Division of Biokinesiology & Physical Therapy Mission & Vision

Our Vision
To transform healthcare by creating the future in physical therapy.

Our Mission
To enhance the health and quality of life of all people by advancing physical therapy education, science, and practice.

Our Objectives
1. Transform Education to Meet Societal Needs
2. Develop Leaders for a Rapidly Changing Healthcare System
3. Integrate Research and Practice to Advance Science and Human Health Influence Local and Global Communities of Practice

Doctor of Physical Therapy Mission & Vision

Mission
To prepare physical therapists to be responsible health care providers who demonstrate core professional values, address the needs of the individual across the lifespan, and embrace evidence-based and patient-centered practice.

Vision
To have the USC Doctor of Physical Therapy program recognized as the premier program, cultivating the highest caliber physical therapists who improve individual and societal health through innovations in clinical practice, education, leadership and research.
Introduction

The purpose of this handbook is to provide you with a written copy of the policies and procedures of the Division of Biokinesiology & Physical Therapy.

In addition, students, faculty and staff are held to the standards and practices of the University as it relates to all policies and procedures that relate to faculty, staff, and university affairs and governance. All students, faculty and staff are encouraged to review the University policies and procedures available to them at: http://policies.usc.edu/index.html

We require that all students verify that they have read the 2017-2018 Student Handbook by signing the following signature page and submitting a copy to the Assistant Director, Student Affairs (whose office is located in CHP 155) for the student's individual academic file.
The undersigned indicates by his/her signature that he/she has viewed a copy of the electronic version of the USC Student Handbook 2017-2018, and therefore, is informed of the Division’s policies related to academic, clinical, and professional expectations. Your signature confirms your understanding of these expectations and your willingness to be responsible for your conduct associated with these expectations. A copy of this signed agreement will be placed in your student records file.

PRINT NAME ________________________________

SIGNATURE _________________________________

DATE _________________________________

Check appropriate class:

☐ ___ DPT Class of 2018
☐ ___ DPT Class of 2019
☐ ___ DPT Class of 2020
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SECTION 1 GENERAL POLICIES

I. CLASS ATTENDANCE/PARTICIPATION

The philosophy of the Division is that a professional curriculum requires certain standards that may differ from non-professional graduate school programs. Attendance is one of these differences. Specifically, attendance is required at all class sessions unless it has been explicitly stated otherwise in the course syllabus. Consider that you are now beginning your professional career. As in the workplace attendance is mandatory and absence requires an explanation and notification.

Students are required to attend both lecture and laboratory classes regularly and to arrive on time. The student should contact the Division regarding any absence by sending an email notification to dptstudent.absence@ihpnet.usc.edu. If an email notification is not sent by the student to the Division, the absence will be considered a non-excused absence. Students are responsible for all class material. In the event of an absence from class, it is the student's responsibility to make up all class work and demonstrate adequate mastery of concepts or skills covered during the absence. Upon returning to class, students should check with the Course Director (s) to make sure that they received timely notification of the student’s absence. Two or more excused absences per semester or one or more unexcused absence in consecutive semesters is considered excessive and evidence of non-professional performance, and may result in disciplinary action, up to and including dismissal. Unexcused absences are not grounds for receiving an incomplete in didactic or clinical courses.

Absences from clinical assignments must be reported directly to the Division by sending an email notification to dptstudent.absence@ihpnet.usc.edu. A phone contact to the clinic where the student is assigned is also required. If an absence is unavoidable during a clinical assignment, the clinical facility must be notified first and the Division second.

Excused absences due to health condition or personal/family events beyond the student’s control may be grounds for an administrative leave by the Division and afford the opportunity to receive an incomplete for unfinished course work; however, the Division must be officially notified with proper documentation to comply with University standards.

A. Illness

In the event that a student is absent from class for 3 or more consecutive days, in addition to notification via the absence email, a physician's or dentist's statement covering the absence must be submitted to the Assistant Director, Student Affairs by the student on the first day he/she resumes classes or clinical experiences. The Assistant Director, Student Affairs will communicate the absences to the DPT Program Director and the Director of Clinical Education.

Students should note that they are responsible for notifying their Clinical Instructor as well as the Director of Clinical Education any day that they will be absent from a facility during a clinical assignment. The make-up of 1-3 days of absence is at the discretion of the Division and the clinic. More than 3 days of missed clinical time must be made up.

B. Other Absences

There are occasionally other reasons for absence including family crises or emergencies. The student must notify the DPT Program Director when such events require absence from class as described above.

All absences other than those for illness, family crises or emergencies are considered unexcused unless permission has been granted by the DPT Program Director. NOTE: Examinations will not be rescheduled for any personal reasons. This is a University policy with which the Division and its faculty are required to comply.
C. **Make-up of Work after Absences**

It is the student's responsibility to contact the appropriate faculty members to arrange a satisfactory plan to make-up class work or tests missed because of an excused absence.

Make-up examinations for an excused absence are left to the Course Director's discretion. Faculty may choose to alter the format of a make-up exam (i.e., a change from written to oral format), and scheduling of the exam is by agreement between the faculty member and the student. If a final examination is missed and arrangements for make-up examinations cannot be made prior to the deadline for grade submission, the student will receive an incomplete.

II. **HEALTH DISCLOSURES AND STUDENT INJURY/PARTICIPATION IN DIDACTIC, LABORATORY OR CLINICAL ASSIGNMENTS**

In clinical lab courses, students serve as patient models for many different activities/techniques. This allows each student the opportunity to practice on live patient models with a variety of body types. Each student is required to make any physical limitation that may limit his/her ability to participate in lab activities known to Course Directors prior to the academic term and to student partners prior to each lab activity. Failure to disclose limitations within one week of the beginning of the academic term or prior to each lab activity indicates consent to, acknowledgement of and acceptance of any inherent risks involved in all lab coursework.

Every student is expected to participate in clinical labs as a patient and physical therapist. The student has the right to refuse to serve as a subject for demonstration without prejudice by the faculty due to a DISCLOSED injury.

If a student sustains an injury, becomes pregnant or his/her health changes during the course of the academic term and this health change may prevent them from full participation in clinical instruction then the following must occur:

- The student must fully disclose injury/health condition and its consequences to the Course Director as soon as possible.
- The student must have a physician's report indicating diagnosis AND activity/participation restrictions. The student will be provided with a **Physical Health Conditions Summary Form (see Appendix)** to be filled out and signed by his/her physician that will determine the student’s level of restriction in class participation. This form will need to be updated and returned to the Assistant Director, Student Affairs AND Course Director(s) after each follow up appointment and prior to return to full class participation. This form can be obtained from the Assistant Director, Student Affairs in CHP 155.
- If an injury occurs during school related activities, the student must complete a **Student Injury Report (see Appendix)**. Return this form to the Program Director via the Assistant Director of Student Affairs.
- Student must notify Course Director of follow up appointment with the appropriate healthcare provider and timeframe for resolution of restrictions with expectation to return to full class participation.

Students whose injury or illness requires them to miss a midterm or examination will be required to meet with the Course Director. The student and Course Director will determine a timely schedule for re-testing of a missed exam. The student will be responsible for staying up to date with course material through assigned reading, course notes, classmate assistance and office hours.

Decisions regarding unresolved health issues or injury which require greater than three days of restricted attendance and/or participation and/or more than one examination will be considered on a case by case basis by the DPT Program Director in consultation with Course Directors.
**Treatment of Injuries:** “Casual” or “informal” physical therapy treatment for a disclosed or undisclosed injury will not be given by any of the faculty of the course to students during or outside of class time. Use of a student as the “demo” patient should not be interpreted as physical therapy treatment. If a student wishes to seek Physical Therapy treatment for an injury, the student must schedule an appointment in a structured clinical setting to insure a thorough exam and focused and consistent treatment.

### III. MEETINGS OF STUDENTS AND FACULTY

Meetings of students and faculty may be initiated by either the faculty or the student. Appointments for most meetings are required and should be made with the faculty member or through the Administrative and Operations Coordinator located at the front desk in CHP 155.

Students and faculty are expected to honor appointments and to cancel well in advance (except for unforeseen emergencies) if the appointment cannot be kept. This is one of the principal reasons for the student address/telephone listings, which are NOT for distribution to persons outside the Division.

Class representatives are elected each year, and one of their responsibilities is to meet with the faculty at designated faculty meetings regarding matters of concern or of interest to the class as a whole.

Students experiencing academic difficulty are responsible for seeking advice and assistance from the Course Director (the faculty member with primary responsibility for the course) and their faculty mentor. All faculty will have posted their office hours. Appointments are to be scheduled either directly with the faculty member or via the Administrative and Operations Coordinator.

Students are requested to refrain from contacting faculty members at home unless permission has been granted directly by the faculty member. While the Division encourages student/faculty interaction, it requests that students adhere to the appointment courtesy, except in cases of extreme urgency.

It should be remembered that some faculty are not on-site, or may be on vacation during part of the summer. Counseling or mentoring of students regarding the program or research projects in these months may revert to faculty-on-duty and must be arranged well in advance.

### IV. COUNTY/STATE LAWS AND REGULATIONS AND THE STUDENT

#### A. Use of Alcoholic Beverages, Drugs and Smoking

The USC Division of Biokinesiology & Physical Therapy is located on the USC Health Science Campus. The consumption of alcoholic beverages, the use of illegal drugs or the demonstration of drunk or disorderly behavior on the campus is expressly prohibited. Smoking is forbidden in all university buildings.

