PT 625: MUSCULOSKELETAL PATIENT MANAGEMENT I

In Workflow

- 1. PT Committee Chair (kbaxter@csus.edu)
- 2. PT Chair (mckeough@csus.edu;%20crummetth@csus.edu)
- 3. HHS College Committee Chair (knam@csus.edu)
- 4. HHS Dean (maguirem@csus.edu)
- Academic Services (torsetj@csus.edu;%20212408496@csus.edu;%20cnewsome@skymail.csus.edu)
- 6. Senate Curriculum Subcommittee Chair (curriculum@csus.edu)
- 7. Dean of Undergraduate (james.german@csus.edu;%20celena.showers@csus.edu)
- 8. Dean of Graduate (cnewsome@skymail.csus.edu)
- 9. Catalog Editor (212408496@csus.edu;%20torsetj@csus.edu;%20cnewsome@skymail.csus.edu)
- 10. Registrar's Office (wlindsey@csus.edu)
- 11. PeopleSoft (PeopleSoft@csus.edu)

Approval Path

1. Thu, 12 Dec 2019 17:39:57 GMT

Heide Katrin Mattern-Baxter (kbaxter): Approved for PT Committee Chair

2. Fri, 13 Dec 2019 19:25:50 GMT

Heather Crummett (crummetth): Approved for PT Chair

3. Tue, 04 Feb 2020 23:22:55 GMT

Kisun Nam (knam): Rollback to Initiator

4. Wed, 26 Feb 2020 19:42:32 GMT

Heide Katrin Mattern-Baxter (kbaxter): Rollback to Initiator

5. Wed, 26 Feb 2020 21:18:42 GMT

Heide Katrin Mattern-Baxter (kbaxter): Approved for PT Committee Chair

6. Wed, 26 Feb 2020 21:49:51 GMT

Michael Mckeough (mckeough): Approved for PT Chair

7. Tue, 03 Mar 2020 16:47:40 GMT

Kisun Nam (knam): Approved for HHS College Committee Chair

8. Tue, 03 Mar 2020 18:32:41 GMT

Mary Maguire (maguirem): Approved for HHS Dean

9. Wed, 08 Apr 2020 18:31:09 GMT

Janett Torset (torsetj): Approved for Academic Services

Date Submitted: Wed, 26 Feb 2020 20:56:32 GMT

Viewing:PT 625: Musculoskeletal Patient Management I

Last edit:Wed, 26 Feb 2020 20:56:31 GMT

Changes proposed by: Heather Crummett (210174092)

Contact(s):

Name (First Last)	Email	Phone 999-999-9999
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Catalog Title:

Musculoskeletal Patient Management I

Class Schedule Title:

Musculo Patient Management I

Academic Group: (College) HHS - Health & Human Services

Academic Organization: (Department)

Physical Therapy

Will this course be offered through the College of Continuing Education (CCE)?

No

Catalog Year Effective:

Fall 2021 (2021/2022 Catalog)

Subject Area: (prefix) PT - Physical Therapy

Catalog Number: (course number)

625

Course ID: (For administrative use only.)

160501

Units:

4

In what term(s) will this course typically be offered?

Fall, Spring

Does this course require a room for its final exam?

Yes, final exam requires a room

Does this course replace an existing experimental course?

Nο

This course complies with the credit hour policy:

Yes

Justification for course proposal:

The course pre and co-requisites for all summer year 1 and fall year 2 courses in the program had to be changed because Geriatrics (PT 636) was moved from the summer to the fall semester.

Course Description: (Not to exceed 80 words and language should conform to catalog copy.)

This course, the first of three, focuses on acquisition, integration, knowledge and skills involved in developing and implementing a patient management plan for the patient with musculoskeletal dysfunction based on sound evaluative findings. Lectures address etiology, signs and symptoms, medical, surgical, and physical therapy management of musculoskeletal dysfunction. Labs address skill development for performing evaluation and interventions safely and effectively. The course addresses the management of lower extremity dysfunction.

Are one or more field trips required with this course?

No

Fee Course?

No

Is this course designated as Service Learning?

No

Does this course require safety training?

Nο

Does this course require personal protective equipment (PPE)?

No

Course Note: (Note must be a single sentence; do not include field trip or fee course notations.)

Open to Physical Therapy majors only

Does this course have prerequisites?

