**Course Change Proposal**  
**Form A**

<table>
<thead>
<tr>
<th>Academic Group (College):</th>
<th>Health &amp; Human Services</th>
<th>Academic Organization (Department):</th>
<th>Physical Therapy</th>
<th>Date:</th>
<th>2-4-2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Course Proposal:</td>
<td></td>
<td>Department Chair:</td>
<td></td>
<td></td>
<td>S. McGinty</td>
</tr>
<tr>
<td>New ___ Change X___ Deletion ___</td>
<td></td>
<td>Submitted by:</td>
<td></td>
<td></td>
<td>B. Stockert</td>
</tr>
<tr>
<td>Does this course fulfill a requirement for single-subject or multiple subject credential students?</td>
<td>Yes ___ No X__</td>
<td>For Catalog Copy:</td>
<td>Yes X__ No ___</td>
<td>Semester Effective:</td>
<td>Fall X__ Spring __, 2012</td>
</tr>
<tr>
<td>CCE (Extension):</td>
<td>Yes ___ No X__</td>
<td></td>
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</tbody>
</table>

This course replaces experimental course Subject Area (prefix) and Catalog Nbr (course number):

### Change from:

<table>
<thead>
<tr>
<th>Subject Area (prefix) &amp; Catalog Nbr (course no.):</th>
<th>Title:</th>
<th>Units:</th>
</tr>
</thead>
<tbody>
<tr>
<td>PT 240</td>
<td>Therapeutic Exercise II</td>
<td>3</td>
</tr>
</tbody>
</table>

### Change to:

<table>
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<th>Title:</th>
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<tr>
<td>PT 640</td>
<td>Physical Therapy Interventions II</td>
<td>3</td>
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**JUSTIFICATION:**

This course has been changed for the new DPT curriculum. It has been updated to reflect comprehensive and reflective practice in the acute care setting and with patients with cardiopulmonary dysfunction.

**NEW COURSE DESCRIPTION:**  (Not to exceed 80 words, and language should conform to catalog copy. See http://www.csus.edu/acaaf/univmanual/crpsnl.htm - Guidelines for Catalog Course Description)

This course is a continuation of Physical Therapy Interventions I. This course focuses on the presentation of selected topics in acute care and cardiopulmonary Physical Therapy. Students will learn to perform appropriate and comprehensive examinations, interpret the examination findings as well as design and implement a plan of care based upon best available evidence. **Open to Physical Therapy Majors Only.**

**Note:**

**Prerequisite:**

- BIO 633  
- PT 600  
- PT 608  
- PT 630  
- PT 602  
- PT 604  
- PT 606  
- PT 614  
- PT 618  
- PT 620  
- PT 622  
- PT 632  
- PT 634  
- PT 636  
- PT 638

**Enforced at Registration:** Yes X__ No

**Corequisite:**

- PT 624  
  Adult Neuromuscular Patient Management I
<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
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<tbody>
<tr>
<td>PT 625</td>
<td>Musculoskeletal Patient Management I</td>
</tr>
<tr>
<td>PT 626</td>
<td>Clinical Agents</td>
</tr>
<tr>
<td>PT 640</td>
<td>Physical Therapy Interventions II</td>
</tr>
<tr>
<td>PT 646</td>
<td>Acute Care and Cardiopulmonary Physical Therapy</td>
</tr>
<tr>
<td>PT 660A</td>
<td>Research Elective</td>
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</table>

**Enforced at Registration:** Yes ___ No X

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<tr>
<th>CAN (California Articulation Number):</th>
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<tr>
<td>Graded: Letter <em><strong>X</strong></em> Credit/No Credit___</td>
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</table>

**Course Classification (e.g., lecture, lab, seminar, discussion):**
- Lecture/Laboratory C-02; C-16

**Title for CMS (not more than 30 characters):**
- Physical Therapy Interventions II

**Cross Listed?**
- Yes ___ No X___
- If yes, do they meet together and fulfill the same requirement, and what is the other course?

**How Many Times Can This Course be Taken for Credit?** ___once___

**Can the course be taken for Credit more than once during the same term?** Yes ___ No X___
FOR NEW COURSE PROPOSALS OR SUBSTANTIVE CHANGES ONLY:

Description of the Expected Learning Outcomes: Describe outcomes using the following format: “Students will be able to: 1), 2), etc.” See the example at http://www.csus.edu/acaf/example.htm

At the completion of this course, the student is expected to be able to:

<table>
<thead>
<tr>
<th>Goal 1.0</th>
<th>Demonstrate Professional Effectiveness</th>
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<td>Determine the physical therapy needs of any individual seeking services.</td>
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in a safe and client-centered manner.

1.2.3.1 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner for a patient with a cardiopulmonary condition.

1.2.3.2 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner for a patient with an oncology condition.

1.2.3.3 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner for a patient in an acute care setting.

1.2.4 Determine, with each patient encounter, the patient’s need for further examination or consultation.

1.2.5 Perform a physical therapy patient examination using evidenced-based tests and measures.

1.2.6 Utilize available evidence in interpreting examination findings to inform the patient evaluation.

1.2.7 Evaluate data from the patient examination (history, systems review, tests and measures) to make clinical judgments.

1.2.8 Synthesize available data on a patient using the concepts and terminology of the most recent disability/enablement theoretical construct (currently the International Classification of Functioning, Disability, and Health (ICF) Model of Functioning and Disability).

1.2.9 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions.

