative behavior; is honest; does not knowingly violate class & college academic dishonesty policies	Provides work that reflects very little or no effort; shows negative behavior; is often not honest; knowingly violates class or college academic dishonesty policies

<b>Teamwork</b>	Makes obvious & significant contributions on projects in terms of timeliness in completing assigned work, making genuine effort to work effectively with others & providing valuable, creative, competent skills to the team; often takes leadership role;	One or two complaints from team members about lack of contribution; occasionally takes leadership role	A few complaints from team members about lack of contribution	More than a few complaints from team members about lack of contribution; does not contribute in a meaningful way to group work
<b>Impression for Employment</b>	Professionalism at its best Would hire immediately & without reservation	Professionalism consistently exhibited. Would hire without reservation	Professionalism is inconsistent. Would only hire with history checks	Lack of professionalism Would not hire

Based on the above professional/employment behaviors, would you hire this person today as a PTA in the clinical setting?

- Yes
- Yes, but reservations in this area:
- Maybe, but after work in this area:
- No

## **SKILLS LAB REFERRAL**

Student Name \_\_\_\_\_ Course \_\_\_\_\_

Date \_\_\_\_\_

**Required Clinical Remediation** (Skills Practice, Skill Check-Off, Tutoring, etc.)  
(Completed by Student's Instructor)

*Instructor*

Signature \_\_\_\_\_

**Remediation Activities** (Describe specific learning activities)

(Completed by Skills Lab Instructor)

- ( ) The student achieved competency in the area(s) requiring remediation  
( ) The student could not achieve competency

*Skills Lab Instructor Signature* \_\_\_\_\_

Date \_\_\_\_\_

*Original to Skills Lab Instructor then Student File; Copy to Instructor; Copy to Student*

## **LAB PRACTICAL EXAMINATION GRADING CRITERIA**

This Grading Criteria applies to all Lab Practical Examinations for any course with a lab component.

The Critical Safety Elements are identified in each specific course Syllabus and Lab Skill Check Off.

Note that Critical Safety Elements identified in any course are expected to be carried forward into all future courses.

**FAILURE OF LAB PRACTICAL EXAM AT MID-TERM WILL RESULT IN THE ESTABLISHMENT OF A PRACTICAL/CLINICAL REMEDIATION PLAN.**

**FAILURE OF LAB PRACTICAL EXAM AT FINAL WILL RESULT IN SUBSEQUENT FAILURE OF THE COURSE AND DISMISSAL FROM THE PROGRAM.**

In order to pass any course with a lab:

1. You **MUST** pass ( $\geq 70\%$ ) the **FINAL** Lab Practical Exam in order to move on in the Program, regardless of didactic course grade.
  
2. Didactic Course grade must be  $\geq 72\%$  **AND** Final Lab Practical Exam grade must be  $\geq 70\%$ 
  - a. Successful Re-Examination of a Lab Practical Exam will result in a score of 70%
  - b. Successful Remediation of a single Competency will result in the Competency being awarded two points on the Lab Practical Rubric

**Individual skills/criterion (Red Flag or Competency) of the Lab Practical Exam are graded as follows:**

- **4 - Pass, Exceeds Expectations:** Student demonstrates skilled & consistent function safely and efficiently at level that exceeds expected performance.
- **3 - Pass, at Expectation:** Student functions safely & effectively at a 75% level that reflects expected performance.
  - May need to improve consistency or efficiency

- **Fail:** Student has neglected item(s) that require(s) improvement to meet criteria at the 70% level.

**If the student receives a FAIL on ANY Red Flag Criterion, he/she will FAIL the Lab Practical Exam (see details below under FAIL LAB PRACTICAL EXAM)**

**If the student receives a FAIL on TWO or MORE Competency Criterion, he/she will FAIL the Lab Practical Exam (see details below under FAIL LAB PRACTICAL EXAM)**

**If the student receives a FAIL on ONE Competency Criterion, he/she will PASS the Lab Practical Exam contingent upon successful remediation of that Competency (see details below under REMEDIATION)**