#### B. Conviction of Felonious Crimes

Conviction of a felony constitutes grounds for denial of eligibility for licensure or revocation of a license in the case of a physical therapist possessing a license to practice physical therapy. Similarly, conviction of a felony constitutes grounds for dismissal from the physical therapy program at USC.
V. DRESS STANDARDS

Personal appearance is the first statement you make about yourself and your profession to patients, other health professionals and the public in general. Since the Division is located on a campus that includes hospitals and medical offices, it is common that you will encounter patients and health professionals. Dress is an outward manifestation of your professional pride and attitude. As students in this program you are evolving health care professionals and, therefore, are seen as representatives of our profession. Because of the importance of appearance in conveying a professional attitude, a dress code will be adhered to by faculty and students.

A. In a Clinical Facility

When in any patient care facility or area, be it for a class, clinical education experience or other use, acceptable attire consists of:

1. Name tags are required at all times
2. White clinic coats
3. Slacks or long pants (no jeans/shorts) and collared shirts for men (shirt and tie are highly recommended)
4. Long pants or skirts, blouses, or dresses for women
5. Clean shoes with closed heel and toe; socks or hose must be worn. (Clean, well-kept tennis shoes may be permitted in some clinic settings)
6. Hair that is neat; long hair must be tied back.
7. Fingernails must be short.
8. Jewelry must be kept to a minimum and cannot pose any safety hazard for patient or student during patient care.
9. Visible body piercing (excluding ears) and tattoos may be considered unprofessional and unacceptable in the clinical setting. Each clinical site has the support of the school to request a student remove any piercing or cover the area of the tattoo per their site regulations.

If the clinical setting has different dress requirements than the Division, the student should follow the clinical setting guidelines (i.e., no white laboratory coats in a pediatric setting)

B. Classroom Attire When There is a Guest Faculty or Patient present:

1. Dress standards are the same as in the clinical facility.
2. White clinic coats need not be worn unless requested by the faculty.

C. In a Clinical Lab the attire is as follows:

1. Clean and gently worn shorts and T-shirts/tank tops.
2. Bike Shorts or Supporters for men
3. 2-piece swim suit top or sports bra for women
*Faculty members will discuss the required attire for specific class meetings as needed.

D. Anatomy Lab

1. Scrub top and bottom
2. Shoes with closed heel and toe
3. Gloves
E. **Unacceptable Attire at Any Time**

1. Short shorts
2. Tube tops or t-shirts with inappropriate language/pictures
3. Unkempt/torn attire/shoe wear
4. Provocative clothing (by length or fit) or excessive skin exposure
5. No hats (during exams or professional dress days)

The faculty members and clinical instructors reserve the right to prevent any student from attending any class or clinical experience at any location if the student's attire is judged to be non-professional. This is considered an unexcused absence, and therefore the student will be held accountable for material covered in that class.

Repetitive infractions of the dress standards may result in the student being placed on Clinical Warning. *(See Section 6).*

VI. **RECORDING OF LECTURES AND GUEST SPEAKERS**

Students must obtain permission to audio or video record any lectures by faculty or guest speakers, patients, or fellow students. The division offers recording of lectures and posts them to Mediasite. This is for the use of enrolled students only. It is strictly prohibited to share Mediasite links with anyone outside the Division. Violation of this policy will warrant consideration of being placed on Clinical Warning for poor professional behavior *(See Section 6).*

VII. **SOCIAL MEDIA**

During a clinical rotation, it is the student’s responsibility to abide by the policies and procedures set forth by the clinic. Students must first obtain clinic’s permission to post on any social media site about the clinic or patients. Even if permission is granted, at all times the student should follow HIPAA guidelines and protect the patients’ and clinic’s privacy. Violation of this policy will warrant consideration of being placed on Clinical Warning for poor professional behavior *(See Section 6).*

**Control your online reputation.** Students should be acutely aware of their online reputation and take proactive measures to project a professional image at all times, be it on Facebook, Twitter, Instagram or any other social media outlet. For example, it is not uncommon for prospective employers to check a prospective employee's Facebook page. Consideration should also be given to the reputation of those you are associated with. For example, if your Facebook account lists you as a USC student, then the online image you project directly influences USC’s image. Please be careful in what you post.

VIII. **FACULTY TITLES AND NAMES**

All faculty and staff should be addressed according to their formal titles (Dr., Professor, Mr., Mrs., Miss, Ms.). When faculty and students are in a less formal setting, it is the prerogative of the individual faculty member to request being addressed informally.
IX. GENERAL REQUIREMENTS

The following must be kept current throughout the students’ career at USC. Untimely renewal or lapses of any of these items will prevent the student’s participation in required educational experiences.

A. Malpractice Insurance

All students are required to purchase malpractice insurance through the group policy that USC makes available. Students are required to establish/new insurance coverage by contacting the Assistant Director, Student Affairs (see index in the back of this booklet for contact information).

B. Health Care Insurance

All students are required to have health insurance coverage during both the academic and clinical portions of their curriculum.

C. CPR

American Heart Association CPR for the Healthcare Provider (Basic Life Support BLS Provider) certification is required and must be kept current throughout the academic and clinical portions of the curriculum. See the Clinical Education Administrative Assistant to provide proof of CPR.

D. Immunizations and Titers

Immunizations clearances must be kept current the entire time students are in the program.

E. Health Insurance Portability and Accountability Act (HIPAA) Certification

F. APTA Student Membership

Students are required to join the APTA in their first year of study. Thereafter, they are strongly encouraged to renew their membership as well as to attend Chapter and District functions, and to participate in the activities provided for student members.

X. LIBRARY AND DIVISIONAL REFERENCES

Students should exercise responsibility in only removing from the Library materials that may be checked out. Materials on reserve must not be removed from the Library. Materials for current class use may only be checked out overnight. All borrowed library materials should be returned by the due date. Non-adherence to this practice may result in denial of periodical borrowing privileges at USC Norris Library, Rancho Los Amigos Medical Center Library, or other libraries.

Responsibility should be exercised by students in not removing non-cataloged course materials placed in the course readings file within the Division. Photocopies can be made for individual use away from the Division; removal of these materials, however, prevents other students’ access. Similarly, library or Divisional reserve materials should never be marked (by underlining, etc.). Be courteous to your classmates and considerate of their needs!
XI. RESEARCH PROJECTS

Students may develop and execute a research project or proposal, under the guidance of a faculty member. Each faculty member has a general area of research, suitable for development of student research projects and papers. Many faculty have ongoing research projects, which allow the combination of several projects to create publishable information.

There is, therefore, an added dimension of responsibility placed on the student investigator. Data provided must be accurate and valid. Thus, the student investigator contributes to the advancement of the profession while the art of critical and independent thinking is being developed and honed.

XII. VOLUNTARY WITHDRAWAL

The faculty of the Division recognizes that in some special instances it may be necessary for a student to interrupt or discontinue his/her Physical Therapy education. Counseling in such situations is available from the Assistant Director, Student Affairs, Faculty Mentor and/or the DPT Program Director. The procedures for doing so and the policy governing such action follow:

A. A student wishing to withdraw from school must obtain the withdrawal forms from the Office of the Registrar. The completed forms are to be returned to that office accompanied by a letter of intent. A copy of the letter is to be submitted to the Division of Biokinesiology & Physical Therapy.

B. A student who withdraws at any time during the first twelve full weeks of an academic term will receive a recorded grade of "W" for enrolled courses.

C. A leave of absence will not exceed one year. A leave of absence after all course work is completed will not be allowed (Graduate School Policy).

XIII. READMISSION FOLLOWING VOLUNTARY WITHDRAWAL

The procedures for establishing programs for readmitted students have been purposefully left flexible in order to better respond to the needs of individual students.

A. Options for Readmission

1. The Admissions Committee will consider readmission applications for positions in the entering first-year class.

2. The entire faculty will consider petitions for readmission to a class other than the entering first-year class.

B. Procedures for Applying for Readmission

1. A person applying for readmission must submit a petition in writing to the DPT Program Director for referral to the faculty no later than four months (120 days) prior to the date of proposed or desired readmission. This petition should clearly state the reasons why readmission should be granted.
2. Upon acceptance of a readmission petition, the faculty will:
   a. Determine the readmission level.
   b. Request appropriate faculty to develop a precise academic program.
   c. Maintain the readmitted student on the academic status in existence at the end of the last completed academic term.

3. All grades received by the readmitted student remain on the official transcript, but for purposes of determining student academic status, GPA determinations for readmitted students will follow one of the procedures below:
   a. GPA will be computed only upon grades received following readmission to the first-year class.
   b. GPA will be computed only upon grades received during completed academic terms.

XIV. MISCELLANEOUS

A. Divisional Fees

   All outstanding Divisional fees for library books, photocopying, class syllabi, etc., must be paid by the end of each academic term. Outstanding debts for fees may result in course grades designated MG (missing grade) or a delay of graduation.

B. Parking Regulations

   Parking on any USC campus is by permit only. Students are eligible to purchase parking permits at the beginning of each semester for the entire semester. Parking permits purchased for Health Sciences Campus parking lots are also honored at some University Park Campus lots.

   Students may pay for campus parking each day, as space is available. Off campus street parking is also available, but inadvisable. Students who park in the street should use the anti-theft "Club".

C. Care of Divisional Facilities

   Students must assume responsibility for the care of classrooms, laboratories, meeting rooms and hallway/stairs. Food and drink restrictions are to be closely observed. Should an accidental spill or forceful blow occur that causes damage to a piece of equipment, furniture, carpet, or walls/doors, please report the problem immediately to the Administrative and Operations Coordinator.

   Your timely reporting of accidental damage is viewed as a considerate gesture so that appropriate maintenance of the facility is possible.

D. University Graduation Requirements/Reporting of Graduation Date

   See the University Catalog. A minimal cumulative GPA of 2.75 is required in the DPT program to qualify for graduation.

   The University officially awards degrees three times a year: May, August and December. The Division participates in the University convocation ceremony, which is in May. The Division Convocation occurs at this time.

