ALL AREAS COVERED IN THE STUDENT HANDBOOK ARE SUBJECT TO CHANGE. POLICIES IN PLACE AT THE TIME OF ENTRY INTO THE DOCTOR OF PHYSICAL THERAPY PROGRAM MAY CHANGE THROUGHOUT THE THREE YEARS OF CURRICULUM. MAJOR POLICY REVISIONS ARE GENERALLY MADE AT THE BEGINNING OF THE ACADEMIC YEAR. ON OCCASION PERIODIC UPDATES ARE NECESSARY.

Students are also urged to access the Northwestern University Student Handbook (http://www.northwestern.edu/handbook/) and the Feinberg School of Medicine Student Handbook (http://www.feinberg.northwestern.edu/md-education/docs/feinberg-student-handbook.pdf).

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TABLE OF CONTENTS

Chair’s Message ........................................................................................................................................v
Associate Chair for Professional Education’s Message ......................................................................vi
The University and The Medical Center ...............................................................................................1
Mission Statement .............................................................................................................................1
Profession of Physical Therapy ........................................................................................................1
Accreditation and Filing Complaint with CAPTE ...........................................................................2

ADMINISTRATION, PERSONNEL, & STUDENT REPRESENTATION
Administrative Governance .....................................................................................................................3
Doctor of Physical Therapy Core Faculty ..........................................................................................4
Doctor of Physical Therapy Core Faculty and Staff ...........................................................................5
Associated Faculty ............................................................................................................................6
Student Representation ......................................................................................................................7

CURRICULUM
Academic Calendar 2021-2022 ..............................................................................................................8
Curriculum Sequence – 1st Year ..........................................................................................................9
Curriculum Sequence – 2nd Year ......................................................................................................10
Curriculum Sequence – 3rd Year ......................................................................................................10
Philosophy Statement .....................................................................................................................11
Curriculum Goals ............................................................................................................................11
Medical Terminology Competency ..................................................................................................11
Professional Advancement & Community Engagement ....................................................................12
Professional Association Involvement Requirement ........................................................................12
Synthesis Project Requirement ......................................................................................................12
Curriculum Adaptations ..................................................................................................................13

STANDARDS
Overview of University Behavior Standards and Title IX ..............................................................14
Northwestern University Non-discrimination Statement ...............................................................14
PTHMS Standards ...........................................................................................................................15
  Student Conduct Code ..................................................................................................................16
  Observed Misconduct ...................................................................................................................16
  Violations and Offenses ................................................................................................................17
Academic ............................................................................................................................................17
  Grades and Grade Requirements ...............................................................................................18
  Evaluation of Student Performance and Grading During Clinical Experiences .....................18
    Learning Development Plan .....................................................................................................19
  Termination of Clinical Experience ...........................................................................................19
    Student Performance ...............................................................................................................19
    Facility Performance ...............................................................................................................20
Technical Standards Doctor of Physical Therapy Program ............................................................20
PTHMS SafetyBehaviors ................................................................................................................21
Safety Behaviors Along Continuum .............................................................................................21
Safety Behaviors Errors ..................................................................................................................22
Strategies to Achieve Success Following a Practical Exam................................. 26
Specific Procedures for Practical Examinations ............................................. 27
Satisfactory Academic Performance ............................................................. 28
Probation ........................................................................................................ 28
Student Progress Committee (SPC)................................................................ 29
   Appeal of Course Grade Subcommittee ....................................................... 30
   Academic Integrity and Conduct Violation Subcommittee ................................ 31
Appealing Student Progress Committee Decisions ........................................ 32
Program Dismissal ......................................................................................... 33
Program Withdrawal ...................................................................................... 33
Re-enrollment of Students ............................................................................. 34
Requirements for Graduation ........................................................................ 34

POLICIES AND PROCEDURES
Access to Student Records ........................................................................... 35
Address and Phone Information .................................................................... 35
Advisor System ............................................................................................... 35
Alcohol/Drugs ................................................................................................. 36
Attendance Expectations .................................................................................. 36
Breaks .............................................................................................................. 36
Classroom/Clinical Experience/Laboratory Attire ......................................... 37
Clinical Education .......................................................................................... 39
   Overview ...................................................................................................... 39
   Clinical Education Timeline ........................................................................ 39
   Pre-Assignment Process ............................................................................ 39
   Communication with Facilities and Recommending Sites .......................... 39
   Scheduling ................................................................................................. 40
Assignment of Students to Clinical Facilities ................................................ 40
   Experience Requirements of Graduation ................................................... 41
   Location for Clinical Experiences ............................................................... 41
   Conflicts of Interest .................................................................................... 41
   Placement Process ...................................................................................... 41
   Changes in Placement ................................................................................ 42
Prerequisites .................................................................................................... 42
   Interviews .................................................................................................... 42
   Background Checks ..................................................................................... 42
   Health Requirements-Immunizations and Certifications ............................. 43
General Policies and Procedures during Clinical Experiences ...................... 43
   Attendance ................................................................................................. 44
   Expenses ..................................................................................................... 46
   Access to and Responsibility for Cost of Emergency Services during Clinical Experiences .......................... 46
   Health Conditions ..................................................................................... 46
   Legal Requirement and Confidentiality for Clinical Education Experiences .......................................................................................................................... 46
   Patient Right to Refuse/Decline Care ........................................................ 47
   Process for Clinical Education Sites to Provide Feedback or Complaints .... 47
Clinical Education Award ............................................................................... 48
Communicable Diseases ................................................................................ 48
Computers User Policy NUIT & Feinberg School of Medicine ...................... 48
Information Technology (NUIT) Policies ....................................................... 48
Feinberg Information Security & Access Policies .......................................................... 48
Copyright Protection of Educational Materials ............................................................ 48
Courses in Other Northwestern University Schools ....................................................... 49
CPR Certification ........................................................................................................... 49
Digital Media Policy ....................................................................................................... 49
Electronic Class Handouts and Media............................................................................ 50
E-mail ............................................................................................................................. 51
Emergency Contacts ...................................................................................................... 52
Evaluation of Student Performance ............................................................................. 52
  Assignments .................................................................................................................. 52
  Examination Procedures .............................................................................................. 52
  Practical Examinations ............................................................................................... 53
Feedback to the Curriculum .......................................................................................... 54
Grievance Procedure .................................................................................................... 54
Hazardous Waste .......................................................................................................... 55
HIPAA ............................................................................................................................ 55
Informed Consent for Teaching and Learning Activities, Images, and Materials ....... 55
Leave of Absence ........................................................................................................... 56
OSHA Training .............................................................................................................. 57
Safe and Healthy Learning Environment ...................................................................... 57
Sexual Harassment Policy ............................................................................................. 57
Social Media Policy ...................................................................................................... 58
Transcripts ..................................................................................................................... 58

**STUDENT SERVICES, RESOURCES, AND FACILITIES**

<table>
<thead>
<tr>
<th>Accommodations Through AccessibleNU</th>
<th>59</th>
</tr>
</thead>
<tbody>
<tr>
<td>After-Hours Access</td>
<td>59</td>
</tr>
<tr>
<td>Appointments with Faculty</td>
<td>60</td>
</tr>
<tr>
<td>Audiovisual Equipment</td>
<td>60</td>
</tr>
<tr>
<td>Communications</td>
<td>60</td>
</tr>
<tr>
<td>Computer Resources on 7th Floor</td>
<td>61</td>
</tr>
<tr>
<td>Counseling Services</td>
<td>61</td>
</tr>
<tr>
<td>Equipment Use Outside of Class, Annual Equipment Maintenance, and Calibration</td>
<td>62</td>
</tr>
<tr>
<td>Facilities</td>
<td>62</td>
</tr>
<tr>
<td>Financing Your Education</td>
<td>63</td>
</tr>
<tr>
<td>Identification Cards</td>
<td>63</td>
</tr>
<tr>
<td>Liability/Malpractice Insurance</td>
<td>63</td>
</tr>
<tr>
<td>Lockers</td>
<td>63</td>
</tr>
<tr>
<td>Parking</td>
<td>63</td>
</tr>
<tr>
<td>Peer Tutoring</td>
<td>64</td>
</tr>
<tr>
<td>Study Habit Recommendations</td>
<td>64</td>
</tr>
<tr>
<td>Writing</td>
<td>67</td>
</tr>
<tr>
<td>Photocopying and Printing</td>
<td>68</td>
</tr>
<tr>
<td>Physical Therapy Services</td>
<td>68</td>
</tr>
<tr>
<td>Shuttle Bus</td>
<td>69</td>
</tr>
<tr>
<td>Student Health Service</td>
<td>69</td>
</tr>
<tr>
<td>Requirements for Registration</td>
<td>69</td>
</tr>
<tr>
<td>Insurance</td>
<td>69</td>
</tr>
<tr>
<td>Transcripts and Diplomas</td>
<td>69</td>
</tr>
</tbody>
</table>
STUDENT RECOGNITION

Departmental Awards ........................................................................................................ 70
Leadership Award ............................................................................................................. 70
Community Engagement Award ....................................................................................... 70
Clinical Education Award ............................................................................................... 71
National PT Student Honor Society .................................................................................. 72
Scholarships ...................................................................................................................... 72
Hemzacek .......................................................................................................................... 72
Wood/Voss ........................................................................................................................ 72
Edelsberg ........................................................................................................................... 72

SAFETY AND SECURITY

Safety and Security Overview ......................................................................................... 74
General COVID-19 Health Considerations ...................................................................... 74
Risks and Precautions ...................................................................................................... 74
Medical Emergencies ........................................................................................................ 75
Internal Security of the Building ...................................................................................... 75
Location of 11th Floor Emergency Stations .................................................................... 76
Location of 7th, 8th and 10th Floor Emergency Stations ..................................................... 76
Evacuation ......................................................................................................................... 77
Other Threats to Personal Safety ....................................................................................... 79

EXAM SOFT/EXAMPLIFY POLICIES AND PROCEDURES ........................................... Addendum

Key for Abbreviations:

ACPE – Associate Chair of Professional Education
ACCE – Assistant Chair of Clinical Education
APTA – American Physical Therapy Association
SCCE – Site Coordinators of Clinical Education
CI – Clinical Instructor
CAPTE – Commission on Accreditation in Physical Therapy Education
DCE – Director of Clinical Education
IPTA – Illinois Physical Therapy Association
NU – Northwestern University
NUIT – Northwestern Information Technology
PACE – Professional Advancement & Community Engagement
PTHMS – Physical Therapy and Human Movement Sciences
SPC – Student Progress Committee
CHAIR’S MESSAGE

As the Chair of the Department of Physical Therapy and Human Movement Sciences (PTHMS) at the Feinberg School of Medicine, I would like to welcome you to Northwestern University! The Department of PTHMS houses one of the best physical therapy educational and research programs in the nation. During your time with NU-PTHMS, you will be trained by expert clinicians and researchers to become doctors of physical therapy. When you graduate, your clinical practice will be based on a solid understanding of the scientific evidence that underpins the delivery of physical therapy. Furthermore, you will be introduced to the latest technologies under development for the quantitative assessment of movement disorders and the implementation of novel physical therapy interventions.

The Doctoral of Physical Therapy (DPT) education you will receive at Northwestern University will prepare you well to become superb clinicians as well as future leaders in healthcare delivery, education, clinical research and professional organizations. I strongly encourage you to take full advantage of all that Northwestern has to offer and to use your education here as a stepping-stone for future professional, educational and clinical research endeavors.

The faculty and I are delighted to work with you over the next 32 months and in the forthcoming years as a doctor in physical therapy. We want you to be active and critical participants in your professional education and welcome your comments and feedback regarding the educational process. Last but not least, I want to wish each and every one of you a smooth and successful transition to our professional education program. I am offering the support of my faculty and myself to make your educational experience here at Northwestern a rewarding and stimulating one.

Sincerely,

Julius P.A. Dewald P.T., Ph.D.
Professor and Chair
Physical Therapy & Human Movement Sciences;
Professor
Biomedical Engineering; Physical Med & Rehab.
Northwestern University
ASSOCIATE CHAIR’S MESSAGE

Welcome to the Department of Physical Therapy and Human Movement Sciences at Northwestern University’s Feinberg School of Medicine! The department has been preparing physical therapists for over 90 years and has a strong tradition of best practices in teaching and learning, discovery of new knowledge, and exceptional patient-centered care. The COVID-19 pandemic has added new challenges in your preparation as future health care providers. However, the department remains committed to facilitating your development as a physical therapist professional who is able to care for clients from diverse backgrounds within the contexts of their communities and in the new world of COVID-19. We strive to foster your growth as a generalist practitioner who demonstrates excellence in communication and interpersonal skills; clinical reasoning for effective evidence-based decision-making; and social responsibility.

Our faculty and staff have prepared this handbook so that your academic journey may begin and progress smoothly. Please take the time to carefully read the handbook, including our policies and procedures. The Acknowledgement of Receipt and Understanding of the content of the Student Handbook must be signed electronically and submitted by 4 p.m. on Monday, September 20. Updates to the handbook will be issued annually.

The faculty looks forward to serving as your mentors! Please do not hesitate to contact me if I can assist in your professional development.

Best wishes,

Bill Healey, PT, EdD, Board-Certified Clinical Specialist in Geriatric Physical Therapy
Associate Professor and Associate Chair for Professional Education
THE UNIVERSITY AND THE MEDICAL CENTER

Physical therapy education is based on the Chicago campus of Northwestern University, a private research university located on lakefront campuses in Evanston and Chicago. As a student of the university, you have access to resources and facilities on both campuses. For information on campus life visit Northwestern University’s website at http://www.northwestern.edu/campus-life/index.html

Physical therapy education is a blend of learning in classroom, virtual or online, clinical, and community settings. The Feinberg School of Medicine, of which we are a part, together with Northwestern Memorial Hospital, The Jesse Brown VA Medical Center, Ann & Robert H. Lurie Children's Hospital of Chicago, and the Shirley Ryan AbilityLab form the McGaw Medical Center of Northwestern University. The goals of this consortium are patient care, teaching, and research. This environment is where the chief part of your education takes place. Physical therapy students at Northwestern University also obtain their clinical education, through additional agreements with health care facilities or agencies where physical therapy is provided throughout the country.

Physical therapy faculty members are responsible for the majority of your physical therapy education. In addition, faculty from other departments and health professionals from the community contribute to your learning by teaching in selected courses or units of instruction. Our physical therapy faculty members are actively involved in research, patient care, and service. In addition, numerous physical therapy clinicians contribute their teaching services by sharing their expertise in the classroom and health care facilities, some of which serve as clinical education sites.

MISSION STATEMENT

Training a new generation of leaders and scientists, we aim to…

- **Educate doctors of physical therapy and movement scientists in an academic medical environment that integrates research, education, and clinical care.**

- **Promote optimal health outcomes for our patients and society through the advancement of rehabilitation science and practice.**

- **Be a diverse faculty, staff and student body producing global leaders in the profession of physical therapy and the science of human movement.**

PROFESSION OF PHYSICAL THERAPY

The practice of physical therapy demands a high degree of mutual trust, respect, and cooperation among patients, physical therapists and other individuals involved in care. The development of these characteristics necessitates a responsibility among students to help each other learn by contributing actively in their educational environment. Students should expect the highest standards of professionalism, fairness, honesty and respect among their peers and future colleagues. Maintaining high standards of academic and professional integrity is the responsibility of both students and faculty members.
ACCREDITATION AND FILING A COMPLAINT WITH CAPTE

Northwestern University (NU) is accredited through the Higher Learning Commission of the North Central Association of Colleges and Schools. The Doctor of Physical Therapy Program at Northwestern University is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: accreditation@apta.org; website www.capteonline.org. Information about filing a complaint with CAPTE is available at http://www.capteonline.org/Complaints/.
ADMINISTRATION, PERSONNEL, & STUDENT REPRESENTATION

ADMINISTRATIVE GOVERNANCE

OFFICE OF THE DEAN, FEINBERG SCHOOL OF MEDICINE

Eric G. Neilson, MD, is the Lewis Landsberg Dean of the Feinberg School of Medicine and Northwestern University’s Vice President for Medical Affairs. In these capacities, Dean Neilson bears overall responsibility for leadership of the School of Medicine’s educational, research, and clinical activities. Marianne M. Green, M.D., is the Dr. Raymond H. Curry Professor of Medicine Education, and Vice-Dean, Education. Please see the Feinberg School of Medicine’s website for additional administrative contacts (http://www.feinberg.northwestern.edu/contact/admin.html).

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STUDENT REPRESENTATION

Class representatives act as a liaison between the students and the PTHMS faculty and administration. The Associate Chair for Professional Education asks for nominations for student leadership positions.

Affinity and Special Interest Groups

Alumni Board
One to two students from each class are selected to serve as Alumni Board student representatives for a three-year term. The recipient(s) of the Alumni Scholarship will serve as the class representative(s) on this department committee. The Scholarship Committee chooses the recipient during Fall Trimester of Year 1.

American Physical Therapy Association (APTA)/Illinois Physical Therapy Association (IPTA)
One to two students from each class are selected to serve as APTA/IPTA Class representatives for a three-year term during the Fall Trimester of Year 1. The faculty liaison for APTA coordinates the selection of representatives.

Curriculum Committee
One to two students from each class is selected to serve on the Curriculum Committee for a three-year term during the Fall Trimester of Year 1. The Assistant Chair for Curricular Affairs coordinates the selection process with the other members of the committee.

Diversity, Equity and Inclusion Committee
One student from each class is selected to serve for a two-year term. The recipient of the Diversity Scholarship will serve as the class representative on this department committee. The Scholarship Committee chooses the recipient during Fall Trimester of Year 1.

PTHMS Classroom Technology Work Group
Three students from each class are selected to serve for a two-year term. The Technology Work Group Faculty Advisor coordinates the selection process with other staff and faculty members of the working group. There will also be opportunities for students to participate in focus groups regarding technology use for teaching and learning.

Research Seminar Committee
One to two students from each class are selected to serve on the Research Seminar Committee for a two-year term during the Fall Trimester of Year 1. The Assistant Chair for Research Seminars coordinates the selection process with the other members of the committee.
### CURRICULUM

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Days</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 1 - 2</td>
<td>Wednesday – Thursday</td>
<td>Orientation DPT-1</td>
</tr>
<tr>
<td>September 6</td>
<td>Monday</td>
<td>Labor Day-University Holiday</td>
</tr>
<tr>
<td>September 7</td>
<td>Tuesday</td>
<td>Fall Trimester Classes Begin DPT-1, DPT-2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Experience 3 Begins, DPT-3</td>
</tr>
<tr>
<td>September 8</td>
<td>Wednesday</td>
<td>PTHMS Welcome Reception, 4-6 p.m.</td>
</tr>
<tr>
<td>November 22-26</td>
<td>Monday – Friday</td>
<td>Thanksgiving Break DPT-1, DPT-2</td>
</tr>
<tr>
<td>December 3</td>
<td>Friday</td>
<td>Fall Trimester Classes End DPT 1, DPT-2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Experience 3 Ends, DPT-3</td>
</tr>
<tr>
<td>December 6 – 10</td>
<td>Monday – Friday</td>
<td>Fall Final Exams DPT-1, DPT-2</td>
</tr>
<tr>
<td>December 13 – December 31</td>
<td>Monday - Friday</td>
<td>Break DPT-1, DPT-2</td>
</tr>
<tr>
<td>January 3</td>
<td>Monday</td>
<td>Winter Trimester Classes Begin DPT-1, DPT-2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Experience 4 Begins, DPT-3</td>
</tr>
<tr>
<td>January 17</td>
<td>Monday</td>
<td>Martin Luther King Jr. Day – University Holiday</td>
</tr>
<tr>
<td>January 31 - February 4</td>
<td>Monday – Friday</td>
<td>APTA Combined Sections Meeting-San Antonio, TX</td>
</tr>
<tr>
<td>April 1</td>
<td>Friday</td>
<td>Clinical Experience 4 Ends, DPT-3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Classes End DPT-1, DPT-2</td>
</tr>
<tr>
<td>April 4 - 8</td>
<td>Monday – Friday</td>
<td>Winter Final Exams DPT-1, DPT-2</td>
</tr>
<tr>
<td>April 13</td>
<td>Wednesday</td>
<td>Class Meeting DPT-3</td>
</tr>
<tr>
<td>April 14</td>
<td>Thursday</td>
<td>Graduation DPT-3 (Class of 2022!!)</td>
</tr>
<tr>
<td>April 11 - 22</td>
<td>Monday – Friday</td>
<td>Administrative Period &amp; Break DPT 1, DPT-2</td>
</tr>
<tr>
<td>April 25</td>
<td>Monday</td>
<td>Spring Trimester Classes Begin DPT-1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Experience 2 Begins, DPT-2</td>
</tr>
<tr>
<td>May 30</td>
<td>Monday</td>
<td>Memorial Day- University Holiday</td>
</tr>
<tr>
<td>June 3</td>
<td>Friday</td>
<td>Clinical Experience 2 Ends, DPT-2</td>
</tr>
<tr>
<td>June 6 – 10</td>
<td>Monday – Friday</td>
<td>Break DPT-2</td>
</tr>
<tr>
<td>June 13</td>
<td>Monday</td>
<td>Spring/Summer Trimester Classes Begin DPT-2</td>
</tr>
<tr>
<td>June 17</td>
<td>Friday</td>
<td>Spring Trimester Classes End DPT-1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Clinical Practice Ceremony DPT-1, DPT-2</td>
</tr>
<tr>
<td>June 20 - June 24</td>
<td>Monday – Friday</td>
<td>Spring Final Exams DPT-1</td>
</tr>
<tr>
<td>June 27 - July 8</td>
<td>Monday – Friday</td>
<td>Administrative Period, DPT-1 (as needed)</td>
</tr>
<tr>
<td>July 4</td>
<td>Monday</td>
<td>Independence Day Observed</td>
</tr>
<tr>
<td>July 11</td>
<td>Monday</td>
<td>Clinical Experience I Begins, DPT-1</td>
</tr>
<tr>
<td>August 5</td>
<td>Friday</td>
<td>Spring/Summer Trimester Classes End DPT-2</td>
</tr>
<tr>
<td>August 8 – 12</td>
<td>Monday – Friday</td>
<td>Spring/Summer Final Exams DPT-2</td>
</tr>
<tr>
<td>August 19</td>
<td>Friday</td>
<td>Clinical Experience I Ends, DPT-1</td>
</tr>
<tr>
<td>August 22 – September 2</td>
<td>Monday-Friday</td>
<td>Administrative Period, DPT-2 (as needed)</td>
</tr>
</tbody>
</table>
## DPT Curriculum Sequence

### FIRST YEAR

#### Year I: Fall Trimester

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Terminology</td>
<td>501-0</td>
<td>– –</td>
<td>0.5</td>
</tr>
<tr>
<td>Clinical Practice Seminar I</td>
<td>505-1</td>
<td>48</td>
<td>2</td>
</tr>
<tr>
<td>Gross Anatomy I</td>
<td>510-1</td>
<td>84</td>
<td>5.5</td>
</tr>
<tr>
<td>Kinesiology I</td>
<td>511-1</td>
<td>60</td>
<td>4</td>
</tr>
<tr>
<td>Physiology I</td>
<td>514-1</td>
<td>60</td>
<td>4</td>
</tr>
<tr>
<td>Psychosocial Aspects of Human Behavior</td>
<td>521-1</td>
<td>36</td>
<td>2.5</td>
</tr>
<tr>
<td>Introduction to Clinical Decision Making</td>
<td>523-0</td>
<td>48</td>
<td>3</td>
</tr>
<tr>
<td>Examination and Evaluation I</td>
<td>530-1</td>
<td>48</td>
<td>3</td>
</tr>
<tr>
<td>Synthesis Project I</td>
<td>570-1</td>
<td>12</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>396</strong></td>
<td><strong>25.5</strong></td>
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</table>

