1. General Information
WELCOME

The faculty and staff of the Doctor of Physical Therapy Program, Division of Physical Therapy, Department of Rehabilitation Medicine welcomes each of you to Emory University and Atlanta. We are pleased that you have chosen to become physical therapists with us and we are excited about our opportunity to provide you with the best education possible.

You are coming to Emory at an unprecedented time for the School of Medicine and the University community as a whole. A common goal has been set for us all to provide national leadership in clinical care. The Woodruff Health Sciences Center, which houses all components at Emory University responsible for education of health professionals, research affecting health and illness, patient care, and policies for prevention and treatment of disease, has five new Centers of Excellence designed to promote a patient-focused service culture as well as developing collaborations between clinicians and researchers that will benefit patients. We have a new Global Health Institute focused on prevention and cure of diseases in our country and in all countries and the Center for Health Discovery and Well-Being has opened on the Emory Midtown Campus. The emphasis on clinical care, health, prevention and rehabilitation is echoed in our own changes with the offering of dual degree opportunities – DPT/MBA and the DPT/MPH, new electives on the business aspects of health, and sports medicine, and the integration of information on wellness, preventive health and risk screens into our curriculum.

During your three years at Emory, you will have the opportunity for a wide range of experiences in the classroom, clinic, campus, and community. We hope that you will view each of these experiences as an opportunity for growth as your increase skills evolve and you work toward attaining your goal of becoming a competent physical therapist. Our job will be to create an environment that will foster your inquisitiveness, knowledge, leadership, and expertise; an environment in which you will develop the tools necessary to use those traits all your lives. Physical Therapy is a dynamic profession and your preparation here at Emory will help you meet those challenges for your entire professional career.

The next three years will be busy ones. Your lives will seem filled with classes, studying, papers, exams and clinic activities. We encourage you to balance these activities with others that maintain your health, allow you to relax and have fun and enable you to contribute to the world around you. Each of us is here to help you whenever we can so please do not hesitate to ask for help or guidance. Enjoy the three years ahead of you.

“Our unique opportunity is to become an unparalleled center of learning and discovery, community and care: the destination choice for those seeking and for those practicing, learning, and pioneering health care at its best.”

Emory University Vision 2012
Orientation Schedule for the Class of 2012-2015
Wednesday June 6th, 2012

WHSCAB

8:00 – 8:30 AM Sign in and Welcome Breakfast

8:30 – 12:00 PM Orientation to Physical Therapy – Division Faculty

12:00 – 2:00 PM Lunch (ID, Parking and class pictures)

2:00 – 3:00 PM Career Services - Dr. Paul Fowler, Executive Director, Career Services

3:00 – 4:00 PM IT Orientation – Kenneth Lester
Orientation Schedule for the Class of 2012-2015
Thursday June 7th, 2012

WHSCAB

8:30 – 9:00 AM  Student Affairs – **Danny Thompson**

9:00 – 9:30 AM  Financial Aid – **Mike Behler**

9:30 – 10:00 AM Campus Life – **Michael Shutt**
Assistant Dean for Campus Life and Director of LGBT Life

10:00 – 10:30 AM **Break**

10:30 – 11:00 AM Student Health Issues – **Dr. Michael Huey**

11:00 – 11:30 AM Stress Management – **D. Thandi Chase**

11:30 – 12:00 PM Health Education and Promotion – **Marc Cordon, MPH**
Associate Director

12:00 – 1:30 PM  **Lunch and Tour with DPT IIs**

1:30 – 2:30 PM  Orientation to the DPT Program by the DPT IIs
Orientation Schedule for the Class of 2012-2015
Friday June 8\textsuperscript{th}, 2012

9:00 – 10:00 AM OSHA Training – Meagan Parrott

10:00 – 11:00 AM HIPAA Compliance – Beth Davis, PT, DPT, MBA

11:00 AM – onwards Social gathering with DPT II class
CONTACT INFORMATION

School address:
Emory University School of Medicine
Department of Rehabilitation Medicine
Division of Physical Therapy
1462 Clifton Road, N.E., Suite 312
Atlanta, GA 30322

Dial only the last 5 digits of the following numbers, from any campus phone.

University Operator. . . . . . . 404.727.6123

D.P.T. Staffed Admissions Line/Alternate Office Number. . . 404.727.4002
Monica George-Komi, Admission Advisor

D.P.T. Program Main Office Number. . . . . . 404.712.5660
Cathy Finck, Administrative Assistant
Bridgett Moore, Administrative Assistant
Ella Pollard, Administrative Assistant

D.P.T. Program Fax Number. . . . . . 404.712.4130

Office of Medical Education and Student Affairs. . . . . . 404.727.5682
Danny Thompson, Academic Degree Program Coordinator

Address:
Office of Medical Education and Student Affairs
Emory University
1648 Pierce Drive
Atlanta, GA 30322

Student Health. . . . . . . . . . . . 404.727.7551

Financial Aid. . . . . . . . . . . . 404.727.6039

Parking Office. . . . . . . . . . . . 404.727.PARK

Registrar. . . . . . . . . . . . 404.727.6042
### DIVISION OF PHYSICAL THERAPY FACULTY

<table>
<thead>
<tr>
<th>Name</th>
<th>Office Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deborah Backus</td>
<td>404-350-7599</td>
<td><a href="mailto:Deborah_Backus@Shepherd.org">Deborah_Backus@Shepherd.org</a></td>
</tr>
<tr>
<td>Sarah Blanton</td>
<td>404-712-2222</td>
<td><a href="mailto:Sarah_Blanton@emoryhealthcare.org">Sarah_Blanton@emoryhealthcare.org</a></td>
</tr>
<tr>
<td>Patricia Bridges</td>
<td>404-712-4132</td>
<td><a href="mailto:pbridge@emory.edu">pbridge@emory.edu</a></td>
</tr>
<tr>
<td>Andrew Butler</td>
<td>404-712-5675</td>
<td><a href="mailto:Andrew.Butler@emory.edu">Andrew.Butler@emory.edu</a></td>
</tr>
<tr>
<td>Beth Parker Davis</td>
<td>404-365-9019</td>
<td><a href="mailto:bethparker@emory.edu">bethparker@emory.edu</a></td>
</tr>
<tr>
<td>Kathleen Geist</td>
<td>404-712-1620</td>
<td><a href="mailto:kgeist@emory.edu">kgeist@emory.edu</a></td>
</tr>
<tr>
<td>Bruce Greenfield</td>
<td>404-712-4139</td>
<td><a href="mailto:bgreenf@emory.edu">bgreenf@emory.edu</a></td>
</tr>
<tr>
<td>Susan Herdman</td>
<td>404-712-5660</td>
<td><a href="mailto:sherdma@emory.edu">sherdma@emory.edu</a></td>
</tr>
<tr>
<td>Marie Johanson</td>
<td>404-727-6581</td>
<td><a href="mailto:majohan@emory.edu">majohan@emory.edu</a></td>
</tr>
<tr>
<td>Zoher Kapasi</td>
<td>404-712-5671</td>
<td><a href="mailto:zkapsami@emory.edu">zkapsami@emory.edu</a></td>
</tr>
<tr>
<td>Trisha Kesar</td>
<td>404-712-5803</td>
<td><a href="mailto:tkesar@emory.edu">tkesar@emory.edu</a></td>
</tr>
<tr>
<td>Patricia Nichols</td>
<td>404-712-5711</td>
<td><a href="mailto:pat_nichols@learnlink.emory.edu">pat_nichols@learnlink.emory.edu</a></td>
</tr>
<tr>
<td>Richard Nyberg</td>
<td>770-491-6004</td>
<td><a href="mailto:nyes@mindspring.com">nyes@mindspring.com</a></td>
</tr>
<tr>
<td>Tami Phillips</td>
<td>404-727-1350</td>
<td><a href="mailto:tphil5@emory.edu">tphil5@emory.edu</a></td>
</tr>
<tr>
<td>Sara Pullen</td>
<td>404-712-5112</td>
<td><a href="mailto:sdpulle@emory.edu">sdpulle@emory.edu</a></td>
</tr>
<tr>
<td>Benjamin Rogozinski</td>
<td>404-712-5756</td>
<td><a href="mailto:brogozi@emory.edu">brogozi@emory.edu</a></td>
</tr>
<tr>
<td>Ainsley Rossi</td>
<td>404-712-5531</td>
<td><a href="mailto:afrossi@emory.edu">afrossi@emory.edu</a></td>
</tr>
<tr>
<td>Durga Shah</td>
<td>404-785-3758</td>
<td><a href="mailto:Durga.shah@choa.org">Durga.shah@choa.org</a></td>
</tr>
<tr>
<td>Randy Trumbower</td>
<td>404-727-3065</td>
<td><a href="mailto:Rdttrumb@emory.edu">Rdttrumb@emory.edu</a></td>
</tr>
<tr>
<td>Diane Waldner</td>
<td>404-250-2323</td>
<td><a href="mailto:diane.waldner@choa.org">diane.waldner@choa.org</a></td>
</tr>
<tr>
<td>Steve Wolf</td>
<td>404-712-4801</td>
<td><a href="mailto:swolf@emory.edu">swolf@emory.edu</a></td>
</tr>
<tr>
<td>Mike Wooden</td>
<td>770-496-1693</td>
<td><a href="mailto:michael.wooden@physiocorp.com">michael.wooden@physiocorp.com</a></td>
</tr>
<tr>
<td>Laura Zajac-Cox</td>
<td>404-712-5521</td>
<td><a href="mailto:lcox@emory.edu">lcox@emory.edu</a></td>
</tr>
</tbody>
</table>

**Guest Faculty**

<table>
<thead>
<tr>
<th>Name</th>
<th>Office Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Linda Tillman</td>
<td>404-723-0728 x 305</td>
<td><a href="mailto:Linda.tillman@gmail.com">Linda.tillman@gmail.com</a></td>
</tr>
<tr>
<td>Kathy Lee Bishop</td>
<td>404-778-2716</td>
<td><a href="mailto:Kathy.bishop.lindsay@emoryhealthcare.org">Kathy.bishop.lindsay@emoryhealthcare.org</a></td>
</tr>
<tr>
<td>Name</td>
<td>Email</td>
<td>Undergraduate Institution</td>
</tr>
<tr>
<td>--------------------</td>
<td>---------------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>Megan Armstrong</td>
<td><a href="mailto:mearmst@emory.edu">mearmst@emory.edu</a></td>
<td>Mercer University</td>
</tr>
<tr>
<td>Matthew Ayers</td>
<td><a href="mailto:mpayers@emory.edu">mpayers@emory.edu</a></td>
<td>Univ. of Maryland</td>
</tr>
<tr>
<td>Chase Billotte</td>
<td><a href="mailto:cbillot@emory.edu">cbillot@emory.edu</a></td>
<td>Univ. of Redlands</td>
</tr>
<tr>
<td>Jaclyn Bishop</td>
<td><a href="mailto:jmbisho@emory.edu">jmbisho@emory.edu</a></td>
<td>Univ. of Georgia</td>
</tr>
<tr>
<td>Morgan Bolick</td>
<td><a href="mailto:mbolick@emory.edu">mbolick@emory.edu</a></td>
<td>Univ. of North Carolina</td>
</tr>
<tr>
<td>Paige Bourne</td>
<td><a href="mailto:pbourne@emory.edu">pbourne@emory.edu</a></td>
<td>Worcester Polytechnic Institute</td>
</tr>
<tr>
<td>Caitlin Brawner</td>
<td><a href="mailto:cbrawne@emory.edu">cbrawne@emory.edu</a></td>
<td>Univ. of North Carolina</td>
</tr>
<tr>
<td>DeAndrea Bullock</td>
<td><a href="mailto:Dbullo3@emory.edu">Dbullo3@emory.edu</a></td>
<td>Kennesaw State University</td>
</tr>
<tr>
<td>Richard Byrd</td>
<td><a href="mailto:rtbyrd@emory.edu">rtbyrd@emory.edu</a></td>
<td>Univ. of North Carolina</td>
</tr>
<tr>
<td>Charisea Cardwell</td>
<td><a href="mailto:cccardw@emory.edu">cccardw@emory.edu</a></td>
<td>Univ. of Kentucky</td>
</tr>
<tr>
<td>Daniel Chen</td>
<td><a href="mailto:Dchen37@emory.edu">Dchen37@emory.edu</a></td>
<td>Univ. of Michigan</td>
</tr>
<tr>
<td>Hyun Chong</td>
<td><a href="mailto:Hchong2@emory.edu">Hchong2@emory.edu</a></td>
<td>Univ. of Michigan</td>
</tr>
<tr>
<td>Jordan Cohen</td>
<td><a href="mailto:Jcohe32@emory.edu">Jcohe32@emory.edu</a></td>
<td>Univ. of Michigan</td>
</tr>
<tr>
<td>Emily Czarka</td>
<td><a href="mailto:eczarka@emory.edu">eczarka@emory.edu</a></td>
<td>Univ. of Notre Dame</td>
</tr>
<tr>
<td>Kirsten Davis</td>
<td><a href="mailto:Kedavi8@emory.edu">Kedavi8@emory.edu</a></td>
<td>CA State University</td>
</tr>
<tr>
<td>Jillian Dean</td>
<td><a href="mailto:jjdean@emory.edu">jjdean@emory.edu</a></td>
<td>Gardner-Webb University</td>
</tr>
<tr>
<td>Camelyn Dillon</td>
<td><a href="mailto:ctdillo@emory.edu">ctdillo@emory.edu</a></td>
<td>Wake Forest University</td>
</tr>
<tr>
<td>Cari Domoney</td>
<td><a href="mailto:cdomoney@emory.edu">cdomoney@emory.edu</a></td>
<td>Baylor University</td>
</tr>
<tr>
<td>Zachary Dunkle</td>
<td><a href="mailto:zdunkle@emory.edu">zdunkle@emory.edu</a></td>
<td>PA State University</td>
</tr>
<tr>
<td>Lena Ebron</td>
<td><a href="mailto:lebron@emory.edu">lebron@emory.edu</a></td>
<td>Univ. of West Georgia</td>
</tr>
<tr>
<td>Rachel Fabiniak</td>
<td><a href="mailto:rfabini@emory.edu">rfabini@emory.edu</a></td>
<td>Georgia Tech</td>
</tr>
<tr>
<td>Margaret French</td>
<td><a href="mailto:Mfrench2@emory.edu">Mfrench2@emory.edu</a></td>
<td>Miami University</td>
</tr>
<tr>
<td>Kelsey Gilman</td>
<td><a href="mailto:kgilman@emory.edu">kgilman@emory.edu</a></td>
<td>Elon University</td>
</tr>
<tr>
<td>Joseph Graves</td>
<td><a href="mailto:jgrave@emory.edu">jgrave@emory.edu</a></td>
<td>PA State University</td>
</tr>
<tr>
<td>David Gustafson</td>
<td><a href="mailto:dgustaf@emory.edu">dgustaf@emory.edu</a></td>
<td>Northeastern University</td>
</tr>
<tr>
<td>Monica Hale</td>
<td><a href="mailto:mlhale@emory.edu">mlhale@emory.edu</a></td>
<td>Univ. of North Carolina</td>
</tr>
<tr>
<td>Christopher Hopkins</td>
<td><a href="mailto:Chopkis@emory.edu">Chopkis@emory.edu</a></td>
<td>Clemson University</td>
</tr>
<tr>
<td>Megan Hunter</td>
<td><a href="mailto:Mhunte5@emory.edu">Mhunte5@emory.edu</a></td>
<td>Franklin and Marshall College</td>
</tr>
<tr>
<td>Brad Johanson</td>
<td><a href="mailto:Bjohans@emory.edu">Bjohans@emory.edu</a></td>
<td>Michigan State University</td>
</tr>
<tr>
<td>Ashley Jones</td>
<td><a href="mailto:acjones@emory.edu">acjones@emory.edu</a></td>
<td>Howard University</td>
</tr>
<tr>
<td>Meghan Keen</td>
<td><a href="mailto:mmkeen@emory.edu">mmkeen@emory.edu</a></td>
<td>Univ. of North Carolina</td>
</tr>
<tr>
<td>Alyson Kimbrell</td>
<td><a href="mailto:ankimbr@emory.edu">ankimbr@emory.edu</a></td>
<td>Valdosta State University</td>
</tr>
<tr>
<td>Keaton Kramer</td>
<td><a href="mailto:Kkramen4@emory.edu">Kkramen4@emory.edu</a></td>
<td>Univ. of Iowa</td>
</tr>
<tr>
<td>Samuel Kridl</td>
<td><a href="mailto:skridl@emory.edu">skridl@emory.edu</a></td>
<td>Univ. of California</td>
</tr>
<tr>
<td>Aschli Kurzhals</td>
<td><a href="mailto:akurzha@emory.edu">akurzha@emory.edu</a></td>
<td>Ohio State University</td>
</tr>
<tr>
<td>Lavashlyn Lowery</td>
<td><a href="mailto:lalower@emory.edu">lalower@emory.edu</a></td>
<td>Univ. of North Carolina</td>
</tr>
<tr>
<td>Caitlin Manuel</td>
<td><a href="mailto:csmanue@emory.edu">csmanue@emory.edu</a></td>
<td>Univ. of Georgia</td>
</tr>
<tr>
<td>Mitchell McCall</td>
<td><a href="mailto:mwmcclal@emory.edu">mwmcclal@emory.edu</a></td>
<td>Univ. of Florida</td>
</tr>
<tr>
<td>Maurice Middleton</td>
<td><a href="mailto:mmiddle@emory.edu">mmiddle@emory.edu</a></td>
<td>Emory University</td>
</tr>
<tr>
<td>Carla Nelson</td>
<td><a href="mailto:Cinels2@emory.edu">Cinels2@emory.edu</a></td>
<td>Calvin College</td>
</tr>
<tr>
<td>Oluremi Onifade</td>
<td><a href="mailto:oonifad@emory.edu">oonifad@emory.edu</a></td>
<td>Spelman College</td>
</tr>
<tr>
<td>Christine Pieton</td>
<td><a href="mailto:cpieton@emory.edu">cpieton@emory.edu</a></td>
<td>Univ. of California</td>
</tr>
<tr>
<td>Courtney Pope</td>
<td><a href="mailto:Cpope2@emory.edu">Cpope2@emory.edu</a></td>
<td>Baylor University</td>
</tr>
<tr>
<td>Kimberly Porowski</td>
<td><a href="mailto:kporows@emory.edu">kporows@emory.edu</a></td>
<td>Vanguard Univ. of South CA</td>
</tr>
<tr>
<td>Pankti Purohit</td>
<td><a href="mailto:Ppuroh2@emory.edu">Ppuroh2@emory.edu</a></td>
<td>Univ. of Western Ontario</td>
</tr>
<tr>
<td>Ryan Ramsdell</td>
<td><a href="mailto:rramds@emory.edu">rramds@emory.edu</a></td>
<td>Ohio State</td>
</tr>
<tr>
<td>Brittany Robinson</td>
<td><a href="mailto:Blrobi2@emory.edu">Blrobi2@emory.edu</a></td>
<td>Univ. of Indianapolis</td>
</tr>
<tr>
<td>Name</td>
<td>Email</td>
<td>University</td>
</tr>
<tr>
<td>---------------------</td>
<td>---------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Michael Robinson</td>
<td><a href="mailto:mtrobin@emory.edu">mtrobin@emory.edu</a></td>
<td>Howard University</td>
</tr>
<tr>
<td>Lucia Rodriguez</td>
<td><a href="mailto:Lrodrigue9@emory.edu">Lrodrigue9@emory.edu</a></td>
<td>Univ. of Alabama</td>
</tr>
<tr>
<td>Tiara Rolle</td>
<td><a href="mailto:trolle@emory.edu">trolle@emory.edu</a></td>
<td>Auburn University</td>
</tr>
<tr>
<td>Austin Ruedrich</td>
<td><a href="mailto:aruedri@emory.edu">aruedri@emory.edu</a></td>
<td>College of Charleston</td>
</tr>
<tr>
<td>Mallory Sigle</td>
<td><a href="mailto:msigle@emory.edu">msigle@emory.edu</a></td>
<td>Auburn University</td>
</tr>
<tr>
<td>Scott Stephenson</td>
<td><a href="mailto:ssteph8@emory.edu">ssteph8@emory.edu</a></td>
<td>Univ. of Rode Island</td>
</tr>
<tr>
<td>Danielle Tomeck</td>
<td><a href="mailto:dtomeck@emory.edu">dtomeck@emory.edu</a></td>
<td>Syracuse University</td>
</tr>
<tr>
<td>Frances Toutant</td>
<td><a href="mailto:ftoutan@emory.edu">ftoutan@emory.edu</a></td>
<td>Univ. of Michigan</td>
</tr>
<tr>
<td>Kaitlin Trudeau</td>
<td><a href="mailto:Ktrude2@emory.edu">Ktrude2@emory.edu</a></td>
<td>Univ. of Michigan</td>
</tr>
<tr>
<td>Amy Tsoumas</td>
<td><a href="mailto:atsouma@emory.edu">atsouma@emory.edu</a></td>
<td>Miami University</td>
</tr>
<tr>
<td>Carmen Turcott</td>
<td><a href="mailto:cturcot@emory.edu">cturcot@emory.edu</a></td>
<td>GA State University</td>
</tr>
<tr>
<td>Shannon Weakley</td>
<td><a href="mailto:sweakle@emory.edu">sweakle@emory.edu</a></td>
<td>Univ. of South Carolina</td>
</tr>
<tr>
<td>Lilly Webster</td>
<td><a href="mailto:lswebst@emory.edu">lswebst@emory.edu</a></td>
<td>Univ. of Miami</td>
</tr>
<tr>
<td>Brady Wood</td>
<td><a href="mailto:Bwood4@emory.edu">Bwood4@emory.edu</a></td>
<td>Utah Valley University</td>
</tr>
<tr>
<td>Catherine Wozniak</td>
<td><a href="mailto:cwozni@emory.edu">cwozni@emory.edu</a></td>
<td>Florida Atlantic University</td>
</tr>
<tr>
<td>Traci Zitting</td>
<td><a href="mailto:Tander8@emory.edu">Tander8@emory.edu</a></td>
<td>Westminster College</td>
</tr>
</tbody>
</table>
DPT Officers and Committees for Class of 2013