1.2.9.1 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions for patients with a cardiopulmonary condition.

1.2.9.2 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions for patients with an oncology condition.

1.2.9.3 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions for patients in acute care settings.

1.2.10 Evaluate and interpret the results of examination findings to classify the patient problem using the most recently adopted diagnostic taxonomy (currently the Guide to Physical Therapist Practice’s labels and practice patterns).

1.2.11 Integrate and evaluate data that are obtained during the examination to describe the patient condition in terms that will guide the prognosis, the plan of care and intervention strategies.

1.2.12 Identify and prioritize body function and structure impairments to determine specific activity limitations towards which interventions will be directed.

1.2.13 Make a referral to another physical therapist, other health care practitioner or agency when physical therapy is not indicated or the patient/client’s needs are beyond the skills, expertise and/or scope of practice of the physical therapist practitioner.

1.2.14 Determine the need for additional information and utilize technological search mechanisms to find that information.

1.2.15 Adapt delivery of physical therapy services with consideration for patients’ differences, values, preferences and needs.

1.2.16 Apply current knowledge, theory, clinical judgment, and the patient’s values and perspective in patient management.

1.3 Develop a plan of care based on the best available evidence and that considers the patient’s personal and environmental factors.

1.3.1 Prioritize patient/client problems taking into consideration the patient/client’s needs and goals, health condition, physiological and biological mechanisms within the constraints of the environment and resources.

1.3.2 Write measurable, functional goals that are time referenced with expected outcomes.

1.3.2.1 Write measurable, functional goals that are time referenced with expected outcomes.
for a patient with a cardiopulmonary disorder.

1.3.2.2 Write measurable, functional goals that are time referenced with expected outcomes for a patient with an oncology disorder.

1.3.2.3 Write measurable, functional goals that are time referenced with expected outcomes for a patient in an acute care setting.

1.3.3 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level.

1.3.3.1 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level in a patient with a cardiopulmonary disorder.

1.3.3.2 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level in a patient with an oncology disorder.

1.3.3.3 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level in a patient in an acute care setting.

1.3.4 Recognize barriers that may impact the achievement of optimal improvement within a predicted time frame.

1.3.5 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered.

1.3.5.1 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered for a patient with a cardiopulmonary condition.

1.3.5.2 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered for a patient with an oncology condition.

1.3.5.3 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered for a patient in an acute care setting.

1.3.6 Identify and collaborate with others needed in implementing the plan of care.

1.3.7 Articulate a specific rationale for referrals made to other providers.

1.3.8 Progress the plan of care by making ongoing adjustments to interventions.

1.3.8.1 Progress the plan of care by making ongoing adjustments to interventions for a patient with a cardiopulmonary condition.

1.3.8.2 Progress the plan of care by making ongoing adjustments to interventions for a patient with an oncology condition.

1.3.8.3 Progress the plan of care by making ongoing adjustments to interventions for a patient in an acute care setting.

1.3.9 Include in the plan of care indirect interventions, such as coordination of care, patient/family education, modifications to physical and social environments, and referral to other providers.

1.3.10 Seek and find information using contemporary technology that addresses the specific needs of the patient care plan.

1.3.11 Identify patient needs in terms of discharge planning, discontinuation of care, and transfer of care.

1.4 Implement the physical therapy plan of care designed to restore and/or maintain optimal function applying selected procedural interventions that demonstrate safe and effective psychomotor and clinical reasoning skills.

1.4.1 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner.

1.4.1.1 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner for a patient with a cardiopulmonary condition.
1.4.1.2 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner for a patient with an oncology condition.
1.4.1.3 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner for a patient in an acute care setting.
1.4.2 Modify or redirect selected procedural interventions in light of reexaminations and/or patient/client’s response to interventions.
1.4.3 Instruct the patient/client or caregiver in exercises, postures, handling techniques, home exercises consistent with patient/client diagnosis, prognosis, and expected outcomes, to facilitate patient/client progress, to maintain patient/client status, or to slow deterioration.
1.4.4 Assess patient/client progress towards goals/projected outcomes.
1.4.5 Coordinate patient/client care with other health care providers.
   1.4.5.1 Coordinate patient/client care with other health care providers for a patient with a cardiopulmonary condition.
   1.4.5.2 Coordinate patient/client care with other health care providers for a patient with an oncology condition.
   1.4.5.3 Coordinate patient/client care with other health care providers for a patient in an acute care setting.

1.5 Demonstrate effective verbal and written communication skills with patients, families, other health care professionals, and the public, to facilitate interventions and interdisciplinary interactions and cooperation.
1.5.1 Determine appropriate documentation for the recording of patient/client information consistent with professional standards, the fiscal intermediary, and the treatment setting.
1.5.2 Produce quality documentation in a timely manner to support the delivery of physical therapy services.
1.5.3 Demonstrate thorough, concise documentation consistent with current language from the Patient Management Model contained in the most recent edition of the Guide to Physical Therapist Practice.
1.5.4 Communicate efficiently and effectively with other health care providers involved in the patient/client’s management.

1.6 Utilize data from selected outcome measures to document intervention effectiveness.
1.6.1 Select relevant outcome measures for levels of body functions and structural impairments, activities and participation with respect for their psychometric properties.
1.6.2 Collect relevant evidenced-based outcome measures that relate to patient/client goals and/or prior level of function.