#### Year I: Winter Trimester

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Practice Seminar II</td>
<td>505-2</td>
<td>48</td>
<td>1</td>
</tr>
<tr>
<td>Gross Anatomy II</td>
<td>510-2</td>
<td>72</td>
<td>5</td>
</tr>
<tr>
<td>Kinesiology II</td>
<td>511-2</td>
<td>36</td>
<td>2.5</td>
</tr>
<tr>
<td>Physiology II</td>
<td>514-2</td>
<td>60</td>
<td>4</td>
</tr>
<tr>
<td>Professional Role Development I</td>
<td>520-1</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td>Examination and Evaluation II</td>
<td>530-2</td>
<td>48</td>
<td>3</td>
</tr>
<tr>
<td>Foundations of Physical Therapy I</td>
<td>540-1</td>
<td>48</td>
<td>3</td>
</tr>
<tr>
<td>Synthesis Project II</td>
<td>570-2</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>360</strong></td>
<td><strong>21.5</strong></td>
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#### Year I: Spring Trimester

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Practice Seminar III</td>
<td>505-3</td>
<td>32</td>
<td>1</td>
</tr>
<tr>
<td>Neuroscience I</td>
<td>513-1</td>
<td>40</td>
<td>2.5</td>
</tr>
<tr>
<td>Professional Role Development II</td>
<td>520-2</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td>Clinical Management of Patients with Cardiovascular and Pulmonary Dysfunction I</td>
<td>531-1</td>
<td>32</td>
<td>2</td>
</tr>
<tr>
<td>Clinical Management of Patients with Neurological Dysfunction I</td>
<td>537-1</td>
<td>40</td>
<td>2.5</td>
</tr>
<tr>
<td>Foundations of Physical Therapy II</td>
<td>540-2</td>
<td>72</td>
<td>5</td>
</tr>
<tr>
<td>Clinical Experience I (6 weeks)</td>
<td>560-1</td>
<td>240</td>
<td>8</td>
</tr>
<tr>
<td>Synthesis Project III</td>
<td>570-3</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>248 + 240</strong></td>
<td><strong>15 + 8</strong></td>
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</table>
**SECOND YEAR**

**Year II: Fall Trimester**

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Practice Seminar IV</td>
<td>505-4</td>
<td>48</td>
<td>1</td>
</tr>
<tr>
<td>Neuroscience II</td>
<td>513-2</td>
<td>36</td>
<td>2.5</td>
</tr>
<tr>
<td>Psychosocial Aspects of Human Behavior II</td>
<td>521-2</td>
<td>32</td>
<td>2</td>
</tr>
<tr>
<td>Clinical Management of Patients with Cardiovascular and Pulmonary Dysfunction II</td>
<td>531-2</td>
<td>36</td>
<td>2.5</td>
</tr>
<tr>
<td>Clinical Management of Patients with Musculoskeletal Dysfunction I</td>
<td>536-1</td>
<td>60</td>
<td>4</td>
</tr>
<tr>
<td>Clinical Management of Patients with Neurological Dysfunction II</td>
<td>537-2</td>
<td>40</td>
<td>2.5</td>
</tr>
<tr>
<td>Issues Across the Lifespan I</td>
<td>538-1</td>
<td>42</td>
<td>3</td>
</tr>
<tr>
<td>Synthesis Project IV</td>
<td>570-4</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>278</strong></td>
<td><strong>19</strong></td>
</tr>
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</table>

**Year II: Winter Trimester**

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Practice Seminar V</td>
<td>505-5</td>
<td>48</td>
<td>1</td>
</tr>
<tr>
<td>Professional Role Development III</td>
<td>520-3</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td>Electrophysical Agents</td>
<td>533-0</td>
<td>48</td>
<td>3</td>
</tr>
<tr>
<td>Clinical Management of Patients with Musculoskeletal Dysfunction II</td>
<td>536-2</td>
<td>60</td>
<td>4</td>
</tr>
<tr>
<td>Clinical Management of Patients with Neurological Dysfunction III</td>
<td>537-3</td>
<td>72</td>
<td>5</td>
</tr>
<tr>
<td>Issues Across the Lifespan II</td>
<td>538-2</td>
<td>16</td>
<td>1</td>
</tr>
<tr>
<td>Synthesis Project V</td>
<td>570-5</td>
<td>24</td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>292</strong></td>
<td><strong>16.5</strong></td>
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</table>

**Year II: Spring Trimester**

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Experience II (6 weeks-between Winter &amp; Spring trimesters)</td>
<td>560-2</td>
<td>240</td>
<td>8</td>
</tr>
<tr>
<td>Clinical Practice Seminar VI</td>
<td>505-6</td>
<td>4</td>
<td>0.5</td>
</tr>
<tr>
<td>Professional Role Development IV</td>
<td>520-4</td>
<td>18</td>
<td>1</td>
</tr>
<tr>
<td>Clinical Management of Patients with Musculoskeletal Dysfunction III</td>
<td>536-3</td>
<td>64</td>
<td>4</td>
</tr>
<tr>
<td>Clinical Management of Patients with Amputations</td>
<td>541-0</td>
<td>24</td>
<td>1.5</td>
</tr>
<tr>
<td>Clinical Management of Patients with Lymphatic or Integumentary Dysfunction</td>
<td>546-0</td>
<td>40</td>
<td>2.5</td>
</tr>
<tr>
<td>Clinical Management of the Complex Patient</td>
<td>548-0</td>
<td>32</td>
<td>2</td>
</tr>
<tr>
<td>Synthesis Project VI</td>
<td>570-6</td>
<td>12</td>
<td>2</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
<td><strong>194+ 240</strong></td>
<td><strong>13.5 + 8</strong></td>
</tr>
</tbody>
</table>

**DPT Curriculum Sequence**

**THIRD YEAR**

**Year 3: Fall and Winter Trimesters**

<table>
<thead>
<tr>
<th>Course</th>
<th>Course #</th>
<th>Clock Hours</th>
<th>Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Experience III (13 weeks)</td>
<td>560-3</td>
<td>520</td>
<td>11.5</td>
</tr>
<tr>
<td>Clinical Experience IV (13 weeks)</td>
<td>560-4</td>
<td>520</td>
<td>11.5</td>
</tr>
</tbody>
</table>
PHILOSOPHY STATEMENT

The Doctor of Physical Therapy curriculum of the Department of Physical Therapy and Human Movement Sciences, Northwestern University, Feinberg School of Medicine, prepares physical therapists who are able to apply the art and science of physical therapy to solve complex patient/client needs. Physical therapists must understand the interaction of physiologic, biomechanical, and behavioral factors that contribute to normal and abnormal movement, and the impact of sociocultural issues on patients/clients and families. Students are challenged to make evaluation and intervention decisions that balance patient/client factors with best evidence.

Learning is viewed as a dynamic and interactive process. Academic and clinical faculty cooperatively plan and implement creative and progressive learning experiences to prepare students to assume various roles within physical therapy. Learning activities focus on developing students’ abilities to think critically and develop creative solutions to both new and familiar problems. All students conduct inquiry into a narrowly defined topic of relevance to the profession of physical therapy. Faculty and students are expected to strive for excellence in all endeavors, internalize and demonstrate professional values and ethical behavior, and meet explicit technical and behavioral standards. Emphasis is placed on developing and demonstrating the skills to be effective lifelong learners who are able to create and respond to changes in healthcare.

CURRICULUM GOALS

The curriculum provides learning experiences so that students will:

1. Demonstrate legal and ethical practice and commitment to the profession by accepting responsibility to patients/clients, employers, and society.
2. Function competently within the healthcare system as primary contact practitioners for people with potential or existing movement dysfunction.
3. Incorporate sociocultural issues of patients/clients and their families in decision-making.
4. Effectively function in the roles of researcher, educator, consultant, and administrator.
5. Effectively supervise support personnel.
6. Demonstrate having self-assessment skills to foster continued professional growth throughout their professional life spans.

The curriculum provides learning experiences so that graduates will:

1. Be competent practitioners who can function safely and effectively while adhering to legal, ethical, and professional practice standards in a variety of physical therapy settings for patients/clients across the lifespan with potential or existing movement dysfunction.
2. The graduate will demonstrate lifelong commitment to learning and professional development.

MEDICAL TERMINOLOGY COMPETENCY

A first trimester requirement of the DPT program is demonstrating competence in medical terminology through an exam. Preparation for the exam is through independent study. Each matriculating student is expected to pass an online competency examination in medical terminology by September 1. Students are able to repeat the exam. If a student is unsuccessful in passing after the third attempt, they will be asked to meet with the Course Director to determine why the student is having a problem and to develop a plan for future success. Students must achieve a score of at least 80% to be considered competent in medical terminology and be assigned a “Pass”.

11
PROFESSIONAL ADVANCEMENT & COMMUNITY ENGAGEMENT REQUIREMENT

The purpose of the Professional Advancement & Community Engagement (PACE) process is to allow DPT students an opportunity to enhance and facilitate their professional growth through service in the community during their academic career. By the completion of the PACE process students will:

1. Identify areas of strength and weaknesses to enhance their professional growth and develop an action plan that includes a volunteer/service activity.
2. Participate in a volunteer/service activity within a domestic community organization, reflect on learning that occurred, and share their experiences with faculty and peers.
3. Demonstrate having met these objectives. This is an expectation for successful completion of Professional Role Development IV (PT 520-4).

As with all academic activities, DPT students are expected to fully participate in this development process. Any student who does not meet this expectation will be referred to the Student Progress Committee (SPC). See PACE document distributed at DPTHMS orientation and posted on CANVAS for specific details and timeline.

PROFESSIONAL ASSOCIATION INVOLVEMENT REQUIREMENT

Another means to participate in professional development and lifelong learning is through involvement in the American Physical Therapy Association (APTA). Students are required to participate in at least two activities sponsored by the APTA by the first week of Professional Role Development IV (520-4) during the second year of their professional education. One activity must be a “live” face-to-face meeting of the APTA at a section, district, state chapter, or national level. By the end of PRD III, the student will submit a list of the activities they have completed or plan to complete to fulfill this requirement. The student will reflect on their participation for successful completion of Professional Role Development IV. This reflection will be due at the beginning of the second week of classes in the Spring Trimester of Year 2. Along with the reflection, the student will need to submit electronic copies of the course or meeting advertisements that identify the sponsor of the course or meeting, the speaker and the format for delivery. If you have any questions to determine if an activity meets the requirement, please contact Babette Sanders at b-sanders2@northwestern.edu or Emily Becker at emily.becker@northwestern.edu.

SYNTHESIS RESEARCH PROJECT REQUIREMENT

The Synthesis Project is an educational component required for graduation. The purpose of the Synthesis Project is to facilitate a student’s learning by conducting an inquiry into a narrowly defined topic of relevance to the profession of physical therapy. Specifically, through supervised group work, students will learn how to construct an operationally feasible research question for inquiry, develop a plan of action, make observations about that proposition, and interpret and conclude from those observations. The conclusions serve as a vehicle to integrate new with existing information in the narrow field and also with information acquired over the course of the program at Northwestern University. Students also develop the ability to communicate verbally and in writing about professional matters. The formal aspect of the Synthesis Project concludes with a poster presentation of the findings to peers and members of the clinical community.
POTENTIAL NEED FOR CURRICULUM ADAPTATIONS DUE TO COVID-19

Despite the uncertainties surrounding the Covid-19 pandemic, the DPT program will make every effort to deliver the course content according to this syllabus; however, the program may need to make adjustments to the delivery of the curriculum in order to maintain the health and safety of our community. These adjustments may include, but are not limited to the following changes:

- Class scheduling and/or cancellation of class and laboratory sessions.
- Methods of curriculum delivery (live in-person, live remote/virtual, asynchronous, recorded, etc.).
- Types of assessments, as well as the number of assessments
- Structure and platform of assessment (in-person, remote delivery with and without proctoring)
- Change in the grading basis (the program reserves the right to change to “pass/fail” basis) if deemed necessary by the Curriculum Committee.

If the DPT Program determines that any substantive change is needed, the students will be notified in writing as soon as possible.
STANDARDS

OVERVIEW OF UNIVERSITY BEHAVIOR STANDARDS AND TITLE IX

Both Northwestern University, and the Feinberg School of Medicine (FSM), of which the Department of Physical Therapy and Human Movement Sciences (PTHMS) is a part, set standards of behavior and maintain independent procedures for their fair and equitable enforcement. DPT students are subject to both. Although many of the standards are similar, the responsibility of physical therapy students to the care of patients necessitates the inclusion of additional provisions in the PTHMS Standards.

Actions by a physical therapy student or students generally fall under the purview of PTHMS and/or FSM. The University centrally may more appropriately address any incident involving multiple students from different schools. The Chair of PTHMS, Associate Chair of Professional Education, and the Vice Dean of Education for the Feinberg School of Medicine will decide whether the responsibility for the investigation of an incident of alleged misbehavior belongs to PTHMS, The Feinberg School of Medicine, or to the University.

Alleged violations of the University’s Policy on Sexual Misconduct and/or its Policy on Discrimination and Harassment are resolved through the sexual misconduct complaint resolution process and discrimination and harassment complaint resolution guidelines of Northwestern University. Consideration of a matter by other areas of the university or law enforcement authority, does not preclude PTHMS from conducting its own hearing or imposing other sanctions or actions determined to be warranted.

Students may always directly contact an office empowered to address specific policies. In cases of possible sexual misconduct, the University’s Title IX Coordinator should be contacted at TitleIXCoordinator@northwestern.edu or (847) 491-3745. Contact the Office of Equal Opportunity and Access for concerns related to discrimination and harassment, (847) 491-7458, eeo@northwestern.edu, or online: https://www.northwestern.edu/equal-opportunity-access/index.html

For complete policy information, please visit the Sexual Misconduct Response and Prevention website at http://www.northwestern.edu/sexual-misconduct to read the most current policy.

All Northwestern students are subject to the laws of the state of Illinois and to the ordinances of the cities of Evanston, Chicago or all the other cities they are in. In addition, every student is required to comply with all rules and regulations enacted and published by the University or under the delegated authority of the University in the Northwestern University Student Handbook, available on the web at http://www.northwestern.edu/handbook/. A student or student organization found to have violated any of the University's rules and regulations shall be subject to appropriate disciplinary action.

Non-discrimination Statement
Northwestern University does not discriminate or permit discrimination by any member of its community against any individual on the basis of race, color, religion, national origin, sex, pregnancy, sexual orientation, gender identity, gender expression, parental status, marital status, age, disability, citizenship status, veteran status, genetic information, reproductive health decision making, or any other classification protected by law in matters of admissions, employment, housing, or services or in the educational programs or activities it operates. Harassment, whether verbal, physical, or visual, that is based on any of these characteristics is a form of discrimination. Further prohibited by law is
discrimination against any employee and/or job applicant who chooses to inquire about, discuss, or disclose their own compensation or the compensation of another employee or applicant.

Northwestern University complies with federal and state laws that prohibit discrimination based on the protected categories listed above, including Title IX of the Education Amendments of 1972. Title IX requires educational institutions, such as Northwestern, to prohibit discrimination based on sex (including sexual harassment) in the University’s educational programs and activities, including in matters of employment and admissions. In addition, Northwestern provides reasonable accommodations to qualified applicants, students, and employees with disabilities and to individuals who are pregnant.

Any alleged violations of this policy or questions with respect to nondiscrimination or reasonable accommodations should be directed to Northwestern’s Office of Equity, 1800 Sherman Avenue, Suite 4-500, Evanston, Illinois 60208, 847-467-6165, equity@northwestern.edu.

Questions specific to sex discrimination (including sexual misconduct and sexual harassment) should be directed to Northwestern’s Title IX Coordinator in the Office of Equity, 1800 Sherman Avenue, Suite 4-500, Evanston, Illinois 60208, 847-467-6165, TitleIXCoordinator@northwestern.edu.

A person may also file a complaint with the Department of Education’s Office for Civil Rights regarding an alleged violation of Title IX by visiting the following site, www2.ed.gov/about/offices/list/ocr/complaintintro.html, or calling 800-421-3481. Inquiries about the application of Title IX to Northwestern may be referred to Northwestern’s Title IX Coordinator, the United States Department of Education’s Assistant Secretary for Civil Rights, or both.

**PTHMS STANDARDS**

Physical therapy is a health science profession requiring academic and clinical preparation for practice, education and research. The academic and clinical faculties share the mutual responsibility of preparing competent physical therapists. This requires coordination of the academic and clinical resources of the curriculum.

Quality learning experiences are provided in the classroom, laboratory and clinical setting through goal-directed, supervised learning activities. To provide a quality education, faculty members keep abreast of current physical therapy clinical, professional, research and educational developments. They present results of the latest scientific research and current professional issues, and discuss varying viewpoints where results are not conclusive and there are divergent perspectives. Faculty members in each course establish specific course requirements and expectations which may vary based on the nature of the course. Students are encouraged to recognize the value of participative learning. Meeting course requirements and expectations contributes to the student's preparation for providing quality physical therapy services. Learning experiences in professional education are frequently designed to simulate employment expectations and consequences. Each course contributes to the preparation of a competent physical therapist. The curriculum is carefully sequenced and presumes successful learning and integration of material previously presented.

Graduates of the PTHMS Doctor of Physical Therapy curriculum must demonstrate sound judgment, a sense of responsibility and morality, personal insight or perception, personal integrity and accountability, responsibility to patients, sensitivity and compassion for individual patient needs, motivation, ability to recognize personal limitations, apply knowledge to become safe and effective clinicians, as well as the ability to function under pressure. The standards of professional behavior
discussed in this section are in harmony with the Conduct Code of the Feinberg School of Medicine and the Code of Ethics of the APTA. The successful graduate must meet academic, technical, and clinical standards.

**STUDENT CONDUCT CODE**

This Student Conduct Code articulates the principles by which a student will abide. By adopting these principles into a students’ personal and professional lives, they will positively influence the community at PTHMS and their future as professionals.

- *My conduct toward colleagues, teachers, patients, and all professionals will be guided by the virtues of honesty, compassion, and personal integrity.*
- *I will treat all people equitably without regard to race, color, religion, national origin, sex, sexual orientation, gender identity, gender expression, socioeconomic status, parental status, marital status, age, disability, citizenship or veteran status.*
- *Through my language, behavior, and appearance, I will present myself in a professional manner.*
- *I pledge to take care of myself physically and psychologically. During the COVID-19 pandemic, I pledge to follow Centers for Disease Control, Illinois Department of Public Health, and NU/FSM guidelines on campus and in the community.*
- *I will promote and protect a patient’s health, well-being, and dignity as my cardinal duties.*
- *I will keep all information that I receive about patients in confidence from anyone outside the medical team.*
- *I will respect the directives of my superiors, but I will question any directives that endanger the health or wellbeing of a patient or are contrary to a patient’s wishes.*
- *I will not give a false impression of my medical knowledge and skill, nor will I allow anyone to believe my role is anything other than that of a physical therapy student.*
- *I will not exploit patients or their families for personal or financial gain.*
- *I will act in a manner that promotes mutual respect and cooperation in the medical school community.*
- *I will abide by the Northwestern, FSM, and PTHMS policies and procedures.*
- *I am committed to the improvement of our curriculum and myself through communication and evaluation.*
- *I will support an atmosphere conducive to learning and assist my colleagues in meeting their professional obligations as well.*
- *In all my academic examinations and assignments, I will neither give nor receive impermissible assistance.*
- *I pledge to maintain this code, to discourage its violation, and to report any infraction.*

**OBSERVED MISCONDUCT**

Any incident of cheating, falsifying records, dishonest behavior, or other breach of academic integrity, either confirmed or suspected, should be reported promptly by the observer to the Course Director(s), Assistant Chairs, or Associate Chair of Professional Education (ACPE). The observer must identify himself/herself to one of these individuals for even a cursory investigation to proceed and/or for any discussion to be held with the alleged offender. At the observer’s request, his/her identity will be kept confidential; in such a case, however, no further action can proceed beyond a private discussion. Only if
the identity of the observer and the nature of any evidence can be made known to the alleged offender can others be brought into the investigation and the matter referred to the Student Progress Committee (SPC) for a hearing and possible disciplinary action.

VIOLATIONS AND OFFENSES

University Offenses

See the link below for information pertaining to University Offenses listed in the Northwestern University Student Handbook.


Feinberg/NUPTHMS Offenses

In addition to violation of the University’s Student Handbook grounds for referral to the Student Progress Committee include, but are not limited to, the following:

- Bullying, harm, abuse, or theft to, of, or from any person or property on University grounds, at University-sponsored events, or on property owned by any hospital, affiliated institution, or individual to which or whom the student may be assigned
- Failure to abide by any safety or hygiene standards recommended by Feinberg, Northwestern, the Illinois Department of Public Health, or the CDC, including standards regarding wearing masks, social distancing, limiting gatherings, hand washing and sanitizing, recommended COVID-19 testing, quarantine and self-isolation, and cleaning shared surfaces, both on-campus and in the community. Failure to comply may lead to a SPC referral or meeting with department leadership.
- Giving, receiving, or utilizing unauthorized aid on examinations or assignments
- Plagiarism, misrepresenting the source of academic work, or falsifying attendance records
- Knowingly and intentionally falsifying or manufacturing scientific, educational, or clinical data and representing them as the result of scholarly research or patient examination
- Entering or using University or hospital facilities without authorization or disrupting teaching, research, administrative, or student functions of the University
- Misusing institutional documents or instruments of identification in an attempt to defraud
- Identifying oneself as someone other than a PTHMS physical therapist student
- Identifying oneself as a PTHMS physical therapist student when not in an assigned PTHMS role
- Misusing the computing and network resources of the University or its affiliated hospitals
- Any alleged violations of the law
- Participating in academic or clinical endeavors of the University or its affiliated institutions while under the influence of alcohol or a controlled substance
- Placing a patient, peer, staff or faculty member in needless jeopardy, e.g., risk of COVID-19 exposure
- Disclosing privileged information about a patient or other HIPAA violations
- Having behavior, language, attire, or hygiene that provokes a lack of respect and confidence on the behalf of patients, faculty members, and colleagues
• Refusing to provide care for a patient

**Academic Standards**

**Grades and Grade Requirements**

Students will be informed in each course of the methods and weighting to be used to evaluate their performance. The following grading scale is used for computing the grade point average:

<table>
<thead>
<tr>
<th>Letter</th>
<th>Score</th>
<th>Grade Point</th>
<th>Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90.00 to 100</td>
<td>4.0</td>
<td>P = Pass with credit (Not factored into computing the GPA)</td>
</tr>
<tr>
<td>B</td>
<td>80.00 to 89.99</td>
<td>3.0</td>
<td>F = Fail with no credit</td>
</tr>
<tr>
<td>C</td>
<td>70.00 to 79.99</td>
<td>2.0</td>
<td>WP = Withdrawn passing</td>
</tr>
<tr>
<td>F</td>
<td>&lt; 70.00</td>
<td>0.0</td>
<td>WF = Withdrawn failing</td>
</tr>
</tbody>
</table>

- Y = Failed to earn credit
- K = Work in progress; work incomplete

- The grade of Incomplete (K) is assigned only when illness or other personal or community emergency precludes completion of a course or when faculty determine that a student(s) requires additional time to demonstrate safe performance on practical skills. The faculty establishes a date for completion of all outstanding requirements. Deficiencies in safe performance must be removed within the first two weeks of the subsequent term or before commencing a full-time clinical experience, whichever comes first.
- Students are notified of grades shortly after the end of each trimester and posted in CAESAR.
- Requests for course grade changes are to be directed to the Course Director within 5 business days after the student has received a grade report. If a change of grade is granted, confirmation will be given to the student and the GPA revised for that trimester. Requests submitted after this time will not be honored and no grade change will be made.
- When a student is required to repeat a course, both the original and the duplicated course entries remain on the student’s permanent record and are used to calculate the cumulative grade point average.