**President:** Brad Johanson  **Vice President:** Aschli Kurzhal

**Secretary:** Mallory Sigle  **Treasurer:** Maggie French  **IT Tech:** Maurice Middleton

*Each committee will be overseen by the office in parentheses*

**Academics:** (Brad Johanson)
Traci Zitting
Megan Armstrong
Kim Porowski
Morgan Bolick

**Allied Health** (Aschli Kurzhals)
Ashley Jones – Chair
Lilly Webster

**Alumni** (Brad Johanson)
Meghan Keen – Chair
Alyson Kimbrell
Sam Kridl
Ellie Toutant

**APTA/PTAG** (Brad Johanson)
Chris Hopkins – Co-Chair
Ryan Ramsdell – Co-Chair
Jaclyn Bishop
Catherine Wozniak

**Clinical** (Mallory Sigle)
Kristen Davis – Co-Chair
Kelsey Gilman – Co-Chair
Jill Dean
Keaton Kramer

**DPT Outfitters** (Maggie French)
Caitlin Brawner
Lena Ebron
Shannon Weakley

**Intramural** (Maurice Middleton)
Dan Chen – Co-Chair
Remi Onifade – Co-Chair
Cari Domoney
Zach Dunkle
Mike Robinson

**International:** (Aschli Kurzhals)
Christine Pieton – Co-Chair
Lucia Rodriguez – Co-Chair
Amy Tsoumas

**Morale** (Mallory Sigle)
Monica Hale – Chair
Matt Ayers
Brady Wood
Austin Ruedrich

**Philanthropy** (Maggie French)
Emma Czarka – Co-Chair
Kaitlin Trudeau – Co-Chair
Rachel Fabiniak
Megan Hunter
Caitlin Manuel
Carla Nelson

**Community Service** (Aschli Kurzhals)
Joe Graves – Chair
Charlsena Cardwell
Jordan Cohen
Camelyn Dillon
Tiara Rolle

**Social** (Maggie French)
Scott Stephenson – Chair
Trend Byrd
David Gustafson
Alexis Lowery
Pankti Purohit

**Communication/PR:** (Maurice Middleton)
Courtney Pope – Co-Chair
Danielle Tomack – Co-Chair
Mitch McCall
Brittany Robinson

**Fundraising:** (Mallory Sigle)
Hyun Chong – Chair
Chase Billotte
Paige Bourne
DeAndrea Bullock
<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
<th>Undergraduate Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren Acenbrak</td>
<td><a href="mailto:lacenbr@emory.edu">lacenbr@emory.edu</a></td>
<td>University of South Carolina</td>
</tr>
<tr>
<td>Alice Anderson</td>
<td><a href="mailto:adande6@emory.edu">adande6@emory.edu</a></td>
<td>James Madison University</td>
</tr>
<tr>
<td>Michelle Arrigoni</td>
<td><a href="mailto:maarrig@emory.edu">maarrig@emory.edu</a></td>
<td>High Point University</td>
</tr>
<tr>
<td>Martin Baker</td>
<td><a href="mailto:mjbake2@emory.edu">mjbake2@emory.edu</a></td>
<td>Kennesaw State University</td>
</tr>
<tr>
<td>Daniel Balthazor</td>
<td><a href="mailto:djbalth@emory.edu">djbalth@emory.edu</a></td>
<td>University of Georgia</td>
</tr>
<tr>
<td>Travis Barefoot</td>
<td><a href="mailto:tbarefo@emory.edu">tbarefo@emory.edu</a></td>
<td>University of North Carolina</td>
</tr>
<tr>
<td>Benjamin Barton</td>
<td><a href="mailto:bbart03@emory.edu">bbart03@emory.edu</a></td>
<td>University of North Carolina</td>
</tr>
<tr>
<td>Ryan Boudreaux</td>
<td><a href="mailto:rboudre@emory.edu">rboudre@emory.edu</a></td>
<td>University of Florida</td>
</tr>
<tr>
<td>Gail Butler</td>
<td><a href="mailto:gebulle@emory.edu">gebulle@emory.edu</a></td>
<td>Furman University</td>
</tr>
<tr>
<td>Colleen Byers</td>
<td><a href="mailto:cbyers@emory.edu">cbyers@emory.edu</a></td>
<td>College of Charleston</td>
</tr>
<tr>
<td>Kelvin Carter</td>
<td><a href="mailto:kecarter@emory.edu">kecarter@emory.edu</a></td>
<td>Hope College</td>
</tr>
<tr>
<td>Jasper Casano</td>
<td><a href="mailto:jccasan@emory.edu">jccasan@emory.edu</a></td>
<td>University of Florida</td>
</tr>
<tr>
<td>Holly Compton</td>
<td><a href="mailto:hcompto@emory.edu">hcompto@emory.edu</a></td>
<td>Betty College</td>
</tr>
<tr>
<td>Tessa Cook</td>
<td><a href="mailto:tdcook@emory.edu">tdcook@emory.edu</a></td>
<td>East Carolina University</td>
</tr>
<tr>
<td>Alycia Dobson (Mrs)</td>
<td><a href="mailto:adobson@emory.edu">adobson@emory.edu</a></td>
<td>GA College and State University</td>
</tr>
<tr>
<td>Kendall Ederer</td>
<td><a href="mailto:dederer@emory.edu">dederer@emory.edu</a></td>
<td>Miami University</td>
</tr>
<tr>
<td>Elizabeth Eldridge (Mrs)</td>
<td><a href="mailto:eeldri2@emory.edu">eeldri2@emory.edu</a></td>
<td>Presbyterian College</td>
</tr>
<tr>
<td>Elizabeth Gilchrist</td>
<td><a href="mailto:ejgilch@emory.edu">ejgilch@emory.edu</a></td>
<td>Auburn University</td>
</tr>
<tr>
<td>Robert Gonzales</td>
<td><a href="mailto:rfgonza@emory.edu">rfgonza@emory.edu</a></td>
<td>Augusta State University</td>
</tr>
<tr>
<td>Katherine Hall</td>
<td><a href="mailto:khall22@emory.edu">khall22@emory.edu</a></td>
<td>Furman University</td>
</tr>
<tr>
<td>Meghan Harris</td>
<td><a href="mailto:mbhari@emory.edu">mbhari@emory.edu</a></td>
<td>University of Florida</td>
</tr>
<tr>
<td>Eric Henderson</td>
<td><a href="mailto:ehende3@emory.edu">ehende3@emory.edu</a></td>
<td>CA State University</td>
</tr>
<tr>
<td>Andrew Hollingsworth</td>
<td><a href="mailto:aholli3@emory.edu">aholli3@emory.edu</a></td>
<td>University of Tulsa</td>
</tr>
<tr>
<td>Peter Hoyt</td>
<td><a href="mailto:phoyt@emory.edu">phoyt@emory.edu</a></td>
<td>Brigham Young University</td>
</tr>
<tr>
<td>Anne Keener</td>
<td><a href="mailto:akeene2@emory.edu">akeene2@emory.edu</a></td>
<td>Duke University</td>
</tr>
<tr>
<td>Taeksoo Kim</td>
<td><a href="mailto:tkim57@emory.edu">tkim57@emory.edu</a></td>
<td>Iowa State University</td>
</tr>
<tr>
<td>Jennifer Ko</td>
<td><a href="mailto:jko@emory.edu">jko@emory.edu</a></td>
<td>University of Michigan</td>
</tr>
<tr>
<td>Caitlyn Krue</td>
<td><a href="mailto:ckrue@emory.edu">ckrue@emory.edu</a></td>
<td>Indiana University</td>
</tr>
<tr>
<td>Rachel Levy</td>
<td><a href="mailto:rlevy@emory.edu">rlevy@emory.edu</a></td>
<td>Boston University</td>
</tr>
<tr>
<td>Jodi Long</td>
<td><a href="mailto:jlong22@emory.edu">jlong22@emory.edu</a></td>
<td>Ohio State University</td>
</tr>
<tr>
<td>Kristen MacDonald</td>
<td><a href="mailto:khrmacdo@emory.edu">khrmacdo@emory.edu</a></td>
<td>University of Georgia</td>
</tr>
<tr>
<td>Anjali Malviya</td>
<td><a href="mailto:amalvi2@emory.edu">amalvi2@emory.edu</a></td>
<td>University of Michigan</td>
</tr>
<tr>
<td>Jacqueline Michaelson</td>
<td><a href="mailto:jmicha7@emory.edu">jmicha7@emory.edu</a></td>
<td>University of Redlands</td>
</tr>
<tr>
<td>John Murphy</td>
<td><a href="mailto:jtmurph@emory.edu">jtmurph@emory.edu</a></td>
<td>Auburn University</td>
</tr>
<tr>
<td>Daniel Neff</td>
<td><a href="mailto:dcneff@emory.edu">dcneff@emory.edu</a></td>
<td>Brigham Young University</td>
</tr>
<tr>
<td>Nancy Ng</td>
<td><a href="mailto:nng2@emory.edu">nng2@emory.edu</a></td>
<td>University of California</td>
</tr>
<tr>
<td>Lindsay Nicoletti</td>
<td><a href="mailto:lnicolet@emory.edu">lnicolet@emory.edu</a></td>
<td>Miami University</td>
</tr>
<tr>
<td>Moronke Ogundele</td>
<td><a href="mailto:mogunde@emory.edu">mogunde@emory.edu</a></td>
<td>Arizona State University</td>
</tr>
<tr>
<td>Mackenzie Olson</td>
<td><a href="mailto:molson4@emory.edu">molson4@emory.edu</a></td>
<td>Washington University</td>
</tr>
<tr>
<td>Kar Ou</td>
<td><a href="mailto:kou@emory.edu">kou@emory.edu</a></td>
<td>University of Georgia</td>
</tr>
<tr>
<td>Lara Perkins (Mrs)</td>
<td><a href="mailto:lwperki@emory.edu">lwperki@emory.edu</a></td>
<td>Rochester Institute of Tech.</td>
</tr>
<tr>
<td>Jessica Perry</td>
<td><a href="mailto:jhperry@emory.edu">jhperry@emory.edu</a></td>
<td>Auburn University</td>
</tr>
<tr>
<td>Michelle Phillips</td>
<td><a href="mailto:mphil@emory.edu">mphil@emory.edu</a></td>
<td>University of South Florida</td>
</tr>
<tr>
<td>Ashley Powell</td>
<td><a href="mailto:alpowe2@emory.edu">alpowe2@emory.edu</a></td>
<td>Western Kentucky University</td>
</tr>
<tr>
<td>Daniela Pruzan</td>
<td><a href="mailto:dpruzan@emory.edu">dpruzan@emory.edu</a></td>
<td>University of California</td>
</tr>
<tr>
<td>Caroline Roberts</td>
<td><a href="mailto:crbober8@emory.edu">crbober8@emory.edu</a></td>
<td>Florida Southern College</td>
</tr>
<tr>
<td>Bruce Rollins</td>
<td><a href="mailto:brolli2@emory.edu">brolli2@emory.edu</a></td>
<td>University of Texas</td>
</tr>
<tr>
<td>Lauren Rossbach</td>
<td><a href="mailto:lrossba@emory.edu">lrossba@emory.edu</a></td>
<td>Creighton University</td>
</tr>
<tr>
<td>Michael Saunders (Dr)</td>
<td><a href="mailto:mwsaund@emory.edu">mwsaund@emory.edu</a></td>
<td>GA State and University of GA</td>
</tr>
<tr>
<td>Aylin Seyalioglu</td>
<td><a href="mailto:aseyali@emory.edu">aseyali@emory.edu</a></td>
<td>Xavier University</td>
</tr>
<tr>
<td>Name</td>
<td>Email</td>
<td>University</td>
</tr>
<tr>
<td>----------------------</td>
<td>------------------------</td>
<td>---------------------------</td>
</tr>
<tr>
<td>Mary Shelus</td>
<td><a href="mailto:mshelus@emory.edu">mshelus@emory.edu</a></td>
<td>University of Illinois</td>
</tr>
<tr>
<td>Dongik Shin</td>
<td><a href="mailto:dshin35@emory.edu">dshin35@emory.edu</a></td>
<td>Kyunghee University (Korea)</td>
</tr>
<tr>
<td>Hayley Siegenthaler</td>
<td><a href="mailto:hsiegen@emory.edu">hsiegen@emory.edu</a></td>
<td>University of Washington</td>
</tr>
<tr>
<td>Christina Storm</td>
<td><a href="mailto:cstorm@emory.edu">cstorm@emory.edu</a></td>
<td>University of North Carolina</td>
</tr>
<tr>
<td>Ryan Summitt</td>
<td><a href="mailto:rsummit@emory.edu">rsummit@emory.edu</a></td>
<td>Depauw University</td>
</tr>
<tr>
<td>Morgan Sweeney</td>
<td><a href="mailto:msweeney@emory.edu">msweeney@emory.edu</a></td>
<td>Michigan State University</td>
</tr>
<tr>
<td>Elizabeth Tredway</td>
<td><a href="mailto:etredwa@emory.edu">etredwa@emory.edu</a></td>
<td>University of Georgia</td>
</tr>
<tr>
<td>Angela Tsai</td>
<td><a href="mailto:atsai3@emory.edu">atsai3@emory.edu</a></td>
<td>University of Georgia</td>
</tr>
<tr>
<td>Carmen Turcott</td>
<td><a href="mailto:cturcott@emory.edu">cturcott@emory.edu</a></td>
<td>Georgia State University</td>
</tr>
<tr>
<td>Zachary Walston</td>
<td><a href="mailto:zwalsto@emory.edu">zwalsto@emory.edu</a></td>
<td>VA Polytechnic Inst. &amp; State Univ.</td>
</tr>
<tr>
<td>Alison Watt</td>
<td><a href="mailto:awatt@emory.edu">awatt@emory.edu</a></td>
<td>University of Georgia</td>
</tr>
<tr>
<td>Wesley Wedewer</td>
<td><a href="mailto:wwedewe@emory.edu">wwedewe@emory.edu</a></td>
<td>Wartburg College</td>
</tr>
<tr>
<td>Charles West</td>
<td><a href="mailto:cwest@emory.edu">cwest@emory.edu</a></td>
<td>Emory University</td>
</tr>
<tr>
<td>Lindsay White</td>
<td><a href="mailto:lnwhit2@emory.edu">lnwhit2@emory.edu</a></td>
<td>GA College and State University</td>
</tr>
<tr>
<td>Brandon Williams</td>
<td><a href="mailto:bcwill5@emory.edu">bcwill5@emory.edu</a></td>
<td>University of Mississippi</td>
</tr>
</tbody>
</table>
Emory DPT14 Committee List

President: Travis Barefoot  Vice President: Kat Hall
Secretary: Jennifer Ko  Treasurer: Annie Keener  IT Tech: Nicolas Golder

Academic/Communication (Travis Barefoot)
Ashley Powell
Dongik Shin
Kelvin Carter
Nancy Ng
Pete Hoyt

Allied Health (Kat Hall)
Lara Perkins
Zach Walston
Bruce Rollins
Tyler Tredway

Alumni (Kat Hall)
Carmen Turcott
Alycia Dobson
Elizabeth Eldridge

APTA/PTAG (Travis Barefoot)
Martin Baker
Kar Ou
Michael Saunders

Clinical (Nick Golder)
Christina Storm
Lauren Rossbach
Eric Henderson
Holly Compton
Robert Gonzales

DPT Outfitters (Annie Keener)
Hayley Siegenthaler
Ali Anderson
Jackie Michaelson
Michelle Arrigoni

Intramural (Nick Golder)
Anjali Malviya
Ben Barton
Ali Watt
Daniel Balthazar
Dan Neff

International (Jennifer Ko)
Angela Tsai
Ryan Summitt
Daniela Pruzan
Mary Shelves
Taeksoo Kim

Morale (Jennifer Ko)
Alex Acenbrak
Colleen Byers
Gail Butler
Lindsay Nicoletti
Rob West
Ryan Boudreaux

Philanthropy/Fundraising (Annie Keener)
Caitlyn Kruer
Mackenzie Olsen
Brandon Williams
Caroline Roberts
Elizabeth Gilchrist
Hope MacDonald
Jessica Perry
JT Murphy
Meg Harris

Service Learning/Community Service (Kat Hall)
Lindsay White
Tessa Cook
Alyin Seyalioglu
Andrew Hollingsworth
Michelle Phillips
Rachel Levy
Wes Wederer

Social (Travis Barefoot)
Morgan Sweeney
JC Casano
Jodi Long
Kendall Ederer
Moronke Ogundele
Note: The schedule, order and names of the coursework may change in order for us to provide the most up-to-date and appropriate educational experience possible.