1.7 Determine an appropriate discharge, discontinuation of service, or transfer of care plan for patients/clients.
1.7.1 Re-examine patients/clients to determine if continued physical therapy services are indicated.
1.7.2 When a patient/client has reached optimal goals with physical therapy interventions and, when other related services are still needed, seek resources and/or consult with others to identify alternative resources.
1.7.3 Determine needed resources for patients/clients to ensure timely discharge, including follow-up care.
1.7.4 Discontinue care when physical therapy services are no longer indicated.
1.8 Provide consultative services applying the unique knowledge and skills of a physical therapist to identify problems, recommend solutions, or produce an outcome or product.

1.9 Engage in education activities consistent with imparting information and knowledge unique to the expertise of physical therapists to individuals or groups using relevant and effective teaching methods.
   1.9.1 Promote health behaviors through educational interventions and modeling.
   1.9.2 Apply basic educational concepts of teaching to the practice of physical therapy.
   1.9.3 Educate colleagues and other health care professionals about the roles, responsibilities and academic preparation of the physical therapist and scope of physical therapy practice.
   1.9.4 Present topics/issues using current evidence and sound teaching principles (i.e. case studies, in-service, journal article review, etc).

**Goal 2.0 Demonstrate Professional Behaviors**

2.1 Recognize cultural, ethnic, age, economic, and psychosocial differences and apply a humanistic and holistic approach to the delivery of a clinical service.
   2.1.1 Practice physical therapy demonstrating cultural competence with all individuals and groups.
   2.1.2 Work effectively with challenging patients.
   2.1.3 Respect personal space of patients/clients and others.
   2.1.4 Demonstrate behaviors that are non-judgmental with regards to patients/clients’ lifestyles.
   2.1.5 Respect roles of support staff and delegate appropriately.

2.2 Communicate effectively for varied audiences and purposes.
   2.2.1 Demonstrate effective interpersonal (verbal, nonverbal, electronic) communication skills considering the diversity of populations and environments.
   2.2.2 Facilitate therapeutic communication and interpersonal skills.
   2.2.3 Discuss difficult issues with sensitivity and objectivity.
   2.2.4 Appropriately utilize communication technology efficiently, professionally, and effectively.
   2.2.5 Respect roles of support staff and communicate appropriately.

2.4 Recognize the need for personal and professional development.
   2.4.4 Accept responsibility and demonstrate accountability for professional decisions.
   2.4.5 Recognize own biases and suspend judgments based on biases.

2.5 Demonstrate entry level generic abilities, including:
   2.5.1 Professional accountability and commitment to learning.
   2.5.2 Recognition of one’s own limitations.
   2.5.3 Effective use of constructive feedback.

**Goal 3.0 Practice in an Ethical and Legal Manner**

3.1 Practice physical therapy in a manner consistent with established legal and professional standards.
   3.1.1 Demonstrate awareness of and adherence to state licensure regulations.
   3.1.2 Practice within all applicable regulatory and legal requirements.

3.2 Practice in a manner consistent with the professional code of ethics
   3.2.1 Demonstrate knowledge and application of ethical decision-making.
   3.2.2 Treat patients/clients within scope of practice, expertise and experience.

**Goal 4.0 Demonstrate Scholarship**

4.1 Apply basic principles of statistics and research methodologies within the practice of physical therapy.
   4.1.1 Formulate and reevaluate positions based on the best available evidence.
4.1.2 Critically evaluate and interpret professional literature as it pertains to practice, research, and education.
4.1.4 Utilize contemporary technology consistently to access evidence.

**Attach a list of the required/recommended course readings and activities [Note: it is understood that these are updated and modified as needed by the instructor(s).] This attachment should be forwarded only to your Dean's office, not Academic Affairs.**

**Assessment Strategies:** A description of the assessment strategies (e.g., portfolios, examinations, performances, pre-and post-tests, conferences with students, student papers) which will be used by the instructor to determine the extent to which students have achieved the learning outcomes noted above:

**GRADING PROCEDURES: (described within PT 240 syllabus)**

1. Term paper .......................................................... 25%
2. Pulmonary written exam ........................................... 25%
3. PNF presentation....................................................... 25%
4. Cardiac & ICU exam.................................................. 25%
5. Successful completion of 2 practical exams (pulmonary & PNF)........ Pass/Fail
6. Successful completion of pulmonary rehab observation & 2 field trips .......... Pass/Fail
7. Professional behaviors demonstrated in all activities related to this course Pass/Fail

**For whom is this course being developed?**

- Majors in the Dept _X_  Majors of other Depts ___  Minors in the Dept ___  General Education ___  Other ___

Is this course required in a degree program (major, minor, graduate degree, certificate)?  Yes _X_  No ___

If yes, identify program(s): DPT

Does the proposed change or addition cause a significant increase in the use of College or University resources (lab room, computer facilities, faculty, etc.)?  Yes ___  No _X_

If yes, attach a description of resources needed and verify that resources are available.

Indicate which department or programs will be affected by the proposed course (if any).

*The Department Chair’s signature below indicates that affected programs have been sent a copy of this proposal form.*

**Approvals:** If proposed change, new course or deletion is approved, sign and date below. If not approved, forward without signing to the next reviewing authority, and attach an explanatory memorandum to the original copy.