**Evaluation of Student Performance and Grading During Clinical Experiences**

The purpose and objectives for Clinical Experience I, II, III and IV are described in Clinical Education Expectations and Evaluation inclusive of course syllabi, distributed to all students by the Assistant Chair of Clinical Education. Additionally, students are expected to meet and be evaluated based on the Technical Standards of the DPT program outlined below during all clinical education experiences. If a student requires accommodations in order to function safely and meet the stated objectives of the clinical experience, the accommodations will be documented through AccessibleNU and communicated via the DCE to the clinical site prior to the student’s placement.
Students earn a grade of Pass (P) or Fail (F) for each Clinical Experience (I, II, III, and IV). In the event it is necessary to assign a grade of Incomplete (K), the Directors of Clinical Education (DCE), in consultation with the student, will determine how the course objectives are to be met and the deadline for doing so. Students earning a grade of Incomplete (K) in CE I or II may continue in their didactic coursework. Any grade of Incomplete must be removed and replaced with a grade of Pass (P) within one year after the course was offered for the student to remain in good academic standing. Extensions beyond one year will be reviewed by the Student Progress Committee (SPC) if there are extenuating circumstances and handled on a case-by-case basis (e.g., medical leave). Students earning a grade of Fail in any CE must repeat the experience and may not progress except for CE II if there are extenuating circumstances and handled on a case-by-case basis.

If a student receives a grade of Fail (F) for Clinical Experience I, II, III, or IV the student will be referred to the SPC. The committee will notify the student they are on academic probation unless they successfully appeal the grade. If the student does not appeal the grade or the appeal is denied, the SPC will develop a remediation plan in coordination with the student’s assigned DCE or designee. If a student receives a remediation plan he/she must satisfactorily complete the remediation plan, repeat the clinical experience, and receive a grade of Pass (P) to continue forward in the curriculum. Exceptions may be made for completing the last eight weeks of didactic coursework in DPT-Year 2 before repeating Clinical Experience II. Successful completion must occur within one year after the course was offered to remain in good academic standing. Extensions beyond one year will be reviewed by the SPC if there are extenuating circumstances and handled on a case-by-case basis (e.g., medical leave). If the student is unable to complete the remediation plan satisfactorily he/she will be asked to reappear before the SPC who may recommend additional remediation or dismissal from the DPT program.

**Learning Development Plan**

Clinical educators (Site Coordinators of Clinical Education and Clinical Instructors) are considered to be an extension of the academic faculty. Therefore, prior to participation in a clinical education experience, if in the best interest of the student and clinical facility, the Assistant Chair of Clinical Education (or designee) may share information about a student’s academic performance, specific learning needs, and goals for the clinical experience with clinical educators. Permission of the student is obtained and documented prior to communication with clinical educators. If problems with clinical performance arise during a student’s clinical experience, a learning development plan may be created in consultation with the Site Coordinator of Clinical Education, Clinical Instructor(s), student, and DCEs. A learning development plan outlines the performance deficits, establishes objectives for student improvement, and delineates consequences should the objectives not be achieved by an established time frame.

**Termination of Clinical Experience**

During clinical education experiences, if problem situations arise, the facility, university, and student are expected to collaborate about resolving areas of concern. Early identification of behaviors and/or skills that need to be improved is key and a learning development plan may be developed for the student. The DCEs may terminate a student’s experience after appropriate evaluation of the factors involved and in consultation with student, clinical site, ACSA, and/or ACPE as needed. Factors that could cause a clinical experience to be terminated include, but are not limited to:

**Student Performance**

Student’s behavior or performance interferes with the facility’s primary mission of care and treatment of the patient.
• The student fails to make changes in behavior or performance based on feedback provided by clinical instructor and university, or the student fails to abide by conditions of a learning development plan.
• Student practices in an unsafe manner that places the patient or self at risk for injury.
• Student demonstrates unprofessional behavior.
• Student does not practice in a manner that is consistent with established legal and professional standards and ethical guidelines.
• Student demonstrates ineffective communication skills.
• Student demonstrates ineffective clinical reasoning skills.
• Student does not adhere to the policies/procedures and rules/regulations of the clinical facility.

Facility Performance

The student’s learning needs are not being met:
• Staffing changes – clinical instructor’s unexpected illness or injury and no other qualified staff available to supervise student.
• Clinical instructor supervision is threatening or intimidating.
• Student does not receive adequate supervision and feedback on clinical performance.
• Clinical instructor’s performance expectations do not match university’s expectations.
• The student is discriminated against because of race, color, religion, sex, national origin, disability, age, veteran’s status, marital status, sexual orientation, or any other protected classes.

Technical Standards Doctor of Physical Therapy Program

The Doctor of Physical Therapy education program in the Department of Physical Therapy and Human Movement Sciences (PTHMS), Feinberg School of Medicine, Northwestern University, prepares physical therapists to serve as generalist practitioners. In order to function as a physical therapist with generalist skills in a variety of clinical, classroom, and community situations, an individual must have abilities and skills in the following areas: behavior, social skills, and professionalism; communication; cognitive/integrative abilities; and psychomotor skills. Also, inherent in performance expectations is providing services in a timeframe appropriate to the context of care.

Overall, the purpose of technical standards is to delineate the skills deemed essential for continuation in and completion of the educational program. Technical standards are necessary to identify and communicate specific expectations for student performance and assessment in the academic (e.g., practical and oral examinations) and clinical environments (e.g., Clinical Performance Instrument). Reflected in the standards are those behaviors, knowledge, and skills that degree candidates must possess to engage safely and competently in required learning activities and in clinical practice to ensure the well-being of the patient/client, self, and others. Skills fundamental to Physical Therapist practice and to the curriculum at DPTHMS include but are not limited to the following:

Behavior, Social Skills, and Professionalism

1. Practice in a manner that ensures the safety of the patient/client, self, and others.
2. Practice in an ethical, legal, and responsible manner.
3. Identify, acknowledge, and accept responsibility for actions and report errors.
4. Establish professional relationships, based on mutual trust, with individuals from a variety of backgrounds, ages, and needs.
5. Recognize the psychosocial impact of dysfunction and disability, and integrate the needs, including cultural needs, of the patient/client, family, significant other, and caregiver into the plan of care.
7. Consistently demonstrate professional behaviors in interactions with patients/clients, families, caregivers, health care providers, students, faculty, consumers, and payers.
8. Demonstrate the ability to cope and adjust to recurrent stresses, which are inherent in clinical practice.

**Communication**

1. Demonstrate expressive and receptive communication skills (verbal, nonverbal, and written) that meet the needs of the target audience (students, faculty, patients/clients, families, caregivers, practitioners, community members, payers, and policy makers).
2. Appropriately document the delivery of physical therapy services.

**Cognitive/Integrative Abilities**

1. Demonstrate the ability to problem solve, analyze, and synthesize information, and apply principles of logic and scientific inquiry to the practice of physical therapy.
2. Select appropriate physical therapy examination procedures and synthesize findings to formulate an appropriate physical therapy evaluation.
3. Establish a working physical therapy diagnosis, formulate a prognosis, and select appropriate interventions for individuals with an actual or potential movement dysfunction to achieve desired outcomes.
4. Recognize and respond appropriately in emergency situations.

**Psychomotor**

1. Accurately perform physical therapy examination techniques.
2. Demonstrate the strength, mobility, balance, fine motor coordination, endurance, perceptual and sensory capabilities sufficient to provide physical therapy to any adult or pediatric patient/client, including heavy or immobile patients/clients. If a student has a documented disability and is unable to directly provide safe and effective care, they must demonstrate the ability to manage patient/client care with the assistance of approved reasonable accommodations.

**PTHMS Safety Behaviors**

In order to further describe the technical standards for safe practice, PTHMS faculty developed the Safety Behaviors. Safety Behaviors include the student’s clinical decisions and actions when providing PT services. Students are expected to practice in a safe manner concomitant with their education to date that minimizes the risk of harm to the patient, self, and others (adapted from Clinical Performance Instrument).

Safety behaviors are critical along a continuum of physical therapist-patient interactions.
• At the time of the FIRST PATIENT/CLIENT ENCOUNTER, the physical therapist must:
  a. Identify potential risks; and,
  b. Take action to minimize risks (e.g., consult with the referring provider, refer to another practitioner) within the context of delivering optimal care.
• During the CHART REVIEW, the physical therapist must:
  a. Identify potential risks; and,
  b. Take action to minimize risks (e.g., consult with the referring provider, refer to another practitioner) within the context of formulating an effective plan of care.
• During the EXAMINATION, the physical therapist must:
  a. Identify potential risks;
  b. Select examination procedures to minimize risks while achieving the goal of generating reliable and valid information;
  c. Perform tests in a manner that minimizes risk but still remains reliable and valid for making clinical decisions;
  d. Communicate anticipated response to the patient and respond appropriately to the patient’s verbal and non-verbal communication;
  e. Identify and interpret data appropriately to minimize risk;
  f. Modify the examination appropriately based on the patient’s response (verbal, non-verbal) to minimize risk; and,
  g. Take action to minimize risk (e.g., consult with the referring practitioner, refer to another practitioner, activate appropriate emergency systems/procedures).
• During the INTERVENTION, the physical therapist must:
  a. Identify potential risks;
  b. Select interventions to minimize risks, yet maximize intended benefits and outcomes;
  c. Perform interventions in a manner that minimizes risk, yet maximizes intended benefits;
  d. Communicate anticipated response to the patient and respond appropriately to the patient’s verbal and non-verbal communication;
  e. Modify the intervention appropriately based on the patient’s response (verbal, non-verbal) to minimize risk; and,
  f. Take action to minimize risk (e.g., refer to another practitioner, activate appropriate emergency systems/procedures).
• During DOCUMENTATION, the physical therapist must identify current risks and the potential of future risks related to:
  a. Accurate documentation of examination and treatment sessions;
  b. Legible documentation of examination and treatment sessions;
  c. Timely documentation of examination and treatment sessions; and,
  d. Document an assessment that synthesizes and interprets all findings to determine the correct physical therapy diagnosis to minimize risks.
• During DISCHARGE PLANNING, the physical therapist must:
  a. Recommend discharge placement to minimize risks yet maximize intended benefits.

Safety Behavior errors are defined as being either MAJOR or MINOR AND ARE DETERMINED BY THE COURSE FACULTY MEMBERS.
  1. Major safety errors arise from student behaviors that would have a high probability of resulting in potential harm to the patient, self, and others.
  2. Minor safety errors arise from student behaviors that would have a low to moderate probability of resulting in potential harm to the patient, self, and others.
Examples of Safety Behavior errors are described below. This is not an all-inclusive list. Additional behaviors may apply that are not identified on this list.

1. **Physiological Status**
   a. Does not take vital signs (VS) for review of systems (ROS) – major safety error.
   b. Takes VS but does not follow-up appropriately – minor safety error.
   c. Unable to identify examination findings that require immediate medical referral – major safety error.
   d. Does not recognize critical signs & symptoms, e.g., severe SOB, chest pain, pallor, diaphoresis, nausea & vomiting, excessive pain, fear, anxiety.
      a. At rest — major safety error
      b. In response to procedures – major safety error
   e. Does not recognize critical signs & symptoms, e.g.:
      a. Significant ST segment change/depression; significant dysrhythmia on EKG; development of S3 heart sound, abnormal VS responses to activity.
      b. Performance of tracheal suction such that catheter is in trachea greater than recommended time ± 5 sec.
   f. Does not identify critical lab values (e.g., HgB < 7; Hct < 25%; platelets < 20 K; INR > 5) - major safety error.

2. **Infection Control**
   a. Does not observe appropriate clean/sterile precautions (including but not limited to hand hygiene before, during and after a patient encounter) with a patient at high risk for infection - major safety error.
   b. Does not observe appropriate clean/sterile precautions (including but not limited to hand hygiene before, during and after a patient encounter) with a patient at low risk for infection - minor safety error.
   c. Does not maintain sterility of suction catheter tip - major safety error.

3. **Body Mechanics**
   a. Body mechanics used create high risk of injury - major safety error, e.g., transfers patient with back in pike position.
   b. Body mechanics used create low/moderate risk of injury - minor safety error, e.g., bends to put patient’s foot on foot rest with back in pike position.

4. **Tissue Integrity**
   a. Pressure areas inadequately relieved.
      a. Existing pressure areas inadequately protected – major safety error
      b. Potential for excess pressure due to positioning - minor safety error
   b. Shears skin during movement.
      a. Intact skin likely to be irritated - minor safety error
      b. Existing pressure areas likely to be exacerbated – major safety error
   c. Selection or administration of force, duration, intensity, frequency, position, etc. during examination and intervention that is has a high probability of harm – major safety error, e.g., examination - passively moving hemi paretic shoulder past 90 degrees while internally rotated; treatment – inadequate stabilization of lumbar spine that is at risk for injury; performance of tracheal suction with > recommended suction force; suction on the way down; does not stabilize tracheotomy tube.
   d. Selection or administration of force, duration, intensity, frequency, position, etc., during
examination and intervention that increases patient risk - minor safety error, e.g., high repetition exercises in a patient with tendonitis

5. **Falls Prevention**
   a. Must ask about falls and circumstances in interview when risk factors are present.
   b. Selection of method:
      a. Increases risk for a given patient – minor safety error
      b. That is unsafe for a given patient - major safety error
   c. Guarding:
      a. Potential for fall due to inappropriate guarding – minor safety error
      b. High probability of fall due to inappropriate guarding – major safety error
      c. Student may introduce activities that increase risk for patient in order to examine their capacities or train their capabilities, e.g., balance. Student is expected to modify guarding/assistance/force to minimize overall risk.
      d. Gait belt/appropriate level of guarding is required when examination or intervention introduces activities that patient does not typically perform independently; however, may make a clinical decision that no gait belt/guarding required if patient is known to do activities independently and there are no indicators of fall risk.
   d. Assistance:
      a. Potential for fall due to inadequate assistance – minor safety error
      b. High probability of fall due to level of assistance – major safety error
      c. Leaves patient in a precarious position - major safety error
   e. W/C position increases risk of fall - minor safety error
   f. W/C brakes not locked - major safety error
   g. Does not use gait belt when indicated - major safety error
   h. Patient not wearing shoes - major safety error
      a. Shoes may be removed for examination and treatment if environment is safe and fall risk is otherwise minimized.

6. **Equipment Use**
   a. Unsafe use of equipment such as equipment size adjustment, intensity, or duration not adjusted to minimize risk – major safety error.
   b. Uses unsafe equipment – major safety error.
   c. Equipment contact with patient is unsafe, e.g., insufficient electrode gel, protective toweling, etc. – major safety error.
   d. Equipment set-up is unsafe, e.g., therapist can’t monitor patient and equipment simultaneously - major safety error.

7. **Patient-specific precautions**
   a. Does not follow stated precautions when appropriate - major safety error
   b. Doesn’t instruct patient in weight-bearing restrictions – major safety error
   c. Doesn’t monitor the patient’s weight-bearing during activity – major safety error
   d. Disrupts the integrity of patient lines (IV’s, catheters, etc.) – major safety error
   e. Puts the integrity of patient lines (IV’s, catheters, etc.) at risk – minor safety error
   f. Selection or administration of examination or treatment that is contraindicated – major safety error, e.g., examination - testing hip adduction in person acute post hip replacement surgery; treatment – stretching tissue that is immediately post-surgery.
   g. Selection or administration of examination or treatment when appropriate precautions have not been taken – minor safety error.
h. Doesn’t follow medical or surgical protocol (e.g., skin graft, ACL repair, median sternotomy) - major safety error.

i. Does not identify and respond to patient red flags (e.g., not recognizing need for imaging for potential fracture, cord compression, DVT) – major safety error.

**Scoring of Safety Behaviors on Practical Examinations** during Year 1:

1. **Full credit** – if the student recognizes an error in completed performance and self-corrects/performs the behavior again.

2. **50% credit deduction** – if the student recognizes an error in completed performance, verbalizes the error and modification, but lacks sufficient time to perform the behavior correctly again.
Strategies to Achieve Success Following a Practical Exam: Preparing for the Clinic

Student’s practical exam score is < 75%.

Course Director notifies Student Progress Committee & Faculty Advisor.

1. After reflecting on exam feedback & performance, student meets with Course Director and/or exam grader & discuss:
   a) understanding learner perception of the problem;
   b) screening for concomitant life stressors;
   c) review of deficits in core competencies.¹
2. Student identifies remediation strategies, supported by faculty, & submits written development plan tailored to his/her specific needs.²
3. Remediation of exam may be indicated, i.e., major safety error.

Student completes remediation activities with designated remediation faculty member. Remediation activity determined by Course Director & team.

Satisfactory student performance. Original exam score is unchanged.

Unsatisfactory student performance.

Course Director notifies Student Progress Committee 2nd time. If final exam & before a CE, enters CE with learning plan.

Student meets with designated remediation faculty member for continued discussion of deficits & focused practice.
Specific Procedures for Practical Examinations

1. Student’s practical exam score is < 75%. Course Director notifies Student Progress Committee & Faculty Advisor.

2. After reflecting on exam feedback & performance, student meets with Course Director and/or exam grader & discuss:
   a) understanding learner perception of the problem
   b) screening for concomitant life stressors, burnout, mental health issues, substance abuse, learning disability (outside referral?)
   c) review of deficits in each of 5 core competencies:
      i. PT knowledge and skills
      ii. Clinical reasoning
      iii. Organization & efficiency
      iv. Professionalism
      v. Interpersonal communication skills

   Student identifies remediation strategies, in consultation with Course Director and supported by faculty, & submits written development plan tailored to his/her specific needs. Remediation of exam may be indicated, i.e., major safety error. *

3. Student completes remediation activities with designated remediation faculty member.
   Remediation activities determined by Course Director & team. Remediation involves deliberate practice of the core competencies in question, real-time feedback by faculty observing the student, and time for reflection. When planning faculty course hours, Course Director allocates 1-3 hrs./per student of additional time for designated faculty to complete remediation activities, e.g., 1 hr. for counseling only, 3 hrs. for counseling & exam remediation. This is based on previous course history.
   a) Satisfactory student performance on remediation activity. Original exam score is unchanged.
   b) Unsatisfactory student performance on remediation activity.
      i. Course Director notifies Student Progress Committee 2nd time. If final exam & before a CE, enters CE with learning plan.
      ii. Student meets with designated remediation faculty member for continued discussion of deficits & focused practice.

4. *Unsafe student performance on practical exams as defined by the PTHMS Safety Behaviors.
   a) First practical examination in a course. Faculty will determine the percentage (points) to be allocated for assessing safe performance on the practical examination. This scoring system shall be applied consistently to all students within a course. Safety criteria can be weighted more heavily than other performance criteria in the examination but should not be weighted so heavily that a major safety error results in automatic failure of the practical examination.
   b) Subsequent practical examinations in a course. The percentage (points) allotted to safety will be weighted so that a major safety error results in an automatic failure of the practical examination; the examination score will reflect both student performance on all other components of the examination and the safety error.
   c) Course directors will notify the SPC of all safety failures in practical examinations.

SATISFACTORY ACADEMIC PERFORMANCE/GOOD STANDING

- A student must pass all courses getting a “C” or above to maintain good academic standing.
- A student must maintain a minimum cumulative grade point average (GPA) of 3.00 based on a 4.0 scale.
- A student is expected to complete the DPT curriculum within four years of matriculation (within one year of original cohort). Appeals for exceptions to the 4-year rule must be made to the SPC.

PROBATION

Official notification of probation will be made in writing by registered mail, electronically with verification of receipt, or via hand delivery in meeting with Assistant Chair for Student Affairs or designee. Each of the following is considered cause for probation:

- **Failure of course, including CE I-IV:** If a student receives a grade of Fail (F) in a single course during an academic term, the student will be placed on probation and may be permitted to withdraw from matriculation until the next time the course is offered; all didactic courses are offered in sequence and only once each academic year. Such a student is required to indicate in writing the intention to reinstate. In addition, upon recommendation of the faculty, the student may be required to repeat additional portions of the curriculum. If a student is allowed to retake a course after receiving an “F”, the student must earn a grade of C or higher to be permitted to continue to enroll and also meet the cumulative GPA standards described below.

- **Cumulative grade point average (GPA) less than 3.00:** If a student’s PTHMS cumulative GPA falls below 3.00 in an academic term the student will be placed on probation. If the student is not successful in raising the cumulative GPA to at least 3.00 within the successive term, the student will not have removed himself/herself from probation and will meet with the SPC. Following the SPC’s analysis of performance, and review of extenuating circumstances, the SPC may recommend:
  - An extension of the period allotted for removal from probation;
  - An alternative method of removal from probation; or
  - Dismissal

In the event that a student’s cumulative GPA falls below 3.00 for the first time during the Spring Trimester of the 2nd Year, the SPC will make a recommendation to the ACPE regarding the terms for successful removal from probation before the student will be allowed to proceed to Clinical Experience III & IV.

- **Inability to meet PTHMS Technical Standards.** If a student fails to meet one or more of the Technical Standards, any faculty member or course team may refer the student to the SPC. The SPC may consult with AccessibleNU to determine if accommodations are necessary, develop a Learning Development Plan, and recommend probation. The SPC will determine the terms and timeframe for meeting the objectives of the Learning Development Plan during the probationary period.

STUDENT PROGRESS COMMITTEE (Standing)

The Student Progress Committee (SPC) is a faculty committee responsible for ensuring that physical therapist students meet the PTHMS behavioral, academic and technical standards. The SPC may also be
asked to review allegations of misconduct for appropriate action. The SPC is notified when a student earns a grade of fail on a practical, oral exam, written exam, or clinical experience, or if there is a pattern of academic difficulty. In addition, the SPC receives notification from course instructors or advisors of incidents in which that student is given written and oral feedback about unprofessional behavior (e.g., unexcused absences, a pattern of repeated excused absences or requests to change a scheduled exam, failure to complete required health records or curriculum evaluations by the established deadlines, ineffective communication, etc.) The course instructor/advisor may recommend simple notification without follow-up or recommend referral to the SPC.

**Student Progress Committee Membership**

The SPC consists of six faculty members. The Chair and Associate Chair of Professional Education (ACPE) of the Department appoint the SPC members from the faculty with preference for members having three or more years of academic teaching experience; one SPC member must be a DCE. The Assistant Chair of Student Affairs chairs the SPC. *Ad Hoc* Advisory subcommittees are convened to review marginal student performance or assist with remediation as necessary. Student appeals of SPC decisions are managed by the ACPE.

**Student Progress Committee Procedures**

Referrals to the SPC may be made by:

- Course Directors.
- Individual faculty/advisors.
- DCEs.
- Staff.
- Students.

Anonymous referrals will NOT be accepted.

The SPC will monitor the student’s progress and may recommend that the student’s advisor meet with the student or schedule a Committee meeting with the student. The SPC may gather information from faculty and students, determine whether a significant problem exists, and provide written notification to the student and the ACPE about expectations for change.

The Student Progress Committee:

- Interprets referrals,
- Seeks clarification as needed from faculty or students submitting referrals,
- Consults with the student's advisor to determine whether the advisor is aware of the problem and has initiated any intervention with the student, and
- Determines whether concerns are significant.

If the SPC determines that the concerns are insignificant, the SPC informs the faculty or student(s) who submitted the referral.

The SPC will meet with a student* and make recommendations when they have:

- Multiple failure notices within or across courses.
- Do not meet minimum cumulative GPA standard.
- Recurring patterns of academic difficulty and marginal performance in classroom or clinic (Multiple notifications to SPC).
• Recurring patterns of unprofessional behaviors or qualities in classroom (e.g., lack of punctuality, unexcused absences) or clinic.
• Lack of awareness of personal limitations or an inability to self-assess.
• Alleged violations of the Behavioral and Academic Integrity Standards of Northwestern, Feinberg School of Medicine, and/or PTHMS.
• Returned to repeat a course after having received a grade of “F”.
• Returned from a leave of absence (LOA).

*The SPC and student will jointly agree on meeting in person or remotely.

If the SPC determines that the problem requires some action, the Committee develops a plan for remediation and intervention. Written learning development plans will identify performance objectives and strategies to solve problems and delineate expected outcomes. On the date of receipt, the student and members of the SPC must sign the plan to acknowledge its delivery and receipt. Learning plans describe:
• Goals to be achieved,
• Resources available,
• Responsibilities of all parties,
• Deadlines for achievement, and
• Consequences for failing to fulfill the plan.