### DPT I

#### Semester 1: Summer 2012

<table>
<thead>
<tr>
<th>Course #</th>
<th>Description</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>SU DPT 700</td>
<td>Health Promotion, Wellness &amp; Prevention: Individual</td>
<td>Johanson</td>
<td>1</td>
</tr>
<tr>
<td>SU DPT 705</td>
<td>Human Anatomy</td>
<td>Kapasi</td>
<td>4</td>
</tr>
<tr>
<td>SU DPT 710</td>
<td>Basic Measurement Skills</td>
<td>Rossi</td>
<td>3</td>
</tr>
<tr>
<td>SU DPT 715</td>
<td>Kinesiology and Biomechanics</td>
<td>Rogozinski</td>
<td>4</td>
</tr>
<tr>
<td>SU DPT 720</td>
<td>Ethics and Professionalism</td>
<td>Greenfield</td>
<td>2</td>
</tr>
<tr>
<td>SU DPT 725</td>
<td>Interpersonal Communications</td>
<td>Tillman</td>
<td>2</td>
</tr>
</tbody>
</table>

**Semester Total**: 16

#### Semester 2: Fall 2012

<table>
<thead>
<tr>
<th>Course #</th>
<th>Description</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>FA DPT 730</td>
<td>Systems Physiology</td>
<td>Nichols</td>
<td>5</td>
</tr>
<tr>
<td>FA DPT 735</td>
<td>Neuroscience</td>
<td>Kesar</td>
<td>4</td>
</tr>
<tr>
<td>FA DPT 740</td>
<td>Introduction to Interventions</td>
<td>Rossi</td>
<td>3</td>
</tr>
<tr>
<td>FA DPT 745</td>
<td>Growth Process through the Lifespan</td>
<td>Shah</td>
<td>4</td>
</tr>
<tr>
<td>FA DPT 750</td>
<td>The Teaching and Learning Process in PT</td>
<td>Greenfield</td>
<td>2</td>
</tr>
</tbody>
</table>

**Semester Total**: 18

#### Semester 3: Spring 2013

<table>
<thead>
<tr>
<th>Course #</th>
<th>Description</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP DPT 755</td>
<td>General Medical Conditions</td>
<td>Davis/Bishop</td>
<td>12</td>
</tr>
<tr>
<td>SP DPT 760</td>
<td>Medical /Genetics in PT</td>
<td>Nichols</td>
<td>3</td>
</tr>
<tr>
<td>SP DPT 765</td>
<td>Evidence-Based Practice</td>
<td>Johanson</td>
<td>2</td>
</tr>
</tbody>
</table>

**Semester Total**: 17

#### Semester 4: Summer 2013

<table>
<thead>
<tr>
<th>Course #</th>
<th>Description</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>SU DPT 800</td>
<td>Musculoskeletal Rehabilitation</td>
<td>Geist/Rossi/Johanson</td>
<td>10</td>
</tr>
<tr>
<td>SU DPT 805</td>
<td>Principles of Motor Learning</td>
<td>Reese</td>
<td>3</td>
</tr>
</tbody>
</table>

**Semester Total**: 13

#### Semester 5: Fall 2013

<table>
<thead>
<tr>
<th>Course #</th>
<th>Description</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>FA DPT 810</td>
<td>Adult Neurorehabilitation</td>
<td>Phillips/Zajac-Cox</td>
<td>7</td>
</tr>
<tr>
<td>FA DPT 815</td>
<td>Pediatric Rehabilitation</td>
<td>Rogozinski</td>
<td>4</td>
</tr>
<tr>
<td>FA DPT 820</td>
<td>Health Service and Management</td>
<td>Davis/Waldner</td>
<td>3</td>
</tr>
<tr>
<td>FA DPT 825</td>
<td>Exploration of Human Behavior</td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

**Semester Total**: 16

#### Semester 6: Spring 2014

<table>
<thead>
<tr>
<th>Course #</th>
<th>Description</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP DPT 830</td>
<td>Internship I</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>SP DPT 835</td>
<td>Administration and Consultation in Healthcare</td>
<td>Rossi</td>
<td>2</td>
</tr>
<tr>
<td>SP DPT 840</td>
<td>Internship II</td>
<td></td>
<td>10</td>
</tr>
</tbody>
</table>

**Semester Total**: 22
**Semester 7: Summer 2014**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>SU DPT 900</td>
<td>Internship III</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>SU DPT 905</td>
<td>Current Practices in PT</td>
<td>Herdman</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td><strong>Semester Total</strong></td>
<td></td>
<td>12</td>
</tr>
</tbody>
</table>

**Semester 8: Fall 2014**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>FA DPT 910</td>
<td>Advanced Medical Screening</td>
<td>Geist</td>
<td>3</td>
</tr>
<tr>
<td>FA DPT 915</td>
<td>Clinical Research I</td>
<td>Butler</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Electives</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td></td>
<td><strong>Semester Total</strong></td>
<td></td>
<td>15</td>
</tr>
</tbody>
</table>

**Semester 9: Spring 2015**

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Title</th>
<th>Instructor</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>SP DPT 920</td>
<td>Health Promotion, Wellness and Prevention: Communities</td>
<td>Johanson/Pullen</td>
<td>3</td>
</tr>
<tr>
<td>SP DPT 925</td>
<td>Clinical Research II</td>
<td>Butler</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Electives</td>
<td></td>
<td>6</td>
</tr>
<tr>
<td></td>
<td><strong>Semester Total</strong></td>
<td></td>
<td>15</td>
</tr>
</tbody>
</table>

**Total Credits for Program = 144**

Elective credits will start with the numbering of DPT 950. The DPT Curriculum Committee will identify the electives and number of hours for each.

For above course descriptions see [http://www.rehabmed.emory.edu/pt/prospective/schedule.shtml](http://www.rehabmed.emory.edu/pt/prospective/schedule.shtml)

****ELECTIVES

For elective descriptions see [http://www.rehabmed.emory.edu/pt/prospective/electives.shtml](http://www.rehabmed.emory.edu/pt/prospective/electives.shtml)
2. Administration
DIVISION OF PHYSICAL THERAPY
EMORY UNIVERSITY SCHOOL OF MEDICINE

PHILOSOPHY AND OBJECTIVES
DOCTOR OF PHYSICAL THERAPY PROGRAM

The Doctor of Physical Therapy Program at Emory University provides an entry into the profession for individuals with a minimum of a baccalaureate degree. The skills and abilities, which should be developed in students to enable them to function effectively as physical therapists, are based on a current concept of health care with three major characteristics. First, the welfare of the patient/client is the basis of health care. Health workers may be involved in one of a number of areas related to health care, e.g., clinical care, research, education, administration, and consultation. Nonetheless, the welfare of the patient/client is the focal point of their efforts. Second, health care is dynamic. Changes occur constantly that incorporate advances in assessment and treatment as well as in the delivery of care and the processes of health care insurance. The scope of health care has widened to include the promotion of health and prevention of illness. Also, emphasis on the rights and responsibilities of the patient/client of the health care system is increasing. Third, the quality of health care is dependent on the process of delivery of service in the health care system and the extent to which individual needs of the patient/client are met. Additional skills and abilities must be developed in students in order to enable the graduate to practice safely, professionally and effectively in a ‘direct access’ environment.

The dynamic quality of health care requires that physical therapists must have the expertise to identify and meet the needs of individual patients/clients. Also, physical therapists must be educated to identify and effectively act in a variety of capacities while providing health care. More specifically, the objectives of the program are to provide the student with the following competencies:

I. The student will use the problem-solving process to demonstrate areas of expertise and in applying a theoretical framework of basic, behavioral, social and medical sciences. Skill is shown through:

1. participation in planning, implementing and evaluating the teaching-learning process
2. the provision of therapeutic services
3. an active recognition of the rights and dignity of the individual in planning and administering programs of care
4. use of basic principles of research in the critical analysis of concepts and findings generated by self and others
5. participation in the administration of a defined physical therapy service
6. consultation with others for the purpose of providing comprehensive care.

The educational experience of the program is designed to meet the foregoing competencies in the following ways: First, the mechanism, which is provided for identifying and affecting needs of a patient/client and of the health care system, is the problem-solving approach. The physical therapist must be a health worker in the broadest sense. In other words, the physical therapist must not only be able to work as a member of the health team, but also must assume a leadership role in initiating interdisciplinary care. The physical therapist must know how to identify and resolve health problems through program planning related to a patient/client, to a specialty area, and to the total health care system. For that reason, the problem-solving approach is used in all aspects of the Doctor of Physical Therapy program. Application of this approach is incorporated in content related to the theoretical framework of medical science and physical therapy. In each of the above contexts, the physical therapist must be able to identify a need(s) and alternative program plans for resolving the need/problem, implement a solution, and modify the solution/process as necessary. The physical therapist, other health workers, the patient/client and the health care system are all involved in the programs and all are considered in effecting solutions to specific problems.
II. The teaching-learning process is demonstrated and applied in all contexts. The learning process is presented as applicable to the student's own learning, both during and after completion of the program. Continued learning is stressed as essential in staying abreast of recent findings and theory related to care of the patient/client. For that reason, the student's understanding of how he learns and what he needs to learn is developed. In addition, the student learns to identify the learning style of others. An understanding of the teaching process is developed by familiarizing the student with the instructional process designed to facilitate his learning in classroom and clinical settings. Classroom and clinical faculty serve as models for the development of teaching behavior in students. Finally, the student is given an opportunity to develop skill in a) identifying what a patient/client needs to learn to accomplish program objectives, b) identifying and implementing the best method of teaching to the patient/client, and c) determining if the desired learning has occurred. The application of these skills in collegial and interdisciplinary relationships is also experienced by the student.

III. The area of expertise of the physical therapist is the physical function or dysfunction of patients/clients and/or the use of therapeutic approaches to beneficially affect function. Generally, physical therapists are specialists in motor behavior, including the neuromusculoskeletal, pulmonary and cardiovascular, and cognitive systems. Basic content areas, which provide theoretical basis in the medical sciences, are:

1) Human growth and development,
2) Normal structure and function,
3) Disturbances in homeostasis as manifested by various pathophysiologies,
4) Related medical and physical therapy management,
5) Ethics, professionalism and health services management.

Knowledge and skills in these areas are naturally sequenced, i.e., birth to aging, function to dysfunction, and general to specific. Organization of information related to the medical and clinical sciences is based on the homeostatic model and clinical problems presented by the patient/client as a result of disturbance of homeostasis. Accordingly, content is organized by symptom complexes or clinical problems rather than by medical discipline or physical therapy technique. Also, integration of knowledge from the past, to present, to future is stressed. Learning of specific content areas is integrated, i.e., each content area with others, classroom experiences with clinical experiences, and content areas with the process skills.

IV. An active recognition of the rights and dignity of the patient/client is emphasized in all aspects of the Doctor of Physical Therapy program. This active recognition is demonstrated by consideration of the personal, community, and cultural environment of the patient/client in effecting changes beneficial to the patient/client. Specific interpersonal skills for implementing changes are emphasized. These skills include the ability to make decisions based on the human dignity of the people involved, to grow personally and to facilitate growth in others, and to respond effectively to the interpersonal needs of the patient/client, of self, and of other health professionals. Humanistic factors are considered with economic factors in determining specific and general goals of health care. In summary, psychosocial considerations are integrated into the content areas, clinical experiences, and process skills.

V. In addition to skills discussed above, skills relating to functioning as a researcher, administrator, and consultant are observed and practiced by the student in both the clinic and the classroom.

The educational design directly reflects the presented concept of health care and the objectives of the program. Integration of learning and the humanistic approach accustoms the student to focusing on the patient/client's changing needs simultaneous with engaging in the appropriate processes to meet those needs. Use of a problem-solving approach in program planning provides the student with a mechanism for responding to the problems of patients/clients and affecting the direction of change in the health care system. And finally, development of process skills necessary for the multiple roles of a physical therapist enables the student to participate in the expanding scope of the health care system in a variety of settings.
TECHNICAL STANDARDS:

Applicants must possess certain skills in order to master the educational content of the Physical Therapy program at an acceptable level of performance within the time frame provided by the curriculum and required for professional competence. These skills are needed to improve or maintain patient/client health by preventing and/or alleviating disability and improving independence of function; to achieve goals of physical therapy care that engage the greatest possible degree of patient motivation and cooperation within resource constraints; and to provide for periodic revision and appropriate discontinuation. This regimen should be appropriate to the patient's progress and physical and psychosocial status. All professional service must be provided in a manner to assure safety of patients/clients, professionals, and technical staff.

The Director of the Doctor of Physical Therapy Program welcomes questions or inquiries from individuals with disabilities regarding the standards and their application to each individual's unique situation. In each case, a determination can be made as to whether the individual is qualified for admission to the program and if reasonable accommodations can be made. Although the Doctor of Physical Therapy Program is prohibited by federal law from making inquiries about specific disabilities prior to admission, applicants who are selected for admission must be prepared to meet the performance standards in order to complete the program.

Skills fundamental to the physical therapy profession and curriculum include:

1. Problem solving on the basis of verbal, visual, and written information within a limited time frame;
2. Clinical reasoning and decision making within a limited time frame;
3. Insight and judgment for safety and prognostication;
4. Written and verbal communication among group members;
5. Planning and organizing for treatment prescription;
6. Visual-spatial integration;
7. Perceptual-motor integration;
8. Intermittent lifting of heavy loads;
9. Repetitive motion;
10. Time management to coordinate course requirements and clinical responsibilities.

Achieving these skills requires that applicants have the abilities to meet technical standards which have been established for this program. These technical standards include the ability to:

I. Participate in all phases of the educational program within the required time frame, including demonstrating comprehension of all classroom, clinical, and any other required learning experiences through performance and/or examination in order to:

   A. be provided with all the specific skills and experiences necessary to successfully complete the Physical Therapy Program, and become eligible for licensure.

   B. apply basic principles of the scientific method in reading and interpreting professional literature, performing research, and critically analyzing new concepts and findings provided by others.
Components of the scientific method include:

1. identifying a professional problem or question.
2. critiquing and synthesizing current theory related to the problem.
3. integrating the relationship between current theory and the problem.
4. generating a hypothesis and variables related to the hypothesis.
5. devising a research protocol to test the research hypothesis.
6. determining the resources required to perform the proposed research procedures.
7. presenting a written research proposal.
8. carrying out the protocol for purposes of collecting data.
9. analyzing and interpreting the data collected based on current theory.
10. integrating the results into clinical practice or knowledge base.
11. presenting the results in written and verbal formats.

C. apply basic educational concepts of theories in designing, implementing, and evaluating treatment regimens, and in educating patients, families, and health care personnel involved in the patient’s care.

Components of education include:

1. identifying the needs of the learner.
2. analyzing the learner’s current level of knowledge.
3. determining what needs to be learned and stating that information to the learner.
4. relaying the purpose for learning to the individual.
5. reviewing the learner’s previous knowledge related to the content.
6. presenting the material at a level appropriate to the learner verbally and by demonstration.
7. providing the learner an opportunity to practice the material presented.
8. analyzing the learner’s knowledge and providing feedback to the learner.
9. augmenting the material as indicated by the learner’s performance.
10. relating the information to practical situations relevant to the learner.

II. Function appropriately in interpersonal relationships by exhibiting use of good judgement, empathy, reliability, and emotional stability; must possess the abilities to practice appropriately in stressful situations and to work acceptably with others in order to:

A. interact with patients and families in a manner which provides the desired psychosocial support by:

1. recognizing his/her own reaction to illness and disability.
2. recognizing patients’ and families’ reactions to illness and disability.
3. respecting individual, cultural, religious, and socioeconomic differences in people.
4. utilizing appropriate communicative processes, including:
   a. presenting and interpreting facial expressions and body language;
   b. monitoring voice intonation and enunciation;
   c. accepting and providing constructive criticism.

B. demonstrate safe, ethical, and legal practice as stated by the profession
C. engage the greatest possible degree of patient motivation and cooperation in evaluation and treatment

D. function effectively with other health care practitioners in providing appropriate patient care and in improving the quality of patient care

E. be responsive to ideas and techniques that might be more appropriate, effective, or safe.

III. Communicate effectively with patients, their families, and health care practitioners in order to:

A. instruct, confer, and integrate appropriate patient treatment with other aspects of patient care

B. stimulate motivation and cooperation in treatment, and assist in the alleviation of anxiety

C. teach patients and their families procedures necessary for continued care

D. participate in the planning, organization, and control of a physical therapy service

IV. Function appropriately in professional practice in order to:

A. review and evaluate patient needs; specify which definitive physical therapy procedures are indicated by administering and analyzing the results of tests, measurements, and evaluations including: gait analysis, vital signs, strength, coordination, joint range and capsule integrity.