   Most DPT students should graduate from USC-PT in May, unless remedial course work is required. Students who are scheduled to finish remedial course work in August will be allowed to participate in the previous May commencement. Anyone scheduled to complete remedial course work later than August will require written permission from the Chair to participate in the previous May commencement.
States vary in their policies regarding licensing exam eligibility. It is the student's responsibility to determine the requirements of the state in which they will be taking the exam. It is also the student's responsibility to be sure all deadlines are met for the various State Board Exams.

E. Commencement and Convocation Ceremonies

Each May the University honors its graduates by holding a commencement ceremony on the University Park Campus. All graduating students are encouraged to attend. The Division of Biokinesiology & Physical Therapy is represented by Faculty Marshalls, elected by the graduating class, and by those members of the graduating class and faculty who choose to attend.

Individual schools within the University also hold their own satellite ceremonies in addition to the main University ceremony. These are scheduled after the University's ceremony, and may take place on either the University Park Campus or the Health Sciences Campus. The Chair or faculty member designated by the Chair works with the graduation committees of the PT classes to inform students of specific details and to coordinate the ceremony. Any student requests for changes in commencement activities must be submitted to the Chair for approval by the first of the year that the student is to graduate. Traditionally, the non-graduating students help host a Divisional reception immediately following the satellite ceremony.

F. Procedure for Filing a Complaint with the Commission on Accreditation in Physical Therapy Education (CAPTE)

Any person may submit to CAPTE a complaint about an accredited or developing program. The formal procedure for filing a complaint can be found in the CAPTE Accreditation Handbook under the heading "Part 11 - Procedures for Handling Complaints About an Accredited or Developing Physical Therapy Education Program". The CAPTE Accreditation Handbook can be accessed from the APTA web page and is found in PDF form at the following URL: http://www.capteonline.org/AccreditationHandbook/
SECTION 2 STUDENT SUPPORT

I. GENERAL

Access to USC resources such as wireless network, printing, copying, NML, etc. can be found in the current version of SCampus which can be found online here: http://scampus.usc.edu/

II. STUDENT MENTORING

The purpose of the USC, DPT student mentoring program is to provide each student with a personal link to a faculty member who can offer information and professional guidance to that individual. Each student has a faculty contact who knows them well and can discuss all aspects of the student’s education as a professional physical therapist. Students will have a formal meeting with their mentor at least once during the first month of each academic term to review the student’s progress. If possible these meetings should be held in person. However, because students may be off site for clinical experiences, or because some faculty mentors may be on campus less frequently, a phone meeting is acceptable. Because the student has been formally assigned to a mentor does not mean that the student will not develop mentoring relationships with other faculty. For example, if a student is interested in participating in research or has a specific clinical interest, another faculty member would also mentor the student. The faculty mentor should be seen as an advocate for the student and the student should feel that their mentor knows them and is there to help them obtain the most from their physical therapy education at USC.

A. Definition

All full-time and some part-time Divisional faculty serves as Mentors of students. Each student is assigned a Faculty Mentor at the beginning of the academic year. Students may request a change of mentor once during their time in the DPT program. This request must be submitted in writing to the Director of the Student Mentoring Program (for 2017-2018 this is Dr. Nina Bradley, nbradley@usc.edu) who will review the request and make the necessary changes.

B. Responsibilities (refer to Mentoring Flow Chart in Appendix)

1. Review with students, each academic term, their academic, clinical and professional behavior status.
2. Counsel students regarding their progress and status.
3. Recommend and refer students for special assistance.
4. During year one and two assist students with their service learning project.
III. STUDENT TUTORING

The Division is committed to providing support for students who are experiencing academic difficulty. The primary avenues for this support are through active participation in office hours with course instructors, and working with course faculty by appointment. For those students who need additional assistance, the Division has organized an optional tutoring program in which select DPT II students who have been approved by the Course Directors serve as tutors for DPT I students. Division sponsored tutoring is only available in the first year as it is dependent upon the availability of more senior students.

Criteria for Division Sponsored Tutoring
The number of available tutors is limited, therefore priority for tutors will be given to students who are having academic difficulty:
1. Student has received a grade of ≤ B– on a mid-term examination.
2. Tutoring Application has been submitted.
3. Approval is granted by the Course Director.

Procedure for Obtaining Division Organized Tutoring
- Participation in these tutoring options require the submission of a Tutoring Application form
  - See Appendix or obtain one at the front desk in CHP 155.
  - Obtain the signature of the appropriate course director.
  - Drop the form off in the box at the front desk in CHP 155.

Tutoring Options
1. Free, small group tutoring lead by DPT II students
   a. Attendance in these groups is by Division approval only
   b. To participate, students are required to continue to attend the relevant course office hours.
2. Paid private tutoring with DPT II students
   a. The student is responsible for the costs associated with private tutoring.

IV. HEALTH SERVICES

Health (Medical and Counseling) services are available on the Health Sciences Campus. The Eric Cohen Student Health Center is located at: 1510 San Pablo St., HealthCare Consultation Center I, 1st Floor, Los Angeles, California 90033. The clinic is open Monday, Tuesday, and Friday from 7:00 AM to 5:00 PM, Wednesday from 9:00 AM to 7:00 PM, and Thursday from 10:00 AM to 7:00 PM.

Appointments can be made by calling 323-442-5631. After hours you will be connected to the registered nurse and/or physician on call.

V. ACCOMMODATIONS FOR EQUAL ACCESS

Disability Services and Programs (DSP) is dedicated to maintaining an environment that ensures all students with documented disabilities at USC have equal access to its educational programs, activities and facilities. The accommodations are designed to level the playing field for students with disabilities, while maintaining the integrity and standards of USC’s academic programs.

Those students who need to request accommodations must register online with the Office for Disability Services and Programs (DSP) within the first week of each academic term to discuss individual needs and arrange appropriate support services and strategies. (Email: ability@usc.edu; http://www.usc.edu/disability) Registering with the DSP office is confidential and will allow accommodations to be granted for a physical disability or a learning disability. This office is located on the on the University Park Campus in the Student Union Building, Room 301.

A letter from DSP specifying the necessary accommodations must be submitted to the Division’s Assistant Director, Student Affairs at the beginning of each academic term. In addition, the student
must provide a copy of the accommodation letter to each Course Director and discuss with them their individual needs. *There will be no accommodations provided without this clearance from DSP;* hence, students are highly encouraged to initiate the process early in the academic term prior to the start of academic term exams.
SECTION 3 ANATOMY LABORATORY POLICIES AND PROCEDURES

Working with human bodies is a privilege. The cadavers entrusted to your care are to be honored, as they have been donated for the advancement of your knowledge and skills. This type of anatomical study is essential for your education, and is a mandatory curriculum requirement. The work you will do is, therefore, not viewed in any way as "desecration" of a human body.

I. LABORATORY POLICIES

Because we recognize that many individuals are sensitive to this type of endeavor and may be hesitant to begin human dissection, the following sensitivities will be observed at all times during the lab.

A. Students will respect the body with which they are working and take great care in disposal of the parts and maintenance of that cadaver. It is essential that you do not remove any body parts from the lab at any time. At the completion of the course the disposal of human remains are handled according to instructions in a will or by cremation.

B. Cameras and/or videos are not allowed in the laboratory.

C. Guests, including sponsors and/or children, are not allowed into the lab at any time without special permission from the director of the Division's Anatomical Sciences.

II. LABORATORY PROCEDURES

A. Preparation: Do not begin dissection before reviewing your dissection manual. Each dissection procedure has been carefully designed to provide you with a comprehensive review of the relevant structures. You must not deviate from these dissection guidelines.

B. Open Laboratory: Lab time is very limited; you must work efficiently. It may be necessary for you to spend additional time in the laboratory. Open laboratory time will be scheduled throughout the academic term.

C. Uniform: Each student will provide his/her own scrubs and gloves. The scrubs should be washed whenever soiled or at least once every other week. Always wear your scrubs in the laboratory. Do not wear them outside of the lab.

D. Tools: You are responsible for providing your own dissection tools. These tools must include serrated forceps, a scalpel blade holder, and scissors. After each class, you must clean your dissection tools and remove them from the cadaver table. Any tools left on the dissection tables will be confiscated.

E. Waste disposal: All tissues, fluids, supplies, and gloves must be disposed of in the appropriate containers. Any fluid or cadaver part dropped on the floor should be removed immediately and the floor cleaned. This is necessary to avoid accidents on slippery surfaces.

F. Cadavers: All tissue pieces (e.g. skin flaps) should remain with the cadavers.

G. Black Fluid Collection Barrels: Fluids from the cadavers should be collected in the pails beneath the tables. Once the pail is half full the fluid inside should be disposed of in the large black fluid collection barrels.

H. Gray Collection Bins: Gloves, paper towels, and other products, which come into contact with the cadaver tissues, should be disposed of in the lined gray collection bins labeled "Contaminated Materials" and "Biohazard".
I. **Sharps Containers:** Used scalpel blades should be placed in the "sharps" containers.

J. **Cadaver Preservation:** Each cadaver must last for a minimum of two academic terms. You are in charge of protecting and maintaining the condition of your cadaver. If there appears to be a problem with your cadaver (e.g. mold), please contact a faculty member as soon as possible. Excessive drying of the specimens must also be prevented. Be sure to frequently spray your cadaver with the provided wetting solution. Additionally, be sure to preserve your skin flaps and replace them over the exposed tissues before leaving the laboratory. Lastly, all specimens must be covered and zipped closed within the body bags prior to leaving the laboratory. If your bag develops a tear or the zipper breaks, inform a faculty member as soon as possible.