Yes

Prerequisite:

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

Prerequisites Enforced at Registration?

Yes

Does this course have corequisites?

Yes

Corequisite:

PT 624, PT 626, PT 636, PT 640, PT 646.

Corequisites Enforced at Registration?

Yes

Graded:

Letter

Approval required for enrollment?

No Approval Required

Course Component(s) and Classification(s):

Laboratory Lecture

Laboratory Classification

CS#16 - Science Laboratory (K-factor=2 WTU per unit)

Laboratory Units

2

Lecture Classification

CS#02 - Lecture/Discussion (K-factor=1WTU per unit)

Lecture Units

2

Is this a paired course?

No

Is this course crosslisted?

No

Can this course be repeated for credit?

No

Can the course be taken for credit more than once during the same term?

Nο

Description of the Expected Learning Outcomes: Describe outcomes using the following format: "Students will be able to: 1), 2), etc."

All course objectives are referenced to program educational goals and related objectives. At the conclusion of the course, the student is expected to be able to demonstrate an understanding of the basis, execution, and effectiveness of the physical therapy evaluation, prevention and treatment / intervention procedures that are commonly used with the patient with musculoskeletal dysfunction. Specifically, the student should be able to:

Student Learning Outcome 1.0: Demonstrate professional physical therapist effectiveness by creating and documenting a comprehensive physical therapy patient management process, including determination of the physical therapy needs of any individual, designing a plan of care that synthesizes best available evidence and patient preferences, implementing safe and effective psychomotor interventions, and determining the efficacy of patient outcomes.

- 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.
- 1.1.2 Describe how pathological processes affect normal function.
- 1.1.3 Discuss common medical/surgical treatments for major disorders.
- 1.1.4 Analyze the effects of pharmacological agents on human function.
- 1.2 Determine the physical therapy needs of any individual seeking services.
- 1.2.1 Perform an effective and efficient systems review screen.
- 1.2.2 Review pertinent medical records and conduct a comprehensive patient interview.
- 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 Conduct tests and measures to appropriately assess anthropometric characteristics for a patient with lower quarter musculoskeletal disorders in a culturally competent and age appropriate manner across the life span.
- 1.2.3.2 Conduct tests and measures to appropriately assess the need for adaptive and assistive devices for a patient with lower quarter musculoskeletal disorders in a culturally competent and age appropriate manner across the life span.
- 1.2.3.3 Conduct tests and measures to appropriately assess the patient's lower quarter arterial, venous, and lymphatic systems in a culturally competent and age appropriate manner across the life span.
- 1.2.3.4 Conducts tests and measures to appropriately assess the patient's lower quarter peripheral nervous system including motor and sensory examination in a culturally competent and age appropriate manner across the life span.
- 1.2.3.5 Conduct tests and measures to appropriately assess the patient's low back and lower quarter ergonomics and body mechanics in a culturally competent manner and age appropriate across the life span.
- 1.2.3.6 Conduct tests and measures to appropriately assess the patient's gait, balance, and locomotion in a culturally competent and age appropriate manner across the life span.
- 1.2.3.7 Appropriately assess the integrity of the integumentary system as it relates to the management of patients with lower quarter musculoskeletal disorders in a culturally competent and age appropriate manner across the life span.
- 1.2.3.8 Appropriately and safely carryout the examination of the mobility and integrity of the lumbar spine and joints of the lower quarter in a culturally competent and age appropriate manner across the life span.
- 1.2.3.9 Appropriately examine muscle function including strength, power, and endurance of the lower quarter; based on the patient's response in a culturally competent and age appropriate manner across the life span.
- 1.2.3.10 Appropriately examine the patient's lumbar and lower quarter posture in a culturally competent and age appropriate manner across the life span.
- 1.2.3.11 Appropriately examine the patient's reflex integrity of the lumbar spine and lower quarter and interpret the results in a culturally competent and age appropriate manner across the life span.
- 1.2.3.12 Carry out appropriate subjective and objective evaluation of self-care, home, community, and work management including ADL and IADL in an age appropriate and culturally sensitive manner taking into account work/play/sport/recreation and community/social goals of each patient as related to the lumbar spine and lower guarter.
- 1.2.3.13 Carry out appropriate subjective and objective evaluation of self-care, home, community, and work management including ADL and IADL in an age appropriate and culturally sensitive manner taking into account work/play/sport/recreation and community/social goals of each patient as related to the lumbar spine and lower quarter.
- 1.2.4 Determine barriers in the patient's environment, home, work, or school as they relate to lower quarter musculoskeletal disorders in a culturally competent manner across the life span.
- 1.2.5 Evaluate the patient/client with lumbar and lower quarter musculoskeletal conditions need for orthotics, or supportive devices in a culturally competent and age appropriate manner across the life span.
- 1.2.6 Appropriately assess the patient's/client's pain experience including the influence of biopsychosocial factors as they relate to the lumbar spine and lower quarter in a culturally competent and age appropriate manner across the life span.
- 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.
- 1.2.10 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.
- 1.3.3 Determine a patient prognosis by predicting the level of optimal improvement in function and the amount of time required to achieve that level.
- 1.3.4 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.
- 1.3.6 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.
- 1.3.9 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 including functional/work/sport/leisure training, manual therapies (soft tissue and joint mobilization), exercise, and orthotic/taping/supportive device prescription and/or fabrication for the lower quarter and lumbar spine in a culturally sensitive and age appropriate manner.
- 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 Promote health by providing information on fitness, exercise, and lifestyle change as they relate to health risks, disease prevention, and optimization of function as influenced by age and gender, in an age appropriate and culturally sensitive manner, and within the scope of physical therapy practice, particularly as related to the lumbar spine and lower quarter condition.
- 1.4.5 Coordinate patient/client care with other health care providers.
- 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.
- 1.6.3 Describe how aggregate data is analyzed to assess the effectiveness of clinical performance (interventions).
- 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.