B. plan and prepare treatment programs which:

1. include realistic goals in terms of diagnosis, prognosis, physical, psychosocial status, and anticipated lifestyle of the patient.
2. include effective treatment methods that provide a high probability of achieving treatment goals
3. are within resource constraints.
4. provide for periodic revision according to changes in the patient’s physiological state.
5. contain specificity and comprehensiveness appropriate to the level of personnel who will execute the plan.
6. are adequately documented.

C. properly administer and/or modify physical therapy treatments in order that patients safely perform functional activities.
GENERAL INFORMATION

1. Classrooms - We will use classrooms and the laboratory in the 1462 Clifton Road (Old Dental Building) the School of Medical Education Building, and the Center for Rehabilitation Medicine (CRM). Faculty offices are located in Suite 312 of the 1462 building and CRM (rooms, 203, 206, 209, 228). Teaching Laboratories in the CRM building and 1462 building are keypad coded. The Student Lounge in the 1462 building is also keypad coded and you will be given those codes. Use by persons other than those in the DPT Program is not allowed. Please use stairs in both buildings unless medically necessary to use elevators.

2. Communication – electronically by Emory email, Blackboard, and by telephone. Students have mailboxes located in Room 306 of the 1462 building. Messages and class materials may be posted for you in Emory email and Blackboard. You are expected to check your mailboxes and Emory email account daily, as this is our way of communicating with you. Messages for the faculty should be placed in their boxes located in the office areas (1462 building, Suite 312).

3. Lockers will be assigned by the Assistant to the Director. You will need to provide the Director’s Assistant with your locker combination in order to get a locker number. Lockers are located in the student lounge.

4. Required readings for courses (other than purchased books) will be on electronic reserves through the Health Sciences library, which is located on the first floor of the Dental School Building.

5. Notices, re: Grand rounds, workshops, etc., are posted in general areas. Attendance at Rehabilitation Medicine Grand Rounds is strongly recommended.

6. Parking - You need to bring proof of ownership/registration of your automobile to obtain a parking permit. Parking registration is available on-line at www.transportation.emory.edu. Vehicle registration for the academic year is approximately $654.00. Parking is available in the Michael Street Deck and the Clairmont Campus Deck.

7. Official regulations - be sure to read the portions of the official regulations that pertain to you. They are written in Campus Life.

8. Due to the professional nature of the curriculum, the types of activities and related content in each course, attendance at all classes is expected of each student. If you are ill and/or cannot attend, please call the office at 404-712-5660 and leave word (we have voice mail for your convenience). If emergencies arise and you have knowledge of pending absences, you should discuss such absences with the program director, your advisor and/or individual course instructors in order to make arrangements to make up your academic work. Most of the time, re-creation of a seminar, discussion, laboratory experiences, or clinical experience is not possible. This policy also applies to classes the day before or the day after vacations or holidays. NOTE: IN INSTANCES OTHER THAN UNFORESEEN ILLNESS OR EMERGENCY, PERMISSION FOR ABSENCE FROM CLASS MUST BE OBTAINED IN WRITING AT LEAST TWO WEEKS IN ADVANCE FROM THE DIRECTOR AND FROM EACH INSTRUCTOR. Failure to meet these responsibilities may seriously compromise your academic standing. Also, the faculty is not responsible for providing information or learning experiences in cases of student absence.
9. Use of Administrative Assistant telephones is available for school-related calls or extreme emergencies. Use of the phone at the CRM front desk is only for emergencies and physician pages.

10. Emory University Identification Card (picture identification card) **must be worn at all times**
In University buildings and should be visible. You may be asked to leave the CRM building if you are not wearing your identification card. Security of the Center for Rehabilitation Medicine (CRM) and other university facilities is an ongoing concern. As part of these efforts at CRM, we limit traffic during non-business hours (after 9:00 p.m. and prior to 7:00 a.m.). Any papers, messages or other materials for faculty, staff, etc. that are delivered between 9:00 p.m. and 7:00 a.m. should be left at the front desk. If you have materials to deliver, the procedure is as follows:

   a. Be sure that you have a copy of any paper that you write on a disc.
   b. Give the paper to the individual at the front desk and ask that the paper be placed in the box for Division of Physical Therapy.
   c. Call our telephone mail (404-712-5660) and leave a message that you left a paper at the front desk. State the date and your name. Leaving this message is important because the message notifies the Administrative Assistants to check the front desk for papers.

In our offices in the 1462 building, the PT office will be locked from approximately 5 pm to 7:30 a.m. Please do not bring these materials to our offices during these off hours.

Be sure that you carry your Emory identification card at all times when on campus. Entry to the 1462 building, the SOM Education Bldg and CRM after hours and on the weekend will only be possible with your Emory picture identification card. This identification card should have a magnetic strip on the back. The card (and strip) is slid through the security box at the door to gain entry. You will not have access without your identification card. If for some reason you have no identification card, you must get one immediately at the DUC. Remember if you are working in a laboratory in the evenings, early mornings or weekends, the laboratory door should be closed and locked at all times. Also, do **NOT** prop doors open to allow entry of a colleague. Please thank any person asking you for identification.

11. You must provide proof of health insurance to the Office of Medical Education and Student Affairs. Failure to provide proof of insurance will result in dismissal from the program.

12. All students are required to maintain current records of immunizations and tuberculin skin tests (PPD). Representatives from Student Health will meet with your class at scheduled intervals throughout the program of study. The price of immunizations is included in your student fees. It is each student’s responsibility to maintain their own immunization record and to provide current immunization records to each of their clinical rotation sites. See the Student Health Section of this Handbook for more details about immunizations.

13. **Clinical Laboratory Supplies:**
There are several items that you will need for laboratory throughout the curriculum. There are a few options for purchasing these items which will cost approximately $125-$175 depending on how you purchase them. Other laboratory items will be provided for you. The options and items are listed below.

   **Purchasing Options:**
   1) You can order items from an outside vendor as a Class during the first few weeks of the semester. Typically this results in a reduced overall cost as companies give discounts for bulk orders.
   2) You can order the items on your own.

   **Required Supply List**
   1.) Stethoscope: Littman is the brand preferred by Dr. Kathy Lee Bishop
2.) Sphygmomanometer (blood pressure cuff)  
3.) Vinyl gait belt (60")  
4.) Penlight  
5.) 6" 180˚ goniometer  
6.) 12" 360˚ goniometer  
7.) Buck or Babinski hammer  
8.) Retractable plastic tape measure  
9.) Small case or duffle-type case to store equipment and transport to lab

14. All students are required to maintain continuous membership in the American Physical Therapy Association throughout the program of study.

15. All students **MUST** complete course evaluations at the end of each course. Please note that grades will not be posted until you complete the course evaluations.
POLICY ON DISCRIMINATION

Emory University strives to ensure student participation in programs and in the use of University facilities without discrimination with regard to race, color, creed, sex or sexual orientation, national origin, veteran’s status, handicap, or age.
3. Students and Faculty
<table>
<thead>
<tr>
<th>Student</th>
<th>Advisor</th>
<th>Student</th>
<th>Advisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lauren Alesch</td>
<td>Sarah Blanton</td>
<td>Shannon Kimbrel</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Asha Anand</td>
<td>Sarah Blanton</td>
<td>Sara Kirkland</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Nathan Beckley</td>
<td>Sarah Blanton</td>
<td>Robert Koester</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Alison Borganelli</td>
<td>Trish Bridges</td>
<td>Katherine Krueger</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Claire Bradley</td>
<td>Trish Bridges</td>
<td>Natasha Lee</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Stephanie Brand</td>
<td>Trish Bridges</td>
<td>Stephanie Lievens</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Jenny Brickman</td>
<td>Trish Bridges</td>
<td>Kari Lindegren</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Jacob Broadhurst</td>
<td>Andy Butler</td>
<td>Whitney MacLeod</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Morgan Browne</td>
<td>Andy Butler</td>
<td>Rachel Malina</td>
<td>Tami Phillips</td>
</tr>
<tr>
<td>Elise Bruns</td>
<td>Andy Butler</td>
<td>Gale McCall</td>
<td>Tami Phillips</td>
</tr>
<tr>
<td>Sultan Budhwani</td>
<td>Andy Butler</td>
<td>Ashley McFarland</td>
<td>Tami Phillips</td>
</tr>
<tr>
<td>Nicole Canning</td>
<td>Andy Butler</td>
<td>Rachel Mendelsohn</td>
<td>Sara Pullen</td>
</tr>
<tr>
<td>James Chen</td>
<td>Beth Davis</td>
<td>Catherine Miller</td>
<td>Sara Pullen</td>
</tr>
<tr>
<td>Erinn Claffy</td>
<td>Beth Davis</td>
<td>Katherine Moise</td>
<td>Sara Pullen</td>
</tr>
<tr>
<td>Shannon Conroy</td>
<td>Beth Davis</td>
<td>Brittany Moore</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Rebecca Crockett</td>
<td>Beth Davis</td>
<td>Peter Park</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Christina Dinh</td>
<td>Bruce Greenfield</td>
<td>Callidh Pedersen</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Whitney Ernst</td>
<td>Bruce Greenfield</td>
<td>Donna Piper</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Sarah Escamilla</td>
<td>Bruce Greenfield</td>
<td>Richard Posey</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Emma Faulkner</td>
<td>Bruce Greenfield</td>
<td>Haley Quinlan</td>
<td>Ben Rogozinski</td>
</tr>
<tr>
<td>Eric Fiedler</td>
<td>Bruce Greenfield</td>
<td>Fenella Roche</td>
<td>Beth Davis</td>
</tr>
<tr>
<td>Erica Fredricks</td>
<td>Kathleen Geist</td>
<td>Michelle Sauer</td>
<td>Ben Rogozinski</td>
</tr>
<tr>
<td>Alexis Goedde</td>
<td>Kathleen Geist</td>
<td>Rebecca Simonds</td>
<td>Ben Rogozinski</td>
</tr>
<tr>
<td>Callie Griffith</td>
<td>Kathleen Geist</td>
<td>Raven Smalls</td>
<td>Ben Rogozinski</td>
</tr>
<tr>
<td>Sarah Hardeman</td>
<td>Kathleen Geist</td>
<td>Jennifer Smith</td>
<td>Susan Herdman</td>
</tr>
<tr>
<td>Heaven Harvey</td>
<td>Kathleen Geist</td>
<td>Christina Sperle</td>
<td>Susan Herdman</td>
</tr>
<tr>
<td>Stacy Hassinger</td>
<td>Kathleen Geist</td>
<td>Mark Surdyka</td>
<td>Susan Herdman</td>
</tr>
<tr>
<td>Nhat Ho</td>
<td>Kathleen Geist</td>
<td>Renee Tomko</td>
<td>Susan Herdman</td>
</tr>
<tr>
<td>Alan Hofman</td>
<td>Ainsley Rossi</td>
<td>Joshua Tucker</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Virginia Hogan</td>
<td>Ainsley Rossi</td>
<td>Noah Tucker</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Amy Holifield</td>
<td>Sara Pullen</td>
<td>Loren Vaillancourt</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Katelyn Hughes</td>
<td>Tami Phillips</td>
<td>Katherine Voorhorst</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Collette Wade</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Moire Yue</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Alice Anderson</td>
<td>Sarah Blanton</td>
<td>Ashley Powell</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>---------------</td>
<td>---------------</td>
<td>---------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Michelle Arrigoni</td>
<td>Sarah Blanton</td>
<td>Daniela Pruzan</td>
<td>Jeff Hoder</td>
</tr>
<tr>
<td>Martin Baker</td>
<td>Sarah Blanton</td>
<td>Caroline Roberts</td>
<td>Jeff Hoder</td>
</tr>
<tr>
<td>Daniel Balthazor</td>
<td>Steve Wolf</td>
<td>Bruce Rollins</td>
<td>Jeff Hoder</td>
</tr>
<tr>
<td>Travis Barefoot</td>
<td>Tami Phillips</td>
<td>Lauren Rossback</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Benjamin Barton</td>
<td>Steve Wolf</td>
<td>Michael Saunders</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Ryan Boudreaux</td>
<td>Andy Butler</td>
<td>Aylin Seyalioglu</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Gail Butler</td>
<td>Andy Butler</td>
<td>Mary Shelus</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Colleen Byers</td>
<td>Trish Bridges</td>
<td>Dongik Shin</td>
<td>Ainsley Rossi</td>
</tr>
<tr>
<td>Kelvin Carter</td>
<td>Trish Bridges</td>
<td>Hayley Siegenthaler</td>
<td>Ben Rogozinski</td>
</tr>
<tr>
<td>Jasper Casano</td>
<td>Trish Bridges</td>
<td>Christina Storm</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Holly Compton</td>
<td>Trish Bridges</td>
<td>Ryan Summitt</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Tessa Cook</td>
<td>Steve Wolf</td>
<td>Morgan Sweeney</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Alycia Dobson</td>
<td>Jeanne Charles</td>
<td>Elizabeth Tredway</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Kendall Ederer</td>
<td>Jeanne Charles</td>
<td>Angela Tsai</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Elizabeth Eldridge</td>
<td>Jeanne Charles</td>
<td>Zachary Walston</td>
<td>Sara Pullen</td>
</tr>
<tr>
<td>Elizabeth Gilchrist</td>
<td>Jeanne Charles</td>
<td>Alison Watt</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Nicolas Goldier</td>
<td>Susan Herdman</td>
<td>Wesley Wedewer</td>
<td>Sara Pullen</td>
</tr>
<tr>
<td>Robert Gonzales</td>
<td>Beth Davis</td>
<td>Charles West</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Katherine Hall</td>
<td>Beth Davis</td>
<td>Lindsay White</td>
<td>Tami Phillips</td>
</tr>
<tr>
<td>Meghan Harris</td>
<td>Beth Davis</td>
<td>Brandon Williams</td>
<td>Ben Rogozinski</td>
</tr>
<tr>
<td>Eric Henderson</td>
<td>Sara Pullen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Andrew Hollingsworth</td>
<td>Ainsley Rossi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peter Hoyt</td>
<td>Beth Davis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anne Keener</td>
<td>Kathleen Geist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taeksoo Kim</td>
<td>Marie Johanson</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jennifer Ko</td>
<td>Kathleen Geist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caitlyn Krueer</td>
<td>Kathleen Geist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rachel Levy</td>
<td>Tami Phillips</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jodi Long</td>
<td>Kathleen Geist</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kristen MacDonald</td>
<td>Ainsley Rossi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anjali Malviya</td>
<td>Bruce Greenfield</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jacqueline Michaelson</td>
<td>Bruce Greenfield</td>
<td></td>
<td></td>
</tr>
<tr>
<td>John Murphy</td>
<td>Courtney Hall</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Daniel Neff</td>
<td>Courtney Hall</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nancy Ng</td>
<td>Courtney Hall</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lindsay Nicoletti</td>
<td>Susan Herdman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moronke Ogundele</td>
<td>Susan Herdman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mackenzie Olson</td>
<td>Susan Herdman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kar Ou</td>
<td>Susan Herdman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lara Perkins</td>
<td>Susan Herdman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jessica Perry</td>
<td>Susan Herdman</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tami Phillips</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student</td>
<td>Advisor</td>
<td>Student</td>
<td>Advisor</td>
</tr>
<tr>
<td>-----------------</td>
<td>----------------</td>
<td>-----------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Megan Armstrong</td>
<td>Zoher Kapasi</td>
<td>Lavashlyn Lowery</td>
<td>Jeanne Charles</td>
</tr>
<tr>
<td>Matthew Ayers</td>
<td>Susan Herdman</td>
<td>Caitlin Manuel</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Chase Billotte</td>
<td>Kathleen Geist</td>
<td>Mitchell McCall</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Jaclyn Bishop</td>
<td>Sarah Blanton</td>
<td>Maurice Middleton</td>
<td>Susan Herdman</td>
</tr>
<tr>
<td>Morgan Bolick</td>
<td>Tami Phillips</td>
<td>Carla Nelson</td>
<td>Beth Davis</td>
</tr>
<tr>
<td>Paige Bourne</td>
<td>Sarah Blanton</td>
<td>Oluremi Onifade</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Caitlin Brawner</td>
<td>Trish Bridges</td>
<td>Christine Pieton</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>DeAndrea Bullock</td>
<td>Zoher Kapasi</td>
<td>Courtney Pope</td>
<td>Bruce Greenfield</td>
</tr>
<tr>
<td>Richard Byrd</td>
<td>Jeff Hoder</td>
<td>Kimberly Porowski</td>
<td>Steve Wolf</td>
</tr>
<tr>
<td>Charisea Cardwell</td>
<td>Andy Butler</td>
<td>Pankti Purohit</td>
<td>Kathleen Geist</td>
</tr>
<tr>
<td>Daniel Chen</td>
<td>Pat Nichols</td>
<td>Ryan Ransdell</td>
<td>Sarah Blanton</td>
</tr>
<tr>
<td>Hyun Chong</td>
<td>Trish Bridges</td>
<td>Brittany Robinson</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Jordan Cohen</td>
<td>Jeanne Charles</td>
<td>Michael Robinson</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Emily Czarka</td>
<td>Susan Herdman</td>
<td>Lucia Rodriguez</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Kristen Davis</td>
<td>Zoher Kapasi</td>
<td>Tiara Rolle</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Jillian Dean</td>
<td>Tami Phillips</td>
<td>Austin Ruedrich</td>
<td>Jeff Hoder</td>
</tr>
<tr>
<td>Camelyn Dillon</td>
<td>Zoher Kapasi</td>
<td>Mallory Sigle</td>
<td>Trish Bridges</td>
</tr>
<tr>
<td>Cari Domoney</td>
<td>Kathleen Geist</td>
<td>Scott Stephenson</td>
<td>Andy Butler</td>
</tr>
<tr>
<td>Zachary Dunkle</td>
<td>Marie Johanson</td>
<td>Daniel Tomeck</td>
<td>Bruce Greenfield</td>
</tr>
<tr>
<td>Lena Ebron</td>
<td>Bruce Greenfield</td>
<td>Frances Toutant</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>Rachel Fabiniak</td>
<td>Pat Nichols</td>
<td>Kaitlin Trudeau</td>
<td>Beth Davis</td>
</tr>
<tr>
<td>Margaret French</td>
<td>Tami Phillips</td>
<td>Amy Tsoumas</td>
<td>Kathleen Geist</td>
</tr>
<tr>
<td>Kelsey Gilman</td>
<td>Susan Herdman</td>
<td>Carmen Turcott</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Joseph Graves</td>
<td>Steve Wolf</td>
<td>Lily Webster</td>
<td>Randy Trumbower</td>
</tr>
<tr>
<td>David Gustafson</td>
<td>Marie Johanson</td>
<td>Shannon Weakley</td>
<td>Marie Johanson</td>
</tr>
<tr>
<td>Monica Hale</td>
<td>Bruce Greenfield</td>
<td>Brady Wood</td>
<td>Zoher Kapasi</td>
</tr>
<tr>
<td>Christopher Hopkins</td>
<td>Jeff Hoder</td>
<td>Catherine Wozniak</td>
<td>Tami Phillips</td>
</tr>
<tr>
<td>Megan Hunter</td>
<td>Kathleen Geist</td>
<td>Traci Zitting</td>
<td>Pat Nichols</td>
</tr>
<tr>
<td>Brady Johanson</td>
<td>Sarah Blanton</td>
<td></td>
<td>Trish Bridges</td>
</tr>
<tr>
<td>Ashley Jones</td>
<td>Randy Trumbower</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meghan Keen</td>
<td>Andy Butler</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alyson Kimbrell</td>
<td>Zoher Kapasi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Keaton Kramer</td>
<td>Jeff Hoder</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Samuel Kridl</td>
<td>Zoher Kapasi</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aschli Kurzhals</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DIVISION OF PHYSICAL THERAPY
EMORY UNIVERSITY
EXPERIENCES, INTERESTS OF FACULTY

**Backus, Debbie**

Educational Experience: PhD in Neuroscience, Emory University, 2004; BS in Physical Therapy, Sargent College, Boston University, 1986.