<table>
<thead>
<tr>
<th>Signatures:</th>
<th>Date</th>
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<tbody>
<tr>
<td>Department Chair:</td>
<td>2-16-11</td>
</tr>
<tr>
<td>College Dean or Associate Dean:</td>
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CPSP (for school personnel courses ONLY)

Associate Vice President and Dean for Academic Programs

*Distribution: Academic Affairs (original), Department Chair and College Dean. Dean’s office to send original after approval to Academic Affairs, at mail zip 6016. An electronic copy must also be sent.*
PT 640 - Physical Therapy Interventions II  

**Fall semester**

**COURSE CREDIT:** 3 units (2 lecture hours and 2½ lab hours/week)

**INSTRUCTOR:**  
TBA  
office hours: TBA

**COURSE LOCATION:**  
TBA

**COURSE TIME:**  
lecture: TBA  
lab: TBA

**COURSE DESCRIPTION:**  
This course is a continuation of Physical Therapy Interventions I. This course focuses on the presentation of selected topics in acute care and cardiopulmonary Physical Therapy. Students will learn to perform appropriate and comprehensive examinations, interpret the examination findings as well as design and implement a plan of care based upon best available evidence. 
**Open to Physical Therapy Majors Only.**

**PREREQUISITES:**
- BIO633  Human Gross Anatomy for Physical Therapists
- PT 600  Pathokinesiology
- PT 602  Evidence Informed Practice I
- PT 608  PT/Patient/Professional Interactions
- PT 630  Pathophysiology
- PT 604  Principles of Human Movement
- PT 606  Therapeutic Measurements & Techniques
- PT 614  Neuroscience for Physical Therapists
- PT 618  Foundations for Patient Management
- PT 620  Physical Therapy Interventions I
- PT 622  Evidence Informed Practice II
- PT 632  Pharmacology for Physical Therapists
- PT 634  Diagnostic Imaging for Physical Therapists
- PT 636  Geriatrics/Gerontology for Physical Therapists
- PT 636  Health, Wellness, and Ergonomics in Physical Therapy

**CO-REQUISITES:**
- PT 624  Adult Neuromuscular Patient Management I
- PT 625  Musculoskeletal Patient Management I
- PT 626  Clinical Agents
REQUIRED TEXTS:
1) Assigned readings in the reserve room in the library

2) A SacLink account is required for this course.

RECOMMENDED TEXTS:


Hillegass, EA & Sadowsky, HS: Essentials of Cardiopulmonary Physical Therapy, 2nd Ed. Saunders, 2001 (Required textbook in prior years & referenced in all lectures)


McArdle et.al.: Essentials of Exercise Physiology. Lea & Febiger, (any edition, year)


COURSE OBJECTIVES:
All course objectives reference the overall educational goals and outcomes of the Department of Physical Therapy.
At the completion of this course, the student is expected to be able to:
Goal 1.0 Demonstrate Professional Effectiveness

1.1 Compare and contrast normal biological, physiological, and psychological mechanisms of the human body with pathophysiological factors that lead to impaired body functions and structure.

1.1.1 Discuss the etiology and clinical features of major disorders.
   1.1.1.1 Describe the relationship between normal anatomy/physiology and pathology in the cardiovascular and pulmonary systems
   1.1.1.2 Describe the relationship between normal anatomy/physiology and pathology due to oncology
   1.1.1.3 Describe the relationship between normal anatomy/physiology and pathology in common conditions found in acute care settings

1.1.2 Describe how pathological processes affect normal function.
   1.1.2.1 Describe how pathological processes affect normal function in the cardiopulmonary system
   1.1.2.2 Describe how cancer affects normal function in the physiological systems of the body
   1.1.2.3 Describe how pathological processes affect normal function in the common conditions found in acute care settings

1.1.3 Discuss common medical/surgical treatments for major disorders.
   1.1.3.1 Discuss common medical/surgical treatments for the cardiopulmonary system
   1.1.3.2 Discuss common medical/surgical treatments used in oncology.
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1.1.4 Analyze the effects of pharmacological agents on human function.
   1.1.4.1 Analyze the effects on human function of pharmacological agents used to treat conditions within the cardiopulmonary system
   1.1.4.2 Analyze the effects on human function of pharmacological agents used to treat oncology conditions.
   1.1.4.3 Analyze the effects on human function of pharmacological agents used to treat common conditions in the acute care setting.

1.2 Determine the physical therapy needs of any individual seeking services.

1.2.1 Perform an effective and efficient systems review screen.
   1.2.1.1 Perform an effective and efficient systems review screen for a patient with a cardiopulmonary disorder
   1.2.1.2 Perform an effective and efficient systems review screen for a patient with an oncology disorder
   1.2.1.3 Perform an effective and efficient systems review screen for a patient in an acute care setting