K. **Bone Boxes:** Each table (group of four students) will be given one numbered bone box containing approximately one half of a human skeleton and a plastic skull. These specimens are extremely valuable. You will be required to inventory your bones and sign a "check-out" form when you receive your bone box at the beginning of the academic term. It will be your responsibility to reimburse the Division for the cost of replacing any lost or damaged bones.
SECTION 4 ACADEMIC INTEGRITY POLICIES

I. GENERAL DEFINITION

The university as an instrument of learning is predicated on the existence of an environment of integrity. As members of the academic community, faculty, students and administrative officials share the responsibility for maintaining this environment. The students share a responsibility for maintaining standards of academic performance and classroom behavior conducive to the learning process. We presume that every student in the Division has sufficient maturity, intelligence and concern for the rights of others that he/she will maintain the standards of conduct of the academic community. These standards are clearly outlined in the next section and in the SCampus publication. Dishonesty, in any form, is intolerable, and can lead to disciplinary action including dismissal from the program.

Academic Integrity: A Guide for Graduate Students is available on the Student Judicial Affairs Web site (http://www.usc.edu/student-affairs/SJACS). This publication was developed in cooperation with The Graduate School and is intended to provide new students with both a rationale and specific guidelines for academic integrity in graduate study.

Details regarding the procedures to be followed in cases of alleged academic dishonesty are described in the following sections, as well as in the USC Faculty Handbook, SCampus and online www.usc.edu/dept/publications/scampus/.

The Division of Biokinesiology and Physical Therapy supports students in their efforts to maintain academic honesty. The Academic Affairs Committee (AAC) adjudicates all concerns related to academic honesty and student academic and clinical performance.

The Division expects that our students will adhere to proctoring policies and guidelines for independent and group student work as follows:

- All coursework submitted must be your own and produced exclusively for the course in which the student is enrolled. The use of sources (ideas, quotations, paraphrases) must be properly acknowledged and documented. Violations for plagiarism will be taken seriously and may result in an "F" for the course and/or dismissal from the program.
- Group projects are commonly used throughout the program. The Course Director will clarify the expectations and effort expected of individual group members as well as the group as a whole. For individual assignments, Course Directors will clarify the level of collaborative work that is or is not acceptable. It is the student’s responsibility to ensure that they are compliant with course expectations. If it is not clear to you, then discuss your questions with the Course Director.
- During written examinations, no backpacks, book bags, or purses are allowed in the testing room. Students should put these items in their lockers prior to coming to the exam. In special testing situations such as during sequestered testing, the proctor can establish a secure place away from the testing area where these items may be stored.
- The Course Director will identify specific testing materials allowed in the examination room. Unless otherwise instructed, no other materials other than those specifically identified may be used during written or practical exams.
- Students are not allowed to ask questions of the proctor during the examination since this may lead to an unfair advantage to students seeking additional clarification. This is particularly important when the class is split between 2 locations.
- Students are not allowed to leave the testing room once the exam has begun even for bathroom breaks. If the exam is lengthy (greater than 2 hrs), faculty will provide the exam in two parts. Completion and handing in of the first part would allow the student to take a bathroom break if necessary. The only exceptions will be for students with documented health conditions requiring frequent breaks. Such special accommodations must be documented through the Office of Disability Services (see Section 2.V).
II. ACADEMIC HONESTY

A. Definitions of Dishonest Behaviors

1. Suspicious behaviors
   a. Inter-student request for help during an exam.
   b. Prolonged, repeated gazing at another person's exam.
   c. Apparent codes being transmitted.
   d. Apparent or reported data fabrication in a class or research project.
   e. Repeated need to leave the room during an examination.

2. Blatant acts
   a. Possession of any unauthorized papers (e.g., cheat sheets, class notes or other unauthorized materials) during an exam.
   b. Continuing to write after exam has ended.
   c. Observed exchange of answers.
   d. Identifiable plagiarism, defined as “the submission of material authored by another person but represented as the student's own work, whether that material is paraphrased or copied in verbatim or near-verbatim form; the submission of material subjected to editorial revision by another person that results in substantive changes in content or major alteration of writing style; improper acknowledgment of sources in essays or papers (Refer to SCampus).

3. Documented data fabrication (from Academic Integrity: A Guide for Graduate Students)
   The invention or alteration of data, information, or citation in any academic exercise constitutes a violation of academic integrity. This includes fabrication of material submitted for lab assignments, whether wholly or partially falsified.
   a. Failure to adhere to requirements of patient/subject safety in research.
   b. Taking exam from room and later claiming that the instructor lost it.
   c. Obtaining a copy of an exam or answer key prior to administration.

4. Unauthorized Collaboration (from Academic Integrity: A Guide for Graduate Students)
   Collaborative projects and assignments may be required in preparation for professional practice. Graduate students should be aware that, unless explicitly directed or granted permission to work collaboratively on assignments, the expectation will be that a student has accomplished academic work entirely independent of assistance from fellow students or other persons.

5. Authorized Collaboration
   When collaboration is explicitly directed, it is expected that all students will contribute equally to the final project or assignment. A student claiming to contribute equally to a project that does not participate in the final result will be guilty of plagiarism.

B. Responsibility

1. Honor Code
   It is the ethical responsibility of each student to report any suspected or blatant act of dishonesty on the part of others. Students who observe an act of academic or other dishonesty among one/or more of their peers should be willing to put the circumstances in writing. Such documents will be given to the AAC. The reporting student's identity kept in strictest confidence.

2. Student/Proctor Mechanisms for reporting dishonest acts:
   The student or proctor should report each observed behavior to the faculty member at the time of the incident. This report will be held confidential unless a hearing results as a consequence of repeated reports.

3. Faculty action - Suspicious behaviors
a. First Offense - The Course Director (professor or research sponsor) shall confront the accused student privately and report the incident to the DPT Program Director.

b. Multiple Offenses - If the DPT Program Director receives more than one report (of separate incidents) about a given student, the information will be transmitted to the Academic Affairs Committee (AAC). The student so accused will be informed of this action.

c. Faculty Recommendations - The AAC with the faculty will consider the situation or evidence and will make recommendations for action (if any) to the DPT Program Director.

4. Faculty action - Blatant acts
   a. Faculty should confront the accused and confiscate any evidence.
   b. Evidence will be submitted to the AAC for recommendation to the DPT Program Director.
   c. The incident will be reported to the faculty and punitive action may be recommended based on extent/severity of offense.

C. Violation of Academic Integrity

Since its founding, the USC Division of Biokinesiology and Physical Therapy has maintained a commitment to the highest standards of ethical conduct and academic excellence. Any student found guilty of plagiarism, fabrication, cheating on exams or purchasing papers or other assignments will immediately receive a failing grade in the course and may be dismissed as a candidate for a degree from the Division (Refer to SCampus and to the online Academic Integrity and Review Process: https://policy.usc.edu/scampus-part-b/ http://web-app.usc.edu/scampus/1400-academic-integrity-review-process/)

5. Possible actions to be recommended by the Division - Suspicious behaviors
   a. Dismissal of charges.
   b. Written reprimand.
   c. Zero grade on test or collection of appropriate data.
   d. Forfeiture of rights to financial aid.
   e. Reduction of grade in course or removal from research project.
   f. Interim suspension of one-year with option to return.
   g. Dismissal from the program.
   h. Withdrawal from the program without penalty (including sealing of records).
   i. Other action the faculty deems appropriate.

6. Possible actions to be recommended by Division - Blatant acts
   a. F grade in course, or for collection of inappropriate data.
   b. Dropping of the course grade by one full letter.
   c. Placing information regarding the incident into the student’s permanent file.
   d. Recommendation of interim suspension.
   e. Dismissal from the program.

III. PROTECTION OF COPYRIGHT LAWS

Papers from recent journals may be photocopied for personal use only. Portions of current texts also may be copied for personal use only. At no time may a complete text be copied, or any paper be mass copied for multiple persons. These are violations of copyright laws. Virtually all journals and textbooks are copyright protected.
SECTION 5 STUDENT PERFORMANCE EVALUATION POLICY

I. GENERAL POLICIES

A. Explanation of Terms

Student
A student is a person pursuing a degree offered by the Division of Biokinesiology & Physical Therapy, and who is registered with the University.

The student also may be a “Limited Status” student not pursuing a degree.

Course Director
Individual faculty member with primary responsibility for a given course.

Faculty Mentor
A faculty member who is responsible for supporting students as they progress through the DPT program. Students are assigned a faculty member to be their Faculty Mentor.

Academic Affairs Committee (AAC)
An ad hoc committee comprised of 3 or more faculty members, one of which will be from outside our division, who receive student cases from the DPT Program Director or Division Chair when students are in academic or clinical jeopardy. The Committee will review the student’s entire academic and clinical records and make a recommendation to the DPT Program Director/Division Chair as to whether or not the student can move successfully through the DPT Program, and if so, how that will be accomplished.

DPT Program Director (“Program Director”)
A faculty member who is responsible for all DPT program operations.
- Students are encouraged to refer to the Program Director when they feel they are experiencing difficulty.
- Students should come to the Program Director if they have a legitimate concern about the program or have a situation that cannot be worked out between course directors, course coordinators and/or TA’s.
- The DPT Program Director reviews student performance on a semester basis and intervenes when necessary, including referring students to the AAC for performance review and using recommendations made by the AAC regarding a student’s status in the program.

Assistant Director, Student Affairs
A staff person who is the liaison between the students and the Division.
- Administrative functions, e.g. course registration, class schedules, degree progress, graduation coordination
- Student Support and Advocacy

Director of Clinical Education (DCE)
A faculty member who is responsible for the Clinical Education program.

Division Chair
The faculty person who serves as Chair of the Division of Biokinesiology and Physical Therapy.