Research/Teaching Interests: I am an experienced physical therapist clinician and educator with 25 years of experience in neurological rehabilitation. As Associate Director of spinal cord injury research at the Shepherd Center in Atlanta, my research efforts are centered on gaining a greater understanding of how somatosensory augmentation can improve arm and hand function in people with tetraplegia due to spinal cord injury (SCI). My other focus is on facilitating the translation of this research into efficacious and cost-effective treatment interventions and programs to maximize the potential for recovery in people with tetraplegia. My primary teaching responsibility in the PT curriculum is Neuroscience, and I am involved in teaching in other clinical courses related to the integration of neuroscience throughout the curriculum, therapeutic treatment approaches, as well as rehabilitation of people with SCI. My greatest passion is to empower clinicians, researchers and patients to reach their highest potential.

**Bishop, Kathy Lee**

Educational Experience: 


**Blanton, Sarah**


Research/Teaching Interests: My research interests have focused primarily on stroke rehabilitation, specifically the evaluation and clinical application of constraint-induced therapy in stroke survivors. I am also interested in quality of life issues after stroke, including depression and family functioning. My teaching interests include upper extremity movement control, self-efficacy and self-management after stroke, neuropsychiatric disturbances and depression.
**Bridges, Patricia Hulsey**

**Educational Experience:** Ed.D. in Education, University of Georgia; M.M.Sc. in Physical Therapy, Emory University; B.S. in Physical Therapy, University of Florida; Certified Trainer, APTA Clinical Instructor Education and Credentialing Program.

**Research/Teaching Interests:** Adult learning; Clinical education; Self-directed learning; Transfer of learning; and Diffusion of evidence-based practice.

---

**Butler, Andrew**

**Educational Experience:** Master’s of Business Administration, Goizueta Business School, Emory University, Atlanta, Georgia, 2007-2009. Post-Doctoral Fellow, Department of Neurology, Heinrich-Heine University, Duesseldorf, Germany, 1999-2001; M.S. Physical Therapy, School of Physical Therapy, Texas Woman’s University, Houston, Texas, 1998; Post-Doctoral Fellow, School of Physical Therapy, Texas Woman’s University, Houston, Texas, 1996-1998; Post-Doctoral Fellow, Department of Integrative Physiology, The University of Iowa, Iowa City, Iowa, 1995-1996; Ph.D. Motor Control, Department of Integrative Physiology, The University of Iowa, Iowa City, Iowa, 1995; B.S. Honors in Biology with a minor in Chemistry, Loras College, Dubuque, Iowa, 1987.

**Research/Teaching Interests:** My research focuses primarily on how volitional movement, motor learning, and organized motor behavior are represented in the human brain. We are interested in evaluating the effect of constraint-induced movement therapy on cortical motor reorganization following stroke using transcranial magnetic stimulation (TMS) and functional magnetic resonance imaging (FMRI). This approach may provide some insight into mechanisms responsible for restitution of functional capability in using an impaired limb that had previously not been used to manipulate the environment following a stroke. We are also pursuing the use of alternative forms of therapy such as robotics, virtual reality and mental motor imagery as a complementary intervention to CI therapy in the rehabilitation of the upper limbs of patients post-stroke.

---

**Davis, Beth P.**

**Educational Experience:** BA from the University of North Carolina at Chapel Hill (1993); Master of Physical Therapy from Emory University (1997); Master in Business Administration from Georgia State University (2002); Doctor of Physical Therapy from Emory University (2003).

**Research/Teaching Interests:** I am the coordinator of the General Medical Complex and have the pleasure of introducing the DPT I students to their first clinical complex of the program. I also teach the Health Service Management and Business Management elective courses. I am actively involved in the interprofessional education efforts at Emory, and participate in several research projects in the area of interprofessional team training. I am additionally involved in research related to business management in physical therapy.
Geist, Kathleen

Educational Experience: Graduated from Auburn University in 1994 with a B.S. in Microbiology. Graduated from Georgia State University in 1997 with a B.S. in Physical Therapy, graduated from the Krannert School of Physical Therapy at the University of Indianapolis in 2009, received an Orthopedic Specialist Certification in 2005, and received a certification in Orthopedic Manual Therapy in 2006. APTA Credentialed clinical Instructor in 2006. Currently enrolled in the Regis University Manual Therapy Fellowship Program in Denver, CO.

Research/Teaching Interests: Teaching interests include medical screening, musculoskeletal dysfunction relating to the spine and manual therapy.

Greenfield, Bruce

Educational Experience: PhD in Educational Policy Studies, Georgia State University; BA in History, Oglethorpe University; Certificate in Physical Therapy, Emory University; MMSc, Orthopaedic Clinical Specialist (OCS), American Board of Physical Therapy Specialties. Currently, Dr. Greenfield is completing a Master degree in Bioethics from Loyola University.

Research/Teaching Interests: During 20 years of clinical practice, I produced a body of work in clinical care examining various aspects of the movement science model that affects patient outcomes. Years of practice as a physical therapist have fostered Insights about the influence of communication and the importance of relationships for effective clinical outcomes. One insight is that physical therapy, like all health care is ultimately relational, and it is the way that we work out relationships that effects patient care. Currently, I am examining aspects of moral practice and ethical decision-making in physical therapists. Dr. Greenfield holds dual faculty positions in the Department of Rehabilitation Medicine and the Center for Ethics, Emory University.

Herdman, Susan

Educational Experience: B.A. In Biology, Vassar College; Certificate in Physical Therapy, University of Pennsylvania; PhD in Anatomy, University of Pennsylvania; Post-doctoral Fellow in Vision Science, University of Pennsylvania.

Research/Teaching Interests: My doctoral and post-doctoral training has enabled me to combine my research interests in recovery of function with my clinical practice specializing in the treatment of patients with vestibular deficits. The focus of my current research is on determining the factors that predict outcome in patients with vestibular hypofunction. Previous research shows that vestibular rehabilitation is effective in decreasing symptoms, improving balance and visual acuity during head movement in patients with unilateral and bilateral vestibular hypofunction yet not all patients recover well. If we can identify which factors predict outcome in these patients, we may be able to develop new interventions that will benefit patients for whom recovery is not optimal.
Johanson, Marie

Educational Experience: B.A. in Physical Education, University of California Berkeley, Certificate in Physical Therapy, Emory University, M.S. in Physical Therapy, Georgia State University, Orthopaedic Clinical Specialist (OCS), American Board of Physical Therapy Specialties, Ph.D. in Higher Education, Georgia State University.

Research/Teaching Interests: Research interests include physical therapist interventions for patients with musculoskeletal impairments, especially impairments at the foot and ankle related to kinetics and kinematics during gait. Teaching interests include evidence-based practice, health promotion, wellness and prevention, and management of patients with musculoskeletal conditions.

Kapasi, Zoher F.

Educational Experience: BS and MS in Physical Therapy from University of Bombay, India. MBA, Goizueta Business School, Emory University, PhD, Department of Anatomy, Medical College of Virginia, Richmond, Virginia. Post-doctoral training, Medical College of Virginia and the Basel Institute for Immunology Switzerland.

Research/Teaching Interests: Dr. Kapasi’s research interest is in the field of marketing in physical therapy industry. Another research interest is in studying the effects of therapeutic exercise on the immune system and its applications in clinical conditions in which the immune system is depressed, for example, the geriatric population. Dr. Kapasi teaches gross anatomy, advanced gross anatomy, business management for the physical therapist and co-ordinates general medical complex course in the physical therapy program.

Nichols, Patricia


Research/Teaching Interests: Research in changes in pharmacological sensitivity of mammalian skeletal muscle following chronic denervation; investigation of the mechanical properties of skinned single fibers of mammalian skeletal muscle. Development of educational methods and materials emphasizing integrative learning and conceptual model building for basic and clinical medical sciences.

Nyberg, Richard


Phillips, Tami

Educational Experience: DPT (highest honors) and MSPT; University of Miami, Miami, Florida. MBA - Operations Management and Strategic Management Concentrations with a Marketing Emphasis; Carlson School of Management, University of Minnesota, Minneapolis, Minnesota. BHS (honors), minor in Psychology; University of Miami, Miami, Florida. Naval and Leadership Studies; United States Naval Academy, Annapolis, Maryland.

Research/Teaching Interests: Dr. Phillips has over seventeen years of clinical and management experience in acute care and rehabilitation working at a large teaching hospital and a regional trauma center. Her clinical interests are in neurological rehabilitation, burns, and multiple trauma injuries. Principal areas of management inquiry are motivating and mentoring the new professional, managing across generations, process improvement, and project management. Current research projects are related to clinical education and neurorehabilitation. She enjoys the clinical training of students, and has been an APTA credentialed clinical instructor for thirteen years. She is actively involved in the Program’s service learning projects, including coordinating an opportunity to work with stroke survivors in Ridge, Jamaica. Dr. Phillips teaches Adult Neurorehabilitation, an Advanced Neurorehabilitation elective, as well as serves as the Assistant Director of Clinical Education.

Rogozinski, Benjamin


Research/Teaching Interests: My background is in biomechanics as it relates to normal and pathological gait in the pediatric population. My research interest is in the use of quantitative gait analysis in the development and assessment of intervention strategies to improve function and quality of movement in people with cerebral palsy. I am currently the course director for DPT715 Kinesiology and Biomechanics and DPT815 Pediatric Rehabilitation.
Shah, Durga

Educational Experiences: Bachelor of Physiotherapy, MS University, Baroda, India, Post-graduate Diploma in Rehabilitation, All India Institute of Physical Medicine and Rehabilitation, Mumbai, India. Graduate course work in Physical Therapy in Pediatric Developmental Disabilities, New York University, New York, NY. Doctorate in Physical Therapy, Massachusetts General Hospital Institute of Health Professions, Boston, MA. Pediatric Clinical Specialist (PCS), American Board of Physical Therapy Specialties

Research/Teaching Interests: My teaching interests include pediatric topics: Growth and development from premies to adolescents, management of children with myelomeningocele, management of foot deformities in children, cancer rehab in children and use of serial casting and splinting in pediatric rehab. Current research interests include management of pain in children, and effects of physical activity on quality of life in children with leukemia.

Tillman, Linda

Educational Experience: B.A., Philosophy and English, Vanderbilt University, 1970; M.S., Psychology, Peabody College, 1978; PhD, Clinical Psychology, Peabody College of Vanderbilt University, 1980;

Research/Teaching Interests: Communication skills, including assertiveness, skills for health behavior change, and empathic, therapeutic communication.

Trumbower, Randy D.

Educational Experience: PhD in Biomedical Engineering, University of Connecticut; MS in Biomedical Engineering, University of Connecticut; MS in Physical Therapy, Duke University.

Research/Teaching Interests: Dr. Trumbower’s career goals are to formulate new knowledge and evidence for physical therapy practice and to foster leadership through research, teaching, and service. He is committed to an academic career with emphasis on translating mechanistic research to evidence-based clinical application in the field of neurologic rehabilitation. Dr. Trumbower’s research is focused on developing robust interventions aimed to extend physical abilities for people with neurologic pathologies such as stroke and spinal cord injury. He also is deeply committed on preparing outstanding researchers, engineers, and evidence-based practitioners to help advance our profession. Dr. Trumbower holds a primary faculty position in the Department of Rehabilitation Medicine at Emory University.
Waldner, Diane

Educational Experience: M.S. in Health Care Administration, Boston University. B.S. in Physical Therapy, Russell Sage College.

Research/Teaching Interests: Healthcare management, Staff and Leadership Development, Patient care delivery models, Patient outcomes, Clinical research

Wolf, Steven L.

Educational Experience: B.A. in Biology, Clark University, Worchester, MA; Certificate in Physical Therapy, Columbia University; M.S. in Physical Therapy, Boston University; Master's Degree in Anatomy and Ph.D. in Neurophysiology, Emory University; post-doctoral fellowship at Karolinska Institute, Stockholm, Sweden.

Research/Teaching Interests: Work in our laboratory has centered around rehabilitation of upper extremity movement in post-stroke survivors. This work is multidimensional and includes clinical, neuroimaging, behavioral and biomechanical measures and includes a multi-disciplinary team. Another area of emerging interest involves functional, biomechanical and physiological assessments of older individuals to control and change postural sway to reduce or prevent falling. This assessment has been made among subjects trained in Tai Chi as an exercise form and in people provided computerized force platform training to improve postural stability. The laboratory has also examined morphological and anatomical considerations of human muscle architecture to better understand the fundamental organization of multi-arthroidal muscles. These measurements are then used as a basis for performing EMG studies to discover how muscle partitions differentially participate in task-specific movements. These explorations form the basis for developing new therapies for selective muscle recruitment.

We are now starting a national clinical trial to explore the effect of a comprehensive evidence based multifaceted intervention on upper extremity function in patients with acute stroke. The entrance criteria for this work evolved from our previous studies on operant conditioning of muscle responses in these patients and the identification of predictors of recovery. Other funding permits us to initiate explorations into the mechanisms underlying possible massed practice cortical reorganization using this approach. Other collaborations address biomechanical changes in upper extremity motor control following stroke, the effects of direct motor cortical stimulation and intense upper extremity therapy on functional improvement among patients with stroke, and changes in behavior among patients and their caregivers when exposed to functionally based therapeutic interventions, and use of robotics or pharmacological agents (BoTox) to further improve upper extremity function.

We are currently exploring the possibility of using both transcranial magnetic stimulation (TMS) and functional magnetic resonance
imaging (FMRI) to assess changes in cortical activity during procedures that are designed to force subacute and chronic stroke patients to use their more impaired upper extremities. This approach may provide some insight into mechanisms responsible for restitution of functional capability in using an impaired limb that had previously not been used to manipulate the environment following a stroke. Other studies center about use of repetitive transcranial magnetic stimulation over the motor area of the impaired cortex combined with functional use of the contralesional limb in an effort to improve use of the hemiparetic upper extremity.

Wooden, Michael


Research/Teaching Interests: Orthopedics and sports physical therapy. Foot orthotics.
SELECT RECENT FACULTY PUBLICATIONS (2007 – 2012)


**Backus D.** Exploring the potential for neural recovery after incomplete tetraplegia through non-surgical interventions. *PM&R* supplement on *Neuroplasticity.* Dec 2010.


Greenfield B, Guest editorial: Opening up the possibilities with genetics. J Physical Therapy Ed – 2008, 22; 1; 3

Rauscher L, Greenfield B. Advancements in contemporary physical therapy research: The use of mixed methods designs. Physical Therapy -2008, 89; 1; 91 – 100.


Bhatti PT, Herdman SJ, Roy SD, Hall CD, Tusa RJ. A Prototype Head-Motion Monitoring System for In-Home Vestibular Rehabilitation Therapy. J Bioengineering & Biomedical Science; accepted for publication 2012.


Lewis GN, MacKinnon CD, Trumbower RD, Perreault EJ. Co-contraction modifies the stretch reflex elicited in muscles shortened by a joint perturbation. Experimental Brain Research 2010; Sept 20.


Taylor D, Hale L, Water D, Binns EE, McCracken H, McPherson K, **Wolf SL**: The effectiveness of tai chi as a community based falls prevention intervention: a randomized controlled trial. JAGS, 2012, accepted for publication.


Non-refereed Publications


4 Doctor of Physical Therapy Program
Policies, Procedures, and Information
PROGRAM COMMITTEES

Each class elects or appoints (class choice of mechanism) one to three students to serve as student representatives on each of the following program committees: academic affairs; student affairs; clinical education and volunteer projects/cultural diversity. Student class liaisons are also elected for non-program committees: Honors Committee; APTA; PTAG

ACADEMIC AFFAIRS COMMITTEE

This committee sets policy and procedures pertaining to academic deficiencies including academic warnings, probation, failure to maintain passing grades in one or more courses, dismissal, and breaches of the divisional honor code. In addition, members of the Academic Affairs Committee will serve as the advisory review committee in cases of presumed discrepancies in criminal background checks and drug tests.

CLINICAL EDUCATION COMMITTEE

Composed of faculty, and as appropriate, student members, this committee designs, coordinates and plans all clinical education and clinical practicum experiences for the programs. Policies regarding affiliations, assignment, selection, and clinical instructors are established and monitored by this committee.

PUBLIC RELATIONS AND ALUMNI LIAISON COMMITTEE

This committee promotes communication and marketing for the program, including obtaining development funds, administering the WEB page and publishing the Emory Extension. Composed of faculty, and alumni, this committee is responsible for organizing events, activities and communications among the faculty, students and alumni. This committee coordinates with the Emory University Physical Therapy Alumni Association.