- **REMEDIATION**

- The student will receive a **Remediation Form** from the Course Instructor identifying the Competency failed and requirements for a **PASS**, including timeframes for completion. The identified Competency must be practiced in PTA 400 and the Remediation Form signed by the skill lab instructor observing.
  - **Any clarifications or questions in regards to the Remediation shall be directed to the Course Instructor issuing the Remediation Form.**
- The student will then make an appointment with the Course Instructor to Re-Test the identified Competency within the given timeframe.
  - If the student **PASSES** the Remediation, he/she will **PASS** the Lab Practical Exam and will receive a score of 2 (two) for the remediated Competency for purposes of the Lab Practical Grade (see details below under **LAB PRACTICAL GRADE**)
  - If the student **FAILS** the Remediation, he/she will **FAIL the Lab Practical Exam (see details below under FAIL LAB PRACTICAL EXAM)**

- **RE-EXAMINATION**

- The student will receive a **Re-Examination Form** from the Course Instructor identifying the Competencies failed and the requirements for a **PASS**, including timeframes for completion.

- **The student will have one opportunity to Re-Exam. The student will be notified of the date. The Re-Examination will be observed and graded by a minimum of two instructors. Failure to pass the Re-Examination will result in a FAIL of the Lab Practical Exam. Failure of a Midterm Lab Practical Exam will result in the establishment of a Practical/Clinical Remediation Plan. Failure of a FINAL Lab Practical Exam will result in subsequent failure of the course and dismissal from the program.**
  - **Any clarifications or questions in regards to the Re-Examination shall be directed to the Course Instructor issuing the Re-Examination Form.**
  
- In the case of a FAIL due to **COMPETENCY CRITERION**:
  - The student will receive a form identifying the CRITICAL ERROR(S) and defining the parameters for re-examination.
  - The student will be required to repeat the failed case in its entirety
  - The student will perform an additional case assigned at time of Re-Examination with emphasis on **Competency Criterion**.
    - The student must still perform at required level in all other aspects of the case.
  
- In the case of a FAIL due to **RED FLAG CRITERION**:
  - The student will receive a form identifying the CRITICAL ERROR(S) and defining the parameters for re-examination.
  - The student will be required to repeat the failed case in its entirety.
  - The student will perform an additional case with emphasis on **Red Flag Criteria** assigned at time of Re-Examination.
    - The student must still perform at required level in all other aspects of the case
  
- **IN EITHER CASE, THE STUDENT MUST PASS BOTH CASES WITHOUT REMEDIATION IN ORDER TO PASS THE LAB PRACTICAL EXAMINATION**



- **LAB PRACTICAL GRADE**

- If the student **PASSES** the Lab Practical Exam, his/her Lab Practical Grade will be the Rubric Percentage calculated as total score received divided by 40.
- If the student **PASSES** the Lab Practical Exam after successful Remediation of a Competency Criterion, his/her Lab Practical Grade will be the Rubric Percentage calculated as total score received +2 for Remediated Criterion divided by 40.
- If the student **PASSES** the Lab Practical Exam after an initial **FAIL**, his/her Lab Practical Grade will be a 70%.

**COLLEGE OF THE SEQUOIAS**  
**CRITICAL SAFETY ELEMENTS for PTA courses with Lab Practicals**

**PTA 125 – BASIC PRINCIPLES OF PATIENT MANAGEMENT**

**A. Preparation for Patient Care Activities/ Safety**

1. List a minimum of 2 people responsible for patient safety.
2. List and define 3 physiological changes with aging that may affect a patient's safety.
3. Describe the role of Joint Commission in regards to patient safety.
4. List 4 safety recommendations for patient care.

**B. Basic exercise: Passive and Active**

1. List precautions to be considered for revision or cessation of active exercise.
2. Describe how you would monitor an exercise patient with cardiopulmonary dysfunction.

**C. Approaches to Infection Control**

1. Demonstrate procedure for hand rubbing and washing.
2. Isolation Precautions
3. Demonstrate competency in determining need for personal protective equipment and adhering to isolation precautions.
4. Demonstrate competency in don/doff personal protective equipment.
5. Describe and demonstrate safe disinfection, decontamination and disposal of items related to patient care including: needles, linen, equipment, surfaces, protective clothing, and infectious waste products.

**D. Assessment of Vital Signs**

- a. Identify when a patient's vital signs are abnormal and describe appropriate action.

**E. Body Mechanics**

- a. Describe 3 guidelines to reduce stress-producing positions or activities including lifting, pushing, pulling, reaching and carrying activities.

**F. Positioning and Draping**

1. Identify bony prominences that may cause pressure injuries.
2. Outline the precautions you would use if it were necessary to position a patient who is elderly with decreased sensation, mental confusion and is unable to move independently.