Potential outcomes may include, but are not limited to:
• Fulfillment of the remediation plan and satisfactory resolution of concerns,
• Student's voluntary withdrawal from the program,
• Recommendation to the ACPE regarding probationary status, the conditions of which are defined by the SPC in writing and may include barring the student from participating in any clinical experience until successful remediation has occurred.
• Recommendation to the ACPE regarding academic or non-academic related dismissal from the program.

The chair of the SPC will notify the student and the ACPE in writing about its recommendations and resolution of the issue(s) referred to SPC.

The SPC will make reports at faculty meetings concerning only those students with whom they have established plans; the faculty and students are expected to hold confidential all activities and reports of the SPC. All documents related to referral to the Committee and reports of the Committee will remain a part of the student’s permanent record while the student is enrolled. SPC actions cannot be removed from a student’s record (remediation, probation, suspension, and dismissal).

Subcommittees of SPC

There are two subcommittees within the SPC:

1. Student Appeal of Course Grade Subcommittee reviews grade appeals where a student alleges arbitrary, capricious, or unfair treatment. Appeal requests must be made in writing to the Assistant Chair of Student Affairs/Chair of the SPC within 5 business days of the posting of the grade and
must indicate the basis for the appeal (i.e. cite specific instance(s) of arbitrary, capricious, or unfair treatment). The Chair of SPC may disallow the appeal if these conditions are not met.

Membership of Subcommittee

The Chair of SPC shall appoint a subcommittee of three members of the SPC to consider a course grade appeal. Subcommittee members may not simultaneously be course team members, parties to the issue at hand, or the student’s advisor.

Meeting Procedures

- The full membership of the committee must be present in order for official business to be conducted. Decisions will be made by majority vote.
- The student has the right to appear before the Appeal of Course Grade Subcommittee to present his or her case and may be accompanied by a support person who is a member of the Northwestern Community such as a trusted mentor, but is not a DPT student, a family member, or an attorney. This person may be present for support at the hearing but cannot directly address the Appeal of Course Grade Subcommittee.
- The Appeal of Course Grade Subcommittee may hear other people of its choosing who may be related to the student’s academic or behavioral situation, and may investigate written reports, examinations, papers, or related documents.
- The Appeal of Course Grade Subcommittee forwards their decision to the Assistant Chair of Student Affairs whether a grade appeal is granted.

Actions

The Assistant Chair of Student Affairs will notify the student of the decision by e-mail, in person, or by telephone, and in writing by registered mail or hand delivery. A student has the right to appeal any decision of the SPC (see below).

2. The Academic Integrity and Conduct Violation Subcommittee reviews incidents of academic dishonesty and other conduct violations by a PTHMS DPT student(s).

Any case of alleged academic dishonesty involving a student in the DPT program should be reported to the Assistant Chair of Student Affairs. The Assistant Chair of Student Affairs will review the case of alleged academic dishonesty to determine whether there are sufficient grounds to warrant a hearing with the Academic Integrity and Conduct Violation Subcommittee.

Membership of Subcommittee

In the event of allegations of academic dishonesty and other unprofessional behaviors in violation of the existing University or Department policies, the chair of the SPC shall appoint a subcommittee of three members of the SPC to consider appropriate action for the student alleged to have committed such misconduct.

Disciplinary Hearing Procedures

- The Assistant Chair for Student Affairs will notify the student in writing of the specific charges made and the nature of the alleged violation. The notification letter is delivered to the student in person, by e-mail, or by registered mail. The time and place of the hearing will be identified in
this letter. The hearing generally occurs within two weeks of this written notification, except in extraordinary circumstances.

- During the hearing, students are given the opportunity to again hear the allegations brought against them and will have the opportunity to fully respond, including providing an explanation and offering evidence in support of their position.
- These hearings are closed, attended only by the Academic Integrity Subcommittee members and the student in question. The Committee and/or the student may request witnesses, and the Committee shall decide what witnesses, if any, may appear. Witnesses are present only during their testimony and any subsequent questioning by the committee. A student may request the presence of a member of the Northwestern University community such as a trusted mentor, who is not a DPT student, family member or attorney, to be present as a support person. This person may be present for support at the hearing but cannot directly address the Student Disciplinary Committee, or otherwise participate in the process. Disciplinary hearings may not be recorded.

**Actions**

The Academic Integrity Subcommittee may recommend a variety of actions to the full SPC who will make the final decision, including but not limited to the following:

- No action;
- A letter of warning;
- Probation;
- Suspension;
- Termination of participation in school committees or activities;
- Dismissal; and/or,
- Any combination of the above, or other actions deemed appropriate.

Following the meeting, the student will be contacted by the SPC chair and made aware of the committee's decision. A written decision letter will be sent to the student via e-mail and/or registered mail within the following week. A record is kept of any discipline imposed, including probation and suspension.

**Appealing SPC Decisions**

**Appeal Procedure**

A student has the right to appeal to the ACPE any decision of the SPC on the following bases: (a) errors of procedure that reasonably could have affected the outcome of the SPC decision, or (b) an SPC decision or sanction that is unreasonable and unsupported by the great weight of information. The protocol for appeal of a PTHMS SPC decision rendered for violation of behavioral or technical standards is the same as that for inadequate academic performance.

A request for appeal must be made to the ACPE within 5 business days of the date of the committee’s decision and must indicate the basis for the appeal. The ACPE may disallow the appeal if these conditions are not met. The ACPE will arrange for an ad hoc Student Appeals Committee to review the student’s written appeal, meet with the student, and recommend action to the ACPE. The Student Appeals Committee will review earlier actions and recommendations of the SPC to ensure that deliberations were conducted fairly and equitably, conclusions reached were justified, and any remediation requirements or other actions imposed were appropriate.
The Student Appeals Committee (ad hoc) of SPC decisions

Each Student Appeals Committee is composed of three faculty members appointed by the ACPE. Members are not simultaneously members of the SPC or the student’s advisor. The full membership of the Student Appeals Committee must be present for official business to be conducted, and recommendations are made by majority vote. The Student Appeals Committee may hear other people of its choosing who may provide information related to the issue at hand, and it may investigate written reports, committee minutes, examination papers, or related documents.

The student has the right to appear before the Student Appeals Committee to present his or her case and may be accompanied by a support person who is a faculty member or other trusted mentor, but not a family member or attorney. This person may be present for support at the hearing but cannot directly address the committee.

Following its review, the Student Appeals Committee will recommend to the APCE to sustain the original decision of the SPC or modify the SPC's decision, which may include a recommendation to either increase or decrease a proposed sanction. The student will be contacted by the ACPE and made aware of the Student Appeals Committee's decision. A written decision letter will be sent to the student via e-mail and/or registered mail within 5 business days.

The student may appeal the Student Appeals Committee's decision to the Vice Dean of Education within five (5) business days of the ruling. The appeal should be made in writing and should set forth the basis for the appeal. The Vice Dean may accept, reject, or modify the recommendation of the Student Appeals Committee. In considering the recommendation of the Student Appeals Committee, the Vice Dean also may wish to examine related documents and meet with the student and/or others. The Vice Dean then will notify the student of the appeal decision directly. The Vice Dean’s decision is final and not subject to any further appeals.

PROGRAM DISMISSAL

Each of the following may be cause for dismissal:

- Conduct violation of nature that immediate dismissal is warranted.
- Inability to remove oneself from academic or disciplinary probation within the time period allotted upon initiation of probationary status.
- Receipt of a grade of Fail (F) in two or more courses in any academic term.

A student typically may be placed on probation only once. If a student who has previously been on probation for either academic performance or behavioral reasons returns to the program and has reason to be placed on probation again, the student will appear before the SPC. Continued failing or marginal performance in multiple or repeated courses in one or more years will lead the committee to consider dismissal. A dismissal decision will be based upon the number and nature of failed or marginally passed courses and clinical experiences, evidence of egregious professional behavior issues or a pattern of professional behavior problems, and the existence of extenuating circumstances.

PROGRAM WITHDRAWAL

Withdrawal is when a student wishes to leave the university after registering for classes in any term. A student wishing to withdraw must meet with the Associate Chair for Professional Education (ACPE) and
complete a form that will be submitted to the Registrar for proper action, including obtaining signatures from the Office of Financial Aid. Withdrawal is not considered official until the signed form has been returned to the ACPE. Only then will the withdrawal become effective on the Student Enterprise System (SES). Refund of any portion of tuition will be based upon the policy established by the University and published annually in the current *Financial Regulations, Chicago Campus*. Withdrawals are listed on the transcript along with the withdrawal date.

**RE-ENROLLMENT OF STUDENTS**

A student who withdrew from the DPT program in good standing may apply for re-enrollment by petitioning to the ACPE. The re-enrollment of a student who had previously withdrawn and the time thereof shall lie within the discretion of the ACPE, or their designee. The student shall notify the ACPE or designee in writing of intent to return from medical leave *at least eight (8) weeks* prior to the first day of classes for Fall, Winter, or Spring Trimester depending on the trimester when the student will resume classes.

**REQUIREMENTS FOR GRADUATION**

In order to complete the DPT degree, the student must:

- Complete all required DPT coursework and the program’s requirements for the degree.
- Have at least a 3.00 cumulative GPA and no Y (Incomplete) grades on their transcript or demonstrated via an alternative method that they had the requisite knowledge and skills to have progressed to the clinic.
- Participate in and complete a Synthesis Project. The Synthesis Project is a required course for graduation. The student may receive a grade of Pass (P), Fail (F), or Work in Progress (K). The grade of K is given each trimester of registration until the work is successfully completed. To receive a P grade, the student must contribute to a departmental scholarly abstract and poster presentation of the project. The Synthesis Project preceptor(s) determines the individual student’s final grade, based on successful completion of and contribution to the overall project. Students who have not successfully contributed to the project by the end of Spring Trimester, Year 2, will be required to meet with the SPC and with the preceptor(s) to develop a Learning Development Plan to successfully complete course.
- Pay tuition in full
- Complete the PACE project
- Meet requirements for Professional Association (APTA) Involvement
- Complete the online curriculum feedback module and attend the mandatory Exit Interview for DPT program financial aid borrowers.
POLICIES AND PROCEDURES

ACCESS TO STUDENT RECORDS

The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records maintained by the Feinberg School of Medicine or the University. A student’s education record includes, but is not limited to, paper or electronic information maintained by the Office of the Registrar, individual Course Directors and faculty that is directly related to a student -- including the clinical education performance evaluations submitted by clinical instructors and faculty members to assist the DCEs in compiling an evaluation and grade. A student may examine his or her education record by requesting access from the Associate Chair for Professional Education. For more information, please see the University’s FERPA policy, available at: http://www.registrar.northwestern.edu/academic_records/FERPA_policy.html

ADDRESS AND PHONE INFORMATION

Students are required to update CAESAR and notify the PTHMS Registrar, Kisha Nelson, at k-nelson@northwestern.edu of changes in permanent or temporary address, e-mail address, telephone numbers and emergency contacts within ten days of said change.

ADVISOR SYSTEM

The purpose of the advisor system is to provide ongoing faculty contact for each student throughout the program. Each student is assigned an academic advisor at the beginning of the program during orientation week.

Functions of the Advisor

- To meet with advisees during orientation week and at least once each term thereafter.
- To keep informed of the advisee's progress in order to be aware of potential difficulties in areas that include, but are not limited to:
  - Health;
  - Employment;
  - Academic performance;
  - Personal concerns; and,
- To foster advisee’s self-assessment and reflection as part of the student’s professional development.
- To review and discuss the Professional Advancement & Community Engagement (PACE) process with the student.
- To review periodic assignments as identified by Course Directors (e.g., Complex Cases course).
- To respond to requests from students, faculty, the SPC, or the Associate Chair for Professional Education should personal or academic problems arise.
- To keep a record of each meeting and to document unusual incidents.
Changing Advisors
Advisees may request a change of advisor, with permission of the Associate Chair for Professional Education, if they have discussed the change with the current advisor, if they have a good reason, and if the proposed new advisor is willing to accept an additional advisee.

ALCOHOL/DRUGS
Various local, state, and federal laws govern the possession and distribution (trafficking) of drugs and alcohol. Penalties for possession and trafficking of drugs and alcohol are contained in the Policy on Drugs and Alcohol, available at: https://www.northwestern.edu/aodresources/

ATTENDANCE EXPECTATIONS
To meet course requirements and expectations, students are expected to attend all scheduled learning activities. In the event of personal illness or emergency that requires absence from class, students are to notify the Course Directors and Assistant Chair of Student Affairs by email prior to the start of the class. In the event of illness requiring absence from patient management experiences or clinical activities to clinical facilities, students must inform the Clinical Practice Seminar Course Director. If a student is absent from a class session when an in-class, graded activity/assignment is scheduled and the Course Director has not been previously notified with an acceptable reason for the absence, a grade of zero is issued. If an illness, injury, or emergency is expected to cause a student to miss more than three days of class, please notify the Assistant Chair of Student Affairs, Dr. Krista Van Der Laan (krista-vanderlaan@northwestern.edu).

Students are expected to be present for all graded activities. If a student has a very compelling reason why he or she cannot be present for an examination, he or she must secure the permission of the Course Director to reschedule the exam via written e-mail request; with the Assistant Chair of Student Affairs, Dr. Krista Van Der Laan (krista-vanderlaan@northwestern.edu), copied on the request. Unless the absence is due to an emergency, a request for a change in exam must be given to the Course Director within 72 hours of receiving the course syllabus. The Course Director has the right to determine whether it is reasonable to reschedule the exam and the nature of the rescheduled examination. If the Course Director approves the absence and agrees to reschedule the examination, the student and the Course Director will mutually determine a date for the exam. Ordinarily, the exam will be scheduled prior to the absence.

BREAKS
Every effort is made to allow for breaks between classes whether in person or via Zoom, but if a class extends beyond the allotted time, students are to remain until class has ended. In the case of 90 minute to two-hour classes, breaks of 10 minutes are highly encouraged, however may sometimes not be possible.

If an instructor fails to appear at the scheduled time for a class, a student representative should inform the ACPE, and one of the two receptionists on the 11th floor. If the instructor cannot appear for the class within 20 minutes of the scheduled time, the class may have to be rescheduled.
CLASSROOM/LABORATORY/CLINICAL EXPERIENCE ATTIRE

Appropriate attire for clinical settings, classroom sessions involving patients/community volunteers, classroom clinical course labs, and Anatomy labs is detailed below:

- **Clinical Settings and Class Sessions Involving Patients/ Clients/Community Volunteers**

The following information will assist students with presenting themselves as professionals to the public and healthcare providers, and as appropriate representatives of Northwestern University. Students are expected to adhere to these guidelines during integrated clinical education experiences, and full-time clinical experiences except when superseded by facility policy.

**All students are expected to wear professional clinical attire for labs, class sessions and clinical settings that involve community volunteers, patients and for practical exams unless informed otherwise by the Course Director. It may be necessary to curtail some aspects of their individual expression for safety or to reflect appropriate respect and create rapport with patients, families, and health care members.**

- Students should wear white lab coats with appropriate clinic attire. Lab coats may be suit-jacket, three-quarter, or full length, with a PTHMS identification patch to be worn on the left sleeve, two inches below the seam and centered on the arm after obtained at Clinical Practice Ceremony. Appropriate street clothing includes shirts, blouses or sweaters and khaki or dark slacks. "Jean" style pants, jeggings, leggings, hats, sweat suits, T-shirts, see-through fabrics, and necklines and hemlines that are revealing are unacceptable.
- Shoes are to be closed-toe, closed-heel and low-heeled. Clogs, heels higher than 1", sandals, platform shoes and flip-flops are unacceptable. **Rubber soled shoes are recommended.**
- Students must wear a nametag provided by the facility or the University.
- Good personal hygiene and grooming are expected. Makeup and colored nail polish should be used with discretion. Do not wear perfume or cologne.
- Fingernails should not extend beyond the fingertips. No artificial nails.
- Jewelry should be worn with discretion and should not endanger the safety of the student or others, e.g., no dangling earrings, sharp rings.
- Effectively restrain long hair behind the head. Hair must be well groomed.
- At all times, when in the clinic, the student must adhere to the guidelines for clinic attire of the organization, this could include clothing, jewelry, and/or tattoos.

Students who fail to comply with the expected attire for any class session or clinical experience may be asked to leave the learning activity until they are able to be dressed appropriately. Also, students may receive a “0” for graded activity that occurs during the session.

- **Lab Clinical Courses**

Lab attire in all other labs may vary with the course. The faculty of each course will determine appropriate attire and notify the students. Students may be asked to leave the lab until they are dressed appropriately for session or to wear a hospital gown if appropriate for the learning activity. A student who requires modifications to the lab attire policy for religious or medical reasons shall
consult with the Assistant Chair of Student Affairs who will determine the feasibility of the request and if and how the accommodations will be implemented. **Hats are unacceptable.**

- **Required Dress and Protocol in the Feinberg Anatomy Lab**

  Laboratory setting dress is not a personal fashion choice and is mandated by safety guidelines from OSHA and Northwestern’s Office for Research Safety. The following guidelines are required for **ALL** Anatomy Lab users:

1) All students must wear the provided disposable lab coat at all times.

2) Wear old clothes under your disposable lab coat. These clothes must be discarded after your last anatomy lab.

3) Wear long pants or slacks to protect the legs.

4) Wear sturdy shoes that cover the entire foot. Sandals, flip flops, “ballet flats”, high heels, etc. are **NOT** appropriate footwear.

5) Effectively restrain long hair behind the head. Hair must be well groomed. Beards are acceptable when neatly trimmed.

6) Wear the provided nitrile gloves at all times.

7) Wear the provided masks with face shields when sawing bones or any time there is a splash hazard. When entering the lab as an observer, minimal dress requirements are: long pants, covered shoes and a disposable gown. Gloves are not required; however, face masks and shields must be worn if bone sawing or other splashing hazards will occur.

8) Always remove **ALL** personal protective equipment, including gloves and disposable gowns, before leaving the lab.

9) All lab users must wash hands and arms thoroughly before leaving the lab.

10) Do not take coats or protective clothes home to wash. This may result in cross-contamination.

11) Cover any cuts or exposed skin wounds you may have with bandages.

12) Food or drink is never allowed in the laboratory.

Failure to abide by these guidelines will result in you being asked to leave the laboratory and referral to SPC.
CLINICAL EDUCATION

Overview

Clinical education experiences are an extremely important and a substantial part of the DPT program at the Department of Physical Therapy and Human Movement Sciences. During their clinical education, students integrate aspects of classroom learning, clinical decision making, manage patient problems, and provide educational, administrative, consultative, risk assessment, health and wellness promotion, and research services with supervision. The experiences are designed to take place at facilities where healthcare or physical therapy is offered such as hospitals, rehabilitation centers, ambulatory centers, school systems, and home care. Clinical educators at clinical sites are considered to be an extension of the academic faculty.

The clinical education faculty consists of:
Assistant Chair of Clinical Education
Directors of Clinical Education (DCE)
Site Coordinators of Clinical Education (SCCE)
Clinical Instructors (CI)

Clinical Education Time Line

Pre-Assignment Process

Communication with Facilities and Recommending Sites
The Directors of Clinical Education (DCE) and the clinical education site representative(s) manage communication regarding the establishment of a Clinical Education Agreement(s) and specific clinical education experiences for NU students. Clinical Education Agreements are mutually agreed upon and include, but are not limited to, a description of the roles and responsibilities of all involved parties. Clinical educators at affiliated sites offer clinical education experiences based on their available resources annually and before students and DCEs determine Clinical Education I-IV placements.
Students may recommend a maximum of two new clinical education sites by completing the Clinical Site Recommendation Form. Students should refer to the form posted on Exxat for clinical site recommendation procedures. If a Clinical Education Agreement with the recommended site is fully executed and the SCCE offers a clinical placement that fits the student’s clinical education schedule, then the student who recommended the site will be pre-placed at that site unless a conflict of interest is identified. The above statement will only apply if the clinical education agreement has been signed by the University and the clinical site prior to the start of the relevant clinical education Selection and Match process.

If a student requests a clinical education experience at a site that already has a clinical education agreement with NU, and the site is able to offer a slot for the student’s desired timeframe, the slot will appear on the list of learning opportunities for the selection and match process and be available for all students in the class. The requesting student is expected to include the slot on their learning opportunity list. If the slot is not matched with any student during the match process, then the DCEs will place the requesting student in the slot.

**Scheduling**

The ACPE, in consultation with the Assistant Chair of Clinical Education, determines the dates for each clinical experience and these dates are provided to the SCCEs. These dates determine the legal time frame for students to complete clinical experiences and dates for professional liability coverage for Northwestern University students at facilities.

Students are not to negotiate changes in dates of clinical experiences with the assigned site. If a student anticipates a need to alter the dates of a clinical education experience, the student must contact her/his assigned DCE. Any student attempting to negotiate a change in dates without notifying the assigned DCE may be prohibited from participating in a clinical experience at the facility.

The Department has scheduled travel time prior to and after Clinical Experiences I – IV. Students are expected to begin and end each clinical experience on the committed dates. Because students have this scheduled travel time, they should have no need to request time off from any clinical experience for personal business or to travel to the next experience or graduation.

When a student demonstrates problems with clinical performance and/or has a learning development plan, the length of the clinical experience may be extended so the student may have additional time to demonstrate safe, effective, consistent, and efficient practice. Learning development plans may be instituted prior to, or during, a student’s clinical experience. As such, students are expected to keep the week following the assigned end date of the clinical experience open for additional clinical practice, if needed.

**Assignment of Students to Clinical Facilities**

**Experience Requirements for Graduation**

Graduates are prepared to meet the needs of patients/clients in any area of physical therapy service. To facilitate the development of knowledge and skills required to practice effectively in any setting, students must complete CE I – IV in a variety of clinical settings and sites. Students must consider the following characteristics when choosing clinical placements: patient age (e.g., pediatrics vs. young adults vs. geriatrics), setting type (e.g., school vs. extended care facility; hospital-based outpatient vs. private practice), facility location (e.g., rural vs. urban vs. suburban; Northwest vs. Midwest vs. South United States), setting size (e.g. facilities with 125 vs. 500 inpatient beds), or socioeconomic/cultural
background of patients/clients. These requirements can be met during Clinical Experiences I, II, III, IV or any combination of these experiences. Students are required to complete a minimum of 6 weeks of full-time clinical experience practicing with:

1. Inpatients who have conditions that can change abruptly, e.g., acute care.
2. Outpatients who have a variety of musculoskeletal conditions.
3. Patients (inpatient or outpatient) who have neurological conditions (adult or pediatric).
4. Patients whose conditions complement the other three clinical experiences and meet the expectations of a well-rounded, diverse clinical education schedule.

To promote variety in each student’s clinical education schedule, students may complete no more than 19 weeks of full-time clinical experiences in pediatrics or managing patients with similar movement problems and levels of acuity. For example, students may not select the same patient population, such as outpatient orthopedics, for both CE III and CE IV.

Students enrolled in dual degree programs (i.e. DPT/PhD and DPT/MPH) have additional research and program requirements. They may be given preferential placement at sites in close geographic proximity to NUPTHMS (e.g. Shirley Ryan AbilityLab, NMH) or at sites that are public health Community Partners during CE II, III, and/or IV.

**Location of Clinical Experiences**

To optimize the use of available clinical education resources and assure variety within each student’s clinical education schedules, students shall travel a minimum of 50 miles outside of the Chicago area for at least one, and possibly more, of their full-time clinical education experiences. Exceptions are made on a case by case basis. Once the clinical education schedule is final, students cannot change the type of experience or facility selected. However, facilities have the right to change their availability and type of experience at any time. Students may participate in one full-time clinical education experience at a very limited number of international clinical organizations. Application, interview, and approval by the Assistant Chair of Clinical Education are required for international clinical education experiences.

**Conflicts of Interest**

To receive maximum benefit from clinical education and eliminate the possibility of biases, students will not be allowed to complete clinical education experiences at sites where they or a family member are or have been employed. Also, students will not be allowed to complete clinical education experiences at sites with which they have signed scholarship agreements or where they have completed physical therapy experiences, including volunteer, observation, work, and previous clinical experiences. Students are expected to self-report to their assigned DCE if they are ineligible to complete a clinical education experience at a specific site.