SERVICE LEARNING, VOLUNTEERISM / CULTURAL DIVERSITY COMMITTEE

Composed of faculty, students, and staff, this committee meets with the faculty and prospective students to address issues of cultural diversity in the physical therapy curriculum, to plan and coordinate community and international outreach programs and to assist in the recruitment of minority students.

CURRICULUM COMMITTEE

This committee reviews and revises courses, evaluates proposals for new electives and designs program curricula and presents these proposals to the faculty as a whole. In addition, this committee coordinates class schedules each term and administers course evaluations.

ADMISSIONS COMMITTEE

This committee reviews and revises application materials, in addition to reviewing all applicant information, organizing interview days and making recommendations for admissions.

DUAL-DEGREE COMMITTEE

This committee administers the DPT/MBA and DPT/MPH programs.
STUDENT CONDUCT AND ACADEMIC AFFAIRS

Upon matriculation in Emory University School of Medicine, each student agrees to be bound by the rules, policies, procedures and administrative regulations as they exist at the time of his/her admission and as they may be changed by duly constituted authority. Therefore, students enrolled in the School of Medicine are under the jurisdiction of the student conduct standards and procedural guidelines of Emory University. Certain aspects of student conduct as related to students in the School of Medicine call for special consideration, since such students are carefully selected on the basis of both academic capabilities and personal characteristics, particularly related to matters of integrity and propriety. The policies of student conduct in the School of Medicine and the procedures in the case of alleged misconduct were formulated by the officers of the Medical School Administration and of the student body and have been approved by the Dean of the School.

Misconduct would result when a student violates the principles or specifics of these areas of conduct as viewed either by other students, faculty and/or public officials charged with enforcing the law of their jurisdiction. An action by students indicating lack of integrity or dishonesty in academic matters is considered a violation of academic ethics. The offense includes, but is not limited to, cheating, plagiarism, falsifying, or knowingly passing off work of another as one’s own. Cheating includes acquiring, receiving or passing on information about the content of an examination knowingly prior to its authorized release or during its administration. Unless allowed by the instructor, obtaining or passing on of exam copies from previous years in not allowed in this program.

This memorandum is to remind you that any student who commits an act of dishonesty, i.e. cheating, plagiarism or falsification, will be brought before a faculty committee. If the charges of the alleged misconduct are upheld, then the student will be dismissed from the School of Medicine. There is no acceptable excuse for dishonesty. To prevent questionable acts of cheating, all examinations are monitored carefully. All students have the right of appeal as outlined in the University Conduct Code should they be falsely accused. Should you have further questions concerning the Student Conduct Code, please contact the Director.
I. **PREAMBLE**

The students, faculty, and administration of the Emory University School of Medicine join together in support of this HONOR CODE for the purposes of (a) providing an atmosphere of mutual trust, concern, and respect; (b) fostering honorable and ethical behavior; and (c) cultivating lifelong professional conduct.

To promote this purpose, matters regarding misconduct of an academic nature shall fall under the jurisdiction of the Honor Code, while other aspects of a student’s professional education will be covered by the guidelines stated in the Student Conduct Code.

Students enrolled in the Emory University School of Medicine are required to uphold the Honor Code.

A. The Medical Student Council on Honor will have primary jurisdiction over the supervision of the Honor Code as it applies to medical students. That Honor Council is outlined in the School of Medicine Student Handbook for Medical Students.

B. The Academic Health Professions Student Honor Council (hereafter referred to as the Honor Council) will have jurisdiction over the adherence to and supervision of the Honor Code as it applies to students in the Academic Health Professions Programs.

II. **STATEMENT OF THE HONOR CODE**

A. Any action indicating lack of integrity or dishonesty in academic matters is considered a violation of academic ethics. Such offenses include, but are not limited to, engaging in or attempting to engage in cheating, plagiarism, sabotage, falsifying or manipulating data, or knowingly passing off work of another as one’s own.

1. Cheating includes knowingly acquiring, receiving, or passing on information about the content of an examination prior to its authorized release or during its administration, provision or utilization of un-authorized aids, or impermissible collaboration.

2. Plagiarism is defined as the act of incorporating into one’s own works the work or expression of another without appropriately and adequately indicating the source.

3. Sabotage is defined as intentional and malicious actions that impair another student’s academic performance.

4. Falsifying or manipulating data is defined as the act of creating, enhancing, or otherwise changing actual results in academic, clinical, or research matters.

B. Acts observed that appear to be in violation of the Honor Code will be reported to the Honor Council. Failure on the part of a student to report such apparent violation will itself be considered a violation of the Honor Code.
C. Lack of knowledge of the aforementioned precepts will not stand as adequate defense of violation of the Honor Code.

D. The following pledge may be signed at the end of all final examinations, hour quizzes, and other important projects on which the pledge is required by an instructor:

   “On my honor, I have neither given nor received any aid on this (examination, quiz, or paper), nor am I aware of anyone who did.”

   **However, absence of this pledge does not exempt the student or the assignment from the obligations set forth under this Honor Code.**

E. Each student upon entering the School of Medicine must sign a matriculation pledge stating that he/she has read, understands and is aware of his/her responsibilities under the Honor Code.

III. THE ACADEMIC HEALTH PROFESSIONS COUNCIL ON HONOR

1. MEMBERSHIP

   A. The Honor Council

      (1) The Honor Council will consist of one elected Student Representative from each program and 2 (two) Faculty Representatives. In addition, there will be two (2) alternate Student Representatives from each program, and four (4) Alternate Faculty Representatives. The leadership of the Council will be under the direction of a Chair, Vice Chair, and Secretary who are elected by the student membership from the Student Representatives on the Honor Council.

      (2) Student Representatives and Alternates

         (1) Elections will be held by November 1\textsuperscript{st} of each academic year. A Student Representative and two Alternate Student Representatives will be elected by each program’s students to serve for a one-year term. The elections will be open to any student, including previous members of the Honor Council. The list of candidates will be approved by the Dean.

         (2) Vacancies will be filled by special election of the respective program, when possible. If a program is unable to elect any representatives, alternates from other programs will serve on a rotational basis until a new Student Representative can be elected.

      (3) Faculty Representatives and Alternates

         (1) To establish a pool of six faculty members, three of whom are replaced each year, the following process will be utilized:

            1) Programs will submit nominations for faculty membership to the Academic Health Professions Advisory Committee for consideration for appointment. Selected faculty nominees will be forwarded to the Dean.
2) In the first year, the Dean will appoint one Faculty Representative and two Alternate Faculty Representatives for a one year term, and one Faculty Representative and two Alternate Faculty Representatives for a two year term.

3) Each November thereafter, the Dean will appoint one Faculty Representative and two Alternate Faculty Representatives for a two year term.

(2) Each appointed member can serve no more than two years without reappointment by the Dean.

(3) Faculty members will be limited to three consecutive terms.

(4) Vacancies will be filled by appointments by the Dean.

B. LEADERSHIP OF THE HONOR COUNCILS

a. Chair and Vice-Chair: The Chair and Vice-Chair will be Student Representatives elected by the student membership of the Honor Council who are presently enrolled in programs of at least two years in length. This election will be held by December 1st of each academic year following the first year of implementation. These elected officers must be approved by the Dean.

b. Secretary: The Secretary will be a Student Representative and will be elected for a one year term by the entire Council from the pool of Student Representatives whose program length allows fulfillment of the term. This officer is approved by the Dean.

C. All matters reviewed by the Council will be kept strictly confidential.

IV. PROCEDURES FOR REPORTING & INVESTIGATING VIOLATIONS

A. If an individual believes that a violation of the Honor Code has occurred, that individual must report the violation as soon as possible to any member of the Honor Council. Failure to report the violation will itself constitute a violation of the Honor Code.

B. Once an allegation has been made, the individual making that allegation must draft, sign, and submit to the Honor Council Secretary a brief statement for Honor Council documentation.

C. Upon notification of a possible violation of the Honor Code, the Council Secretary will choose two investigators from available alternate Council members whose responsibility it will be to gather information about the case. The Secretary will then inform the Honor Council Chair that an investigation has been initiated. The Chair shall subsequently inform the Council faculty members and the Executive Associate Dean of OMESA that an investigation is being conducted, but the name of the student and details of the incident will remain known only to the Chair, the Secretary, the investigators, and any individuals the Chair may deem necessary. The student named in the allegation will be informed of the investigation prior to its
onset. Upon notification of the investigation, the student will be provided with a list of available advisors with whom to consult, at the student’s discretion.

D. After information concerning the case has been gathered, this information shall be submitted to the Chair of the Honor Council, who along with the two investigators, will judge whether sufficient evidence exists to warrant a formal hearing. Among the Chair and two investigators, the decision to continue with a formal hearing or cease the investigation will rest upon the concurrent views of at least two of the three participants.

E. If a hearing is deemed warranted, the student will be notified by the Secretary of the Honor Council in writing of the date, time, and place of the Hearing; the nature of the violation with which the student is charged; the evidence of the investigation, including the name of the individual making the initial allegation, and the options available to the student concerning assistance by an advisor.

F. The hearing will take place within a reasonable time (no more than 21 days) after the accusation is reported to the Honor Council. (In rare instances, a different time period may be determined by the Honor Council based upon the specific circumstances of the case.)

G. The student will be permitted to continue academic endeavors until a final decision is made. The student and advisor may review and gather evidence prior to the hearing.

H. For each hearing, the Honor Council consists of eight members: five student members, the Chair (or Vice-Chair) and two faculty members. The five student members are randomly chosen by the Chair and will include a student member from the program of the accused. If any member is unable to serve for any reason, including conflict of interest, then an alternate member will sit on the Honor Council. The alternate members who serve as investigators will present pertinent information but will not be allowed to vote in the proceedings or to be present during deliberations.

I. It will be the responsibility of the Secretary to inform the Honor Council members of the alleged violation (date, person involved, and nature of the accusation). The Chair (or Vice-Chair) will preside over the hearing and participate in discussion and deliberation of the case but will not have a vote.

V. The Hearing

Rules of law do not apply to any hearings or proceedings regarding the Honor Code.

A. Order of Proceedings

1. Call to order
3. Statement of the alleged Honor Code violation
4. Presentation of evidence: The Investigators and the accused may present testimony and other evidence as appropriate and relevant to the case. The Chair and members of the Honor Council, the accused, and the advisor to the accused
may ask questions of witnesses, but the Chair shall have the right to determine whether such questions are appropriate.

5. Discussion and deliberation by the Council is held in a private executive session.

B. Rules Governing Proceedings

1. All hearings will be conducted in closed-door session and will remain confidential.

2. Participants in the hearing will be limited to the following:
   a. Chair (or Vice-Chair) of the Honor Council
   b. Honor Council Representatives to include the Secretary or, if needed, a temporary secretary appointed by the permanent Secretary.
   c. Student accused of violation
   d. Two Alternate Council Representatives who served as investigators for the case.
   e. Relevant witnesses who may be present only while testifying
   f. Advisor for the accused.

3. The Secretary or his/her appointee will take notes of the hearing and make them available to the Honor Council.

4. The accused has the option of selecting an individual from the School of Medicine, but not a member of the Honor Council, to assist in an advisory capacity prior to the hearing and to be present at the hearing. This individual will not be permitted to testify or to make statements of any nature other than asking questions.

VI. DECISION AND PENALTIES

A. For a student to be found guilty of an Honor Code violation, the unanimous vote of the seven voting members of the Honor Council will be required [the Chair (or Vice-Chair) will not be eligible to vote].

B. The penalty recommended for an Honor Code violation will be by a plurality vote of the seven voting members of the Honor Council. In case of a tie, the Chair (or Vice-Chair) will cast a vote.

C. The Dean will be informed promptly following the decision of the Honor Council.

D. Recommendation for penalties regarding violations of the Statement of the Honor Code:

   1. The standard penalty for violation of the Honor Code is (a) mandatory leave of absence from Emory University School of Medicine for at least one academic term (semester); and (b) a grade of “Incomplete” for all courses in which the student is enrolled at the time of the infraction.

   2. The Honor Council may recommend to the Dean a penalty more severe than a mandatory leave of absence (e.g., permanent expulsion) or may recommend a less severe penalty (e.g., disciplinary probation for Honor Code violation), dependent upon the circumstances of the case.

   3. Upon receipt of a mandatory leave of absence, the student cannot advance to the next term until he/she has completed the term in which the “Incomplete” grades were given.
4. At the discretion of the Program Director, the student may be required to enroll as a student in special standing for purposes of review prior to re-enrollment as a full-time student.

E. Decision of the Dean of the School of Medicine

The final decision rests with the Dean. The decision of the Dean will be effective immediately unless there is an appeal. The appeal, including the basis for the appeal, must be submitted by the student in writing to the Dean within one week after the decision of the Dean. If an appeal is requested, an ad hoc committee consisting of three faculty members from the School of Medicine will be appointed by the Dean. The committee will review the data and render its recommendation to the Dean for upholding or repealing the decision, following which the Dean will issue the final decision in the matter.

VII. AMENDMENTS

Amendments to the Honor Code may be proposed by the Honor Council at any point in the academic year; proposed amendments must be approved by the Dean before becoming effective. If an amendment is approved while a case is under active review that amendment will not apply to that case. Any new amendment, once approved, will become effective as soon as all academic health professions students have been notified of the change via mail or email.
STRUCTURE AND FUNCTION
of the
ACADEMIC AFFAIRS COMMITTEE

A. Structure

The present structure of the Academic Affairs Committee is as follows: The Chair of the Academic Affairs Committee is appointed by the Director.

The Chair of Academic Affairs and at least two other faculty members, designated by the Director, serve as the Academic Affairs Committee in making decisions or recommendations regarding student dismissal from, probation or promotion, and progression in the program.

In the event of formal student appeal to the Academic Affairs Committee by a student regarding grading or academic status, in addition to the Chair and the two or more faculty members denoted above, the committee composition will include two Doctor of Physical Therapy students (from among members of their class Academic Committees

1. the chairperson (Chair of Academic Affairs)
2. two Doctor of Physical Therapy students (from members of their class Academic Committees
3. at least two faculty members.

Committee members are chosen by the chairperson for each meeting. A quorum for meetings regarding a formal student appeal is five members; otherwise it is three members.

B. Function

The purpose of the Academic Affairs Committee is to:
1. hear and act on student and faculty general academic problems and recommendations
2. determine individual student academic status and make recommendations for faculty decision and action, as appropriate
3. hear and make recommendations for faculty decision regarding individual student and faculty appeals.

The philosophy underlying the purposes and mechanisms of the Academic Affairs Committee is as follows:

Students and faculty share the responsibility of:
1. identifying and resolving academic problems
2. curriculum planning, implementation and evaluation.

Each individual is here for the purpose of teaching and learning. All share a commitment to the quality of teaching-learning process. The common purpose and commitment require daily attention to become realities. The Academic Affairs Committee provides a mechanism for open, honest and fair communication and decision-making by all persons.

In meeting the above purpose and philosophy, the Academic Affairs Committee functions as follows:

1. The Chair of Academic Affairs meets with the student liaison(s) a minimum of once per semester. The purpose of the meeting is to determine strengths, weaknesses, problems and recommendations regarding current curriculum implementation. The student liaison(s) is expected to solicit the above information from students in the class. In that way, comments are reflective of the class, as a whole.
2. The student liaison(s) may request a meeting, at any time, with the Chair of Academic Affairs to discuss specific or general academic problems and recommendations.

3. Any student may request a meeting, at any time, with the Chair of Academic Affairs to discuss specific or general academic problems and recommendations.

4. The class, as a whole, may request a meeting, at any time, with the Chair of Academic Affairs and specific faculty members or the faculty, as a whole, to discuss academic problems and recommendations. The request is made to the Chair of Academic Affairs, who, in turn, contacts the additional faculty, as specified. The request should be accompanied by suggested meeting times and an agenda.

5. The Chair of Academic Affairs, alone or with the faculty, may request, at any time, a meeting with specific students, or the class, as a whole, to discuss academic problems, recommendations or plans. The request should be accompanied by suggested meeting times and a tentative agenda.

6. The Chair of Academic Affairs meets at mid-semester, the end of the semester, and other times, as necessary, with designated faculty members, to review individual student academic status. Decisions and procedures regarding decisions are presented in "Procedures of Grading and Promotion".

7. In the event of formal student appeal, the Chair of Academic Affairs convenes a meeting with the committee members as specified above. The committee determines a recommendation(s) to the faculty for final decision. Decisions for recommendations are made by simple majority vote. Again, recommendations from the Academic Affairs Committee are referred to the faculty, as a whole, for final decision-making. In instances required by university or medical school regulations, the faculty will recommend to the proper authority that the decisions be enforced.

C. Appeal Procedures

1. If a student or students have concerns about the fairness and/or validity of the content or process of a course, the following steps should be taken to voice the concern.
   a. The first step is always to consult with the instructor of the course. The consultation should include student presentation of the problem(s) and constructive, feasible suggestions for solution of the problem.
   b. If consultation with the instructor proves unsatisfactory, the student or student liaison(s) should consult with the Chair of Academic Affairs. The Chair will then negotiate with the instructor and student(s) to find a reasonable solution.

2. If an individual student wishes to appeal a grade, the steps outlined in #1 above are followed. If the solution negotiated is not considered appropriate by the student, the student is to submit a statement to that effect, in writing, to the Chair of Academic Affairs. The Chair then convenes a meeting with committee members to review the situation and make recommendations to the faculty for a final decision.

3. If a student wishes to appeal academic status, a written statement to that effect is submitted to the Chair of Academic Affairs. The Chair then convenes a meeting with committee members to review the situation and make recommendations to the faculty for a final decision.

4. If the final decision of the faculty in instances of #2 and #3, above, is unsatisfactory to the student, extra-program appeal mechanisms are available to the student. Information regarding same is available from the Chair of Academic Affairs.
POLICY FOR ENTRY LEVEL STUDENTS
POLICIES ON GRADING AND PROMOTION

Academic Regulation regarding program completion:

1. Successful completion of a residency totaling 9 semesters, which includes academic study and 30 weeks of full-time clinical education.
2. Completion of all semester hours of work with an overall average of B. A student must have a cumulative grade point average of 3.0 or higher in order to graduate from the program.
3. A grade of B or above must be earned in each individual course. The minimum score for passing written and laboratory examinations for all courses is 80%. Students may continue in a course if a single written examination score falls below the minimal score of 80%, but the average examination score for the entire course must be at or above the minimal score to pass the course. A student who scores less than 80% on any examination must contact the course director to discuss areas of deficiency. Failure to do so will negatively affect any potential decision for future remediation opportunities. Note: Physical Therapy requires mastery of both academic and psychomotor clinical skills, therefore, an exception to this rule exists in the following clinical courses: Basic Measurement (DPT 710), Introduction to Therapeutic Interventions (DPT 740), General Medical Conditions (DPT 755), Musculoskeletal Rehabilitation (DPT 800), Pediatric Rehabilitation (DPT 815) and Adult Neurorehabilitation (DPT 810), where ALL practical examinations must be passed with a minimum score of 80% to successfully pass the course, regardless of the student’s cumulative average for that course.
4. Successful completion of each clinical rotation as defined in course materials.
5. Progression through the curriculum is dependent upon successful completion of all courses in sequence and upon recommendation by the Faculty each semester. Any changes in sequence must be approved by the Faculty.