Academic term
The period of time allotted for course presentation and student evaluation (semester or summer session). The last day of final examinations is considered the end of an academic term.
Assessment of Academic Performance
Academic program courses use the numerical grade system with letter grades submitted for course credit. It is the responsibility of the Course Director to assign a grade based upon the conditions delineated in the course syllabus. Course Directors use the numerical grade system below to determine the final letter grade for their course.

Grade Point System
Grade points are used to compute grade point averages (GPA's). Grade points for a course are derived by multiplying the numerical equivalent of final course grade by the quantity of academic units for that course. Cumulative grade point average (CUM GPA) is the average of all grades from all courses taken at the University of Southern California, Division of Biokinesiology & Physical Therapy.

B. Eligibility for a Degree

A student is eligible for a degree in Physical Therapy if he/she has:

1. Successfully attained the quantitative and qualitative level expected in the curriculum in which enrolled. There must be:
   a. No un-reconciled grades of C-, D, F, IN, or NC.
   b. No conditions existing at the termination of the final academic term which would be grounds for academic probation, clinical probation, or dismissal.
   c. Successfully completed all requirements, coursework, and clinical internships.
   d. Acquired a minimum cumulative grade point average of 2.75.
   e. Fulfilled the financial obligations as well as all other obligations and requirements for graduation.

All of the stipulations described above must be completed before the entry-level student is considered a graduate eligible to take the State Licensure Examination.

C. Maintenance of University Academic Standards

All faculty members have the responsibility for implementation of the spirit and letter of the academic standards set forth by the Commission of Academic Standards and as published in the USC Faculty Handbook, SCampus and the Division of Biokinesiology & Physical Therapy Student Handbook.

II. ACADEMIC PERFORMANCE EVALUATION

A. General Policies

1. Responsible Parties: Course Directors, Individual faculty and clinical instructors, Student Mentors, Semester Chairs, Director of Clinical Education (DCE), DPT Program Director, the Academic Affairs Committee (AAC), and the Division Chair.

2. Evaluation of student academic performance is determined through examinations and assignments as determined by the Course Director and can include one or more of the following procedures:
   a. Review mid-term reports from faculty regarding student performance.
   b. Review reports from Clinical Faculty and Clinical Instructor regarding student clinical performance.
   c. Review student's total academic record.
   d. Review the assignment of academic/clinical warning or probation to students.
   e. Recommend actions regarding academic status to the Divisional faculty.
f. Receive and recommend actions on petitions for readmission received from disqualified students.
g. Recommend development of academic programs for readmitted students

B. Academic Course Grades

Grades are issued by members of the faculty to indicate to students their level of achievement, and to provide information to the faculty regarding academic status.

The grading system used by the faculty in the Division is as follows:

1. Students can receive the following grades in Academic Courses:
   a. Letter Grade System:
      
      | Grade | Letter |
      |-------|--------|
      | 93-100| A      |
      | 92-90 | A-     |
      | 87-89 | B+     |
      | 83-86 | B      |
      | 80-82 | B-     |
      | 77-79 | C+     |
      | 73-76 | C      |
      | 70-72 | C-     |
      | 67-69 | D+     |
      | 63-66 | D      |
      | 60-62 | D-     |
      | < 60  | F      |

   b. W (Withdrawal):

      Students have until the end of the 12th week of the semester to drop courses. Courses that are dropped by the end of the 3rd week do not appear on the transcript. Courses dropped after the third week result in a mark of W. A Course Director may not withdraw a student from a course. No course may be dropped after the 12th week; although in exceptional cases students may petition to withdraw from a course after the twelfth week. Such petitions are rarely approved. Also note that students may not withdraw from a course in which they have committed or have been accused of committing an academic integrity violation.

   c. UW (Unofficial Withdrawal):

      Assigned to students who have stopped attending prior to the drop deadline (end of week twelve) without officially withdrawing, the students' names will appear as official enrollees on the final grade sheet for the course. The UW will be computed in the GPA as zero grade points (as in the case of an F) and indicates a failure on the part of the student to assume the administrative responsibility of officially dropping a course.

   d. IN (Incomplete Work):

      IN (Incomplete) is assigned when work is not completed because of documented illness or other "emergency" occurring after the twelfth week of the academic semester. The Registrar's recommended definition of "emergency" is as follows: "A situation or event which could not be foreseen and which is beyond the student's control and which prevents the student from taking the final examination or completing other work during the final examination period." Incomplete (IN) grades are only given for situations that
prevent a student from completing course requirements prior to the day that grades are due at the end of the academic term. Students should contact the DPT Program Director or the Assistant Director, Student Affairs by phone or email to notify the Division of health conditions that are interfering with academic performance. The Division will respect the student’s confidentiality of any health-related information that is shared.

The grade IN exists so there is a remedy for illness or emergency that occurs after the drop deadline (typically week 12). A student may not request an IN before the end of the twelfth week; the rationale is that the student still has the option to drop the course until the end of the twelfth week. Arrangements for the grade of IN and its completion must be initiated by the student and agreed to by the Course Director prior to the final examination. Supporting documentation (e.g. a letter from a physician) will be required. If an Incomplete is assigned as the student’s grade, the Course Director is required to fill out an Assignment of an Incomplete (IN) and Requirements for Completion form which specifies to the student and to the Division the work remaining to be done, the procedures for its completion, the grade in the course to date, and the weight to be assigned to work remaining to be done when the final grade is computed. Both the Course Director and student must sign the form with a copy of the form and its supporting documentation filed in the Division with the Assistant Director, Student Affairs.

*Time Limit for Completion of Incomplete Work:*

Marks of IN must be completed within one calendar year from the date of the assignment of the IN. If not completed within the designated time, marks of IN automatically become marks of IX (expired incomplete) with the exception of non letter-graded courses and are calculated in the Grade Point Average (GPA) as a grade of F (zero grade points). Every attempt will be made by the faculty to ensure that incomplete grades are completed prior to the start of the next academic term; however, in extenuating circumstances the student may be allowed to proceed in the curriculum with permission of the DPT Program Director.

C. **Consequences of Grades of C or Below**

1. **The Grade of Fair (C) in Clinical/Procedure Courses:**

   When a final course grade of C is earned by a student in a clinical/procedure course, the faculty has the discretion to assign a student to a clinical faculty member for tutoring in clinical skills or clinical facility for additional supervision during the clinical experience. The decision of which facility can best meet the student's needs will be recommended by the Director of Clinical Education.

2. **The Grade of Less than Fair (C-), Poor (D) or Failure (F):**
   a. A grade of Fair (C-), Poor (D) or Failure (F) is considered a non-passing grade within the DPT program. Non-passing grades require that the course be re-taken for a passing grade and course credit needed for graduation.
   b. If the grade of C-, D, or F is earned in a course that is a prerequisite to subsequent courses, then the student will not be allowed to register for those courses until the deficiency has been reconciled.
   c. If the grade of C-, D, or F is earned in a course that is not a prerequisite to subsequent courses, then the student will be allowed to register for subsequent courses while the grade is being reconciled.
   d. If the grade of C-, D, or F is obtained in a clinical procedure/clinical course, then the student will not be allowed to participate in the clinical experience relating to that clinical course until the deficient grade is reconciled.
3. The Grade of Less than Fair on Practical Examinations:
   a. A student must achieve a score of 73% on each section of the OSCE in order to pass the class, regardless of the final overall grade. If a score of less than 73% is earned, the student is allowed 2 retakes for the midterm and 1 retake for the final per section. Should a retake practical examination be required, if possible, two faculty members will independently grade the student's performance, in order to avoid bias in grading. One of the faculty testers will likely be the Course Director. If a 73% or greater is achieved on the retake, then the student can pass the class. Regardless of the passing score on the retake exam, the student will receive a 73% for that section of the exam.

   b. As the Semester II midterm examinations occur before the 2 week clinical experience (PT-600a), students must have passed the practical examination stations of PT-621 and PT-530a to attend this experience. Those who do not pass 1 or more of the stations must retake the station(s) they did not pass before they can be allowed to go out on clinical rotation.

D. Reconciliation of C-, D, F, NC, or IN Grades

1. General Policies:
   a. All courses attempted, whether required or elective, must be completed with a passing grade of C or higher. A student, therefore, will not meet the requirements for a graduate degree until final course grades of C-, D, F, NC, or IN are reconciled.
   b. The individual Course Director will provide a means by which a student can reconcile a deficient grade. The method of reconciliation is at the discretion of the Course Director, and will consist of either repeating a course or completing make-up work/exam.

2. Reconciliation by Testing out of a Course:

   A student may be required to take examination(s) at the discretion of the Course Director in whose course the deficiency exists. If the student successfully completes the exam, he/she may continue with the program. The student must enroll for the course again in order complete this option.

3. Reconciliation of Grades of C-, D, F or NC:

   Upon successful reconciliation of a C-, D, F, or NC, the student must register for the course and the Course Director will forward the reconciled grade to the Grades Division. The reconciled grade will then be added to the existing grade on the student's permanent academic record indicating that the course requirements were completed satisfactorily.

E. Questioning of a Final Course Grade

   A student who believes that a grade issued to him/her was based on incomplete or inaccurate information should contact the Course Director as soon as the grades for the academic term are received. If this is verified, the Course Director may change the grade. A grade must be challenged by the student within the first three weeks of the subsequent academic term.
F. Procedure for Changing a Final Course Grade

Course Directors may issue a change of grade notice to the Office of the Registrar without the student completing a make-up procedure if:

1. The grade is changed from an IN to an F or NC
2. The initial grade was based on inaccurate information or resulted from a clerical error.

Changes in grades for any other reason must have the approval of the DPT Program Director and must be requested within the academic term following issuance of the final course grade.