**G. Bandages, Dressings, Girth and Volumetric Measurements**

1. Describe and demonstrate proper application and removal of a bandage and dressing.

#### **H. Transfer Activities**

1. Demonstrate how to organize and prepare a patient and environment for safe transfer.
2. Teach a patient with low back dysfunction a transfer to and from floor.

#### **I. Special equipment and patient care environments**

1. Describe various monitoring devices including vital signs, oximeter, pulmonary artery catheter, intracranial pressure, and arterial lines and identify if intervention can be performed and list any precautions.
2. Describe minimum percent of oxygenation level that must be maintained to continue treatment.
3. Differentiate between nasogastric tube, gastric tube, and intravenous feeding & identify precautions for implementing PT intervention for each.

#### **J. Incidents and Emergencies**

1. Describe appropriate responses to an emergency situation.
2. Describe signs and symptoms of autonomic hyperreflexia.
3. Differentiate between an insulin reaction and acidosis.
4. Describe responsibilities, obligations and actions for a patient that is injured as a result of treatment.
5. Describe activities performed to monitor a patient's response during treatment.

#### **K. Ambulation Aids, Patterns, and Activities**

1. Demonstrate how to properly fit a patient for a cane, axillary crutches, and walker.
2. Demonstrate how you would guard patient ambulating on a level surface, on stairs, and when moving from sitting to standing.
3. Demonstrate competency in reassessing patient's pain throughout treatment.

#### **L. Features and activities of Wheeled Mobility Aids**

1. List components of wheelchair a new user should be taught for proper operation.
2. Describe how you would confirm proper wheel chair fit.

### **PTA 128 – KINESIOLOGY**

#### **PART I: Basic Clinical Kinesiology and Anatomy**

##### **A. Articular System and Arthrokinematics**

1. Identify and describe end feels of a joint.

##### **B. Nervous System**

1. List signs and symptoms of autonomic dysreflexia.

**C. Shoulder Complex**

1. Accurately position patient and PTA and perform MMT.

**D. Elbow Joint and Forearm**

1. Accurately position patient and PTA and perform MMT.

**E. Wrist and Hand**

1. Accurately position patient and PTA and perform MMT.

**F. Neck and Trunk**

1. Accurately position patient and PTA and perform MMT.

**G. Trunk, Lumbar Spine/Pelvic Girdle**

1. Describe and demonstrate pelvic girdle motions.
2. Define and differentiate between common vertebral column pathologies including: Thoracic outlet syndrome, torticollis, cervical sprains, whiplash, sciatica, lordosis, kyphosis, spondylosis, spondylolysis, spondylolisthesis, ankylosing spondylitis spinal stenosis, herniated discs, ruptured disc and osteoporosis.
3. Accurately position patient and PTA and perform MMT.

**H. Posture**

1. Describe and demonstrate the correct alignment of the spine during lifting techniques.
2. Analyze the factors that contribute to safe and unsafe lifting techniques. Recommend how to properly lift items from the ground, waist height and lower items from overhead.

**I. Hip**

1. Accurately position patient and PTA and perform MMT.

**J. Knee**

1. Accurately position patient and PTA and perform MMT.

**K. Ankle/Foot Complex**

1. Accurately position patient and PTA for muscle to be tested.

**L. Gait**

1. Identify the normal and abnormal gait cycle.
2. Define and describe characteristics of common gait deviations due to muscular weakness, paralysis, joint or muscle limitation, neurological involvement, pain and leg length discrepancies.

## **PTA 130 – MODALITIES**

### **A. Soft Tissue Mobilization /MFR**

1. Recognize changes normal and abnormal changes in integumentary system.
2. Recognize and position patient correctly for treatment that does not aggravate pain or alter sensation, and maintains patient modesty with appropriate draping.
  3. Describe and demonstrate correct body mechanics while performing therapeutic massage.
  4. Explain, discuss and demonstrate competency in critical safety skills, contraindications of STM.
  5. Discuss and demonstrate competency in critical safety skills, contraindications
  6. Demonstrate competency in differentiating muscle tone and explaining tone abnormalities.
  7. Explain critical safety skill and contraindications of myofascial release.
  8. Discuss and demonstrate competency in critical safety skills, contraindications

### **Motion Restrictions**

1. Demonstrate PROM and discuss the contraindications and precautions to consider when performing range of motion techniques.