**Placement Process**

The clinical education placement process is designed to distribute available clinical education resources fairly and equitably for all students. Students’ preferences for clinical sites are matched with available clinical placements using EXXAT’s Student Training and Education Placement Software (STEPS). STEPS is a comprehensive, fully integrated tool that allows universities, students and clinical sites to manage all information related to clinical education placements in a centralized cloud-based system. The placement system is deployed on the cloud, which ensures 24/7 secure, real-time access to clinical site information.

During the selection and match process, students are able to search through all available slots for a particular clinical education experience and select preferred slots for their learning opportunities.
list. Students then rank their preferred slots in the order of preference. The placement system then matches students based on all choices that are submitted from the class. There may be one to two rounds per selection cycle.

Some clinical education sites allow an early selection via application/interview or first come, first served basis. Information about these sites and relevant deadlines are posted on EXXAT. Interested students may apply for placement in those sites prior to the match process noted above. If a student is accepted, they will not have to participate in the match process for the assigned clinical education experience.

**Changes in Placement**
Approximately 10% of clinical placements change partially or completely before or during any clinical experience. In the event a clinical facility becomes unable to provide a clinical experience, the assigned Director of Clinical Education in consultation with the student will revise the clinical education schedule using available clinical education resources. If a facility changes the experience, the university expects the student to accommodate the change by using effective communication skills and demonstrating professional behavior, flexibility and adaptability. Students remain responsible for expenses that result from changes in clinical education schedules or from changes in facility arrangements for any clinical experience.

Students are not allowed to make changes to their placements once the selection process has ended. If a student believes they have a justifiable reason for requesting a change in her/his clinical placement, the student must: 1) Articulate in writing clear reasons why her/his selection should be altered; 2) Submit the written request to alter the clinical education selection to the assigned DCE; 3) Meet with the DCEs for further discussion. Completion of written request and meeting with the DCEs does not guarantee that a change to the student’s selection will be approved.

**Prerequisites**
Students are responsible for communicating with their sites regarding prerequisites for clinical education experiences.

**Interviews**
Several clinical education sites require a telephone interview with the student prior to offering the student a clinical education experience. If a student participates in an interview and the clinical site offers the student a clinical experience at the site, the student will be assigned to the site and the student’s schedule for that experience is final.

**Background Checks**
Clinical education sites frequently require criminal background checks for participating students. Students will be responsible for communicating with their clinical sites regarding required criminal background checks (e.g. releasing results). Students should be aware that in the event adverse information is obtained during the criminal background check, they might face disciplinary action if admissions application included false information, be prevented from participating in a clinical experience and/or sitting for the licensure examination.

Some clinical education sites require specialized background checks (e.g. through a specific state agency, fingerprinting, pediatric screens). It is a student’s responsibility to complete the specialized background check per a site’s instruction. There may be additional fees associated with these background checks, and students are responsible for the fees.
Health Requirements—Immunizations and Certifications

Students are required to submit two sets of immunization records (including lab reports) to meet the requirements for both the University and the Department.

#1 One set should be sent directly to Health Service in Evanston (address is in Details and Deadlines table below) by July 1.
#2 The departmental set is to be uploaded to Exxat by July 1.

It is important that you meet these health requirements, as they are a pre-requisite for clinical education activities in the curriculum, including all patient/client/community volunteer experiences. Some clinical sites may have additional requirements, which must be met prior to working with patients.

PTHMS has the additional requirement of a CPR certification through an American Heart Association, Basic Life Support course. This is the only certification acceptable. Students are also responsible for maintaining current CPR certification. If the student’s CPR certification expires during didactic education, students will be prohibited from participating in patient/client/community volunteer activities until the student provides documentation of current certification; during a clinical education experience, the student will be removed from the clinical site until the student provides documentation of current certification.

This table compares the University requirements with PTHMS requirements.

<table>
<thead>
<tr>
<th>Immunizations required</th>
<th>Northwestern University</th>
<th>PTHMS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tuberculosis Testing:</strong> A QuantiFERON® TB Gold blood test must be completed in the USA between June 1 and June 30 of the year you enter the program. You must submit a copy of the lab report. If the QuantiFERON® TB Gold blood test result is positive, a chest x-ray must also be completed and result submitted. OR If you have a history of positive TB tests, a chest X-ray performed in the USA on or after June 1 of the year you enter the program must be submitted. If available, also include historical positive Tuberculosis test result and, if applicable, treatment records. Students arriving from other countries in need of a QuantiFERON® TB Gold blood test and/or Chest X-Ray have until 30 days after the start of classes to complete the test without incurring penalty. TB tests and x-rays from other countries will not be accepted and will be repeated at the student’s expense.</td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td><strong>Measles (Rubeola), Mumps, Rubella Titer:</strong> Positive qualitative lab reports confirming immunity must be submitted to meet this requirement.</td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td><strong>Varicella (Chicken Pox) Titer:</strong> A positive qualitative lab report confirming immunity must be submitted to meet this requirement.</td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td><strong>Hepatitis B (Surface Antibodies) Titer:</strong> A positive qualitative lab report confirming immunity must be submitted to meet this requirement.</td>
<td>√</td>
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</tr>
<tr>
<td><strong>Tetanus/Diphtheria/Pertussis (Tdap):</strong> One booster vaccination administered within 10 years of entrance into Northwestern.</td>
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</tr>
<tr>
<td><strong>Tetanus/Diphtheria Series (Td, DT, DTP, DTaP or Tdap):</strong> International students’ vaccinations must be done at least 6 months after last primary series vaccination. There should be 2 doses of the vaccination from their Tetanus/Diphtheria primary series. The doses MUST be 28 days apart.</td>
<td>√</td>
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</tr>
</tbody>
</table>
Influenza Vaccination: An influenza vaccine is required annually by September 15, or when annual vaccine becomes available.

AHA BLS CPR Certification: Front and back side of card of should be uploaded to EXXAT by September 1.

COVID-19 Vaccination: Proof of vaccination should be uploaded to EXXAT; ensure vaccination follows University guidelines https://www.northwestern.edu/coronavirus-covid-19-updates/resources/frequently-asked-questions/vaccination-requirement-faqs.html

Details and Deadlines for Submitting Information

<table>
<thead>
<tr>
<th>Northwestern University</th>
<th>PTHMS</th>
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<tbody>
<tr>
<td>Deadlines:</td>
<td>July 1</td>
</tr>
<tr>
<td>Submit to:</td>
<td>Northwestern University Health Service, Health Information Management Services, 633 Emerson St., Evanston, IL 60208</td>
</tr>
<tr>
<td>Failure to Comply:</td>
<td>Students who fail to submit the completed Admission Health Record, including proof of immunizations or fail to rectify deficiencies within 30 days after the start of classes will be assessed a non-refundable $100 late fee and in accordance with Illinois state law, barred from class registration for subsequent terms, until compliant.</td>
</tr>
<tr>
<td>For More Information:</td>
<td>For more information, visit the “Entrance Health Requirements” page on our website at: <a href="http://www.nuhs.northwestern.edu/evanston/default.aspx">http://www.nuhs.northwestern.edu/evanston/default.aspx</a></td>
</tr>
</tbody>
</table>

Students must maintain personal copies of all their health documents in EXXAT. Documentation of completed admission health requirements, AHA CPR certification, HIPAA and OSHA blood borne pathogens training are shared with clinical facilities prior to students’ participation in clinical activities and clinical education experiences. Students must submit documentation of additional health requirements and/or criminal background checks requested by individual clinical sites directly to the SCCE. Students can send prerequisite information through EXXAT, however, should ensure that is the preferred format of the site.

General Policies and Procedures During Clinical Experiences

Attendance
Each student is expected to work the same schedule as their Clinical Instructor (CI), which will include completing at least 40 hours of clinical practice for each week scheduled for Clinical experiences I-IV and may include working beyond 40 hours in a week.

The time spent in clinical practice is valuable to the student's professional development. When unforeseen circumstances occur and the student is unable to complete the expected hours of clinical experience, students and clinical faculty should adhere to the following policy:
If a student is absent from clinical practice for any reason, it is expected that arrangements will be made to make up the time missed, if feasible. Any make-up time should be scheduled when supervision by a licensed physical therapist is available and should only occur within dates of that academic term/trimester unless special approval has been given; options may include extended workdays, weekends, etc. When scheduling make-up opportunities is not feasible for the clinical site, the school, in consultation with the student, CI, and SCCE, will decide what alternative arrangements will be made. Students are expected to demonstrate flexibility in the scheduling of make-up time.

Planned time off during assigned clinical education is allowed to attend: 1) APTA Combined Sections Meeting to present their research, 2) a wedding to participate as a member of the wedding party, or 3) a family graduation. The student must contact his/her assigned DCE for initial approval. Depending on the circumstances, time off may be approved for other reasons. See below for examples of specific scenarios where time off may be approved.

In the event a student must request time off, she/he must:

1. Contact the assigned PTHMS Director of Clinical Education as early as possible.
2. After receiving approval from the PTHMS Director of Clinical Education, contact the SCCE and/or CI and follow the administrative policies and procedures of each site in order to obtain permission for time away.
3. Only make travel arrangements once both a PTHMS Director of Clinical Education and the clinical site have approved time away.

Illness
If a student becomes ill and is unable to attend any portion of clinical practice, they are to notify their CI and the assigned PTHMS DCE as early as possible on each day of absence. During Clinical Education Experiences I-IV, students are expected to learn how to determine when it is appropriate to call in sick. For example, if the student’s illness could pose a threat to patients’ or clinicians’ health, the student should not go to the clinical setting.

Attending CSM
Students are not allowed time off to attend APTA Combined Section Meetings (CSM) unless pre-approved with the assigned DCE and CI. Preference is given to students who have a CSM platform or poster presentation. If pre-approval is received, a maximum of 1-2 days will be offered. Pre-approval must be obtained prior to making any flight or travel arrangements. If approved, students are responsible for making up time missed during the clinical experience.

Residency Interviews
Students are not allowed time off for residency interviews unless it is pre-approved with the assigned DCE and CI. Preference is given to students who are interviewing for American Board of Physical Therapy Residency and Fellowship Education approved residency when the deadline for application requires an interview prior to the end of the experience. If pre-approval is received, a maximum of 1 day per residency will be allowed and preferably no greater than 3 days missed for interviews. Students should strongly consider not attending CSM if applying for more than one residency. Pre-approval must be obtained prior to making any flight or travel arrangements. If approved, students are responsible for making up time missed during the clinical experience.

Job Interviews
Students are not allowed time off for job interviews.
Other
In the event that a student has an emergent need to be away from the clinic (e.g., death in the family, illness) during CE I-IV, the student should immediately contact their CI and assigned DCE to make arrangements.

Expenses
Students are responsible for all expenses associated with clinical education. These expenses may include site health requirements, criminal background checks, transportation, meals, housing, access to onboarding systems, and professional clinical attire. These expenses are items in the expense budget used to determine need for financial aid. Students can contact NU Financial Aid to adjust their financial aid to meet expenses associated with clinical education coursework.

Access to and Responsibility for the Cost of Emergency Services During Clinical Experiences
The standard Northwestern University Agreement for Clinical Education, Section B., Facility Responsibilities, states, “In the event of an onset of illness or injury of a student or faculty during assignment to the FACILITY, emergency care will be provided to the student or faculty at their expense.” For clinical education agreements that are generated by the facility’s legal/education departments, comparable wording must be included for the agreement to be signed by a University official.

Health Conditions
Students are expected to inform the Assistant Chair of Clinical Education (or designee) of any health condition or illness that could affect the student’s ability to safely, effectively, or efficiently engage in clinical practice. Students may be required to provide medical clearance for participation in classes, integrated clinical education experiences, or full-time clinical education experiences. Such information is shared with the SCCE and the CI only with the student’s consent. Students in need of accommodations related to a disability have the right to register to request reasonable accommodations during clinical education experiences. Link to register with AccessibleNU: https://www.northwestern.edu/accessibleunu/students/index.html

Pregnancy should be reported to the Assistant Chair of Student Affairs (or designee), SCCE, and CI as soon as possible upon medical confirmation. Learning experiences may be modified to ensure maximum safety for mother and baby. Complications and/or the inability to perform clinical skills related to pregnancy should be discussed immediately if it is expected that participation in the clinical experience may be affected. Medical clearance is necessary to resume program activities following the birth. Students in need of accommodations related to pregnancy may also consult the following webpage: http://www.northwestern.edu/sexual-misconduct/get-help/pregnancy-and-parenting.html.

In case of illness or injury (including exposure to airborne contaminants, blood and body fluids, etc.) during clinical activities or clinical education experiences, students are expected to follow the facility’s policies and procedures for reporting and follow up care. Students are also expected to notify their CI, the SCCE, and the Assistant Chair of Clinical Education of such occurrence.

Legal Requirements and Confidentiality for Clinical Education Experiences
Federal and state laws, and facility bylaws, policies, rules and regulations govern clinical practice in each facility. Students are expected to follow the legal guidelines for physical therapy in any state, and
the policies, rules and regulations of any facility. Students who fail to do so may be prohibited from continuing the clinical experience. Students are expected to hold confidential any information about patients, clinicians, clinical sites, peers and faculty. Students are also expected to hold confidential any proprietary information acquired at a clinical site. Students may not write or publish facility proprietary or patient information acquired during clinical education experiences without written consent by the facility and/or University. In addition, students are prohibited from using any form of social media (e.g., blogs, Facebook, Twitter, Snapchat) to discuss issues (positive or negative) pertaining to their clinical experiences.

**Patient Right to Refuse/Decline Care**
Patients have the right to refuse care provided by a PT student. The CI and student must honor any refusal or declination. A CI has the responsibility to communicate with patients that a student may be involved in his/her care and seek permission for this. Students are required to wear a school or facility name badge and must always identify themselves as a student. They cannot misrepresent themselves as a licensed professional.

**Safe and Healthy Learning Environment**
PTHMS is committed to a safe and healthy learning environment based on mutual respect between students and all clinical education stakeholders. The promotion of a safe and healthy learning environment is a mutual responsibility for student education during all clinical education experiences. All employees at clinical education sites and PTHMS faculty are expected to behave in a manner that promotes education as detailed in the Safe and Healthy Learning Environment policy. Discrimination based on race, color, religion, national origin, sex, pregnancy, sexual orientation, gender identity, gender expression, parental status, marital status, age, disability, citizenship status, veteran status, genetic information, or any other classification protected by law or University policy is unacceptable. The DCEs disseminate this policy to clinical education sites who interact with students. Violations of the policy (incidents of student mistreatment) will be investigated by PTHMS, FSM and the clinical education site according to the policies described in the FSM Safe and Healthy Learning Environment Policy. Students should contact their DCE if they feel they have experienced discrimination or any other forms of mistreatment.

**Grading**
Refer to grading section of Academic Standards for policies and procedures related to grading during clinical education experiences.

**Process for Students to Provide Feedback about Clinical Education Sites**
PTHMS values feedback from students on clinical education sites. Students are to complete a clinical site evaluation form at the conclusion of each clinical education experience and are expected to share this with their clinical site. The DCEs review this feedback and follow up with sites as needed.

**Process for Clinical Education Sites to Provide Feedback**
PTHMS values all feedback that relates to its curriculum, students, faculty, and graduates from patients or clinical education sites. We strive to respond in an efficient and effective manner. To provide feedback please contact the Assistant Chair of Clinical Education, Krista Van Der Laan, PT, DPT, OCS, at krista-vanderlaan@northwestern.edu. To file a complaint with the Department of Physical Therapy and Human Movement Sciences, patients or clinical education sites may email the
Chair, Julius P.A. Dewald PT, PhD, at j-dewald@northwestern.edu. The individual or organization will receive a response on action taken within 3 business days.

**Clinical Education Award**
Further information regarding the Clinical Education Award can be found in the Student Recognition section of the student handbook.

**COMMUNICABLE DISEASES**
It is the student’s responsibility to inform the PTHMS Assistant Chair for Student Affairs if he/she has contracted any communicable disease. When exposure could endanger the health of the student’s classmates or the faculty, PTHMS maintains the right, with the student’s written acknowledgement when possible, to inform faculty and the student’s classmates of their exposure to the disease. The student’s identity will be protected to the extent possible and consistent with community health and safety. The Department also maintains the right to require the student to present written confirmation from the physician that it is safe to return to classes.

If students are ill, PTHMS faculty members maintain the right to ask them to go home or seek medical care. Faculty may also ask students to don a mask, cover wounds or skin rashes, and so forth.

A supply of gowns, masks, face shields and gloves will be maintained in storerooms in Room 705 and 715. They will be needed both for patient laboratories and for class activities.

**COMPUTER USER POLICY NORTHWESTERN UNIVERSITY INFORMATION TECHNOLOGY (NUIT) and FEINBERG SCHOOL OF MEDICINE**

**Information Technology (NUI) policies.**
NUIT policies are posted at www.it.northwestern.edu/policies, including the Rights and Responsibilities policy at www.it.northwestern.edu/policies/responsibilities.html. The NUIT security officer should be notified about violations of copyright laws and NUIT policies, as well as about potential loopholes in the security of any computer systems and networks at Northwestern. Contact the NUIT security officer at security@northwestern.edu. Further information of University IT policies may be found on the Web at http://www.it.northwestern.edu/policies/index.html.

**Feinberg Information Security & Access policies.**
Users must abide by the terms of the Feinberg Information Security and Access Policy http://www.feinberg.northwestern.edu/it/policies/compliance.html

**COPYRIGHT PROTECTION OF EDUCATIONAL MATERIAL**
Students may not copy or redistribute educational materials (print, audio and/or visual) they receive through their education at PTHMS, without the express written consent of the course instructor. Dissemination or unauthorized duplication of educational materials will be considered a violation of this policy and a breach of academic integrity.

Materials on Canvas, the Course Management System, are subject to copyright and may NOT be distributed beyond members enrolled in classes served by the course management system without explicit written permission of the faculty member.
COURSES IN OTHER NORTHWESTERN UNIVERSITY SCHOOLS
Due to the heavy course load, students enrolled in the Doctor of Physical Therapy curriculum are discouraged from registering for classes in other schools in the University unless enrolled in a dual degree program sanctioned by PTHMS. Tuition to attend classes in other schools is not included in tuition for PTHMS; therefore, any additional expenses must be borne by the student. Registration must be done independently of PTHMS; no reciprocity exists between PTHMS and other schools.

CPR CERTIFICATION
All students are required to maintain American Heart Association CPR certification throughout the entire program. Certification is necessary for any and all patient care activities, whether in the classroom or the clinic. We will accept only the American Heart Association BLS Course. To assist students in maintaining current certification, PTHMS offers an American Heart Association (BLS) certification course in August of each year. If students’ certification is due to expire any time prior to September 1, 2020, we urge them to certify during the August 2020 course offering. It is imperative that students maintain continuous certification past their anticipated graduation date.

Students whose certification is not from the American Heart Association BLS course at the time of enrollment will have to arrange to certify immediately. Students without current certification will not be permitted to participate in any activities involving patients/clients/community volunteers, including those held in conjunction with courses which may include clinic activities, until their certification is current. Any student without current certification will receive a grade of zero for activities missed and will have a "Professional Practice" "Accountability" simple notification forwarded to the Student Progress Committee.

At the beginning of each Clinical Experience, the Assistant Chair of Clinical Education will be notified of the current certification status of all students. Students without current certification will not be permitted to begin a Clinical Experience. If students fail to maintain current certification during Clinical Experiences I-IV, they will be asked to leave the clinical site until their certification is current. The clinical time missed will have to be made up through consultation with the Assistant Chair of Clinical Education and the clinical facility.

DIGITAL MEDIA POLICY
Policy on use of technology in the classroom

PTHMS supports a technology-based learning environment. The use of technology in classrooms is intended to enrich the educational environment for all students.

While we promote an electronic, paper-free environment, the use of technology that interferes with the educational environment, encourages academic dishonesty, or promotes illegal activities (such as copyright infringement) is prohibited by faculty, instructors and the DPT program at Northwestern University.

Students may use hand held electronic devices, mobile computing technologies, and cellphones only as permitted by the instructor. Mobile technologies should be utilized as appropriate when professors or students need to reference information to further classroom inquiry or when utilized as a part of instruction.

To minimize distractions and keep students’ full intellectual energies inside the classroom, students are required to observe the following when present in the classroom and lab settings.
• During classes, cell phones and pagers must be turned off or placed on silent mode. Students are expected to show respect to classmates and faculty by not using computers or cell phones for texting, playing games, or sending/responding to personal communications during class. If a family emergency requires that the student be available by phone or pager during class times, special permission to leave communication devices on during classes may be obtained from the Course Director. If permission is granted, students must place the device on silent mode, and are required to leave the classroom to interact with the technology when it is not used as a part of classroom instruction.

• The use of technology in the classroom is a privilege, not a right, and should be used for note taking or to further the educational inquiry of the student (e.g., referencing information pertinent to classroom activities). If an iPad or a computer is utilized for texting, e-mail, or accessing social media without the explicit permission of the instructor the student may be asked to discontinue use of the technology for the remainder of the class period.

• Digital recording audio or video of any class is only for personal educational purposes or for sharing recording among the cohort. A faculty member must be notified if being recorded and they can reserve the right not to be digitally recorded. Recordings must not be shared outside of Northwestern University’s Department of Physical Therapy and Human Movement Sciences.

• Students may not post ANY material from physical therapy classes on any social networking sites (Facebook, YouTube, etc.), or file sharing sites without the explicit written permission of the instructor. In addition, written permission must be sought from any person that is present in any digital media prior to sharing of recordings in any forum. At no time shall any patient encounter be recorded by any means without the express written permission of the patient or caregiver. Students shall not approach a patient or caregiver on an individual basis. A PTHMS Release and Waiver Form of consent should be obtained and completed by the Course Director.

• Students who have official documentation from AccessibleNU that recommends the use of technology to accommodate verified learning needs will be accommodated to use the recommended technology during class.

ELECTRONIC CLASS HANDOUTS AND MEDIA:

All class syllabi, documentation, and handouts will be provided electronically during your tenure at PTHMS. If you choose to print, you may do so using your personal printers or the printers in the student lounges using your student account. All handouts will be posted on Canvas, the current Learning Management System (LMS), approximately 48 hours before a class session to allow adequate time for download prior to a session. Please be advised that while we will make every effort to post handouts 48 hours prior to class, instructors may, at their discretion, modify handouts up until the time of the actual class meeting. Thus, there may be minor changes to the handout posted in advance of class, as instructors make every effort to provide the most up to date material and evidence for class sessions.

All students will be enrolled in the PTHMS DPT Orientation Course site via Canvas. Under Documents you will be able to connect to the iPad Project website which will provide access to “How to” and other important information related to use of the iPads and Technology for the classroom and assigned activities. You will also find an electronic copy of the PTHMS Student Handbook, orientation documents and class schedules posted on this site.
iPad and Electronic Media Initiative:
Today’s students already have considerable familiarity with educational technologies and this creates new opportunities for efficient, mobile, and innovative learning. While iPads cannot replace a computer, their portability, use as an e-text and PDF reader, and numerous apps for learning and patient instruction make them an excellent educational tool. iPads allow students to view and annotate course content electronically, facilitate advance preparation, as well as in-class note taking in a highly shareable and searchable format. Students will be able to easily access high quality information from any place, at any time, including image databases, images from textbooks on electronic reserve, journal articles, and Galter Library’s search tools. DPTHMS is committed to supporting iPads by embedding their usage into the curriculum and providing AppleCare and technical support. The use of iPads is supported on all classroom and conference room monitors via Apple-TV. All courses will provide syllabi and handouts electronically in PDF format. Most research articles required as course reading are available online via the Library Resource link within a course as PDFs. Apps are available to read, annotate and store them in an organized way. There are also apps that allow audio recording of lectures and taking handwritten or typed notes. Finally, by “going green” PTHMS will be contributing to and committing to a more sustainable environment.

Information Technology Package for incoming DPT Class of 2024
Students entering the DPT program will pay a one-time DPT Technology fee and be issued a basic Information Technology Package which includes: an iPad Pro, 256 GB of memory, 3 years of AppleCare, and an iPad Smart Folio with Keyboard which includes a 3 year warranty. A basic app package will be provided, as well as a license to Complete Anatomy and Examsoft/Examplify, with additional recommendations as you progress through the curriculum.