1.2.2 Review pertinent medical records and conduct a comprehensive patient interview.
   1.2.2.1 Review pertinent medical records and conduct a comprehensive patient interview for a patient with a cardiopulmonary condition
1.2.2.2 Review pertinent medical records and conduct a comprehensive patient interview for a patient with a oncology condition
1.2.2.3 Review pertinent medical records and conduct a comprehensive patient interview for a patient in an acute care setting
1.2.3 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner.
  1.2.3.1 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner for a patient with a cardiopulmonary condition
  1.2.3.2 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner for a patient with an oncology condition
  1.2.3.3 Carry out appropriate and comprehensive patient examinations including tests and measures in a safe and client-centered manner for a patient in an acute care setting
1.2.4 Determine, with each patient encounter, the patient’s need for further examination or consultation.
1.2.5 Perform a physical therapy patient examination using evidenced-based tests and measures.
1.2.6 Utilize available evidence in interpreting examination findings to inform the patient evaluation.
1.2.7 Evaluate data from the patient examination (history, systems review, tests and measures) to make clinical judgments.
1.2.8 Synthesize available data on a patient using the concepts and terminology of the most recent disability/enablement theoretical construct (currently the International Classification of Functioning, Disability, and Health (ICF) Model of Functioning and Disability).
1.2.9 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions.
  1.2.9.1 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions for patients with a cardiopulmonary condition.
  1.2.9.2 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions for patients with an oncology condition.
  1.2.9.3 Cite the evidence (patient history, diagnostic test results, tests, measures, and scientific literature) to support clinical decisions for patients in acute care settings.
1.2.10 Evaluate and interpret the results of examination findings to classify the patient problem using the most recently adopted diagnostic taxonomy (currently the Guide to Physical Therapist Practice’s labels and practice patterns).
1.2.11 Integrate and evaluate data that are obtained during the examination to describe the patient condition in terms that will guide the prognosis, the plan of care and intervention strategies.
1.2.12 Identify and prioritize body function and structure impairments to determine specific activity limitations towards which interventions will be directed.

1.2.13 Make a referral to another physical therapist, other health care practitioner or agency when physical therapy is not indicated or the patient/client’s needs are beyond the skills, expertise and/or scope of practice of the physical therapist practitioner.

1.2.14 Determine the need for additional information and utilize technological search mechanisms to find that information.

1.2.15 Adapt delivery of physical therapy services with consideration for patients’ differences, values, preferences and needs.

1.2.16 Apply current knowledge, theory, clinical judgment, and the patient’s values and perspective in patient management.

1.3 Develop a plan of care based on the best available evidence and that considers the patient’s personal and environmental factors

1.3.1 Prioritize patient/client problems taking into consideration the patient/client’s needs and goals, health condition, physiological and biological mechanisms within the constraints of the environment and resources.

1.3.2 Write measurable, functional goals that are time referenced with expected outcomes.

1.3.2.1 Write measurable, functional goals that are time referenced with expected outcomes for a patient with a cardiopulmonary disorder.

1.3.2.2 Write measurable, functional goals that are time referenced with expected outcomes for a patient with an oncology disorder.

1.3.2.3 Write measurable, functional goals that are time referenced with expected outcomes for a patient in an acute care setting.

1.3.3 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level.

1.3.3.1 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level in a patient with a cardiopulmonary disorder.

1.3.3.2 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level in a patient with an oncology disorder.

1.3.3.3 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level in a patient in an acute care setting.

1.3.4 Recognize barriers that may impact the achievement of optimal improvement within a predicted time frame.

1.3.5 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered.
1.3.5.1 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered for a patient with a cardiopulmonary condition.

1.3.5.2 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered for a patient with an oncology condition.

1.3.5.3 Select and prioritize the essential interventions that are safe, meet the specified functional goals and outcomes and are patient-centered for a patient in an acute care setting.

1.3.6 Identify and collaborate with others needed in implementing the plan of care.

1.3.7 Articulate a specific rationale for referrals made to other providers.

1.3.8 Progress the plan of care by making ongoing adjustments to interventions.
   1.3.8.1 Progress the plan of care by making ongoing adjustments to interventions for a patient with a cardiopulmonary condition.
   1.3.8.2 Progress the plan of care by making ongoing adjustments to interventions for a patient with an oncology condition.
   1.3.8.3 Progress the plan of care by making ongoing adjustments to interventions for a patient in an acute care setting.

1.3.9 Include in the plan of care indirect interventions, such as coordination of care, patient/family education, modifications to physical and social environments, and referral to other providers.

1.3.10 Seek and find information using contemporary technology that addresses the specific needs of the patient care plan.

1.3.11 Identify patient needs in terms of discharge planning, discontinuation of care, and transfer of care.

1.4 Implement the physical therapy plan of care designed to restore and/or maintain optimal function applying selected procedural interventions that demonstrate safe and effective psychomotor and clinical reasoning skills.

1.4.1 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner.
   1.4.1.1 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner for a patient with a cardiopulmonary condition.
   1.4.1.2 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner for a patient with an oncology condition.
   1.4.1.3 Perform efficient and effective procedural interventions utilizing evidence-informed physical therapy procedures in a competent manner for a patient in an acute care setting.

1.4.2 Modify or redirect selected procedural interventions in light of reexaminations and/or patient/client's response to interventions.

1.4.3 Instruct the patient/client or caregiver in exercises, postures, handling techniques, home exercises consistent with patient/client diagnosis,
prognosis, and expected outcomes, to facilitate patient/client progress, to maintain patient/client status, or to slow deterioration.

1.4.4 Assess patient/client progress towards goals/projected outcomes.
1.4.5 Coordinate patient/client care with other health care providers.
  1.4.5.1 Coordinate patient/client care with other health care providers for a patient with a cardiopulmonary condition.
  1.4.5.2 Coordinate patient/client care with other health care providers for a patient with an oncology condition.
  1.4.5.3 Coordinate patient/client care with other health care providers for a patient in an acute care setting.