### **Heat and Cold/Diathermy**

1. Demonstrate competency in application of the Heat and Cold.

### **Ultrasound**

1. Explain and discuss the contraindications and precautions for the use of Ultrasound
2. Propose, explain and demonstrate competency in critical safety skills as well as the contraindications to Ultrasound/phonophoresis.

### **Electrical Current**

1. Explain and discuss contraindications and precautions for the use of electrical currents
2. Propose, explain and demonstrate competency in critical safety skill

### **Wound Care**

1. Recognize normal and abnormal integumentary changes.
2. List the contraindications for Debridement
3. Identify precautions for wound dressing removal

### **Compression**

1. Explain and discuss the contraindications and precautions for the use of external compression
2. Hypothesize the adverse effects of external compression

3. Propose, explain and demonstrate competency in critical safety skills and contraindications

### **Traction**

1. Explain and discuss the contraindications and precautions for the use of spinal traction
2. Identify the adverse effects of spinal traction
3. Propose, explain and demonstrate competency in critical safety skills and contraindications.

### **Hydrotherapy**

1. Explain and discuss the contraindications and precautions for Hydrotherapy
2. Correlate and predict safety issues including infection control for whirlpools and exercise pools.
3. Propose, explain and demonstrate competency in critical safety skills and contraindications.

### **Aquatic Therapy**

1. Explain and discuss the contraindications and precautions for Hydrotherapy
2. Hypothesize and appraise the adverse effects of Hydrotherapy
3. Correlate and predict safety issues including infection control for whirlpools and exercise pools.

### **Electromagnetic Radiation and Laser**

1. Explain and discuss contraindications and precautions for Lasers and Light
2. Explain and discuss the contraindications and precautions for the use of Ultraviolet Radiation
3. Propose, explain and demonstrate competency in critical safety skills and contraindications.

### **PTA 148 – ORTHOPEDIC MANAGEMENT**

1. **Demonstrate systems assessments related to orthopedic pathologies and implement appropriate tests based upon presenting limitations/impairments according to the Plan of Care established by the Physical Therapist.**
  - a. *Differentiate the role of the Physical Therapist Assistant and supervising Physical Therapist in the care of orthopedic patients/clients and their role in assessment (edema/swelling, ROM, MMT, muscular atrophy, alignment, etc.).*
2. **Demonstrate safe, appropriate and complete interventions for the patient with orthopedic pathologies emphasizing strength, flexibility and aerobic training according to the Plan of Care established by the Physical Therapist.**
  - a. Perform objective scales of measurement used to communicate changes in a patient status to the supervising physical therapist.

- b. Demonstrate ability to identify and monitor patient response to treatment including: temperature, edema, vital signs, pain and fatigue.
  - c. Demonstrate ability to assess musculoskeletal structures for data collection and response to intervention.
- 3. Flexibility**
- a. List 3 beneficial effects of warm-up.
  - b. Examine, compare and contrast clinical applications for stretching soft tissue contractures.
- 4. Strength**
- a. Discuss muscle response to exercise.
  - b. Identify clinical features of delayed onset of muscle soreness.
  - c. Differentiate between goals and applications of strength training programs for the elderly and young populations.
- 5. Review of Tissue Healing and Composition and Function of Connective Tissue**
- a. List the five cardinal signs of inflammation.
- 4. Fundamentals of Gait**
- a. Demonstrate the appropriate fit and use of assistive devices.
- 5. UE, LE, Spinal Orthotics, Prosthetics, Bracing and Supports**
- a. Demonstrate competency in appraising the fit, rationale and disadvantages in the use of UE and LE orthotics/supports. (LAB)
  - b. Demonstrate safety and basic skills in rehabilitation techniques used in orthotics, prosthetics, bracing and supports as outline in supervising PT plan of care
- 6. Orthopedic Management of the Ankle, Foot, Toes**
- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of common foot and ankle injuries/conditions as outline in supervising PT plan of care
- 7. Orthopedic Management of the Knee**
- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of injured meniscus, ligament sprains/post-surgery, patellofemoral, and knee arthroplasty as outlined in supervising PT plan of care.
- 8. Orthopedic Management of the Hip and Pelvis**
- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of hip/pelvis fractures, soft tissue injuries and hip arthroplasty as outlined in supervising PT plan of care.
- 9. Orthopedic Management of the Lumbar, Thoracic, and Cervical Spine**
- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of cervical, thoracic, and lumbar conditions as outlined in supervising PT plan of care.