A list of additional recommended apps can be found on the PTHMS Orientation website under Student Recommended apps. Many of these apps are free, or very inexpensive. Some courses will require the use of a particular app; this information will be included in the course syllabus.

Most required textbooks can be purchased in electronic format for significantly lower costs than the hard copy versions, helping to offset the cost of the iPad itself. E-texts can be read using the eBooks app included with the iPad, or by using the Kindle reader available for free download in the iTunes store. In addition, there are several other free app readers that are used by many of the textbook manufacturers including Vital Source Bookshelf (which you will use for your Anatomy Thieme app), Inkling, and modalityBODY. There are other advantages to using an e-text including: the ability to highlight and annotate your text, and have those notes be searchable; setting bookmarks; and of course, portability. In addition to e-texts, all course handouts will be provided in PDF format for download to the iPad. Required research articles will be available in PDF format from the Galter Medical Library.

E-MAIL
Students are required to have an active university e-mail address throughout their enrollment. A list of these addresses is provided to all faculty. University e-mail addresses are used for program and class related communication including: faculty-to-student and peer-to-peer communication, assignments, library reservation, and so forth. University e-mail accounts are provided at no cost. Once the student is enrolled, the account will be continued through graduation, as long as the password is changed when requested. It is the student’s obligation to maintain an active e-mail account, and to check it on a daily basis. Failure to do so will not excuse missing assignments and obligations.

Forwarding of email
The Northwestern University e-mail address is your official e-mail address and the only one that faculty and the university will use to communicate with you. Students who choose to have e-mail forwarded to another e-mail address do so at their own risk. The university and PTHMS are not responsible for e-mail forwarded to any other e-mail address and discourage students from doing so. A student's failure to receive or read in a timely manner official university or PTHMS communications sent to the student's official e-mail address does not absolve the student from knowing and complying with the content of the official communication.

**EMERGENCY CONTACTS**
Please inform family members to contact PTHMS at (312) 908-8160 in case of emergency. Also, be certain that the PTHMS Registrar has a current phone number and the name of a contact person to notify if the need arises. Receiving phone or text messages on a cell phone during class is highly discouraged. In the event that you are having an emergency and anticipate that you might be contacted on a personal phone during class, please notify the instructor ahead of time and sit near one of the doors to minimize disruption to the rest of the class. Also, please make sure you add or update emergency contacts in CAESAR at following link: [http://www.northwestern.edu/ses/students/emergency-information/add-or-update-emergency-contacts.html](http://www.northwestern.edu/ses/students/emergency-information/add-or-update-emergency-contacts.html)

**EVALUATION OF STUDENT PERFORMANCE**
The faculty comprising the teaching team of each course establishes the standards for successful completion of the course. Student performance may be assessed by many means, including but not limited to individual and group assignments or examinations (written, practical, or oral).

**Assignments**
- Faculty may require that assignments be typed or prepared on computer. When not required, computer preparation or typing is highly recommended.
- Assignments are to be submitted by the beginning of the first class on the due date unless otherwise specified by the Course Director. Assignments received after that time, without acceptable prior notice, will be considered late and a penalty of 50% of total points will be assessed.
- The Course Director will specify how assignments are uploaded via Canvas. If materials are uploaded incorrectly and discovered at some later time, they will be considered late.
- If a student is absent from a class session when an in-class graded assignment/activity is scheduled or due, and the Course Director has not been previously notified with an acceptable reason for the absence, a grade of zero is issued for the activity.

**Examination Procedures**
Students are expected and honor-bound to take examinations honestly and eschew any opportunity to obtain an unfair advantage during an examination.

The Northwestern DPT Program utilizes ExamSoft’s application, Examplify, for in class exams. This app is included in the technology package at the start of Year 1. Guidelines have been put in place to assure that students have efficient, fair and positive experiences on exam days. These policies will be reviewed during a mandatory scheduled orientation session. It is important that you are familiar with and adhere to the ExamSoft testing policy and guidelines throughout your tenure at DPTHMS. The policy guidelines are included in the addendum. You will receive a copy of this policy to sign and return during your in-class orientation session.
Examinations are given frequently throughout the curriculum. Examination periods start with the first student tested and continue until the last student has completed their examination. **Discussing a written, practical or oral examination with any class member during this time period is considered a breach of academic honesty and will be handled accordingly.** In the event that a student is unable to take the exam during the scheduled time frame, Course Directors will notify students that the exam period has been extended.

Proctors are present during every examination. Proctors may be faculty, graduate students or staff. Students are expected to police themselves regarding inappropriate behavior and are expected to treat all Proctors with the same respect.

All personal effects, including without limitation, books, newspapers, magazines, jackets, hats, book bags, backpacks, audio devices, PDAs, cell phones, and other electronic devices are to be removed from desk tops during examinations. If calculators are required, you will be notified ahead of time; only simple, non-programmable calculators are permitted and in many cases calculators are built into the Examplify exam. iPads will be utilized for all exams utilizing ExamSoft.

Bluetooth communications devices are prohibited during examinations. The use of electronic data devices during any part of an examination period to give, receive or retrieve information is strictly prohibited, unless specifically permitted in the instructions for the exam (as in an open book test).

No hats may be worn during examinations.

No examination questions will be changed, corrected, or interpreted during the examination. Students are not permitted to ask the Proctor questions once the examination has begun. If the student believes a question is wrong or ambiguous, an explanation can be made on the note sheet provided to each exam taker or in the comments section at the end of an ExamSoft exam. However, obvious typographical errors discovered by the faculty, students or Proctor that compromise the value of an examination question will be rectified by a general announcement.

The examination beginning and ending times will be announced at the beginning of the examination. They will be followed strictly. Answer and note sheets not turned in or ExamSoft exams not exited from and uploaded by the end of the examination will result in the assessment of a penalty to the grade.

In the event that the fire alarm sounds during an examination, all students must place both the answer and question sheets and/or iPads face down at the work area and exit the room or building as instructed. Upon return to the examination the Proctor will announce a revised ending time.

Once the student has surrendered his or her examination materials to the Proctor at the end of the examination, the materials may not be retrieved or changed in any way.

It is the prerogative of the course faculty to determine the nature of the examination to be given and the date the examination will be scheduled.

In the rare situation when illness or an unexpected emergency prevents a student from sitting for an examination at the scheduled time, the Course Director must be notified immediately and prior to the examination. The Course Director is to be notified by e-mail. The Assistant Chair for Student Affairs, in consultation with the Course Director(s) will determine whether the examination will be rescheduled, and if so when.

If a student has a very compelling reason that he or she cannot be present for an examination, he or she must secure the permission of the Course Director to reschedule the exam via written e-mail request; with the Assistant Chair of Student Affairs, Dr. Krista Van Der Laan (krista-vanderlaan@northwestern.edu), CC’d on the request. Unless the absence is due to an emergency, a request for a change in exam must be given to the Course Director within 72 hours of receiving the course syllabus. The Course Director has the right to determine whether it is reasonable to reschedule the exam and the nature of the rescheduled examination. If the Course
Director approves the absence and agrees to reschedule the examination, the student and the Course Director will mutually determine a date for the exam. Ordinarily, the exam will be scheduled prior to the absence. The Assistant Chair for Student Affairs will maintain records of rescheduled exams.

- A score of zero (0) will be recorded for unexcused missed examinations.
- No examination materials, results, or answer keys will be released for review until all students have taken the examination.
- Final exam grades are released on completion of the last final exam.
- Course faculty determines whether the examinations are retained or returned to the student. If examinations are retained, they will be available for student review at a time determined by the Course Director.
- Requests for a change of a grade on an examination or assignment must be directed to the Course Director within five (5) business days of notification of the grade. Requests submitted after this time will not be honored and no grade change will be made. The student will receive notification whether a change in grade is made.

**FEEDBACK REGARDING THE CURRICULUM**

Curriculum, course and instructor quality must be evaluated annually, and student feedback via questionnaires has been established as one method of doing so. Students are asked to complete Course and Instructor Evaluations following each course. The evaluations have been designed to examine a number of characteristics selected as important for teacher/course effectiveness and to evaluate curriculum integration. The course and instructor evaluations for all courses in a given trimester will be made available to the students approximately half way through the trimester. Students are to submit the completed forms online within one week following the last final exam. Course evaluations are anonymous to the faculty. Faculty members only receive an aggregate list of comments with no ability to identify who made the comment. No grades, transcripts or proofs of enrollment will be released until the evaluations have been received. Evaluations are secured by a designated staff member and are not reviewed by faculty until course grades are submitted to the NUPTHMS Registrar. If a student is late submitting their course/faculty and trimester evaluations, without prior approval of the Assistant Chair for Curriculum Affairs, a referral will be sent to the SPC for unprofessional behavior.

In addition to formal evaluations, students are encouraged to give feedback directly to instructors, Course Directors, the Assistant Chair for Curriculum Affairs, or the Associate Chair for Professional Education. At the completion of the academic and clinical components of the program, formal feedback will be requested regarding the curriculum as a whole. This feedback is requested both verbally and in writing.

**GRIEVANCE PROCEDURE**

Professional students sometimes experience disagreements and problems regarding program policies and/or their professional relationships with faculty and staff. The DPTHMS strives to provide students with a positive, collaborative, and healthy approach to solving disputes with faculty and staff.

The intent of this General Grievance Policy is to accommodate a fair and mutually satisfactory resolution of any grievance at the lowest possible level. Students are encouraged to first discuss interpersonal disagreements directly with a faculty or staff member. If the concern is not resolved, the student should next seek assistance and/or bring a grievance regarding program policies, or a student-faculty or student-staff relationship, through consulting with the Associate Chair for Professional Education, Dr. William E. Healey. If still unsatisfied, the students should consult with the Department
Chair, Dr. Julius Dewald. Finally, if a satisfactory resolution is not found, the student may proceed to communicate with the Feinberg School of Medicine Vice-Dean, Education, Dr. Marianne Green. The grievance policy, therefore, sets up a hierarchy of grievance resolution—from Department Associate Chair of Professional Education; Department Chair; to Feinberg School of Medicine Vice-Dean, Education.

HAZARDOUS WASTE

The Northwestern University Office for Research Safety works to ensure compliance with federal, state, and local safety and environmental regulations in the collection and proper disposal of chemical, radioactive, and biological waste generated by the research, teaching, and clinical operations at Northwestern University. It is the policy of PTHMS to operate in full compliance with all laws and applicable regulations and to ensure the health and safety of its students, employees, and the environment. OSHA orientation in Clinical Practice Seminar I (505-1) includes review of biohazardous waste management. For more information on University policies please see https://researchsafety.northwestern.edu/hazardous-waste/hazardous-waste-disposal-guide/

HIPAA

The first federal privacy standards to protect patients’ medical records and other health information provided to insurance plans, doctors, hospitals, and other health care providers took effect in April 2003. The Standards for Privacy of Individually Identifiable Health Information (“Privacy Rule”), developed by the Department of Health and Human Services as part of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), set national standards for the protection of certain health information and provided patients with access to and more control over their personal health information. The Privacy Rule requires health plans, pharmacies, doctors, hospitals, physical therapists and other health providers to establish policies and procedures to protect the confidentiality of protected health information about their patients. Materials regarding the HIPAA responsibilities and requirements are distributed to students during their first year of DPT at a mandatory HIPAA training session that is part of Clinical Practice Seminar I.

INFORMED CONSENT FOR TEACHING AND LEARNING ACTIVITIES, IMAGES, AND MATERIALS

Any patient or community volunteer participating in teaching and learning activities sponsored by the Department must give their written consent to do so. The activities include, but are not limited to: being interviewed, being photographed, allowing faculty to demonstrate examination and intervention procedures, and allowing students to practice examination or intervention procedures. The activities may occur at the University or in the community. At no time shall any encounter be recorded by any means without the express written permission of the patient, community volunteer, or caregiver. Students shall not approach a patient, community volunteer, or caregiver on an individual basis. A PTHMS Community Volunteers Participating in Teaching consent form should be obtained and completed by the Course Director.

LEAVE OF ABSENCE

Due to the intensive nature of physical therapist education, all academic activities are considered to be an important part of the overall educational experience. All students are encouraged to engage in their education with consistent attendance. When special circumstances arise, a student may find it necessary
to request a leave of absence. Leaves of absence will be individualized to the specific situation but will follow the general guidelines outlined below. Program faculty will be notified of all instances of leaves of absence. All requests for an extended leave of absence, whether administrative or medical, should be submitted IN WRITING to the Assistant Chair for Student Affairs, or their designee.

**Administrative Leaves of Absence**
Administrative leaves of absence may be granted for personal, educational, financial or other reasons, which must be stated in the letter of request to DPT Assistant Chair of Student Affairs. If the student is in academic difficulty, the SPC will consult with the faculty and Course Directors of record prior to forwarding a recommendation to the ACPE. Administrative leaves will be considered on a case-by-case basis. A student who has been granted an extended leave of absence and wishes to resume matriculation must notify the ACPE in writing no later than eight (8) weeks prior to the beginning of the session in which he or she wishes to reinstate. If the ACPE has not received such notification, the student may not resume the program and would have to reapply as a new student. If a review of the student’s records indicates that courses previously taken are outdated or that new requirements have been added, the ACPE may stipulate that certain courses be taken or retaken to fulfill requirements.

**Medical Leaves of Absence (MLOA) Process**
The purpose of a medical leave of absence (MLOA) is to provide students time away from campus for treatment of a physical or mental health condition that impairs a student’s ability to function safely and successfully as a member of our community. The authority to grant an MLOA and permission to return from an MLOA resides with the Assistant Chair of Student Affairs and the ACPE. Each leave is individualized based on the needs of the student and handled on a case-by-case basis.

Medical leaves of absence for physical health related requests require the student obtain a statement from the appropriate licensed healthcare provider as to the expected reason and duration of absence.
Medical leaves for mental health related requests require the student to schedule an appointment with CAPS for an evaluation and recommendation.

**Requesting a Medical Leave**
Step 1 – Notify the DPT Assistant Chair of Student Affairs in writing of request for a medical leave of absence.
Step 2 – Medical leaves of absence for physical health related requests require the student obtain a statement from the appropriate licensed healthcare provider as to the reason and expected duration of absence. Medical leaves for mental health related requests require the student to schedule an appointment with CAPS for an evaluation and recommendation.
Step 3 – After the completion of Step 2, the student should contact the DPT Assistant Chair for Student Affairs for a medical leave of absence appointment with either the Assistant Chair for Student Affairs or ACPE. The student will be notified in writing of determination. The approval for MLOA may include expectations during the LOA which will be individually tailored to meet each student’s situation.

**Reinstatement from Medical Leave**
Step 1 – Notify the DPT Assistant Chair of Student Affairs in writing of intent to return from medical leave eight (8) weeks prior to the first day of classes for Fall, Winter, or Spring Trimester depending on the trimester when the student will resume classes.
Step 2 – Provide a clearance letter from physician for return to DPT program if leave was for physical health reasons. The student must schedule an interview for reinstatement with CAPS if leave was for mental health reasons.
Step 3 – After the CAPS or physical health evaluation, the student should contact the Assistant Chair of
Student Affairs to set-up a reinstatement appointment with the DPT Assistant Chair of Student Affairs or ACPE.

Step 4 – The DPT Assistant Chair of Student Affairs and/or ACPE will make a determination regarding reinstatement based on the recommendation provided by CAPS if mental health condition and physician clearance letter if physical health condition. Reinstatement is based on the student's readiness to manage an academic course load and safely function in the learning community. The student will be notified in writing of the determination, and if approved, whether any conditions apply.

Step 5 – If reinstatement is denied, the student may appeal the determination to the Vice Dean of Education within five (5) business days of the decision. The appeal should be made in writing and should set forth the basis for the appeal. The Vice Dean of Education shall review the record and any additional information submitted by the student. The Vice Dean of Education decision shall be final.

A student who is granted an extended (administrative or medical) leave of absence must follow the procedures for withdrawal from the University, including appropriate notification of Student Accounts and Student Financial Aid. Tuition refunds, if any, are based on the percentage of the term the student has completed.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION (OSHA) TRAINING AND UNIVERSAL PRECAUTIONS

Universal precautions must be carried out in all research and educational laboratories of the University. All students must receive training in universal precautions prior to any patient care activities. PTHMS offers training to all students on an annual basis. On occasion, a clinical facility with whom PTHMS maintains an agreement for clinical education will require that the facility provide the necessary OSHA training to participate in clinical activities at that facility. This would apply to participants who have been trained elsewhere. If so, PTHMS will schedule opportunities for the student to participate in training at the facility.

SAFE AND HEALTHY LEARNING ENVIRONMENT

The Northwestern University Feinberg School of Medicine (FSM) and PTHMS are committed to the principle that educational relationships should be one of mutual respect between teacher and learner. Because the DPT program trains individuals who are entrusted with the lives and well-being of others, we have unique responsibilities to assure that students learn as members of a community of scholars in an environment that is conducive to learning. FSM and PTHMS want to encourage students to bring attention to any breach or perceived breach of the Safe and Healthy Learning Environment and wishes to be open about the process the university has in place should such a claim be made. The process and flow document https://www.feinberg.northwestern.edu/md-education/current-students/policies-services/policies/safe-healthy-learning-environment.html offers a snapshot of the reporting, escalation, and resolution procedures related to a perceived mistreatment claim. The school also offers an ombudsperson for student support https://www.feinberg.northwestern.edu/md-education/current-students/policies-services/ombuds.html.

SEXUAL HARASSMENT POLICY

Please visit the University Sexual Harassment Prevention Office website to read the most current policy http://www.northwestern.edu/sexual-harassment/policy/.
SOCIAL MEDIA POLICY
Students are expected to become familiar with the Feinberg School of Medicine policy for social media. The policy can be found at: https://www.feinberg.northwestern.edu/md-education/docs/current-students/policies/Media-Policy.pdf.

TRANSCRIPTS
- Students who have satisfied all financial obligations to the University are entitled to an official transcript of their academic record. Transcripts may be ordered from the PTHMS Registrar. A $5 fee is charged for each additional transcript requested.
- Except for internal educational uses or as required by law, Northwestern University issues official transcripts only upon written authorization of the student concerned. Because of the confidential nature of a student’s record, telephone requests for transcripts will not be accepted. Written requests should be submitted to the PTHMS Registrar.
- Requests for transcripts initiated by persons or agencies other than the student or appropriate educational agencies will not be filled until the student has provided written authorization, unless required by law.
STUDENT SERVICES AND FACILITIES

ACCOMODATIONS THROUGH ACCESSIBLENU
Any student requesting accommodations related to a disability or other condition is required to register with AccessibleNU (agnes.megrane@northwestern.edu; 312-503-4042) and provide professors with an accommodation notification from AccessibleNU, preferably within the first two weeks of class. All information will remain confidential. Please visit the following link for more information: https://www.northwestern.edu/accessiblenu/students/reasonable-accommodations/index.html

AFTER HOURS ACCESS TO 7th and 8th Floors
The PTHMS facilities are available to students for class-related activities including but not limited to:

- quiet study space;
- group meetings;
- skill practice using PTHMS equipment (such as plinths and assistive devices); and,
- access to computers.

The following regulations are designed to protect the students while in the building after hours:

- Students enrolled with PTHMS are allowed to use the student lounges (room 700 and 880), rooms 800, 705, 710, and room 715, 24 hours a day, 7 days per week except on days when the building itself is closed for holidays. Students are expected to abide by all rules and regulations of the building, and COVID-19 guidelines.
- “After hours” is defined as between 5:30 p.m. and 7:30 a.m. Monday-Friday and Saturdays, Sundays, and Holidays. Please note: the heating/air conditioning system is turned off after 6 p.m. on weekdays, after 12 p.m. on Saturday and all day on Sunday, so dress accordingly.
- Students must use their 645 N. Michigan Ave. Building ID card to gain entry into the building. This card registers the student by name and provides PTHMS a record of use.
- Use of the 7th or 8th floor spaces after hours is for registered students only; no guests are permitted.
- Students must **never** use the 7th or 8th floor after hours **alone**.
- Students are asked to bring a cell phone with them.
- An ID code must be used to gain entry into the west wing of the building, rooms 705, 715, 710, 800 and student lounges (700 and 880). Students will be informed of the code number during orientation.
- Students must **always** lock the door behind them upon entering and always lock all doors when departing.
- Course Directors of each course will determine and announce the equipment that **cannot** be used unsupervised in each trimester.
- Students are not permitted to use the AV system in 800, 705, 715 or 710 until oriented to instructions for operation.
- Students must not test patients who are subjects for a synthesis project if the faculty advisor is not present. Students who are testing other PTHMS students as part of a synthesis project must get permission from the faculty preceptor to do so without faculty supervision after hours.

In the event that a student is injured after hours, regardless of whether emergency care is sought, he or she must complete the Incident Report form (available from the front office) by 10 a.m. of the next workday and give the form to the Associate Chair of Professional Education.

If equipment breaks while students are using it, they must notify the Course Director by 10 a.m. the next day. However, the student should take the responsibility to put a sign on the equipment so that other
students do not risk injury by trying to use it before the department is notified. If a computer or printer fails, students must follow the Computer Use Policies. Students are expected to maintain floors and keep them tidy and to return all equipment used.

Use of the 7th and 8th floors after hours is a privilege. Abuse of the privilege could result in a student being denied access to the floor or, depending on the severity of the abuse, could result in more severe disciplinary action. Ongoing misuse by a larger portion of the student body will result in loss of access to the 7th or 8th floors after hours for all students.

APPOINTMENTS WITH FACULTY
All faculty maintain their own schedules and office hours. To make an appointment, students can do one of the following:

- Communicate via e-mail.
- Leave a telephone message via voice mail

E-mail addresses may be obtained on the Internet on the NU home page via Directory. A list of PTHMS office and telephone numbers, as well as e-mail addresses, starts on page 3.

AUDIOVISUAL EQUIPMENT
- Equipment may not be removed from any of the classrooms or conference rooms on floors 7, 8, 10 or 11.
- Equipment is not available or intended for personal use.
- AV equipment must be returned in good condition. If equipment is damaged from negligent use, the student will be responsible for the cost of repair or replacement.
- AV equipment in Rooms 705, 710, 715 and 800 and cameras may only be used by students following instruction from and with the explicit permission of a faculty member.

COMMUNICATIONS

Posting Flyers and Distributing Materials
- Flyers and materials to be distributed by students must be approved prior to posting. Bring materials to staff at the front desk on the 11th floor.
- If approved, materials may be posted only in designated areas.
- If approved, materials announcing an event must be removed following the event.
- Material may not be posted on wooden doors, on black boards, directly on the walls, or to the front of glass cases.

Visitors
Visitors are permitted to attend lectures provided they have prior permission of the instructor. No visitors are permitted in the labs.

Cancellation of Classes
- In the rare event that classes are canceled due to severe weather or national emergency, the information will be posted on Northwestern University’s homepage; and delivered by mass voicemail, text messages, and emails.
COMPUTER RESOURCES ON 7TH and 8TH FLOOR

7th and 8th Floor Computers

PTHMS will make every effort to maintain a safe, functioning, and pleasant computing environment for students to pursue their academic work. Because replacing abused, stolen and damaged equipment is costly, we ask that students be responsible with their use of this computing environment.