Student Learning Outcome 2.0: Demonstrate the ability to plan, organize, administer, direct, and supervise human and fiscal resources for physical therapy practice management, and to communicate effectively with patients, families, other health care professionals and the public.

- 2.1 Provide consultative services applying the unique knowledge and skills of a physical therapist to identify problems, recommend solutions, or produce an outcome or product.
- 2.2 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.
- 2.2.1 Promote health behaviors through educational interventions and modeling.
- 2.2.2 Apply basic educational concepts of teaching to the practice of physical therapy.
- 2.2.3 Educate colleagues and other health care professionals about the roles, responsibilities and academic preparation of the physical therapist and scope of physical therapy practice.
- 2.2.4 Present topics/issues using current evidence and sound teaching principles (i.e. case studies, in-service, journal article review, etc.) for lower quarter and lumbar spine.
- 2.3 Demonstrate the ability to plan, organize, administer, direct, and supervise human and fiscal resources for physical therapy practice management, including:
- 2.3.5 Patient rights, consent, confidentiality and the Health Information Portability and Privacy Act (HIPPA).

Student Learning Outcome 3.0: Demonstrate professional behaviors by reflecting on personal and professional development, and by integrating cultural, ethnic, age, economic, and psychosocial considerations in the communication and delivery of clinical services.

- 3.1 Recognize cultural, ethnic, age, economic, and psychosocial differences and apply a humanistic and holistic approach to the delivery of a clinical service.
- 3.1.1 Practice physical therapy demonstrating cultural competence with all individuals and groups.
- 3.1.2 Work effectively with challenging patients.
- 3.1.3 Respect personal space of patients/clients and others.
- 3.1.4 Demonstrate behaviors that are non-judgmental with regards to patients/clients' lifestyles.
- 3.1.5 Respect roles of support staff and delegate appropriately.
- 3.2 Communicate effectively for varied audiences and purposes.
- 3.2.1 Demonstrate effective interpersonal (verbal, nonverbal, electronic) communication skills considering the diversity of populations and environments.
- 3.2.2 Facilitate therapeutic communication and interpersonal skills.
- 3.2.3 Discuss difficult issues with sensitivity and objectivity.
- 3.2.4 Appropriately utilize communication technology efficiently, professionally, and effectively.
- 3.2.5 Respect roles of support staff and communicate appropriately.
- 3.3 Participate in professional activities that serve the community and advance the profession of physical therapy.
- 3.3.1 Participate in community service activities.
- 3.3.2 Recognize the importance of participation in professional association activities.