All grades are determined by the following criterion-based system:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90-100%</td>
</tr>
<tr>
<td>B</td>
<td>80-89%</td>
</tr>
<tr>
<td>C</td>
<td>70-79%</td>
</tr>
<tr>
<td>D</td>
<td>60-69%</td>
</tr>
<tr>
<td>F</td>
<td>59% or below</td>
</tr>
</tbody>
</table>

Academic Regulation regarding remediation:

The student who achieves a final course grade below the minimal passing score of 80% may qualify for remediation. Should a decision be made to provide an additional opportunity, the student will be placed on academic probation. The course instructor then completes a Record of Academic Probation Recommendation Form. (see section on Academic Deficiency and Probation).

In regards to remediation opportunities, the following policies are observed:

1. Remediation opportunities are offered at the discretion of the course director.
2. To qualify for remediation, the student MUST show evidence of having contacted the course director during the course to discuss any performance that failed to meet minimal standards. The course instructor completes a Record of Academic Deficiency Counseling Form whenever the student is counseled regarding deficiencies in academic work. (see section on Academic Deficiency and Probation).
3. This policy for remediation will also apply to students who fail to pass a practical examination in any course that includes practical examinations.
4. Remediation of a course may involve re-taking a written examination, an oral or practical examination, or the completion of a remediation project.
5. All remediation activities must be completed within the timeframe defined by the course director, and before the end of the following semester.
6. Students will receive a course grade of ‘P’, “Pending”, until successful remediation is completed.
7. For remediation to be considered successful, the student must attain the minimal passing score of 80% on the remediation activity (see #4 above). As a consequence of having to remediate, the highest grade attainable for the course will be a “B”. All questions regarding examination and grading should be addressed directly through a meeting with the student and the course director.
8. A student is allowed only one opportunity beyond the initial attempt to satisfactorily complete the requirements for a given course. Students who fail a remediation examination will fail that course.
9. Students must pass all courses to progress in the program. Students who fail a course must repeat and pass the course before progressing in the program.
   a. Permission to repeat a course is contingent upon approval of the faculty.
   b. Repeating a course will require the student to take a leave of absence for one year, as the sequence of the program is inflexible and progression is contingent upon passing all subsequent coursework.
   c. A student who is offered the opportunity to repeat a course will be required to attend all concurrent coursework and complete all examinations and assignments, even though these courses were already successfully passed. This is done in the best interest of the student, as course information is updated each year.
10. There are concurrent and cumulative limits to the number of opportunities offered to a student for re-examination to meet criteria. There is a limit, per semester, to the number of courses in which a student is allowed to be re-examined. There is also a limit to the cumulative total of course re-examinations that are allowed during the program.
   a. No more than TWO course re-examinations are allowed per semester
   b. No more than a cumulative total of FOUR course re-examinations are allowed throughout the entire program.
   c. Cumulative totals to the number of remediation opportunities continue to apply to students who must repeat coursework.

Consequences for violation of an Academic Regulation:

A student may be placed on academic probation or dismissed from the program at any time in the curriculum when academic or other performance requirements are not met. If any one of the above conditions are not met or exceeded, the student situation will be first brought before the Academic Affairs Committee for consideration of dismissal from the program. The student will be invited to make a statement at that time.

Dismissal from the program may result if a student:
1. Fails a repeated course.
2. Exceeds the total number of remediation opportunities per semester or per program.
3. Violates the Honor code.

The recommendation of the Academic Affairs Committee is based on the overall performance of the student within a specific course, as well as throughout the overall program of study. The recommendation of the Academic Affairs Committee is brought to the Division of Physical Therapy Faculty for the final decision. The full-time faculty will meet in session to consider the recommendations of the Academic Affairs Committee. If a majority of the full-time Physical Therapy Faculty votes to dismiss the student, the Director of the Division of Physical Therapy will make a recommendation to the Dean of the School of Medicine that the student be dismissed. The recommendation will specify the reasons for dismissal, including the regulation or standard violated.
Should the student wish to appeal this decision, a formal appeal in writing must be first sent to the Director of the Division of Physical Therapy within 48 hours of notification of dismissal. Appeals will be reviewed and voted on by the Faculty. Subsequent appeals will be directed directly to the Dean of the School of Medicine. The Dean will make any final decisions regarding dismissal of the student.

COURSE EVALUATIONS

Students are required to fill out course and instruction evaluations for every course (including clinical science and clinical research). The evaluation forms are opened on Blackboard two weeks prior to the end of the semester and remain open for two weeks after the end of the semester. Obtaining feedback from students is extremely important to the development and continued excellence of the program and of the faculty. It is also an opportunity for students to practice providing constructive feedback. You must complete the evaluations in order to get your final grade for the course and in order to graduate.
POLICY ON EXAMINATION PROCEDURES

The following procedures are to be observed by faculty and students during the administration of examinations. These procedures were adopted to protect both the individual student and the integrity of the examination.

1. All students are expected to take the examination on the scheduled day. The instructor has no obligation to provide alternate arrangements if you are unable to take the examination on the scheduled day.

2. All examinations are monitored.

3. Take home and group examinations are not given.

4. All electronic devices are to be turned off and stored. If a calculator is needed for an exam, these will be provided by the instructor.

5. If an examination is less than one hour in length, the instructor may specify that students are not to leave the room during the administration of the examination.

6. If an examination is one hour in length or longer, students may leave the room with the permission of the instructor.

7. The condition of being able to/not being able to leave during examination will be announced by the instructor immediately prior to the initiation of the examination.

8. If students are permitted to leave the room during an examination, the following conditions are enforced:
   a. Each student is to approach the instructor and ask permission to leave the room.
   b. Reasons for leaving the room only include using the restroom, getting a drink of water, or getting a refreshment if refreshments are in the immediate area.
   c. Only one student may leave the room/be gone from the room at a time.
   d. Before leaving, the student is to take his/her examination and any other relevant papers, e.g. scrap paper, to the instructor. No electronic device (e.g. laptops, cell phones, PDAs, etc) can leave the room. If a portable electronic device (e.g. cell phones, PDAs, etc) is within a bag (e.g. purse) to be taken out of the room, it must be taken to the instructor. The student then retrieves the examination and any electronic devices from the instructor when returning to the room.
   e. While absent from the room, the student:
      i. stays in the immediate area
      ii. does not talk with any person
      iii. does not go to his/her locker
      iv. attends only to the business for which the student left the room.

9. An exception to any of the above may be a situation that the instructor considers to be a dire circumstance, based on information from the student or other persons. In these instances, the instructor will advise the student(s) of the appropriate action.
10. If any one or more of the conditions specified above are not followed by the student, the Instructor may judge the examination of that student compromised. In that instance, the instructor will immediately so advise the student and terminate the examination of that student. Subsequent action will be a function of the reason for terminating the examination.

11. All students sign the honor code pledge on the final page of the examination (“On my honor, I have neither given nor received any aid on this (examination, quiz, or paper), nor am I aware of anyone who did”).

12. Students are not allowed to make copies of examination and examination keys.
DIVISION OF PHYSICAL THERAPY
EMORY UNIVERSITY
ACADEMIC DEFICIENCY AND ACADEMIC PROBATION

Following are two forms that are used by the Division of Physical Therapy. The first entitled Record of Academic Deficiency Counseling is used any time a student is counseled about his performance. The execution of the form by the faculty advisor will establish that the student has been warned about substandard work. The form is used to advise the student of some academic deficiency which could lead to academic probation or dismissal. Written recommendations for correction of the deficiency are also provided. There will be two copies of the document. The student gets one copy, and the program retains a copy in the student's file.

The second form, Record of Academic Probation Recommendation, is used when a student fails to achieve a grade of B or above in all Division of Physical Therapy courses or unsatisfactory completion of a special project and/or practicum. There will be three copies of the probation form. The student receives one copy, one copy is retained in the student's file and the third copy is sent to the Office of Medical Education and Student Affairs, which forwards it to Dr. J. William Eley, Executive Associate Dean, Emory University School of Medicine.

The forms are designed to provide the student with written documentation of feedback and are for the protection of both student and faculty.
RECORD OF ACADEMIC DEFICIENCY COUNSELING
(Type or Print Using Ball Point)

Student Name___________________ I.D._____ Faculty Surname_________________

Program:________________________ Level:________________________________

Nature of Deficiency:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Recommendation(s) made to student:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

The student acknowledges that he/she has experienced some academic problems that jeopardize good standing in the program and that failure to correct the deficiency(ies) can lead to placement on academic probation and/or academic dismissal from the program.

Faculty signature ________________________ Date ________________________

Student signature ________________________ Date ________________________
RECORD OF ACADEMIC PROBATION RECOMMENDATION
(Type or Print Using Ball Point)

Student Name __________________________________ I.D. ________________________

Academic Unit _________________ Date Probation to be Effective ________________
Deficiency(ies)

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Requirement for continuation:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

The student acknowledges that he/she is being recommended to the Dean of the School of Medicine for placement on Academic Probation. Upon approval of this recommendation by the Dean, the student understands that failure to meet the requirements for continuation stated above will result in academic dismissal from the School of Medicine.

Faculty signature ______________________________ Date ________________________

Student signature ______________________________ Date ________________________
Evaluation of Student Classroom Participation

In all classes, a percentage of your grade is based on classroom participation and professional behavior (including dress).

1. **Answers questions during discussion of assigned or presented material**
   
The above behavior demonstrates recall, comprehension and/or application of information obtained from assigned readings or experiences. The behavior may be voluntary or solicited. Correctness of the response(s) is not a factor here; rather, the student's willingness to give the response.

2. **Asks questions directly related to assigned material**
   
   This behavior demonstrates the student's recognition of his/her lack of understanding or need for clarification.

3. **Asks questions extrapolated from assigned/presented material**
   
   In this situation, the student demonstrates adequate comprehension of material to generate related questions. The questions do not deal with information presented in the material, per se. Instead the questions hypothesize relationships of the material with other concepts or situations in which principles may apply. In addition, the questions may be seeking additional pertinent information recognized as relevant by the student.

4. **Reports on an assigned project**
   
   The student voluntarily presents information on a project assigned to the class as a whole or to an individual student. The behavior indicates willingness to share information and to participate.

5. **Presents information from voluntary additional reading, project, etc.**
   
   The student voluntarily presents information related to the discussion topic. The information has been obtained from an additional reading source or a project independently undertaken by the student.

6. **Praises or challenges the contribution of some member of the group**
   
   The above behaviors indicate the student's interest and willingness to participate in discussion. The response may support the relevance, insight or meaningfulness of a comment by the student or teacher. On the other hand, the response may express curiosity regarding the correctness or relevance of a comment. Challenges should demonstrate openness and interest rather than condescension or judgement.

7. **Contributes pertinent information from past experiences**
   
   The student presents a brief account of a previous clinical or personal experience which serves as an example of a situation under discussion, of application of principles or concepts being discussed, or an alternative method of administering a technique, etc.
8. **Contributes suggestions regarding hypotheses, methods, solutions for a problem, project, etc.**

The behavior stated above relates specifically to new, novel and different situations rather than contributions from past experiences or reproduced from assignments. These contributions indicate interest in the topic area and classroom activity plus potential ability to analyze situations and synthesize information.

9. **Attends to classroom activity**

This item relates to non-verbal behavior reflecting attention on the part of the student. Examples include maintaining eye contact with persons speaking, taking notes and facial and postural expressions supportive of the group activity.

10. **Works toward completion of tasks assigned during the class session**

Again, this behavior is primarily non-verbal. Examples of class sessions in which this behavior is appropriate include labs, classes with small group work, etc. Evidence of the behavior is simply seeing the student engage in activities consistent with the objectives or assignments for the learning experience.

11. **Supports the classroom environment by appropriate dress**

The behavior stated above addresses adherence to the dress code when attending any type of class. There are specific guidelines for dress for seminars, laboratories, and classes with guest speakers. The guidelines also specify the appropriate dress for clinical and other types of settings. Evidence of the above behavior is observation of student dress to determine compliance with guidelines.

12. **Attends Class**

Attends the scheduled class session. If the student cannot attend, the student communicates with the instructor prior to class, if possible. The student arrives for class at the scheduled time. Also, the student returns from breaks at the scheduled time.
EVALUATION OF STUDENT CLASSROOM PERFORMANCE

Student: ________________________  Instructor: _________________________

Instructions: Space has been provided for the name of the student and the date. If a behavior occurs in a positive manner at least once, indicate with a “+”. If a behavior occurs in a negative manner at least once, indicate with a minus “-”. If a behavior does not occur, leave a blank.

Participation per student should be sampled on a regular, e.g. per session basis.

<table>
<thead>
<tr>
<th>DATE:</th>
<th>1. Answer questions during discussions of assigned or presented material.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2. Asks questions directly related to assigned or presented material during discussion.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3. Reports on an assigned project.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4. Asks questions extrapolated from assigned/presented material during discussion.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5. Presents information from voluntary additional reading, project, etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6. Praises or challenges a contribution of some member of the group.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Contributes pertinent information from past experience.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8. Contributes suggestions of hypotheses, solution for a problem, etc.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9. Attends to classroom activity.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10. Works toward completion of tasks assigned during the class session.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>11. Supports the class environment by appropriate dress.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>12. Supports the classroom environment by attendance and timeliness.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
STUDENT AFFAIRS POLICIES

The American Physical Therapy Association’s vision 2020 statement considers professionalism as a core component of a Doctor of Physical Therapy. Therefore, the faculty in the Division of Physical Therapy at Emory University strive to uphold professional standards by modeling and enforcing professional behaviors in our students.

Enforcement of these behaviors will be reflected as a percentage of each course grade.

Student Conduct:

In addition to any new conduct guidelines to be approved by the Division of Physical Therapy faculty and students, all students must abide by the following:

a. Emory University Student Conduct Code as stated in Campus Life
b. School of Medicine Student Conduct Code
c. Rules Governing the Practice of Physical Therapy in the State of Georgia as developed by the Georgia State Board of Physical Therapy
d. The Ethical Code stated in the Georgia Law governing the Practice of Physical Therapy

Student Conduct in Classroom:

It is everyone’s responsibility to foster a mutually respectful learning environment in the classroom. Accordingly, there are very high expectations about professional behavior in this program. The following unprofessional behaviors are disruptive to everyone and therefore should be avoided during our class meetings:

Arriving late. (Please explain your tardiness to the instructor immediately following the class)

Holding side conversations. (If you have a question about the class material, please raise your hand and ask it, rather than whispering it to your neighbor. Chances are good that if you have a question about what’s happening, then many of your classmates may also have the very same question. If you have to discuss something unrelated to class with a classmate, then please wait until after class.)

Inattention (e.g., reading unrelated materials or studying for other classes).

Personal attacks, or comments of a disrespectful or insulting nature.

All the classes in our program are "unplugged." Please turn off all computers, PDA’s, phones, pagers, or other electronic devices during class.
Dress Regulations:

The Division of Physical Therapy has guidelines for appropriate dress with the goals of fostering professional behavior in students and to show respect to others and the healthcare environment in which we exist.

Students in the Doctor of Physical Therapy Program must spend varying amounts of time in clinical and laboratory settings each semester. Before proceeding to actual experience with physical therapy clients, students observe clinicians and instructors in clinical settings, both on and off campus, and practice on each other in the program’s physical therapy laboratory. During this laboratory time, the students will learn and practice procedures, the theory behind these procedures and patient management skills (physical and emotional management).

The dress regulations for clinic are as follows:

**Uniform:** Dark, solid color slacks and white uniform top/jacket (men and women). Tie for men. No pants or shirt combinations that allow the midriff or back to be exposed during bending, lifting, or stooping.

**Shoes:** Non-cloth, rubber-bottom, sturdy shoes. Dark blue, black, brown or white shoes. No clogs, sandals, deck shoes or tennis shoes (leather or cloth) or open-toed/heeled shoes.

**Hose:** Dark blue, black or beige hose. Dark blue or black socks.

**Name Tag:** Name tags obtained through the Division of Physical Therapy.

**Perfume/Cologne:** None. (Note: The policy is applicable to men and women.)

The dress codes for some facilities may not specify a specific uniform. For these facilities the above regulations apply.

You will need to have the uniform by the mid to latter part of the first semester. There will be enough time after you arrive to purchase uniforms before you will need to wear them.

Dress Code for Laboratory and Class Sessions

There is a dress code not only for clinical situations, but also for certain laboratory sessions, class sessions, guest lecturers, and Grand Rounds. Therefore, we suggest you have at least two sets of appropriate clothing. For guest lecturers, clinic dress regulations are in effect. However, women may wear a dress or skirt and blouse with the white uniform jacket.

For some specific labs, you will be required to wear shorts, short socks and, for women, a halter top, or 2 piece swimsuit top to allow exposure of the spine and lower back for evaluation practice. A one piece swimsuit is not adequate for the work in lab. You should bring these lab clothes with you, as you will need them in the first semester. Sweat suits, with the school monogram, are required attire to wear over lab clothes during breaks and while walking between the lab and the dressing room.

Sweat suits will cost approximately $65.00* and will be ordered for you through the program. No other sweat suits are permissible. (*costs subject to change.)
Dress for Anatomy and Neuroanatomy Laboratory

For anatomy lab, you will need a separate long lab coat. You may purchase the lab coat before arriving or at the Emory bookstore after you arrive. You must wear closed shoes in these labs; no sandals or “flip flops” will be tolerated.