## **10. Orthopedic Management of the Shoulder**

- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of shoulder impingement, rotator cuff tears, fractures and arthroplasty as outlined in supervising PT plan of care.

## **11. Orthopedic Management of the Elbow**

- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of elbow soft tissue injuries and fractures/dislocations as outlined in supervising PT plan of care.

## **12. Orthopedic Management of the Wrist and Hand**

- a. Demonstrate safety and basic skills in rehabilitation techniques used in the treatment of wrist and hand neuropathies, ligament and tendon injury/post surgical and fractures as outlined in PT plan of care.

## **PTA 145 – NEUROREHABILITATION**

1. Demonstrate systems assessments related to neurological pathologies and implement appropriate tests based upon presenting limitations and impairments and within the plan of care (POC) as established by the physical therapist.
  - Cognition
  - Sensation
  - Motor
  - Coordination
  - Cranial Nerves
  - Balance
  - Standardized Tests of Impairment & Function
2. Demonstrate safe, appropriate, thorough interventions for the patient with neurological pathologies according to the plan of care (POC) established by the physical therapist. Understand and implement pathology for specific diagnosis.
  - To include patients with Spinal Cord Injury (SCI), Traumatic Brain Injury (TBI), Cerebral Vascular Accident (CVA), Amyotrophic Lateral Sclerosis (ALS), Guillan-Barre Syndrome (GBS), Multiple Sclerosis (MS), Parkinson’s Disease (PD), Cerebral Palsy (CP), Other Neurological Disorders in Children
  - Demonstrate competency in implementing and assessing the outcomes of a plan of care for the neurological patient.
  - Explain and demonstrate competency in choosing and assessing the use of adaptive equipment for the neurologically involved patient.
  - Identify environmental safety and barrier concerns and recommend appropriate adaptations.
  - Demonstrate Vitals Systems Assessment



- Demonstrate Skin Integrity

## **PTA 152 – CARDIOPULMONARY REHABILITATION**

- 1. Principles of Aerobic Conditioning**
  - a. Demonstrate teaching the patient signs and symptoms of exercise intolerance and indications for terminating exercise.
  - b. Perform pre-participation screening tests recommended prior to beginning exercise program.
  - c. Demonstrate appropriate supervision during aerobic conditioning program.
  - d. Demonstrate fit for various aerobic conditioning devices including: recumbent bike, stationary bicycle, Nu-step recumbent stepper, stair climber, treadmill, total-body system and upper body ergometer.
- 2. Principles of Cardiac Rehabilitation**
  - a. Demonstrate the pretreatment assessment performed by PTA for inpatient cardiac rehabilitation as established in the PT plan of care.
- 3. Hard Chart, Lines, Tubes, Procedures, & Lab Values**
  - a. Demonstrate location, indications, precautions, and contraindications for movement of the following lines/tubes: Arterial Line, Central Line, Chest Tubes, ECG Telemetry, Endotracheal Tubes, Nasogastric, Percutaneous Endoscopic Gastrostomy (PEG Tube), Orogastric, Foley Catheter, Hickman Catheter, Triple Lumen Catheter, Intravenous Line, Nasal Cannula, Pacemaker, Peripherally Inserted Central Catheter (PICC), Swan Ganz Pulmonary Artery Catheter, Ventimask, Yankauer Suction. [Lecture Review] + [Lab Demonstration]
  - b. Demonstrate importance of pre-treatment setup by arranging environment in an effective, efficient manner that is conducive for therapy along with safe for the patient & for treatment.
  - c. Student will confirm with RN prior to assisting patient with tasks that involve food or drink, to ensure patient is not NPO or is unable to swallow. [Lab]
- 4. Enhancement of Breathing and Pulmonary Function**
  - a. Recognizes signs and symptoms of cyanosis.
  - b. Demonstrate activities that alleviate edema, pain, dyspnea or other symptoms
  - c. Integrate psychosocial issues into implementation of intervention as established in physical therapist plan of care.(Case scenarios)
  - d. Demonstrate ability to discern when intervention written in the PT POC should not be provided due to changes in the patient's status; communicates these changes to the supervising physical therapist.