III. CLINICAL PERFORMANCE EVALUATION

Clinical Education Courses use the Credit - No Credit System. This system is used in the evaluation of students engaged in PT Clinical experiences, and s.
- CR - Credit, successful completion of the course.
- NC - NO CREDIT

The Director of Clinical Education, with written and verbal feedback from the clinic’s Clinical Instructor (CI) and Center Coordinator of Clinical Education (CCCE), will determine CR/NC status. The Director of Clinical Education will then document the rationale for the grade, indicate the steps necessary for reconciliation of the grade, and the time limit for such reconciliation. The Director of Clinical Education will confer with the faculty regarding the clinical recommendations. NC in a clinical course is considered a failure. The student must re-register for the non-credited course units, and successfully retake the clinical course. Please refer to the flow chart at the back of the handbook.

Courses graded on a Credit-No Credit system are not computed into a student’s GPA.

The Director of Clinical Education will determine the most appropriate method for completing the clinical requirement. Options may include extending the current clinical experience at the same site for a period of time, completing a partial clinical at a new site, or completing a full clinical at a new site. The student must meet all criteria for the clinical experience at the end of the time period granted to complete the requirements. If the criteria are met, the student will receive a Credit for the clinical course.

If the student does not meet the prescribed minimum standards for a clinical experience, the student will not be given credit for that experience. The student will then be required to re-register for and successfully complete an additional clinical experience.

1. If the student fails a 2-week clinical experience, the student must retake that experience.
2. If the student fails a 6-week clinical experience after the first year, the student must either retake that clinical experience the next academic term (fall), continuing their didactic education on an altered academic schedule; or (with DPT Program Director and Academic Affairs Committee agreement) they may retake the clinical experience after the second year didactic and clinical courses, prior to beginning their third year.
3. If the student fails an 8-week clinical experience after the second year, the student must retake the clinical after completion of the spring 16 week clinical experiences in the third year.
4. A student who has been on clinical probation for one academic term will undergo a review by the DCE and Program Director at the end of that academic term. Two possibilities will exist:
   - The student will be considered for dismissal from the educational program if the student does not meet the minimum performance criteria on the remedial clinical experience.
• The student may be required to complete an additional make-up clinical experience. The student must meet minimal performance criteria at this time, or the student may be dismissed.

See Clinical Education Student Manual for all specific policies and procedures related to Clinical Education.

IV. PROFESSIONAL PERFORMANCE EVALUATION

A. Expectations for Professional Performance

Professional performance is vital to the success of each student physical therapist, the USC Physical Therapy program and the Physical Therapy profession. The process of becoming an effective physical therapist involves attaining competency in professional knowledge, skill, and behavior. Thus, we will use the following professional behaviors valued by the physical therapy profession as a standard throughout this curriculum. The professional behaviors and indicators for each behavior are adapted from work originally completed at the University of Wisconsin, Madison.

1. Commitment to learning
   a. Identifies problems
   b. Formulates questions, and asks them in a respectful manner
   c. Identifies need for further learning based on self-assessment, independently seeks resources
   d. Prioritizes information needs, is able to subdivide large questions into components
   e. Applies new information and re-evaluates performance and further learning needs
   f. Accepts that there may be more than one answer to a problem
   g. Reads articles critically and understands the limits of application to clinical practice

2. Interpersonal skills
   a. Respects cultural and personal differences, is non-judgmental about patients' lifestyles
   b. Maintains confidentiality and patient privacy in all clinical interactions
   c. Demonstrates behaviors that contribute to a positive working environment
   d. Establishes trust and motivates others to achieve
   e. Able to listen compassionately, but can effectively guide subjective examinations
   f. Works effectively with challenging patients
   g. Responds effectively to unexpected experiences

3. Communication skills
   f. Uses correct grammar, spelling, and expression; writes legibly
   g. Recognizes impact of non-verbal communication and modifies accordingly
   h. Actively listens and maintains eye contact
   i. Restates, reflects, and clarifies message when appropriate
   j. Adapts communication to different learning styles and listener backgrounds
   k. Presents verbal and written messages with logical organization and sequencing
   l. Maintains open and constructive communication
4. Effective use of time and resources
   a. Uses unscheduled time effectively
   b. Completes documentation and assignments in a timely fashion
   c. Sets up own schedule, and coordinates schedule with others
   d. Plans ahead, but demonstrates flexibility to unforeseen circumstances
   e. Sets priorities and reorganizes when needed
   f. Considers patient’s goals in the context of the patient, clinic, and third party resources
   g. Performs multiple tasks simultaneously and delegates when appropriate

5. Use of Constructive Feedback
   a. Demonstrates active listening skills
   b. Actively seek feedback from mentors, colleagues and clients
   c. Demonstrates a positive attitude toward feedback, without defensiveness
   d. Assesses and critiques own performance accurately
   e. Develops a plan of action in response to feedback
   f. Modifies feedback given to clients according to their learning styles
   g. Considers multiple approaches when responding to feedback

6. Problem Solving
   a. Identifies problems, and articulates them clearly
   b. Describes known solutions to problems
   c. Examines multiple solutions to problems, justifies solutions selected

7. Professionalism
   a. Abides by the APTA code of ethics and state licensure regulations; seeks council regarding reporting violations of ethics or laws governing PT practice
   b. Abides by facility policies and procedures
   c. Demonstrates dependability and punctuality, completes assignments without prompting
   d. Observes health and safety regulations, identifies risk management situations

8. Responsibility
   a. Accepts responsibility for actions and outcomes
   b. Encourages patient accountability
   c. Treats patients within scope of expertise, demonstrates awareness for precautions and contraindications of patient care

9. Critical Thinking
   a. Prioritizes problems, identifies contributors to problems in the form of a relationship statement
   b. Formulates solution to problems based on alternative hypotheses
   c. Considers consequences of possible solutions
   d. Accepts responsibility and implements solutions
   e. Evaluates outcomes, reassesses hypotheses and subsequent solutions as needed

10. Stress Management
    a. Recognizes own stressors or problems, establishes outlets to cope with stressors
    b. Recognizes distress or problems in others
    c. Seeks assistance as needed for self or others
    d. Balances personal and professional life, always maintains professional demeanor in the clinic and classroom
    e. Prioritizes multiple commitments
    f. Responds calmly to urgent situations
    g. Tolerates inconsistencies in the health care environment
B. **Appropriate Professional Performance**

1. Appropriate professional performance is expected in the classroom, the laboratory, and the clinic. Classroom professional behaviors include: demonstrating respect by refraining from side conversations, being well-prepared for lecture and labs; on time arrival, being seated and ready to proceed when class is scheduled to commence; remaining until class is dismissed; observing classroom rules.

2. Clinical professional performance includes: appropriate verbal and non-verbal communication with patients, families, and other health care workers; demonstrating appropriate use of feedback, assuming responsibility for actions and outcomes, assuming responsibility for learning, punctuality, and professional appearance.

3. Specific facets of a student's professional performance will be assessed during practical examinations, laboratory experiences, clinical experiences and assignments, etc.

**Note:** Self-assessment is important in your development as a student and professional physical therapist. Reflecting on past experiences is an extremely valuable method of assessing your performance and planning more useful strategies for the future. Each student is expected to seek feedback from fellow students and faculty as well.
Section 6 CONSEQUENCES OF UNACCEPTABLE PERFORMANCE

The consequences of unacceptable academic or clinical performance are the student being placed on Academic or Clinical Warning or Academic or Clinical Probation. These academic states can be changed in the middle of a semester if there are problems related to practical exams. The criteria for Academic Warning and Academic Probation are detailed below. Continued unacceptable performance may result in interim suspension or dismissal from the program.

I. ACADEMIC PERFORMANCE

Faculty members are here to assist students in the successful mastery of course material. If midterm grades indicate marginal (C or below) academic achievement, the student is strongly encouraged to seek help immediately from the Course Director and/or Faculty Mentor. The earlier a problem is identified and a course of action implemented/completed (such as office hour attendance, faculty mentoring, and/or tutoring), the greater the opportunity for avoiding placement on academic warning or probation.

A. Academic Warning

1. Definition: A formal notice indicating unacceptable academic achievement.

2. The purpose of this warning is to encourage the student to improve his/her standing and to avoid the serious consequences of academic probation and/or dismissal. Academic warning will be given for a period of a single academic term but can be instituted in the middle of a semester when practical examination problems warrant it. In this instance, the period of academic warning will encompass the rest of the semester and continue through the following full academic term.

3. A student will be placed on Academic Warning if:
   a. The cumulative GPA falls below a 2.75.
   b. A grade of C is earned in any course.
   c. A record of poor performance on two practical exams in one course, or one practical exam in each of two courses in the same semester. Poor performance is defined as failure on a practical exam that requires a remediation and a re-take.
   d. In the judgment of the DPT Program Director academic warning is warranted by other academic factors.

4. A student placed on academic warning will receive a letter from the DPT Program Director, which will state the requirements necessary to be removed from academic warning status. The student’s Faculty Mentor will receive a copy of the letter. The letter will also state that the student will be placed on academic probation if the conditions warranting the warning are not resolved by the end of the next academic term.

5. Academic warning status terminates if, at the completion of the subsequent academic term, all requirements (as stated in A-4 above) have been met. If a student enters the third year on Academic Warning, their status will not be upgraded until they complete Academic Coursework to justify an upgraded status.

B. Academic Probation

1. Definition: A formal notice indicating continued unacceptable academic achievement. During this period of time (typically one academic term) the faculty will conduct a critical examination and evaluation of the student's academic performance to ascertain academic fitness for continuation in the program.
2. A student will be placed on academic probation if:
   a. Academic Warning status is not resolved in one academic term.
   b. The cumulative GPA is 2.50 or less after any academic term.
   c. A grade of C– or below is earned in any course. Note: that a C– is a failing grade in the Graduate School as well as the Division.
   d. A record of poor performance on practical exams in two courses across two academic terms. Academic Probation can be instituted in the middle of a semester when practical examination problems warrant it. In this instance, the period of academic warning will encompass the rest of the semester and continue through the following full academic term. Poor performance is defined as failure on a practical exam that requires a remediation and a re-take.
   e. In the judgment of the DPT Program Director academic probation is warranted by other academic factors.