1.5 Demonstrate effective verbal and written communication skills with patients, families, other health care professionals, and the public, to facilitate interventions and interdisciplinary interactions and cooperation.
  1.5.1 Determine appropriate documentation for the recording of patient/client information consistent with professional standards, the fiscal intermediary, and the treatment setting.
  1.5.2 Produce quality documentation in a timely manner to support the delivery of physical therapy services.
  1.5.3 Demonstrate thorough, concise documentation consistent with current language from the Patient Management Model contained in the most recent edition of the Guide to Physical Therapist Practice.
  1.5.4 Communicate efficiently and effectively with other health care providers involved in the patient/client's management.

1.6 Utilize data from selected outcome measures to document intervention effectiveness.
  1.6.1 Select relevant outcome measures for levels of body functions and structural impairments, activities and participation with respect for their psychometric properties.
  1.6.2 Collect relevant evidenced-based outcome measures that relate to patient/client goals and/or prior level of function.

1.7 Determine an appropriate discharge, discontinuation of service, or transfer of care plan for patients/clients.
  1.7.1 Re-examine patients/clients to determine if continued physical therapy services are indicated.
  1.7.2 When a patient/client has reached optimal goals with physical therapy interventions and, when other related services are still needed, seek resources and/or consult with others to identify alternative resources.
  1.7.3 Determine needed resources for patients/clients to ensure timely discharge, including follow-up care.
  1.7.4 Discontinue care when physical therapy services are no longer indicated.
1.8 Provide consultative services applying the unique knowledge and skills of a physical therapist to identify problems, recommend solutions, or produce an outcome or product.

1.9 Engage in education activities consistent with imparting information and knowledge unique to the expertise of physical therapists to individuals or groups using relevant and effective teaching methods.

1.9.1 Promote health behaviors through educational interventions and modeling.
1.9.2 Apply basic educational concepts of teaching to the practice of physical therapy.
1.9.3 Educate colleagues and other health care professionals about the roles, responsibilities and academic preparation of the physical therapist and scope of physical therapy practice.
1.9.4 Present topics/issues using current evidence and sound teaching principles (i.e. case studies, in-service, journal article review, etc).

Goal 2.0 Demonstrate Professional Behaviors

2.1 Recognize cultural, ethnic, age, economic, and psychosocial differences and apply a humanistic and holistic approach to the delivery of a clinical service.

2.1.1 Practice physical therapy demonstrating cultural competence with all individuals and groups.
2.1.2 Work effectively with challenging patients.
2.1.3 Respect personal space of patients/clients and others.
2.1.4 Demonstrate behaviors that are non-judgmental with regards to patients/clients’ lifestyles.
2.1.5 Respect roles of support staff and delegate appropriately.

2.2 Communicate effectively for varied audiences and purposes.

2.2.1 Demonstrate effective interpersonal (verbal, nonverbal, electronic) communication skills considering the diversity of populations and environments.
2.2.2 Facilitate therapeutic communication and interpersonal skills.
2.2.3 Discuss difficult issues with sensitivity and objectivity.
2.2.4 Appropriately utilize communication technology efficiently, professionally, and effectively.
2.2.5 Respect roles of support staff and communicate appropriately.

2.4 Recognize the need for personal and professional development.

2.4.4 Accept responsibility and demonstrate accountability for professional decisions.
2.4.5 Recognize own biases and suspend judgments based on biases.

2.5 Demonstrate entry level generic abilities, including:

2.5.1 Professional accountability and commitment to learning.
2.5.2 Recognition of one’s own limitations.
2.5.3 Effective use of constructive feedback.
Goal 3.0 Practice in an Ethical and Legal Manner
3.1 Practice physical therapy in a manner consistent with established legal and professional standards.
   3.1.1 Demonstrate awareness of and adherence to state licensure regulations.
   3.1.2 Practice within all applicable regulatory and legal requirements.
3.2 Practice in a manner consistent with the professional code of ethics
   3.2.1 Demonstrate knowledge and application of ethical decision-making.
   3.2.2 Treat patients/clients within scope of practice, expertise and experience.

Goal 4.0 Demonstrate Scholarship
4.1 Apply basic principles of statistics and research methodologies within the practice of physical therapy.
   4.1.1 Formulate and reevaluate positions based on the best available evidence.
   4.1.2 Critically evaluate and interpret professional literature as it pertains to practice, research, and education.
   4.1.4 Utilize contemporary technology consistently to access evidence.

TEACHING STRATEGIES AND LEARNING ACTIVITIES:
Course objectives will be met by utilizing some or all of the following methods of instruction:
1. Lecture and laboratory demonstrations
2. Independent practice of exercise techniques
3. Assigned readings
4. Group problem solving projects
5. Term paper
6. Case studies
7. Computer & video presentation
8. Guest lectures

GRADING SCALE:
\[
\begin{align*}
&\geq 92.0 = A & \geq 78.0 \text{ and } < 80.0 = C+ \\
&\geq 90.0 \text{ and } < 92.0 = A- & \geq 72.0 \text{ and } < 78.0 = C \\
&\geq 88.0 \text{ and } < 90.0 = B+ & \geq 70.0 \text{ and } < 72.0 = C- \\
&\geq 82.0 \text{ and } < 88.0 = B & \geq 60.0 \text{ and } < 70.0 = D \\
&\geq 80.0 \text{ and } < 82.0 = B- & < 60.0 = F
\end{align*}
\]
GRADING PROCEDURES:

1. term paper .................................................................................................................. 25%
2. Pulmonary written exam .............................................................................................. 25%
3. PNF presentation .......................................................................................................... 25%
4. Cardiac & ICU exam .................................................................................................. 25%
5. successful completion of 2 practical exams (pulmonary & PNF) .................. Pass/Fail
6. successful completion of pulmonary rehab observation & 2 field trips .......... Pass/Fail
7. professional behaviors demonstrated in all activities related to this course Pass/Fail