## **PTA 155 – THERAPEUTIC EXERCISE**

- 1. Demonstrate safe implementation, modifications, progression of therapeutic exercise interventions across the lifespan.**
  - a. Recognize when the direction to perform an intervention is beyond that which is appropriate for a physical therapist assistant or beyond the personal scope of the individual.
  - b. Demonstrate monitoring of patient response to intervention, identify status changes and determine need to consult physical therapist, develop modifications as appropriate to interventions to meet the STGs and LTGs within physical therapist (PT) plan of care (POC)
  - c. Monitor patient during treatment, and adjust and progress interventions within the plan of care established by the physical therapist in response to patient clinical indications and/or changes in the patient's status.
  - d. Demonstrate precautions to be observed with patients taking multiple medications.
  - e. Students will be expected to demonstrate competency in appraising the fit, rational and disadvantages in the use of prosthetics and orthotics, and other assistive devices and equipment as indicated.
  
- 2. Compose patient education and demonstrate ability to communicate patient education through demonstration, verbal and written communication.**
  
- 3. ROM**
  - a. Demonstrate monitoring of patient during treatment adjusting and progressing ROM interventions within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status.
  - b. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.
  
- 4. Stretching activities for increasing Muscle flexibility**
  - a. Demonstrate monitoring of patient during treatment adjusting and progressing stretching interventions within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status.
  - b. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.

## **5. Joint Mobilization**

- a. Identify indications and contraindications of joint mobilization

## **6. Principles of resistance training**

- a. Demonstrate monitoring of patient during treatment adjusting and progressing interventions within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status.
- b. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.
- c. Demonstrate age related modifications of exercise for pediatric and geriatric populations. (Lab)

## **7. Developmental Skills: Stages of Motor Control and Motor Learning**

- a. Demonstrate monitoring of patient during treatment adjusting and progressing stretching interventions within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status. (Lab)
- b. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.

## **8. Proprioceptive Neuromuscular Facilitation**

- a. Demonstrate PNF and adjust and progress interventions within the plan of care established by the physical therapist in response to patient clinical indications and/or changes in the patient's status.

## **9. Functional Progression for the Extremities**

- a. Demonstrate monitoring of patient during treatment adjusting and progressing exercises within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status. (Lab)
- b. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.

## **10. Reactive Neuromuscular Training**

- a. Demonstrate monitoring of patient during treatment adjusting and progressing interventions within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status. (Lab)

- b. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.

### **11. Amputations and Prosthetics**

- a. Recognize a patient's level of functional status, and implement task specific developmental training interventions for the purposes of improving patient function, mobility, and safety, as established in the plan of care.
- b. Measure changes in sensory response to pressure on the limbs before gait training when using a lower extremity prosthetic device.
- c. Demonstrate competency in appraising the fit, rational and disadvantages in the use of prosthetics and orthotics.
- d. Monitor patient during treatment, and adjust and progress interventions within the plan of care established by the physical therapist in response to patient clinical indications and/or changes in the patient's status.

### **12. Functional Progression for the Spine**

- a. Apply to clinical practice proper observation skills and education techniques concerning body mechanics within established plan of care. (Lab)
- b. Demonstrate monitoring of patient during treatment adjusting and progressing exercises within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status. (Lab)
- c. Demonstrate knowledge in identifying and reporting changes in the patient's status or treatment interventions to the supervising physical therapist.

### **13. Functional Progression for the Extremities**

- a. Demonstrate monitoring of patient during treatment adjusting and progressing exercises within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status. (Lab)

### **14. Pediatric and Geriatric Patient Interventions**

- a. Apply pediatric and geriatric modifications to posture spinal stabilization exercises. (Lab)
- b. Identify and apply age related modifications to stretching, ROM, resistive exercises and balance training as established in plan of care. (Lab)
- c. Identify and apply geriatric issues pertaining to strengthening. (Lab)
- d. Identify and apply basic guidelines for resistance exercise progression in children. (Lab)

- e. Demonstrate monitoring of patient during treatment adjusting and progressing exercises within the plan of care established by the physical therapist and in response to patient clinical indications and/or changes in status. (Lab)

### **15. Treating the Complex Patient**

- a. Recognize a patient's level of functional status, and implement task specific developmental training interventions for the purposes of improving patient function, mobility, and safety, as established in the plan of care.
- b. Demonstrate monitoring of a complex patient during treatment, adjusting and progressing interventions within the plan of care established by the physical therapist in response to patient clinical indications and/or changes in the patient's status.

### **16. Home Health Environment**

- a. Describe the major environmental assessments to be performed for a residence, workplace and community and be able to locate specific requirements for an accessible environment.
- b. Recognize home and environmental barriers, and make recommendations for modification to improve patient function and safety.