- 3.3.3 Recognize one's role as a member and leader of the health care team.
- 3.3.4 Promote participation in clinical education.
- 3.4 Recognize the need for personal and professional development.
- 3.4.1 Participate in self-assessment to improve clinical and professional performance.
- 3.4.2 Welcome and seek new learning opportunities.
- 3.4.3 Assume responsibility for professional lifelong learning.
- 3.4.4 Accept responsibility and demonstrate accountability for professional decisions.
- 3.4.5 Recognize own biases and suspend judgments based on biases.
- 3.5 Demonstrate entry level generic abilities, including:
- 3.5.1 Professional accountability and commitment to learning.
- 3.5.2 Recognition of one's own limitations.
- 3.5.3 Effective use of constructive feedback.
- 3.5.4 Effective use of time and resources.
- 3.5.5 Demonstrate integrity, compassion, and courage in all interactions.

Student Learning Outcome 4.0: Practice in an ethical and legal manner through the consistent integration of sound decision-making with respect to established ethical, legal and professional standards.

- 4.1 Practice physical therapy in a manner consistent with established legal and professional standards.
- 4.1.1 Demonstrate awareness of and adherence to state licensure regulations.
- 4.1.2 Practice within all applicable regulatory and legal requirements.
- 4.2 Practice in a manner consistent with the professional code of ethics
- 4.2.1 Demonstrate knowledge and application of ethical decision-making.
- 4.2.2 Treat patients/clients within scope of practice, expertise and experience.
- 4.2.3 Seek informed consent from patients/clients.

Student Learning Outcome 5.0: Demonstrate the critical evaluation, interpretation and application of the scientific and professional literature to inform independent judgments and clinical decision-making, research and education.

- 5.1 Apply basic principles of statistics and research methodologies within the practice of physical therapy.
- 5.1.1 Formulate and reevaluate positions based on the best available evidence.
- 5.1.2 Evaluate the efficacy and efficiency of physical therapy procedural interventions.
- 5.1.3 Critically evaluate and interpret professional literature as it pertains to practice, research, and education.
- 5.1.4 Utilize contemporary technology consistently to access evidence.

Attach a list of the required/recommended course readings and activities:

PT625Syllabus 2020_revised.docx

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.

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GRADING PROCEDURES:
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Written exams- (SLO 1-3) (2 at 17.5% each) 35%

Practical exams- (SLO 1-4) (2 at 15% each) 30%

Quiz-Basic Principles-(SLO 1) 10%

Case Study 1 (SLO 1-3) 7%

Case Study 2 EBP Case Study (SLO 1-5) 10%

Ortho Free Clinic Participation and Assignment (SLO 4-5) 3%

Group Outcome Measures Presentations (SLO 5) 5%

Grading Scale

92-100% A

90-91 A-

87-89 B+

82-86 B

80-81 B-

77-79 C+ 72-76 C

70-71 C-

67-69 D+

62-66 D

60-61 D-

<59 F

A passing grade in the course is a "B"

Is this course required in a degree program (major, minor, graduate degree, certificate?)

Yes

Has a corresponding Program Change been submitted to Workflow?

No

Identify the program(s) in which this course is required:

Programs:

Doctor of Physical Therapy

Does the proposed change or addition cause a significant increase in the use of College or University resources (lab room, computer)?

No

Will there be any departments affected by this proposed course?

No

I/we as the author(s) of this course proposal agree to provide a new or updated accessibility checklist to the Dean's office prior to the semester when this course is taught utilizing the changes proposed here.

I/we agree

University Learning Goals

Doctorate Learning Goal(s):

Critical thinking/analysis Communication Information literacy Disciplinary knowledge Intercultural/Global perspectives Professionalism Research

Is this course required as part of a teaching credential program, a single subject, or multiple subject waiver program (e.g., Liberal Studies, Biology) or other school personnel preparation program (e.g., School of Nursing)?

No

Please attach any additional files not requested above:

DPT-SLO_Letter.pdf

Reviewer Comments:

Kisun Nam (knam) (Tue, 04 Feb 2020 23:22:55 GMT):Rollback: Committee approved the form with pending changes. Please refer to the discussion during meeting. Committee members from the department will provide the detailed changes to the chair/author. Once re-submitted, the chair may approve the proposal immediately.

Heide Katrin Mattern-Baxter (kbaxter) (Wed, 26 Feb 2020 19:42:32 GMT):Rollback: as discussed

Key: 4078