Term Paper: Each student is required to write a term paper. The term paper is worth 25% of the
total score in the course. This requirement may be completed individually or in a group of two
students working together. Two students may not work on the same topic unless they are
working together. The instructor will supply a list of term paper topics. The instructor will
determine a grade for the term paper using a grading rubric that the instructor will supply. The
text portion of the report should be 5-10 pages in length (5 page minimum) with 1 inch borders
on each side, line spacing of 1-1/2 and font size of 12. The report must be evidence-based and
include a bibliography with primary references and review articles as appropriate. References
from internet sites such as Wikipedia or “.com” sites are not acceptable. All internet references
must be from a “.edu” or “.org” site or cleared with the instructor. Factors 1 and 2 listed below
should be referenced while factors 3 and 4 may be your interpretation and application of the
information and may not require references unless appropriate. You are encouraged to submit an
outline of the paper for the instructor to review and provide preliminary feedback. Outlines are
not required, but must be submitted by November X, 20XX if you would like feedback.

The term paper should include a discussion of each of the following factors:

1) background & etiology of the pathological condition including mode of onset; e.g. genetic,
   trauma or exposure and symptomatic presentation. References required for this section.

2) short and long term prognosis, i.e. will the condition get better or worse over time and what
   factors will contribute to the potential for change in the pathological state. References required.

3) impact of the pathological condition on the capacity of clients to perform aerobic and
   anaerobic exercise; e.g. limited cardiac output, limited aerobic capacity, muscle dysfunction.
   Please specifically address: a) are the guidelines of aerobic exercise in the target heart zone for
   30 minutes three times a week appropriate for this client population; and b) are the guidelines for
   strengthening exercise using 3 sets of 10 repetitions at ~80% of the 1 repetition maximum
   appropriate for this client population.

4) special considerations in the design of an aerobic and anaerobic conditioning program for a
   client with the pathological condition; e.g. non-weight bearing status, joint protection,
   neuropathy, decreased proprioception and/or other impaired senses.

A paper copy and an electronic copy of the report are both due on or before November XX,
20XX before 5pm. The paper copy should be placed in the mailbox of the instructor by the due
date. An electronic copy of the paper should be emailed to the instructor by the due date.
Written Exams: Two written examinations will be given in the course. Each test is worth 25% of the total score in the course. Each exam will include multiple choice, true/false, matching and/or short answer questions. You need to bring a scantron answer sheet to each exam.

PNF Presentation: Your "exam" for the PNF section of this course will consist of a case presentation. The presentation is worth 25% of the total score in the course. You will work in groups of 4 students. Each member of your group will give the oral presentation to other members of the lab group. You are encouraged to develop any handout materials that would be beneficial to your audience and to use any audio-visual materials that will facilitate the understanding of your presentation by your target audience. Each group presentation should be approximately 30 minutes in duration. The instructor will provide the case for each group.

Practical Examinations: There will be two practical examinations in the course. The practical examinations will test the student's ability to execute examination and treatment techniques in a safe and effective manner. Failure to execute a specific technique safely will result in the student receiving a failing grade and require remediation. If a student fails both practical examinations due to safety violations they will receive failing grade in the class.

Students must achieve a minimum of 3 points out of a total of 5 points on each practical examination section. If a student fails to achieve this minimum grade, he/she will be required to take another practical examination in the skill category in which the failure occurred. If the student does not receive a passing grade in the practical examination taken for a second time, he/she will receive a failing grade for that examination, and will be required to perform remediation appropriate to the deficiency as determined by the course instructor. The remediation must be completed by the end of regularly scheduled classes of the semester in which the remediation is assigned. If the remediation is not completed at a satisfactory level, the student will receive, at most, a D grade in the course regardless of the scores on other examinations. If the student does receive a passing grade in the practical examination taken for a second time, he/she will receive a passing grade for that practical examination.

Pulmonary Rehabilitation Observation: Each student is required to complete an observation in pulmonary rehabilitation. Each student is required to attend the scheduled meeting, observe the activities occurring in that setting and interact with the participants in the setting, as appropriate. Each student is required to submit an article after the visit in which you provide the details of the visit; i.e. who, what, when, where & how. The second part of the article is to be a reflection paper based upon your experienced in that setting. The due date for the article is November XX, 20XX. Failure to submit the paper for the observation on time will result in an incomplete or failing grade in the course.

Field trips: There are two scheduled field trips in this course. You are required to attend the meeting at Folsom Physical Therapy on Monday November X from 7-10pm. You are required to be an active participant in the back training course presented to you at that time. The second field trip you are required to attend is to an Intensive Care Unit. This trip will be scheduled for week 15 during your normal class/lab time. This field trip is observational in nature. There are no papers to write for the field trips.
You are required to provide me with a current copy of your shot records in order to go on the ICU field trip. You must provide evidence of:

1) an MMR,
2) a negative TB test done December 20XX or later
3) a copy of a photo id. and
4) a completed and signed confidentiality agreement.

All of this paperwork must be provided to Dr. Stockert on or before 11/XX/20XX. Failure to do so may cause you to miss the ICU field trip and will result in your grade for the course being lowered significantly.