1. The computers in Room 700 and 880 are available to PTHMS students, faculty and staff only. They should be sanitized before and after use.
2. We make every effort to provide reliable hardware and software, but we cannot guarantee trouble-free computing, so save often to prevent lost work.
3. Academic and educational use takes priority over recreational use of computing resources.
4. We cannot offer assistance with software. For information on the use of a software program, students can try the online help associated with the software.
5. **Students may not install any software on PTHMS computers.** This prohibition includes all executables such as chat software, any font programs, and all unlicensed software. **Personal files found on PTHMS computers may be deleted without warning.** If you need to have software installed, please contact the Associate Chair for Professional Education for approval. If deemed appropriate, the departmental computer support staff will perform the installation.
6. Students may not disconnect the computers or the printers from the power supply or the data ports.
7. **Students may not connect devices to any PTHMS computer.**
8. Students should scan USB flash drives for viruses. PTHMS provides anti-virus software on all departmental computers and updates this software frequently. However, no anti-virus product is perfect, so PTHMS is not responsible for damage caused to files by viruses. PTHMS staff can provide assistance if needed. The knowing creation or propagation of viruses on PTHMS machines is prohibited.
9. The Department will supply paper for the printer; students should request paper for refilling the printer from the front desk personnel on the 11th floor. Students may print only on standard 20# bond paper; some special papers can damage the printer. Despite our best attempts to keep the computer and printers in good working order and the printer stocked with paper, please do not rely on printing an assignment due early in the day on the 7th floor printers.
10. Food and drinks are **strictly prohibited** around the computers.
11. Students should report problems to the work-study students immediately who will report any problems to the Computer Software Engineer. Students should not leave problems for the next person to find. Students should help us by providing as much information as possible, especially:
   - What program(s) were in use?
   - What was the exact error message?
   - What was the student doing when the problem occurred (e.g., saving a file, using a certain feature, etc.)?
12. If students notice that a computer or printer is missing, they should report its absence to the 11th floor office immediately.

COUNSELING SERVICES

The demands of professional education, the impact of your school involvements on your personal relationships and adapting to a new environment can lead to emotional difficulties.

As you make major life transitions, you may feel the need for professional guidance in clarifying your choices, managing stress and anxiety, or addressing concerns about family, other relationships,
sexuality, or academic performance. Counseling and Psychological Services (CAPS) is Northwestern University's primary counseling resource for students. CAPS provides counseling to individuals and groups as well as workshops and outreach programs. CAPS has a team of highly qualified and experienced professionals including social workers, psychologists and psychiatrists, who are dedicated to helping students work through developmental needs, emotional difficulties and adjustments. The purpose of CAPS is to help students, faculty and administrators maximize the total learning experience of students at Northwestern.

CAPS has two locations: one in Evanston and one in Chicago. The Chicago office is located 5th Floor, Abbott Hall, 710 N. Lake Shore Drive. To make an appointment, call (847) 491-2151. For after hour emergencies, call (847) 491-8100. For more specific information visit their website (http://www.northwestern.edu/counseling/). In a crisis situation, CAPS can be reached on a 24/7 basis. Additional information regarding emergency crisis counseling is available at http://www.northwestern.edu/counseling/about-us/what-to-do-in-an-emergency/index.html

EQUIPMENT USE OUTSIDE OF CLASS, ANNUAL EQUIPMENT MAINTENANCE AND CALIBRATION

- Selected equipment may be used outside of class for study purposes. Permission of the instructor(s) is required.
- Equipment may not be removed from the 7th floor unless it is required as part of a class project.
- All equipment must be returned in good condition. If equipment is damaged, the student will be responsible for the cost of repair or replacement.
- PTHMS annually schedules a preventive maintenance check of equipment and calibration.

FACILITIES

PTHMS leases the seventh, part of the eighth and tenth, and eleventh floors at 645 North Michigan Avenue. Teaching facilities for the program are located on the seventh (7) and eighth (8) floors. Faculty and staff offices, research facilities, and conference rooms are located on the eighth (8), tenth (10) and eleventh (11) floor. Students may have classes scheduled in the conference rooms on 10 and 11. Please note the following "rules of the house":

- A code is needed to access all washrooms. Codes are required in commercial buildings by the City of Chicago. Students are informed of codes and any changes to them. They can also be obtained from the 11th floor receptionists.
- Stairwell doors between floors are typically kept locked. Exit is restricted to the first floor for security purposes without an access code. An access code will be distributed during orientation and will allow exit from the northwest stairwell on 7, 8, 10 and 11.
- Refrigerators and microwave ovens are available in rooms 700 and 880. Students are responsible for maintaining each of the lounges and keeping equipment in good condition. Students are responsible for cleaning the refrigerators, microwaves, washing dishes, and so forth.
- The vending machines located outside room 700 are leased by PTHMS. Any problems should be reported to staff on the 11th floor. There are additional vending machines located on the 5th floor that are maintained by the building and are not the responsibility of PTHMS.
- The building is a non-smoking building.
- The building is an active participant in the waste-recycling program of the City of Chicago. Bottles, cans and other items to be recycled are to be emptied before placing in trash containers.
- Alcoholic beverages are not allowed on the premises unless they are part of a social function approved by the Chair.
• Please respect the non PTHMS occupants of the 8th floor and do not congregate or study in the hallways or public spaces, especially outside Room 800.

FINANCING YOUR EDUCATION
The Department of Physical Therapy and Human Movement Sciences abides by the University financial regulations. Failure to read Financial Regulations for Students on the Chicago Campus does not excuse you from compliance with the rules and regulations included therein. Information regarding Student Financial Services may be obtained online at http://chicagofinancialaid.northwestern.edu/landing/physical_therapy.html/.

IDENTIFICATION CARDS
WildCARD: University ID Card
All students must obtain the WildCARD, a multipurpose identification card. For more information on the WildCARD please visit: /http://www.northwestern.edu/uservices/wildcard/
Students will need their WildCARD to:
• check out library materials;
• gain admittance to Anatomy Lab
• purchase tickets for NU athletic, music, and theatre performances;
• parking (if approved); and,
• shuttle bus between Chicago and Evanston campuses.
• attend department activities off the premises and during patient care or clinical education experiences.

Building Access Card
Students also will be issued a building access identification card to allow them access to and exit from the building after usual business hours and on weekends. A $10 replacement fee will be required for lost or stolen building access cards.

LIABILITY AND MALPRACTICE INSURANCE
As noted in Clinical Education, PTHMS funds University-sponsored insurance that covers students for all educational activities for which they are properly registered, including all scheduled clinical education activities for which registration, credit, and tuition payment occur at Northwestern University.

LOCKERS
* Lockers are located on the 7th floor.
* Each student has an assigned locker.
* To minimize incidents of loss, damage or theft, all belongings and valuables should be kept in the locker.
* If you forget your lock combination, contact Kisha Nelson, k-nelson@northwestern.edu for assistance.
* If damage is done to the locker that requires replacement, the student will bear the cost.
* If lockers are not emptied when requested by the PTHMS Registrar, the contents are subject to being discarded.

PARKING
Parking on campus is limited but is available to students based on need. For more information go to https://www.northwestern.edu/transportation-parking/chicago-parking/parking-garage-locations.html. To be eligible students must live outside a 3-mile radius of campus. In August of each year, eligible
students may submit an application to Kisha Nelson, k-nelson@northwestern.edu. All applications will be reviewed and recommendations will be made based on need. Car-pooling is encouraged. If approved for parking, students can purchase their permits at the General Services Parking Office in Abbott Hall. A valid driver's license and car registration must be presented at time of purchase.

Students are eligible to purchase evening and weekend parking permits, which allow parking from 5 p.m. to 8 a.m. on weekdays and 24 hours a day on weekends. For specifics go to: http://www.northwestern.edu/transportation-parking/chicago-parking/index.html

PEER TUTORING

Peer tutoring is an adjunct to classroom teaching in the applied science courses (anatomy, physiology, kinesiology, and neuroscience) that is available to all students. Following are guidelines to direct this program:

1. Any student who demonstrates a consistent pattern of marginal performance or failure in an exam or evaluative activity may request a peer tutor. The SPC, Course Director, or any faculty advisor may suggest that a student access a peer tutor.
2. Based on availability of tutors, peer tutoring may be offered to the entire class prior to first exams with the need for continued tutoring evaluated following the first exams. The goal of this activity would be to initiate tutoring early in the trimester.
3. THE STUDENT MUST INITIATE THE REQUEST FOR A TUTOR BY SUBMITTING AN ONLINE REQUEST. The link to the online request is available on the Canvas NUPT Orientation site.
4. The peer tutors and faculty will maintain confidentiality of students seeking tutoring.
5. An individual student may receive a maximum of six (6) hours of tutoring per week across subjects. An individual student may have more than one tutor based on availability and need.
6. All tutoring must be considered a professional learning interaction between students. The students involved may determine the location of the service.
7. The faculty, the tutor and the student will mutually determine termination of the need for tutoring. Guidelines for termination include:
   a. Improvement in grades.
   b. Weaknesses of the student as learner have been addressed.
   c. The student is responsible and able to handle coursework.
   d. Lack of follow through by student. (i.e. student repeatedly fails to keep pre-established appointments.)

Study Habit Recommendations

The following recommendations have been adapted from the: Northwestern University Feinberg School of Medicine Office of Student Programs and Professional Development and are offered for your information.

Regardless of your need to study as an undergrad, you will need to have disciplined study habits to succeed in this program. Following are suggestions for improving study habits. Utilize the skills that match your learning style.

General Skills
1. Use the SQ3R Method: Survey, Question, Read, Recite, Review
• **Survey** your lecture notes and chapters by reading topic headings, introductions and summaries. Identify the big picture from each lecture.

• **Question** the material you are reading by changing topic headings into questions that you must answer. Use the question for the topic of your concept maps. Write, draw or outline the major concepts and significant details of the topic.

• **Read** the material in your lecture notes/syllabi and slides with the chapters for clarification. Actively read by drawing your concept maps, writing out note cards for detailed information and talking out loud through the material.

• **Recite** the material after you have drawn the concept maps and note cards. Talk yourself through the concepts and details to make sure you understand. Create a mini-lecture.

• **Review** the material by writing a one to two-page summary of your concept maps and note cards. Your summary page should have enough detail and clarity that you could use this for a presentation to teach others the material. If you are unable to pull together a clear, concise and meaningful summary, refer back to the lecture notes, chapters, your lecturer and classmates to gain a better understanding of the topics.

2. Find a Location to Study

• Be comfortable, but not too comfortable. If you lose concentration frequently, it could be the location.

• Create some urgency in your study. Set time limits that you must meet.

• Replicate your exam situation. Complete a final review of all the material in your exam space using a time limit (e.g., block off three hours if it will be a three-hour exam). Focus on questioning yourself on the material. Try to complete this at least two days before the exam so you will have time to fill in the blanks.

• Avoid multi-tasking while studying, as this may negatively impact your learning.

3. Identify a study group of 1-3 students

• Study with peers after each of you have studied individually.

• Bring questions to the study group to challenge each other.

• Take turns questioning and listening to the others’ responses and explaining content.

**Exam Skills**

1. Before an exam

• "Practice" taking the exam trying to replicate exam conditions.

• The night before the exam, practice relaxation techniques before bed and in the morning as you are waking.

• Avoid people who are anxious about the exam. "Create space" between yourself and others who are taking the exam.

• Set a reasonable reward for yourself to look forward to for doing your best.

2. During an exam

• Read the answer stem carefully. Approach each response in a multiple-choice test as “true/false” and eliminate false responses.

• Budget your time. If you are spending too much time on an item, move on and return to it later.

• Do not change an original answer unless you are absolutely certain that the change is correct.
• Find methods to use during the exam: for example, taking a break for deep breathing to calm yourself; if you feel anxious, use this as a cue to relax.
• Focus your attention on the test - don't waste time worrying.
• Use positive self-talk throughout the exam.

3. After the exam
• Don't review the exam with others. This will add more anxiety as you wait for the exam results.
• Enjoy your reward knowing you did the best you could for this exam.
• Prepare for the next block, making note of what you did well for the test block just completed and what you need to change.

Life Skills
1. Self-Confidence
• Create positive self-talk. If you find yourself using negative and self-defeating self-talk, STOP! Reprogram yourself for success.
• Aim for the top, not for the median. Don't overprotect yourself by saying you'll be lucky/happy to get the median.
• Don't compare yourself to others. Find methods of learning, studying, test taking, self-reward and relaxing that work for YOU. Don't think about what others are doing - their methods may not work for you. Pay attention to what works for you and what doesn't. Always assess what you are doing.

2. Time Management
• Prepare for each block the day before it begins.
• Know what you plan on doing and when.
• Follow your study plan.
• Be organized.
• Plan for the unexpected - pad your time management.
• Your schedule should allow extra time for exam preparation.
• Be prepared to take the exam one to two days before the exam.

3. Healthy Diet
• Always eat breakfast, lunch and dinner - snacks in-between should be healthy.
• Five a day! Get your fruits and vegetables.
• Water-Water-Water. Keep yourself hydrated, at least 64 ounces a day. You should drink your water throughout the day - starting when you get up in the morning.
• Avoid caffeine in large quantities. If you drink a 16-oz. coffee every day, add 16 oz. of water to your suggested daily intake.
• Avoid alcohol in large quantities. No binge drinking, especially as a reward.

4. Exercise
• Make exercise a part of your time management plan - and do it!
• At least 30 minutes per day, five days a week.
• Cardiovascular exercise (walking, running, biking, hiking, swimming) is great for stress relief and to refocus a tired mind.
5. Sleep
   • What does your body need? If you need eight hours, get eight hours of sleep.
   • If you need a nap during the day set your limit to 20 minutes.
   • Set a bedtime and a waking time each day and stick to it. Try to keep the same hours on the weekends as you set during the week.
   • Don't forgo sleep the night before an exam.

6. Stress Management
   • Use relaxation techniques 20 minutes every day, seven days a week
   • Progressive Relaxation
   • Meditation
   • Yoga
   • Guided Imagery
   • Self-hypnosis
   • Prayer

Anatomy skills
1. Study early and often.
2. Study with a partner.
3. Draw things out, making study sheets.
4. Read notes and dissector BEFORE coming to class.
5. Attendance is expected in EVERY lab.
6. Share dissection time as much as possible.
7. Look at other cadavers in lab to appreciate variability in the human body.
8. The goal in lab is not to just finish the dissection but to learn the material.
9. Palpate structures on yourself and your classmates.
10. Ask questions only after you have explored potential answers for yourself.
11. YOU WILL SPEND MANY MORE HOURS IN THE GROSS LAB THAN ARE SCHEDULED

Available Resources
If you need help or support with your academics, don't wait too long before seeking assistance from the following:
1. Course unit faculty and Course Director
2. Faculty advisor
3. Peer student tutors
4. Student Progress Committee (SPC)
5. Counseling and Psychological Services (CAPS)
6. NUhelp and app

WRITING CRITERIA AND RESOURCES
In their professional careers, physical therapists are expected to write in a number of contexts. Therefore, the faculty expects that students will write appropriate correspondence, fill out forms, document patient care, and write papers when assigned. Papers typically are expected to be double-spaced, 12-point font, paginated, and to have one-inch margins. Unless otherwise specified, writing
style should follow the American Medical Association (AMA) *Manual of Style*, 10th ed., published by Williams & Wilkins (Baltimore, MD). The style manual is available online at: https://www.amamanualofstyle.com. In addition, faculty may include the following criteria when evaluating assignments or determining a course grade.

Criteria for Acceptable Writing in All Contexts
Students must:
- Write appropriately for the stated audience (e.g., use appropriate level of language; include only appropriate information).
- Organize information logically.
- Be concise yet precise.
- Express themselves clearly.
- Express themselves accurately.
- Use appropriate terminology (e.g., medical, lay, reimbursement system).
- Use correct spelling, punctuation and grammar (including using full sentences; avoiding run-on sentences; organizing writing in paragraphs with topic sentences, headings and appropriate transitions).
- Follow instructions regarding the format of the written assignment.
- Ensure that their work is neatly presented.
- Credit the work of others appropriately. When using information from resources for any assignment, you must provide a reference citation for each concept that you obtained from the source. You must also rephrase the author’s words rather than cut and paste the exact wording. Alternatively, you may choose to use the exact wording, but then the statement needs to be enclosed in quotation marks as well as referenced. Direct quotes are used sparingly, if at all.

Additional Criteria for Specific Contexts
- When writing letters, students must be persuasive when appropriate and use correct letter format.
- When documenting patient care, students must be able to use a variety of documentation systems (e.g., narrative and SOAP format).
- When writing papers, students must be able to develop their stated thesis and use transitions between major ideas.

Northwestern Resources for Writing
Northwestern University offers many resources for writing support. A list of them can be found at http://www.writingprogram.northwestern.edu/resources/index.html. One specific resource you may find helpful is the Writing Place. For more information go to http://www.writing.northwestern.edu

PHOTOCOPYING AND PRINTING
A copying, printing and document scanning machine, located in the Student Lounge on the 7th Floor, is available for student use.

Any publication that states or implies official endorsement by the Feinberg School of Medicine or the Department of Physical Therapy and Human Movement Sciences or uses their seals/logos must have prior approval in writing by the Associate Chair for Professional Education.

PHYSICAL THERAPY SERVICES
In accordance with Illinois State Law:
• Students have the prerogative to seek physical therapy treatment from any licensed physical therapist. Information and/or recommendations may be obtained from a member of the faculty.
• The Illinois Physical Therapy Practice Act allows for evaluation without a physician referral and allows for treatment without referral if the physical therapist has available a documented diagnosis. Each facility providing physical therapy services establishes its own policies regarding the need for a written referral.
• Faculty are prohibited, by University policy, from providing physical therapy within the Department of Physical Therapy and Human Movement premises.

SHUTTLE BUS
A shuttle between the Chicago and Evanston campuses runs Monday through Friday. For schedule information go to: http://www.northwestern.edu/uservices/transportation/shuttles/intercampus/intercampus.html. This bus is free with a NU Wildcard.

STUDENT HEALTH SERVICE
Health services include general medical care, routine women’s health care, allergy shots and immunizations, tuberculin (TB) testing, and access to specialty consultations, laboratory tests, x-rays, and prescription drugs. If you are a full-time student registered for the current trimester, you are eligible to use the Health Service as your primary health care provider. More information is available on the web at http://www-chicago.nuhs.northwestern.edu/Default.aspx. The student health facility on the Chicago Campus is located at 675 North St. Clair, Suite 18-200, Chicago, IL 60611.

Health Requirements for Registration
All new, full-time students must comply with State of Illinois, Northwestern University and PTHMS health, COVID-19 vaccine, and immunization requirements as described in the Student Health Service letter and on website http://www.northwestern.edu/healthservice-evanston/new-incoming-students/entrance-health-requirements/physical-therapy-students/index.html by July 1.

Insurance
All Physical Therapy students are required to carry health insurance. Before registering for the fall term, you are required to complete the Insurance Coverage Selection form and show proof of health insurance either through a private or family plan, or by purchasing the Northwestern plan. The cost varies depending on the plan chosen. If you fail to complete the Insurance Coverage Selection form, you will be charged a substantial late fee and will not be allowed to register for classes. For information about the Northwestern plan, please refer to the visit http://www.northwestern.edu/student-insurance/.

TRANSCRIPTS AND DIPLOMAS
All requests for transcripts should be made in writing to the PTHMS Registrar, Kisha Nelson. There is a fee of $5 for each transcript released after the first one. At the time of graduation, students will provide the name desired on the diploma. Replacement diplomas can be requested for a fee. PTHMS will not change the name on the diploma; the name on the replacement diploma will be the same as the name on the original diploma.
STUDENT RECOGNITION

DEPARTMENTAL AWARDS
The Department of Physical Therapy and Human Movement Sciences sponsors three awards for deserving members of the graduating class.

Leadership Award
This award will be given to a member or members of the graduating class who demonstrate(s) superior leadership abilities. More than one student may qualify for this award annually. If there is no outstanding candidate, the award may not be given.

Criteria
Students receiving this award must have a minimum professional GPA of 3.0 and show potential for leadership in the profession through demonstration of many or all of the following activities:
- Exceptional organization of and participation in classroom activities;
- Substantial participation in physical therapy research;
- Organization of or substantial participation in extracurricular activities;
- Substantial participation in American Physical Therapy Association (APTA) activities.

Procedure
- The Chair of the Student Awards Committee will call for the nomination of candidates from the faculty and 2nd-year students during Spring Trimester of Year 2.
- The ACPE will appoint the faculty members and designate the chair of the committee annually. The committee will consist of two core faculty members and 2 student members from among those members of the 3rd-year student body not being considered for the award.
- The committee will solicit information about each candidate’s representation of the core values of a class leader in an objective manner. Solicited information must address the award criteria, detailing the reasons why the student(s) deserves the award.
- The award(s) will be announced during the final class meeting prior to graduation rehearsal, and the recipient(s) will be recognized at graduation.

Community Engagement Award
This award will be given to a member or members of the graduating class who demonstrate(s) superior commitment to community health in the Chicagoland area. Because Northwestern University Feinberg School of Medicine is committed to serving the needs of Chicagoland, and the majority of the students’ education is completed during their time in Chicago, this award will focus on student contributions to serving the needs of the community in which they have the greatest access. More than one student may qualify for this award annually. If there is no outstanding candidate, the award may not be given.

Criteria
Students receiving this award must demonstrate commitment to the health and wellness of a local community through the following:
- Sustained work through a community-based or faith-based organization serving the Chicagoland area
- Demonstration that the student’s efforts have made an impact on the health and wellness of the community
• The hours of service have gone above and beyond those required for the Demonstration of Professional Development (DPD)

Procedure

• The Chair of Student Awards Committee will call for the nomination of candidates during Spring Trimester, Year 2
• Faculty, 2nd-year students and community leaders may nominate a candidate, as well as any 2nd-year student may nominate themselves.
• The nominator will write a supportive letter detailing the work the student has done and will provide contact information from the organization for whom the student worked.
• A Community Engagement Award Committee consisting of 2 core faculty and two 3rd-year students will read all nomination letters and make a decision regarding final recipient(s) of the award. This committee may solicit more information from the nominated student or the organization, as needed, in order to make final decisions.
• The award will be announced at the final class meeting prior to graduation rehearsal, and the recipient(s) will be recognized at graduation.

Clinical Education Award
This award will be given to a member or members of the graduating class who demonstrate(s) superior clinical abilities. More than one student may qualify for this award annually. If there is no outstanding candidate, the award may not be given.

Criteria
Students receiving this award must show excellence in clinical education based on all of the following accomplishments.
• Demonstrates excellent clinical skills by consistently illustrating insight and performance at a level above that expected of an entry-level physical therapist.
• Exhibits outstanding initiative, professional behaviors and responsibility.
• Takes action on opportunities for professional growth.
• Enhances the facility’s clinical services and promotes growth within the Physical Therapy Department by completing activities beyond patient management.
• Seeks and utilizes sound scientific evidence for decision-making process in providing patient care.

Procedure
• The Assistant Chair of Clinical Education (ACCE) will announce the award to the clinical faculty, describing the award and criteria and soliciting nominations.
• The facility will submit a letter of support for the candidate, detailing the reasons why the candidate deserves the award. Students may be nominated based on experiences during either Clinical Experience III or Clinical Experience IV.
• Letters must be submitted to the ACCE at least 4 weeks prior to graduation.
• A committee consisting of the ACCE, the clinical faculty members of the Curriculum Committee and one academic faculty member selected by the Associate Chair for Professional Education, will make final selections. The selection committee may refer back to the reports of student performance for clarification.
• The award(s) will be announced at graduation, and the recipient(s) will be recognized at graduation.
NATIONAL AWARDS

The National Physical Therapy Student Honor Society is an organization established by the American Council of Academic Physical Therapy (ACAPT) to recognize current Doctor of Physical Therapy students who demonstrate excellence, integrity, and professionalism in areas of academic achievement, leadership, and service. As a member of the Society, individuals are expected to uphold and implement the core values of the physical therapy profession. Founded in 2018, Doctor of Physical Therapy students will be inducted into the Society who demonstrate excellence in all membership criteria, and who were individually selected by representatives from their respective ACAPT member institution. The Society represents individuals who exemplify outstanding traits in leadership, research, and service to society characterized by consistent demonstration of strong moral character and ethics. PTHMS award recipients will be recognized at graduation. Link to information about the Student Honor Society - https://www.acapt.org/about/national-student-honor-society

SCHOLARSHIPS

The following $2500 scholarships are available through PTHMS.

Janet L. Hemzacek Memorial Scholarship
This fund was established in 1992 to honor the memory of Janet L. Hemzacek, a 1982 physical therapy graduate. The scholarship was established by Janet’s family and is intended to recognize Northwestern University Physical Therapy students who demonstrate “a sense of integrity and humanity, and an involvement with the community through volunteer activity.” One scholarship of $2500 may be awarded annually.