3. A student placed on academic probation status will receive a letter from the Program Director that will provide the requirements necessary to be removed from academic probation status. The student’s Faculty Mentor will receive a copy of the letter. The letter will also state the consequences if the conditions warranting the probation are not resolved by the end of the next academic term, including possible dismissal.

4. If a student does not resolve the academic performance issues that resulted in him/her being placed on Academic Probation after the next academic term, the student's case will be reviewed by the Program Director. Possible actions include:
   - Dismissal from the program.
   - The Program Director may determine that the student has experienced extenuating circumstances leading to the inability of the student to achieve a GPA greater than 2.75. In that case, an alternative program will be strongly recommended to the student. If the student is still unable to raise the cumulative GPA over 2.75 after the next term, the student may be dismissed.

6. Academic probationary status terminates if, at the completion of the subsequent academic term, all requirements (as stated in B-3 above) have been met. The student will be placed on Academic Warning at that time, and will abide by the conditions therein. If a student enters the third year on Academic Warning, their status will not be upgraded until they complete Academic Coursework to justify an upgraded status.
II. CLINICAL PERFORMANCE

A. Clinical Warning

1. Definition: A formal notice indicating deficiencies in the areas of clinical and/or classroom professional performance or poor performance in the clinical setting.

2. The purposes of this warning are to:
   a. identify the issue(s),
   b. inform the student that lack of resolution of the issue(s) is/are unacceptable,
   c. inform the student of the consequences should the issue(s) persist, and
   d. provide the requirements necessary to be removed from clinical warning status.

3. Duration: Clinical warning status will be given for a period of a single academic term.

4. Clinical warning status will be given if:
   a. In the classroom or the clinic, the student demonstrates deficiencies in areas of professional performance that do not resolve after verbal warning.
   b. Clinical performance fails to meet minimal acceptable standards.
   c. The student passes the clinical experience, but exhibits sub-par performance.

5. Deficiencies may be determined by the student's Course Director, instructors/teaching assistants, clinical instructor, faculty mentor, Director of Clinical Education, or Program Director.

6. Consequences of Clinical Warning
   a. A student placed on clinical warning status will receive a letter to that effect and his/her faculty mentor will also be notified. A remediation program (e.g. mentoring/tutorial assistance) will be required.
   b. A student on clinical warning status will be assigned to their next clinical rotation at the discretion of the Director of Clinical Education.

7. Termination: Clinical warning status terminates if, at the completion of the clinical warning academic term, all requirements necessary to be removed from clinical warning status are met.

8. Failure to resolve a Clinical Warning status will result in the student being placed on clinical probation, being referred to the Program Director, and be considered for dismissal.

B. Clinical Probation

1. Definition: A formal notice indicating continued deficiencies in the areas of clinical and/or classroom professional performance or poor performance in the clinical setting.
   a. “continued deficiencies” means the student fails to meet minimal acceptable standards during two clinical rotations.

2. During the Clinical Probation period (typically one clinical rotation) the faculty will conduct a critical examination and evaluation of the student's performance to ascertain his/her fitness for continuation in the program.
3. A student will be placed on clinical probation if:
   a. The program or the clinical site faculty identify that the student's performance in the professional performance or clinical realm continues to fail to meet the prescribed minimal acceptable standards.
   b. The student’s poor performance continues over two clinical rotations or academic terms.
   c. The student fails to rectify a clinical warning status.

4. Consequences of Clinical Probation Status
   a. A student placed on clinical probation status will receive a letter to that effect and his/her faculty mentor will also be notified. A remediation program (e.g. mentoring/tutorial assistance) will be required.
   b. A student on clinical probation status will be assigned to their next clinical rotation at the discretion of the Director of Clinical Education.

5. Termination: Clinical probation status terminates if, at the completion of the clinical probation academic term, all requirements necessary to be removed from clinical probation status are met.

6. Failure to resolve a Clinical probation status will result in the student being referred to the DPT Program Director, and be considered for dismissal.

7. Clinical probationary status will not be recorded on the student's permanent academic record. However, should clinical probation lead to dismissal, the basis for dismissal will be noted on the permanent academic record.

III. PROFESSIONAL PERFORMANCE

To facilitate development of competency in professional performance, performance inconsistent with what is outlined in this document will elicit the following response:

- The student will be provided verbal feedback regarding perceived inappropriate professional performance and relevant expectations of the faculty.
- The student will be provided verbal and written feedback regarding perceived inappropriate professional performance and relevant expectations of the faculty.

If a change to more appropriate professional performance does not occur, a meeting will be scheduled with the DPT Program Director (and/or other appropriate faculty as necessary) and the student. The student's faculty mentor may attend this meeting if the student requests his/her attendance. At this meeting, the problem(s) will be identified and a recommended course of action will be determined. The student will be placed on clinical probation, and will be subject to appropriate consequences as determined by the DPT Program Director and/ or appropriate faculty. Recommendations may include evaluation at the University Learning Center, evaluation and counseling at the Student Health Psychological Clinic, or referral to other outside resources as necessary. Every effort will be made to resolve the problem through these means. Failure to demonstrate a change may result in dismissal from the program.
Problems may be identified in any (one or more) of the following areas for which the student may be required to seek professional counseling:

- Inappropriate activities in Anatomy Lab
- Harassment of others (including sexual)
- Failure to adhere to ethical code for research subjects or in patient care
- Dishonesty
- Inappropriate conduct and behaviors with peers/patients/staff/faculty
- Disruptive behavior in classroom or clinic as defined by the USC Student Judicial Affairs and Community Standards.
- Use (unless prescribed by a licensed physician) or distribution of contraband substances (narcotic or mood altering drugs).

IV. CONSEQUENCES OF UNRESOLVED WARNING OR PROBATION

If, despite all the aforementioned efforts, the problem remains unresolved, disciplinary action could include Interim Suspension or Dismissal.

A. Interim Suspension

Interim Suspension is an exclusion from classes or other specified activities of the Division for a specified period of time.

A student will be considered for interim suspension:

1. If, in the judgment of the faculty, a professional performance problem requires medical evaluation.
2. If there is evidence that the continued presence of the student poses a substantial threat to himself or to others or to the stability and continuance of normal Divisional functions.

B. Dismissal

Termination of the student's right to enroll or participate in the classes, seminars or programs of the Division.

If a student meets any of the following conditions, they will be referred to the Director of the DPT Program for consideration for dismissal:

1. The student does not achieve a minimum of 2.5 GPA at the end of the first academic term.
2. Students entering the program on conditional admission who do not achieve a 2.75 GPA at the end of the first academic term.
3. Failure to meet the minimum 2.75 cumulative GPA
4. At the completion of any academic term, a second academic probation is warranted.
5. The student fails one course.
6. While on academic warning or probation, a failing grade is not reconciled within the period specified by the Course Director.
7. A record of poor performance on 2 practical exams in one course or 3 practical exams within the 3 year program. Poor performance is defined as failure on a practical exam that requires a remediation and a re-take.
8. Clinical performance that fails to meet minimal acceptable standards at the end of two clinical experiences.
9. A deficiency in any area, including the affective domain, that is determined to be beyond remediation.
10. After counseling and reasonable intervention, the student is deemed by the faculty to be unsuited for the practice of Physical Therapy.
11. The student is prosecuted for or found guilty of unlawful acts.
V. APPEALS PROCESS

A. Questioning of Status

A student who believes that placement in any deficient academic or clinical status was based on incomplete or inaccurate information should appeal to the DPT Program Director. If the student’s claim is verified, the DPT Program Director will initiate action to correct the situation and will advise the faculty of any action.

Failure to resolve the problem(s) resulting in disruption of academic/clinical performance could lead to student to disciplinary actions.

B. Appeal of Disciplinary Action

1. A student may appeal a disciplinary action if one of the following conditions exist (Refer to SCampus: https://policy.usc.edu/scampus-part-b/):
   a. That new evidence has become available that is sufficient to alter the decision and which the appellant was not aware of at the time of the original hearing.
   b. That the sanction imposed is excessive or inappropriate.
   c. That the faculty member or review panel (AAC) failed to follow university rules or regulations while reviewing the cited behavior.

2. Process of Appeal
   a. A student may appeal any disciplinary action with a written letter of intent to appeal to the Chair of the Division.
      i. The written letter of intent to appeal must be made within 21 days of the decision.
   b. The Chair will create an ad hoc Academic Affairs Committee (AAC) for deliberation.
      i. See page 23 for a description of the AAC.
      ii. The student will have the opportunity to present their case to the AAC.
      iii. The AAC will determine the outcome of the appeal.
      iv. The student will be informed of the AAC decision.
   c. Further Appeals
      i. Should the student wish to appeal the AAC decision, the next level of appeal is to the Division Chair, who will consider the merits of the appeal and render a decision.
      ii. Should the student wish to appeal the Division Chair decision, the next level of appeal to the Associate Dean of Academic Affairs of the School of Dentistry.
      iii. Each appeal must be made in writing within 21 days of the decision being appealed.
      iv. For further appeal processes, see the SCampus at http://policy.usc.edu/student/scampus/

VI. READMISSION FOLLOWING DISMISSAL

The procedures for establishing programs for readmitted students have been purposefully left flexible in order to better respond to the needs of individual students.