PROFESSIONAL BEHAVIOR:

Professional behavior, as described in the PT Student Handbook (generic abilities) is required in order to receive a passing grade in this course. Attendance at lecture is preferred, but adults are able to make their own learning choices. If you are going to be absent from lecture this might affect other members in a group activity. If you are unable to attend lecture you must call and notify the instructor in advance of your absence. Students are responsible for any missed work and may be required to complete a make-up assignment. If a student misses an examination a make-up examination will not be given unless the student has made arrangements prior to the absence, i.e. a score of “0” will be recorded. Attendance at laboratories is required. If you must miss a laboratory please contact the instructor as soon as possible. If your attendance at labs is a reoccurring problem you will not receive a passing grade in the course. Professional behavior includes students arriving and being ready to begin all activities on time. Cell phones and beepers should be off or silent (set to vibration mode) during the class. No text messaging is permitted in class.

Special accommodations: During the course of the year, some students may utilize prearranged accommodations. If you are a student with a learning disability, physical disability, or other special needs, please let me know as soon as possible if you need special accommodation. These kinds of confidential discussions are best handled during my office hours or by special appointment. You can expect confidentiality and cooperation regarding any circumstances and needs that have been verified through the Office of Services to Students with Disabilities (SSWD).

STUDENTS SHOULD READ AND BECOME FAMILIAR WITH THE UNIVERSITY’S ACADEMIC HONESTY, POLICY & PROCEDURES WHICH CAN BE FOUND AT:
www.csus.edu/admbus/umanual/UMA00150.htm The following are direct quotes from the first sections of that document:

“The principles of truth and honesty are recognized as fundamental to a community of scholars and teachers. California State University, Sacramento (CSUS) expects that both faculty and students will honor these principles, and in so doing, will protect the integrity of academic work and student grades. CSUS is a publicly-assisted institution legislatively empowered to certify
competence and accomplishment in general and discrete categories of knowledge. The President and faculty of CSUS are therefore obligated not only to the world at large but also to California to guarantee that substantive knowledge is actually acquired and the ability to acquire it is actually demonstrated by those to whom they assign grades and whom they recommend for degrees. Academic dishonesty defrauds all those who depend upon the integrity of the University, its courses and its degrees. This fraud is accomplished to the extent that faculty, students or campus employees knowingly or unwittingly allow academic dishonesty to work its deception.”

“...Plagiarism is a form of cheating. At CSUS plagiarism is the use of distinctive ideas or works belonging to another person without providing adequate acknowledgement of that person’s contribution. Regardless of the means of appropriation, incorporation of another’s work into one’s own requires adequate identification and acknowledgement. Plagiarism is doubly unethical because it deprives the author of rightful credit and gives credit to someone who has not earned it. Acknowledgement is not necessary when the material used is common knowledge.”
CALIFORNIA STATE UNIVERSITY, SACRAMENTO  
College of Health and Human Services  
Department of Physical Therapy  

PT 240 - Physical Therapy Interventions II  
Fall Semester, 20XX

<table>
<thead>
<tr>
<th>Date/week</th>
<th>Topic</th>
<th>Reading</th>
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| (1)       | Course introduction & overview  
Lecture: Pulmonary Examination  
Lab: Pulmonary Examination | chapters 1, 2, 10 & 16 |
| (2)       | Labor Day holiday  
Pulmonary Examination | chapters 10 & 16 |
| (3)       | Lecture: Pulmonary Interventions  
Lab: Pulmonary Intervention | chapters 13 & 17 |
| (4)       | no class - both lab groups meet on Wednesday  
Guest speaker: Risa McDonald; combined lecture & lab meeting |
| (5)       | **Combined Lecture/lab Monday only:** 10:00 am - 5:00 pm  
Pulmonary simulations & case studies – *El Dorado Hall*  
lab group C = 10:30 – 1:00  
lab group D = 2:00 – 4:30 | |
| (6)       | **Pulmonary Written Examination:** 1-2 pm; no lecture Wednesday  
**Pulmonary Practical Examination:** 2-4:30 pm Monday or Wednesday |
| (7)       | **Combined Lecture/lab Monday or Wednesday lab group only**  
PNF: UE/LE extremity & trunk patterns  
**PNF case presentation assignments made** |
| (8)       | **Combined class/lab: Monday & Wednesday lab group**  
**PNF case presentations on assigned lab day only - 12:30 - 4:30** |
| (9)       | Lecture: Cardiac Examination  
Lab: Cardiac Examination | chapters 8 & 16 |
| (10)      | Lecture: Stabilization Exercises (1-2pm only)  
Lab: *mandatory field trip; Folsom Physical Therapy; from 7-10 pm  
*Shot records due & optional - term paper outlines due* |
| (11)      | Lecture: Cardiac Rehabilitation  
Lab: Cardiac Rehabilitation case studies | chapters 17 & 18 |
| (12)      | **Combined Lecture/lab - both lab groups on Wednesday:** 1-4:30 pm |
Electrocardiogram & ECG case studies  chapter 9

(13)  Combined Lecture/lab Monday: 10:00-5:00 pm
Simulation case studies – El Dorado Hall  chapter 13
Term paper due (paper & electronic submissions required by 5pm)

(14)  Combined Lecture/lab Monday or Wednesday: 1-4:30 pm
Simulation case studies – El Dorado Hall  chapter 13

(15)  Intensive care field trips on Monday or Wednesday
Field trips will occur during your scheduled lab times

Finals Week (16)  Final Examination (Cardiac & ICU written exam)