Eligibility
Applicants must:
1. Be enrolled in the first year of the Doctor of Physical Therapy (DPT) program at Northwestern University and be in good academic standing;
2. Provide evidence of community service. (Volunteer services in physical therapy or other health care intended to prepare for admission into a physical therapy education program will be excluded.); and,
3. Demonstrate financial need, as determined by the university Office of Financial Aid.

Elizabeth Wood/Dorothy Voss Physical Therapy Scholarship
This fund was established in 1987 by Wendy Martin Lageschulte (NUPT 1964) and her husband to honor Elizabeth C. Wood, PT, MS and Dorothy E. Voss, PT for their many contributions to the physical therapy education program at Northwestern and to the profession. Ms. Wood joined the faculty in 1950 and served as Director of Programs in Physical Therapy from 1952 – 1972. Ms. Voss was a faculty member from 1963 – 1975 and was known internationally for her work in the area of therapeutic exercise. The purpose of this award is to recognize students who reflect their ideals of professionalism and high standards and who demonstrate the potential for contributing significantly to the profession. Four scholarships of $2500 each may be awarded annually.

Eligibility
Applicants must:
1. Be enrolled in the second year of the Doctor of Physical Therapy (DPT) program at Northwestern University and be in good academic standing.
2. Demonstrate professionalism by their behavior in the academic and/or clinical environment.

Sally C. Edelsberg Scholarship in Physical Therapy
This scholarship was established in 1999 to honor Sally C. Edelsberg, PT, MS, FAPTA, Director of Programs in Physical Therapy from 1972 – 1999. During her tenure as Director, she demonstrated superior leadership in the physical therapy profession. She is noted for educational leadership and was dedicated to the goal of providing students with the opportunity for an education in physical therapy at Northwestern, regardless of financial circumstances. The scholarship is intended to recognize students who demonstrate leadership potential. Recipients of the scholarship are known as Edelsberg Scholars. One scholarship of $2500 may be awarded annually.

Eligibility
Applicants must:
1. Be enrolled in the second year of the Doctor of Physical Therapy (DPT) program at Northwestern University;
2. Provide evidence of leadership through substantial participation in two or more of the following:
   a. American Physical Therapy Association (APTA) activities;
   b. community service; and,
   c. physical therapy research activities sponsored by the Department of Physical Therapy and Human Movement Sciences.

The PTHMS scholarship committee reviews applications for these scholarships and makes recommendations of recipients. The committee consists of three faculty members appointed by the Chair of the Department. Members serve a term of two years. The committee is responsible for:
• keeping application materials current;
• making applications and procedures available to eligible students by the specified deadlines;
• reviewing applications;
• reviewing letters of recommendation that applicants are required to request; and,
• recommending recipients to the Associate Chair for Professional Education.
SAFETY AND SECURITY

Safety and Security Overview
This section presents an overview of the general emergency procedures for students, staff and faculty of the Department of PTHMS, located at the 645 N. Michigan Building. Read these procedures and follow them in the event of an emergency.

If you see a deficiency in our internal security procedures, feel free to arrange a meeting with a member of the department up to and including the Chair. Describe the deficiency that you would like to improve. The Chair will value your input.

General COVID-19 Health Considerations

1. Unvaccinated students, faculty and staff will be expected to complete a Symptom Tracker [Link](#) each day prior to arriving on campus or attending in-person activities on campus.
2. Students, faculty and staff are required to wear a mask at all times while in the 645 N. Michigan Avenue unless notified with changes in guidelines.
3. All members of the Northwestern DPT community should regularly wash their hands with soap and water for at least 20 seconds. If washing hands is not an option, please use hand sanitizer. Each DPT floor within the 645 building is furnished with several hand sanitizer stations.
4. To help with the efforts of decreasing the spread of COVID-19, all internal and external stakeholders are encouraged to minimize social contacts when possible.
5. If you experience any symptoms, exposure or positivity related to COVID-19, please report this to the Associate Chair of Professional Education (ACPE) and Assistant Chair of Student Affairs, stay home and discuss medical follow-up, quarantine and/or self-isolation options with the ACPE.

Please refer to PTHMS email messaging, posted documents, and the Feinberg School of Medicine website for up-to-date COVID-19 guidelines. [FSM COVID](#) Northwestern University continues to update university-wide guidance on an ongoing basis.

Risks and Precautions in Labs and Clinical Activities

DPT students participate in laboratory and clinical activities that have certain inherent risks associated with them. Among these risks are joint and soft tissue injury as a result of practicing therapeutic procedures and working with therapeutic equipment, exposure to hazardous materials in the Gross Anatomy laboratory, incisions incurred while dissecting or debriding wounds, and contracting communicable diseases from patients, co-workers, faculty, or classmates. The PTHMS professional education program considers the safety of students, faculty, staff and patients to be crucial and offers informational sessions regarding risk avoidance. Hand sanitizer is available in all classrooms. All students and faculty are expected to use it prior to any real or simulated patient encounters.

Faculty supervision provided in the classroom setting when new skills are being learned and practiced is sufficient to decrease the likelihood of injury. Training on universal precautions to avoid communicable diseases is performed annually. Classes in which therapeutic procedures are taught include specific instructions on methods to avoid injury. Methods to prevent contact with and dispose of hazardous materials are discussed and enforced in Gross Anatomy. First aid kits are available in designated locations (see the Other Medical Emergencies Section below) and in the Gross Anatomy laboratory. Automatic external defibrillators and supplemental oxygen are available on the 7th, 8th, 10th and 11th floors of the 645 N. Michigan Building. Emergency Services are available at Northwestern Memorial
Hospital. Students are encouraged to seek emergency care at the closest medical facility and are required to inform the school of the incident within 24 hours.

Other Medical Emergencies
In the event of a Medical Emergency, it is assumed that all faculty members and students possess current Basic Life Support certification. Emergency Stations, located strategically on the 7th, 8th, 10th and 11th floors (see Sections below), contain first aid kits, supplemental oxygen, and automated external defibrillators. First responders should:

- assess the situation
- activate the Emergency Medical System (call 911)
- call the Security Desk at 312-943-4549, provide Security personnel with the following information:
  ✓ your name
  ✓ your location
  ✓ pertinent details of the situation
  ✓ injured person’s name, if known
- render assistance in accordance with BLS training

Internal Security of the Building

Swipe In/Out
Building management maintains security at the entrance to the 645 building.

After hours and on weekends be prepared to identify yourself to the security guard. Only personnel who have a building access card will be allowed entry on weekdays between 5:30 pm and 7:30 am, all day on Saturdays, Sundays and holidays. Please be polite and courteous with all building staff during working and after hours.

During restricted or non-working hours, you will be required to swipe your white building access card at the front desk when entering or exiting the building. Building management also provides a free-roaming security guard you may see periodically on PTHMS floors. During restricted times, your white building access card will also be required to operate the elevators. There is a black box with a red light, under the floor selection panel. Swipe your access card in front of the light and then select your floor. Please note, during restricted times, students will only be able to access the 7th and 8th floors via the elevator. Due to fire codes, restrictions will never apply to the ground floor. You can always select ground floor/lobby in the elevator without swiping your card.

In addition to the security provided by the management of the building, our security involves our own watchfulness.

Location of Emergency Stations
Boxes containing emergency identification vests, room search tags, an automatic defibrillator, supplemental oxygen, and other emergency supplies are located on the 11th Floor at:

- the hallway corner approximately 50 feet from the west end of the northern east-west corridor
- the hallway corner across from the freight elevator in the southern east-west corridor

![Diagram of emergency stations and stairwells]

on the 7th Floor at:
- the hallway corner by Room 710 and the 705D Storage Room in the eastern north-south corridor
- the hallway corner by Room 715 in the western north-south corridor

![Diagram of emergency stations and stairwells]

on the 8th Floor at:
- Fire extinguishers are located in Rooms 800, 801 Lab, 810 office, 850 north of breakroom, 880 Student Lounge, and hall outside 803.
- Automatic defibrillator is located in Room 800.

on the 10th Floor at:
- Automatic defibrillator is located in Room 1025 (northeast corner office).
In the event of an emergency alarm situation, all personnel should follow the instructions given over the emergency audio system, as appropriate. In a non-evacuation emergency (short, repetitive horn blasts), personnel should proceed to the emergency location and assist as needed and pertinent to the situation. In an evacuation emergency (continuous, steady horn blast), all personnel should search their immediate surroundings and assist as instructed by; turning off lighting and electrical devices in the immediate area; unlocking and closing doors; proceeding to the nearest emergency station to assume leadership responsibilities as needed or follow instructions for an orderly evacuation.

**Evacuation**
What will happen if a need to evacuate for fire or another emergency arises?

When situations arise that require the 645 building to be evacuated, alarms will sound.

If a situation arises that necessitates a building evacuation, or if authorized safety and security personnel instruct tenants to leave the 645 building, PTHMS faculty, staff, and students initiating or receiving the evacuation order should proceed to the nearest Emergency Station and sound the audible alarm (continuous, steady horn blast). Then, they should assume the responsibilities of a Floor Captain, as described below.

When an evacuation alarm sounds or authorized personnel instruct tenants to evacuate, all faculty, staff, students, and visitors will be directed to exit the building in a controlled manner via the stairwells – DO NOT USE THE ELEVATORS. The two stairwells are located adjacent to the men’s restroom and the freight elevator on all floors (see diagrams, above). Classroom, office, and laboratory doors should be closed but not locked as you leave.

**Assistance in Emergency**
The building maintains a list of individuals that need assistance in the case of emergency. For example, if you have a physical or medical condition that might prevent you from going down 11 flights of stairs quickly, being on the list alerts emergency responders to your needs. If you have any reason to be added to this list, please contact Kisha Nelson (k-nelson@northwestern.edu, 312-503-4873).

**Persons with locomotor disabilities** should be assisted to the nearest stairwell; the Searcher from the area in which the person with a disability was working will designate helpers to assist them into the stairwell. Movement beyond the stairwell will be by fire department or other professional emergency personnel.

**Floor Captain, Stairwell Monitor, and Searcher Responsibilities**

**Floor Captain**
The Floor Captain is the first person to arrive at an Emergency Station (this will generally be the initiator of the evacuation alarm or the first responder to an evacuation alarm). There will be two (2) Floor Captains on each floor – one for North-West stairwell; one for South-East stairwell. The Floor Captain should establish that Stairwell Monitors and Searchers are assigned and identifiable, (assigning substitutions when necessary). The Floor Captain will be the last person to leave the floor, and only after being assured by the Searchers that all offices, classrooms, lavatories, and labs have been checked and cleared.

**Stairwell Monitor**
Stairwell Monitors shall be the second person(s) to arrive at the Emergency Station after the
alarm has been sounded. There should be two (2) Stairwell Monitors on each floor – one for North-West stairwell; one for South-East stairwell. Stairwell Monitors should don the green vest and proceed to the stairwell exit where they will assure that all exiting personnel are directed down the stairs to the lobby exit. If the stairwell is unsafe, the Stairwell Monitor should direct all exiting personnel to the opposite stairwell. The Stairwell Monitor will render such assistance as may be needed to assure an orderly evacuation. Upon being informed by the Searcher that the corridor is cleared, the Stairwell Monitor and the Searcher should report to the Floor Captain before exiting the floor and rendering such assistance to persons in the stairwell as may be necessary.

Searcher
Searchers shall be the third person(s) to arrive at the Emergency Station after the alarm has been sounded. There should be two (2) Searchers on each floor – one for the North and West corridors; one for the South and East corridors. Searchers should don the orange vest and take the fluorescent orange plastic markers from the cabinet. The Searcher will then begin an orderly search of each classroom, laboratory, or office in the corridor(s) for which he/she is responsible to ensure that each is clear of personnel. The Searcher will direct all personnel to the nearest stairwell, where the Stairwell Monitor (green vest) will lend such assistance as may be necessary. After checking each room, including the restrooms, visually and verbally, the Searcher will place a fluorescent orange plastic marker on the outside of the door about 2 feet from the ground and close each door, to show emergency personnel that no one is inside. If a tag is already hanging on the outside of a door, only a verbal check needs to be made.

Upon clearing his/her corridor, the Searcher should accompany the Stairwell Monitor and report to the Floor Captain. With the Floor Captain’s acknowledgement, the Searcher should exit the floor with the Stairwell Monitor and inform the building security personnel at the lobby if any person is on the stairwell landing or in a specific room.

If someone is unable to move out of a space, the Searcher should designate helpers to assist the person into the stairwell landing. From there professional emergency personnel will assist her/him out of the building. If a person cannot be assisted to the stairwell landing, the Searcher should tell the Floor Captain after completing the search and before exiting the floor. The Searcher should report the person’s location and need for assistance to the building security personnel in first floor the lobby.

Accounting for Personnel
Clearing the floor by the Searchers, Captains, and Stairwell Monitors is our assurance that no personnel are left in the building. Better accounting than this is not possible, as student attendance at lectures is not monitored and faculty and staff move in and out of the building as part of their daily duties.

Re-assembly of Personnel
After exiting the building, personnel should be aware of potential danger around them and choose appropriate routes to avoid it. Pay attention to instructions from professional Security or Emergency Officers. In the absence of those instructions, personnel should not congregate near the building, rather they should re-assemble at the corner of Erie and St. Clair Streets. In a case of severe emergency, a Department representative will be at that location at even hours during daylight hours of the day of the event.
Other threats to personal safety:
Please see http://www.northwestern.edu/ep/emergency/index.html for an overview of Northwestern’s policy and procedures on emergency preparedness in the case of natural hazards, technological/infrastructure disruptions, terrorist incidents or human-caused events and hazards.
**Addendum - Official policy on ExamSoft/Examplify testing at NUPT**

The following rules and guidelines are in place to ensure that students have an efficient, fair and positive experience on exam days.

**Student responsibility BEFORE an ExamSoft/Examplify Examination**

1. Students will receive an exam download notification in Examplify approximately two business days prior to a scheduled exam. If the exam is on Monday or Tuesday, the invitation will be sent out the Friday before. An email will be generated via the Examplify system once the exam is ready for download. It is your responsibility to download that exam in Examplify at least 24 hours prior to the scheduled exam.

2. If you are not receiving these notifications or having difficulty downloading an exam contact your Course Director, Program Administrator, Jonathan Webb (jonathan.webb@northwestern.edu) or Senior Program Coordinator, Kisha Nelson (knelson@northwestern.edu), or ExamSoft help for assistance.

3. No downloads are allowed in the exam room.

4. Students should run the official “Mock” quiz that you will be invited to during your in-class orientation session to practice using Examplify several times prior to the first exam day. Review the ExamSoft policies and procedures, as well as the orientation handout, and take care of technical issues and troubleshooting issues through ExamSoft customer service before coming to the test on-site or remotely. Their phone number is 866.429.8889 and e-mail is support@examsoft.com.

5. If there is an iPad issue, it is the student’s responsibility to address this before coming to the assigned exam room. If the student’s iPad is not working, contact the Course Director or Jonathan Webb prior to the exam to make other arrangements.

Please take the normal steps of shutting down all of your apps and restarting your iPad before each assessment. Try to only have Examplify open from 15 minutes before the start time until the end of each of the exams.

**Student responsibility DURING an ExamSoft/Examplify Examination in person.**

1. Students should arrive for an exam at the exam/class start time. For both in-person and remote exams, students will place their smartwatches, iPods, backpacks, jackets, music players, purses, food, notes, hats, etc. in their locker or at an open area of the classroom or remote testing environment. For in person exams, cell phones or smartwatches MUST be turned off and left in your backpack unless they are being used during the assessment for the purpose of joining a Zoom session. For on-site exams, they can be left in a student locker or on the podium with the Proctor in the exam room.

2. Students needing accommodations must report to their specifically assigned exam room at the exam/class start time.
Cell phones and smartwatches are strictly prohibited. If a student is discovered with a cell phone or smartwatch, he/she will be escorted out of the room, receive a zero for that assessment and be reported to the Associate Chair for Professional Education as this is a breach of academic integrity.

a. Cell phones are only permitted during a remote written, practical or oral exam if they are being used to broadcast the student over Zoom.

3. For in-person exams, all students must be in their seats, with iPads turned on, set up and ready to start by the designated exam time. For remote exams, students will be assigned an exam proctor. This person will invite them to a Zoom session for remote proctoring. A waiting room will be used. Students are requested to wait patiently until the assigned time when they will be allowed into the Zoom space.

4. Students will be notified if exams are given in one classroom or if they will be divided into multiple rooms. Once students are seated in the exam room, they should launch their exam and navigate to the begin screen and wait for instruction from the Proctor indicating that it is okay to begin.

5. Late arrivals (those arriving after the class starts or the exam begins) will result in a notification to the Student Progress Committee for professionalism concerning punctuality. No additional time will be allowed for exam completion beyond the announced end time. Extenuating circumstances will be considered in the event of emergencies or inclement weather.

6. Students are not permitted to have anything open on their iPads in the exam room except the testing software, Examplify. Before the start of a remote exam, students will be required to share their screen to verify that no other apps or sites are being referred to. For both in-person and remote exams, the following items are allowed: iPad, charger, earplugs, keyboard, stylus/Apple pencil, pen and pencil.

7. At the instructor’s discretion, one blank sheet of paper will be assigned to each student. Each student must put their full name and four digit ID# on the paper and turn it in at the conclusion of the exam. For remote exams, students will be asked to rip up or shred the note paper before logging out of the Zoom session. Failure to turn in the sheet or refusal to rip up or shred the note page may result in a loss of points. For on-site exams, the Proctor will provide paper for notes and any other handouts related to the exam and reveal the password once desks are cleared and students are seated.

8. Students must upload their exam file prior to leaving the classroom or Zoom session. Students must show the exam Proctor the green or blue checkmark signifying a successful exam upload and hand in their sheet of paper or shred it before exiting the exam room. Successful upload of the exam is the student’s responsibility.

9. If students are unsure if their file uploaded, they may go to the examsoft.com/Northwestern portal and check the exam history for confirmation. If a student leaves the classroom without uploading or loses their exam file for any reason, they will receive a zero for that exam. Exams/quizzes uploaded after the upload deadline will not be accepted.

We encourage all students to use the restroom prior to the start of the exam. Should you need to take a break from the exam to go to the restroom, you will be permitted to do so one student at a time. Students
shall turn in his/her iPad to the Proctor before leaving the room and pick this up upon return. No additional exam time will be given for this break. For remote exams, students will be permitted one bathroom break. Chat your proctor before leaving your exam space. We ask that bathroom breaks not be excessive in the length of time spent out of your test area. **DO NOT** turn off the video while away from the testing area.

If an exam is remotely administered and proctored:

Students will receive an invitation from their assigned proctor. They will log onto Zoom and wait in the waiting room until they are ushered in. Students will be asked to share their device’s screen, complete an environment check – showing the testing area, display their scratch paper and have the go ahead, they will follow all the normal prompts in the system to access the exam files.

Students should contact their Exam Proctor right away if they encounter any issues accessing either the written exam file or practical exam file or if something out of the ordinary happens during the assessments.

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**Please adhere to the following:**

1. Before entering Zoom, students should set up their testing area so it is well lit and they and their iPad and workspace are visible. If the work area is not well lit, the keyboard or their scratch paper are not visible, the Exam Proctor will chat a request to make adjustments.
2. Please arrive in the waiting room at the time the proctor designates in their e-mail.
3. Students will be muted when they enter the session so any noise in their space will not be broadcast to the group. Please **do not** take yourself off of mute. All communication should be done via chat unless it needs to be escalated to text or a phone call.
4. The chat feature will be limited to sending messages directly to the exam proctor.
5. Video feeds should remain on during the entire exam.
6. Individual issues logging into the system or related to time given to complete the exam will be addressed by your proctor and/or the supporting team.
7. Please be ready to display the blank sheet or sheets of scratch paper used before and after the start of the exam. The exam proctor will ask students to show these at the start of the session and ask them to show and then shred them at the end of the session over Zoom.
8. If students choose to have water or a snack, they should be visible and in a clear bottle, glass or container.
9. Do not wear hats.

**Additional notes:**

1. The Exam Proctor **IS NOT ALLOWED** to answer any exam content related questions.
2. One bathroom break is allowed. Chat your proctor before leaving the exam space. We ask that bathroom breaks not be excessive in the length of time spent out of your test area. **DO NOT** turn off the video while away from the testing area.

At the end of both of the exams, please display the “Successfully Uploaded” screen and scratch paper. **Please be patient as other students may be wrapping up their exam around the same time. Everyone will be checked before exiting Zoom.** Once the student has confirmation that the Proctor has seen their screen and paper, they will tear up the scratch paper and then log out of the Zoom room.

Finally, after exiting Zoom, please forward the upload confirmation e-mails you receive to Jonathan Webb at jonathan.webb@northwestern.edu.
Student responsibility DURING an ExamSoft Examination REVIEW

1. Students should arrive for a review session at the start time and put their backpacks, jackets, iPod/music players, purses, notes, papers, hats, etc. in their locker or at an open area of the room. If you bring a cell phone or smartwatch to the exam review room it MUST be turned off and left in your backpack, locker or the designated receptacle in the exam room.

2. **Cell phones and smartwatches are strictly prohibited.** If a student is discovered using a cell phone or smartwatch to violate exam security (e.g. texting the passcode out of the room to a classmate), he/she will be escorted out of the room, reported to the ACPE for a breach of academic integrity, and the Disciplinary Committee would decide action.

3. All students must be in their seats, with iPads turned on, set up and ready to start by the designated review time. As soon as students enter the exam room, they should launch their exam review and navigate to the begin screen and wait for instruction from the Proctor indicating that it is okay to begin. The Proctor (generally a staff member versus a faculty member) will provide the password once the exam is ready to review.

4. There may be instances when a hard copy of a student’s personal exam report is printed and distributed during an exam review. In these cases, students would be called up either individually or in groups to collect their reports. They would use the allotted time (generally 30 minutes) to review.

5. Late arrivals (those arriving after the review start time) will only have access to the review until the designated pre-set complete time. Reviews generally last 30 minutes.

6. Students must show the Proctor a “green” screen verifying that they have submitted and exited the review or turn in their printed exam report before leaving the room. For in-person reviews using hard copies of exam reports, once students have completed their review, the hard copy report will be returned to the proctor. Students would then leave the review area.

7. Students are not permitted to have anything open on their iPads in the exam room except the testing software, Examplify. They may only bring their iPad, charger, earplugs and pencil, pen, keyboard and/or stylus/Apple pencil.

8. Students are able to discuss questions with their peers.

9. Notes can only be taken on a standardized form that will be distributed at each session. Each student must complete the information requested on the form and turn it in at the conclusion of the exam review. Students cannot share the passcode after exiting the review session. Failure to do so will result in the Associate Chair of Professional Education being notified. This is an academic integrity issue.

10. The Course Director/team will manage responses to questions about the exam.
iPad policies

Specialized cases/keyboards/attachments for iPads are permitted. Students must ensure that their cases/keyboards/attachments contain no notes or materials to aid them during in person or remote exams. Possession of these materials during any exam will result in referral to SPC.

Acknowledgement of ExamSoft Policy Guidelines

I have attended my scheduled ExamSoft orientation session and have reviewed the NUPTHMS ExamSoft Policy and Procedures document.

Date_________________ Signature____________________________________
It is the policy of Northwestern University not to discriminate against any individual on the basis of race, color, religion, national origin, sex, sexual orientation, gender identity, gender expression, parental status, marital status, age, disability, citizenship or veteran status, or any other protected class in matters of admissions, employment, housing or services, or in the educational programs or activities it operates, in accordance with civil rights legislation and University commitment. Any alleged violations of this policy or questions regarding the law with respect to nondiscrimination should be directed to the Director of Equal Opportunity, Affirmative Action, and Disability Services, 720 University Place, Evanston, Illinois 60208-1147, phone 847/491-7458; Office of the Provost, Rebecca Crown Center, Evanston, Illinois 60208-1101, phone 847/491-5117.

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