A. Options for Readmission

The DPT Program Director and the Academic Affairs Committee (AAC) will consider readmission applications.
B. *Procedures for Applying for Readmission:*

1. A person applying for readmission must submit a petition in writing to the DPT Program Director for referral to the AAC no later than four months (120 days) prior to the date of proposed or desired readmission. This petition should clearly state the reasons why readmission should be granted.

2. Upon acceptance of a readmission petition, the DPT Program Director & AAC will:
   a. Determine the readmission level.
   b. Request appropriate faculty to develop a precise academic program.
   c. Maintain the readmitted student on the academic status in existence at the end of the last completed academic term.

3. All grades received by the readmitted student remain on the official transcript.
   a. Graduate school policy requires that failing grades be computed in the student’s overall GPA.
   b. Graduate school policy requires that all students successfully completing the program have a minimum 2.75 GPA.
Section 7: Appendix

MENTORING FLOW CHART

Student meets with Mentor

Student schedules meeting near BEGINNING of each semester & PRN
Student brings to meeting: Summary of grades for all completed semesters; Progress report on Service Learning Project; Plans/concerns for clinical experiences; Additional issues for which student desires mentoring
Semester 1 – Student identifies Service Learning Project by end of semester
Semester 4 – Student completes Service Learning Project by end of semester

Academic Issues

≤ C on midterm
Meet with Mentor to reflect on issue
Mentor Suggests:
Meet with Course Director
Study Groups
Office Hours
Tutoring (See Tutoring Guidelines)
Failing Course Grade (C-, D, F)
See Failing Grade Guidelines
GPA < 2.75
See Academic Warning/Probation Guidelines

Clinical Performance Issues

Meet with Mentor to reflect on issue
Student to meet with DCE (Mentor may accompany student if requested by student)
See Clinical Warnings/Probation Guidelines

Emotional, Psychological, Stress Management Issues

Meet with Mentor to reflect on issue
Mentor May Suggest Referral to:
Peer Counseling
Student Health
University Learning Center
OT Outpatient Lifestyle
Redesign for the Graduate Student

Professional Behavior Issue

Meet with mentor to reflect on issue
Student to meet with Faculty (Mentor may accompany student if requested by student)
No change:
Mentor may Suggest Referral to:
Director of DPT Program
Student Health or Counseling
## TUTORING APPLICATION

Name ____________________________________ Date ________________

Place an X in front of each course for which tutoring is requested:

<table>
<thead>
<tr>
<th>Academic term I</th>
<th>Academic term II</th>
</tr>
</thead>
<tbody>
<tr>
<td>PT 509</td>
<td>PT 574</td>
</tr>
<tr>
<td>Cellular &amp; Systems Physiology</td>
<td>Biomechanics/ Movement Analysis 2</td>
</tr>
<tr>
<td>PT 514</td>
<td>PT 530</td>
</tr>
<tr>
<td>Musculoskeletal Anatomy</td>
<td>Therapeutic Exercise</td>
</tr>
<tr>
<td>PT 521</td>
<td>PT 554</td>
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<tr>
<td>Basics of Patient Management</td>
<td>Analytical Anatomy</td>
</tr>
<tr>
<td>PT 606</td>
<td>PT 561</td>
</tr>
<tr>
<td>Clinical Imaging</td>
<td>Evidence for Physical Therapist Practice</td>
</tr>
<tr>
<td>PT 582</td>
<td>PT 566</td>
</tr>
<tr>
<td>Gait/ Movement Analysis 1</td>
<td>Disorders of the Musculoskeletal System</td>
</tr>
<tr>
<td></td>
<td>PT 621</td>
</tr>
<tr>
<td></td>
<td>Clinical Management of Musculoskeletal Dysfunction</td>
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</tbody>
</table>

Course Director Approval

______________________________________   __________________________

______________________________________   __________________________

______________________________________   __________________________

For Office Use Only – Tutor Assignment

Name ____________________________________ Course Number

______________________________________   __________________________

______________________________________   __________________________

______________________________________   __________________________
PHYSICAL HEALTH CONDITIONS SUMMARY FORM

Date: ______________________________________________

Physician Name: ______________________________________________

Student Name: _________________________  ID#: ________________

Attached is a copy of the Physical Health Conditions Summary Form for the University of Southern California, Biokinesiology and Physical Therapy Program. You are currently treating one of our students. Please fill out the attached form to notify us of any physical limitations this student may have in participating in his/her education.

Please keep in mind the Physical Therapy curriculum includes clinical laboratory courses as well as performing in a clinical setting in direct patient care. Physical Therapy is a physically demanding occupation and the physical requirements may include, but are not limited to, squatting, bending, lifting, moving patient limbs, etc.

Your participation in this process insures the student will be able to optimize his or her health while allowing the student to continue his/her education. If you have any questions about this form or need any further information, please contact our Assistant Director, Student Affairs at (323) 442-2670.

Sincerely,

USC Biokinesiology and Physical Therapy Program
1540 East Alcazar
Los Angeles, CA 90033
(323) 442-2900
Physical Health Conditions Summary Form –CONFIDENTIAL – TO BE SIGNED BY PHYSICAL THERAPIST
Recommendations for Return to Class and Clinic Participation

Student’s Name: ______________________________        USC ID #:___________________________
(Last, First, MI)

I authorize the release of the information below to the Biokinesiology & Physical Therapy Program.

As a student in the USC DPT Program, it is my duty to inform the Course Coordinators and Director of Clinical Education about issues that may limit my class or clinic participation. I understand that the recommendations/precautions in this form are the professional opinion of my provider and do not represent physician clearance. I release the University of Southern California, its employees, offices, & agents, from any and all liability, claims, or actions of any kind that may arise by or in connection with my participation.

Student Signature: _____________________________        Date: ____________

To be completed by the health care provider: Please print clearly.

Physical Therapist Name: __________________________

Address: □ USC PT Associates        Phone Number: □ (323) 224-7070
       1640 Marengo Street, Los Angeles, CA 90033

□ Other: ________________________________    □ Other: _______________

1. Diagnosis: ________________________________________________

2. Date of first consultation for this injury/illness: ________________________________

3. When did this injury/illness first arise/occur? ________________________________

4. Is the patient able to attend class (sit for >1 hour), participate in lab/perform patient care (stand, squat, bend, lift), and study?       Yes □       No □

If no, expected return date: ______________________________________________________________________
5. If you answered no on #4, please check below if this patient has any of the following restrictions and list modifications (if applicable). If yes, indicate expected duration.

<table>
<thead>
<tr>
<th>No</th>
<th>Yes</th>
<th>Modifications/Duration</th>
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<tbody>
<tr>
<td></td>
<td></td>
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<tr>
<td>Bending:</td>
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<td>Squatting:</td>
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<td>Pivoting:</td>
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<td>Kneeling:</td>
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<td>Overhead reaching:</td>
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<td>Writing:</td>
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<tr>
<th>No</th>
<th>Yes</th>
<th>Modifications/Duration</th>
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<td>Sitting:</td>
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<td>&lt;15 min</td>
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<td>Lifting:</td>
<td></td>
<td>&lt;5 lbs</td>
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<tr>
<td>Other:</td>
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<td>________________________</td>
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</tbody>
</table>

6. Is there any further information or are there extenuating circumstances you feel may be relevant in this patient’s case?

Yes [ ] No [ ]

If Yes: ______________________________

________________________

Signature of Provider: __________________________                  Date: _____________________

License Number: __________________________
# STUDENT INJURY REPORT

Complete this form whether or not the injured person receives medical care or the injury seems trivial. Submit to DPT Program Director.

## STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Name</th>
<th>Student ID#</th>
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<table>
<thead>
<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>ZIP</th>
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<tr>
<th>Phone Number (______) _________ - ______________</th>
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## LOCATION OF INCIDENT

<table>
<thead>
<tr>
<th>Bldg/Room-Class</th>
<th>Address</th>
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<table>
<thead>
<tr>
<th>Date of accident/illness</th>
<th>Time/Hour:   ____________ AM /PM</th>
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<table>
<thead>
<tr>
<th>Date Reported to Faculty Member</th>
<th>Time/Hour:   ____________ AM/PM</th>
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## STUDENT'S DESCRIPTION OF INCIDENT

Describe what you were doing just before the incident occurred (include activity and any tools, equipment, material used; e.g. “using knife to cut lettuce for salad”) 

______________________________________________________________________________________________

______________________________________________________________________________________________

Describe how accident occurred (e.g. knife slipped and cut finger”)

______________________________________________________________________________________________

______________________________________________________________________________________________

Type of injury and part of body affected (e.g. “laceration to left index finger”)

______________________________________________________________________________________________

______________________________________________________________________________________________

List object, tool or substance that was most clearly connected with the accident/illness (e.g. knife, stairs, and floor)

______________________________________________________________________________________________

______________________________________________________________________________________________

Names and addresses of any witnesses, or other persons associated with the incident.

______________________________________________________________________________________________

______________________________________________________________________________________________

## FACULTY REVIEW OF INCIDENT

How did you become aware of the incident (witnessed the incident, reported by the student, other)?

______________________________________________________________________________________________

______________________________________________________________________________________________

To the best of your knowledge, describe the incident (what happened).

______________________________________________________________________________________________

______________________________________________________________________________________________

Preventive recommendations and corrective actions

______________________________________________________________________________________________

______________________________________________________________________________________________

## TREATMENT INFORMATION

Treatment given at: Site

- [ ] Student Health Center
- [ ] Internal Medicine (HCC II)
- [ ] ER
- [ ] Hospitalization

If treated by Physician for this injury please list name and address

______________________________________________________________________________________________

______________________________________________________________________________________________

Address of off campus physician

______________________________________________________________________________________________

Faculty Member’s name (PRINT) ______________________________ Ext. __________ Date __________

Program Director’s Signature _________________________________________________ Date ______________