General Dress Code

In addition to dress regulations for clinic, laboratory sessions, and the anatomy lab, students are required to adhere to the following dress regulations while on campus in any patient care or classroom building. The following attire is not considered permissible: 1) casual tee shirts 2) jeans 3) sandals or “flip flops” or “thongs” 4) surgical scrubs (except optional in anatomy lab) 5) immodest fashions 6) short-shorts 7) sweat shirt/pants other than as specified for laboratory sessions 8) denim, 9) visible pierced body parts other than ears and 10) perfume/cologne. Tennis shoes may be worn for class but not for guest speakers or when a lab coat is required. Running or exercise shorts may be worn in laboratory sessions, but must be covered with a sweat suit when in the hallways as described above. In addition, students are requested to wear uniform jackets when in buildings where patient care occurs, e.g. Center for Rehabilitation Medicine.

Necessary Equipment/Supplies:
A watch with a second hand will be needed for laboratory and clinic. For anatomy and neuroanatomy lab, you will need one box of surgical gloves (non-sterile gloves), a dissection kit or probe, scalpel and mouse tooth forceps.

APTA Membership and Meeting Requirements:
The American Physical Therapy Association (APTA) is our professional organization and provides many member services. You are encouraged to join and maintain a membership in the APTA. The cost for a student membership is $80.00 annual national dues, and $7.00 per year in state chapter dues. Applications will be provided at orientation. The PT Journal and newsletters are used in many classes, and the sooner you join, the sooner they’ll start coming to you.

The student proposed and endorsed requirements for student participation in professional association activities are presented below.

1. The student will attend at least one meeting during each semester in which a Health Services Management course is taken and one meeting during the Excitability Symptom Complex.

2. The meetings qualifying for the requirement in #1, above, are the following.
   a. A Physical Therapy Association of Georgia, Inc. (PTAG) business meeting (meetings occur in Fall and Spring)
   b. A Student Special Interest Group (SSIG) meeting (meetings occur in Fall, Winter, Spring and Summer)
   c. A National Student Conclave (Usually occur in the Fall)
   d. A national meeting of the APTA, either the Combined Sections Meeting in February or the Scientific Exposition (at which the House of Delegates occurs) in June
   e. The above are preferred. An alternative meeting type is a PTAG Delegate Caucus (usually occur only in the Spring), or PTAG Board Meeting (usually Friday evening prior to the Saturday PTAG business meeting).

3. The student will present evidence of this attendance by submitting a record of registration or by having attendance verified by meeting registration officials on a form provided by this educational program. For SSIG meetings, the student liaisons will get a copy of the attendance record from the SSIG and submit it to the Division for attendance verification.

4. The exact dates and locations of any of the above meetings may be obtained by visiting the APTA web site for APTA meetings and the PTAG web site for PTAG meetings.
Emory University Health Service
Emory University Health Service (EUHS) is located at 1525 Clifton Road on the Emory Campus and provides comprehensive medical care to students, students’ spouses and dependents (over age 12). Services available are outpatient, physical examinations, anonymous HIV and STD testing, gynecology, family planning and colposcopy, mental health, preventive medicine, allergy injections and immunizations, referrals to specialists, health education, international travel information, nutrition counseling, and substance abuse counseling.

Student Health Service Hours:
During the academic year, 8:00am - 6:00pm, M-F
10:00am - 1:00pm Saturdays
During summer and winter breaks, 8:30am - 5:00pm Monday through Friday
Information regarding after hours care is available by calling 404.727.7551, press 4.

Visits to the Health Service during regular hours are covered by Emory tuition. Other services, such as laboratory tests, x-rays, and allergy injections are not covered by tuition and must be paid for by the student or by insurance. Payment is due at the time of service. Cash, check, Visa, MasterCard, and EmoryCard are accepted.

Students’ spouses and dependents (over age 12) can be seen in the EUHS on a fee-for-service basis. The EUHS will also treat any official visitors or guests to the university. Students’ dependents age 12 and under may be seen at the Primary Care Group at 1525 Clifton Road.

Emory University Student Health: 404.727.7551

Mental Health and Counseling Services

The Student Counseling Center offers a wide range of confidential counseling services at no charge to fully registered Emory students. Located on the 2nd floor of 1462 Clifton Road and open from 8:30 AM until 5:00 PM Monday-Friday, the Center’s services include individual, couples, family, and group counseling for personal problems and concerns, as well as referrals to off-campus and on-campus professionals. Professional staff provides outreach programs and workshops for students, faculty and staff who wish to learn about managing anxiety and stress, changing values and lifestyles, communication skills, time management, relationship concerns and other topics.

Emory Student Counseling Center: 404.727.7450
Mark McLeod, Ph.D., Director

Faculty members appointed by the Department of Psychiatry

These individuals are designated by the Chairperson of the Department of Psychiatry and Behavioral Science and may assist students in obtaining appropriate psychiatric assistance. They will serve as triage and may be able to help identify the most appropriate person either within the Emory Department of Psychiatry or among private practice psychiatrists in the community.
Involuntary Psychiatric Withdrawal and Readmission

If, in the opinion of the Dean of the School of Medicine, a student demonstrates evidence of an emotional disorder and has engaged in, or threatened to engage in, conduct which poses a threat to the mental, emotional, or physical well being of self or other, or to property, and/or impedes the lawful activity of others, the student may be referred for psychiatric evaluation. Refusal to obtain psychiatric evaluation when properly requested to do so or determination by the psychiatric evaluator that withdrawal would be in the best interest of the student and the University shall be case for involuntary withdrawal of the student from the University by the Dean. Withdrawal in such cases shall normally incur no academic penalty for the term in which the student is enrolled, and tuition refund, if any, shall be based on the schedule established for voluntary withdrawal. The Dean shall inform the student in writing of the effective date of the involuntary withdrawal and shall explain in writing the procedure for application for readmission to Emory University. Application for readmission after withdrawal for psychiatric reasons will require evaluation by a University psychiatrist. Persons seeking readmission may choose to submit a written report from their own psychiatrist at their own expense. In no case shall readmission be granted after psychiatric withdrawal without the approval of a psychiatrist acting as evaluator for the University.

Department of Psychiatry Outpatient Psychotherapy Training Program
404.727.0399
404.727.5886

This program is a confidential service that is staffed by second, third, and fourth year residents with faculty supervision. Services are charged on a sliding scale basis. The program has proven to be very helpful for a number of selected students, but referrals must be made by one of the triage faculty members in the Department of Psychiatry or by the Emory University Health Service psychiatrist. Fees range from $95 maximum to $35 minimum and it is one of the lowest cost arrangements available.

Additional Psychiatrists or Clinical Psychologists

The names included below are compiled from therapists who have been of assistance to Emory University School of Medicine students in the past. Some are full-time or volunteer faculty members; others are not. This is only a limited list of practitioners and in no way attempts to be all-inclusive. There are many other options in the community eligible for selection by students.

Recommended Psychiatrists:

James Andrews, MD
2045 P’tree Valley Road
404-351-2008
Joseph Baird, MD
900 Johnson Ferry Rd
404-255-0125
Samuel B. Brown, MD
27 Lenox Pointe NE
404-237-3210
Larry Giustra, MD
Psychiatry/Grady
404-616-4444

Steven O’Hagan, MD
1989 N Williamsburg Dr
404-321-1981
Kathryn Shands, MD
36 Lenox Pointe
404-237-3636
Susan Shelton, MD,
27 Lenox Pointe NE
404-237-3210
F. Conyers Thompson, MD
3205 Paces Ferry Pl NW
404-869-8500
Preventive Health Care and Disability Insurance Fee
A $60 per semester fee is charged to all Academic health students in the School of Medicine to cover various aspects of preventive health care, as well as long-term disability insurance coverage. This fee covers all immunizations including hepatitis B and chicken pox (Varivax) vaccine series. In addition, all PPD administrations are covered. Medical management of students who convert to a positive PPD skin test during enrollment in the Emory University School of Medicine is also covered by the fee including physician fees, laboratory work and chest x-rays, as well as necessary prescription drugs. This fee is included when calculating student budgets for the academic year.
PHYSICAL EXAMINATION:
A pre-matriculation physical examination is required of all entering medical and academic health students. IMMUNIZATION RECORD AND PHYSICAL EXAMINATION:
New students should carefully review the Emory immunization requirements below and complete the Immunization form available via the Student Health Services secure website:
Immunization process is done online through our Patient Portal at
https://www.shspnc.emory.edu/login_directory.aspxx. The student enters his/her own immunization data, then prints it off and takes it to a healthcare provider to verify and sign off, then sends that to Student Health Services Office. Also see our 7 step pre-matriculation health process is at
http://studenthealth.emory.edu/hs/hs_new_student_info.phpp

If there are problems returning the required information on time please contact Danny Thompson in Medical Education and Student Affairs office at 404.712.9930 immediately.

PREVENTIVE HEALTH CARE/LONG-TERM DISABILITY INSURANCE FEE: All medical and academic health students are charged a fee to cover enrollment in a long-term disability plan, which covers all required immunizations or boosters and/or serologies, all PPD skin tests, and costs associated with PPD conversion. There is no waiver of this fee for any reason. The fee for Academic Health students is $60 per semester. This fee is automatically added to your student account. We suggest that if you need any of the following required immunizations on entering that you wait and obtain them at orientation, since they are covered in this fee.

REQUIRED IMMUNIZATIONS AND/OR SEROLOGIES:
Documented proof of prior immunization must be provided to the University Health Service. If no documentation exists, students may be re-immunized.

1. Diphtheria and Tetanus immunizations (Tdap within the last 10 years). Most clinical sites require Tdap.
2. Measles, Mumps, and Rubella immunizations (Must have 2 MMRs recorded or titers which show immunity).
3. Clinical evidence of Chickenpox, two chickenpox vaccinations or a titer that shows immunity.
4. Polio Immunization series completed. Need documentation of this.
5. Tuberculin Skin test will be administered to all incoming students unless documentation of negative PPD within 3 months of enrollment is provided by the student on the medical record. Skin tests are required again one month after registration, and then maintained on an annual basis for the duration of the program.
6. Hepatitis B vaccine series AND a titer showing immunity.
HEALTH INSURANCE: All medical and academic health students are required to maintain continuous inpatient and outpatient health insurance coverage from matriculation through graduation. All international students are required to have Emory Student Health insurance. 

THE 2012-13 STUDENT HEALTH INSURANCE REQUIREMENT WAIVER SITE IS OPEN FOR ALL EMORY STUDENTS from April 25- August 23, 2011 AT www.opus.emory.edu

QUESTIONS? Contact Ms. Kimberly Taylor at 404.727.7560

Cardiac Life Support Certification

You are required to complete the American Heart Association Basic Life Support for Healthcare Providers for matriculation in the program. If you are presently certified, bring documentation of your certification with you. You must maintain this certification for the duration of your program.

First Aid Certification

You will need to complete basic first aid course. First aid certification can be obtained through courses offered by the American Red Cross.

Students on clinical rotation at Grady Memorial Hospital must furnish documentation of PPD readings to the Grady Department of Occupational Health every three months in order to receive a Grady ID badge. In most cases, results of PPD skin tests will be forwarded to the Office of Medical Education and Student Affairs, who in turn will notify Grady.

You may be required to meet additional health requirements before affiliating in a clinical facility that has requirements beyond those designated by this program.

Questions should be directed to Ms. Margo Kuisis, office of Associate Director for Medical Education/Student Affairs, at 727-5717 or 727-5655.

Proof of Compliance

Before submitting any documentation to Student Health Services, make a copy for yourself. You are responsible for maintaining all certifications, completing all immunizations and updating all tests required by the program. In addition, remember to keep copies of all the above for evidence of having met these requirements. Clinic facilities stipulate that health requirements be met before allowing students in the clinic. Therefore, without proof of all of the above, you will not be allowed to participate in the clinical education component of the program.
INFECTION CONTROL PROTOCOL
2012-2013 Academic Year

A. Needle Sticks and Other Blood/Body Fluid Injuries

1. ALWAYS OBSERVE STANDARD (UNIVERSAL) PRECAUTIONS.
2. If you have a significant exposure to blood or other body fluids (e.g., needle stick, cut), immediately clean the wound with soap and water. Do not use bleach or other caustic chemicals.
3. Exposed oral and nasal mucosa should be decontaminated by vigorously flushing with water. Exposed eyes should be irrigated with clean water or sterile saline.
4. Follow the protocol of the hospital in which the incident occurred to the fullest including all follow-ups. It is especially important that you report your exposure to the hospital’s Employee Health Service as soon as possible so that a timely evaluation can be performed. If prophylactic medications are indicated, it is recommended that they be initiated as soon as possible after the exposure.
5. In addition to #4, call the Hospital Epidemiologist (or ID service if Hospital Epidemiologist is not available) for consultation (see list below) if there are any questions about the management of your exposure.
6. Acute serology should be drawn to establish your baseline titers to hepatitis B virus (HBV) (if you have not previously been determined to be HbsAb positive [immune to Hepatitis B]) and, if indicated, to HIV and/or Hepatitis C virus (HCV) (if the source patient is HIV-positive or HCV-positive).
7. Depending on the results of your serology and the baseline serology of the patient (from which the incident occurred), you may need follow-up serologies as per the hospital protocol where the injury occurred. These should be obtained from Emory Student Health Services.
8. If the source patient is HIV-infected, the administration of post-exposure prophylaxis (“prophylactic” antiretroviral medications) to decrease the risk of patient-to-healthcare-worker transmission should be strongly considered. If used, these medications should be taken as soon as possible after the needle stick injury. The hospitals have protocols and will counsel you and give advice as needed. Post-exposure prophylactic regimens are complicated; therefore, be sure that the individual who manages your exposure consults with the Hospital Epidemiologist. Again, call the Hospital Epidemiologist or ID service if you have any questions about management of the needle stick or other occupational exposure.
9. If a potentially infectious exposure occurs, do not allow feelings of embarrassment, a large workload, or misplaced peer pressure prevent you from reporting the event immediately. Needle sticks and other exposures can be life threatening. Responsible health care providers recognize that unintentional injuries and occupational exposures may occur and must be evaluated by competent, objective, and experienced medical professionals. The following list of specific areas and/or individuals should be contacted at the Emory-affiliated facility in which the exposure occurs and will guide injured students in making responsible decisions.

GRADY MEMORIAL HOSPITAL AND AFFILIATED SITES:
Daytime hours, Monday thru Friday:
Employee Health Service Call 404-616-7849 (STIX) or 404-616-4600
After hours and on weekends:
Occupational Health Services Call 404-616-7849 (STIX)

Dr. Henry Blumberg, Hospital Epidemiologist; Div. of Infectious Dis.
Office: 404-616-6145; Pager: 404-686-5500, ID# 15029;
Home: 404-377-5095
Dr. Susan Ray, Associate Hospital Epidemiologist;  
Division of Infectious Diseases Office: 616-6139; Pager: 837-8946;  
Home: (404) 373-8537

Dr. Mark King, Assistant Hospital Epidemiologist, Div. Infectious Dis.  
Office: 404-616-4634; Pager: 404-278-2478;  
Home: 404-377-3485

If you are unable to reach one of the above individuals, ask the Grady Paging operator at 404-616-4307 to contact the Infectious Diseases Attending on call; if that individual is not available, page the Infectious Diseases Fellow on call.

**VA MEDICAL CENTER:**
Daytime hours, Monday thru Friday:  
Infection Control/Employee Health, Room 611  
Debbie Hawkins RN: Office: 404-321-6111, ext. 6471

After hours and on weekends:  
Emergency Room: 404-321-6111, ext. 6640

Dr. David Rimland, Division of Infectious Diseases  
Office: 404-321-6111, Ext. 6165; Pager: 404-722-3122  
Home: 770-393-8951

Dr. William Blake, Division of Infectious Diseases  
Office: 404-321-6111, ext. 2093; Pager: 404-686-5500, ID 16136;  
Home: 404-248-0362

If you are unable to reach any of the above individuals, ask the paging operator at 404-321-6111 to contact the Infectious Diseases Attending on call. If that individual is not available, page the Infectious Diseases Fellow on call.

**EMORY UNIVERSITY HOSPITAL MIDTOWN:**
Daytime hours, Monday thru Friday (7 a.m.-4 p.m.)  
Employee Health Service, Byron Bldg 1505  404-686-2352

After hours and on weekends:  
Page Administrative Nursing Supervisor  
@ 404-686-5500, ID #11917

Dr. James Steinberg, Division of Infectious Diseases  
Office: 404-686-8114; Pager: 686-5500, ID# 15770; Home: 404-876-4717

If you are unable to reach any of the above individuals, ask the paging operator at 404-686-1000 to contact the Infectious Diseases Attending on call; if not available, contact the Infectious Diseases Fellow on call by dialing 404-686-5500, ID#11350.

**EMORY UNIVERSITY HOSPITAL:**
Daytime hours, Monday thru Friday (7 a.m.-4 p.m.):  
Employee Occupational Health Services, HB 53  
Emory Hospital  404-686-8587

After hours and on weekends:  
Page Administrative Nursing Supervisor at 404-686-5500, ID# 13087 or call the Emergency Room at 404-712-7100
Dr. Bruce Ribner, Hospital Epidemiologist, Emory University Hospital and Emory Division of Infectious Diseases

If you are unable to reach any of the above individuals, ask the paging operator at 404-727-4611 to page the Infectious Diseases Attending on call; if not available, contact the Infectious Diseases Fellow on call.

CHILDREN’S HEALTH CARE OF ATLANTA AT EGGLETON OR SCOTTISH RITE
Daytime hours, Monday thru Friday:
Employee Health Digital Pager 1-800-682-4549 or
Needle stick Hotline (Ext. 4444 at Egleston/Children’s Healthcare of Atlanta or Ext. 82444 at Scottish Rite)
After hours and on weekends: Same as above

Dr. Harry Keyserling, Pediatric Infectious Diseases
Office: 404-727-5642; Digital Pager: 770-839-5679;
Home: 404-377-8535

If you are unable to contact any of the above individuals, ask the paging operator at 404-325-6000 to page the Infectious Diseases Fellow on call.

10. Any of the following physicians may be contacted for assistance and additional advice, but the injury should first be reported as outlined in #9 above, for immediate help.

Henry M. Blumberg, M.D., Grady Hospital, 404-616-6146
Harry Keyserling, M.D., CHOA/Egleston, 404-727-5642
Mark D. King, M.D., Grady Memorial Hospital, 404-616-4634
Susan M. Ray, M.D., Grady Hospital, 404-616-6139
David Rimland, M.D., VAMC, 404-321-6111, ext. 6165
Bruce Ribner, M.D., M.P.H., Emory Hospital, 404-727-1580
Jonas Shulman, M.D., Medical School Administration, 404-727-5655
James Steinberg, M.D., Crawford Long Hospital, 404-686-8909

11. All charges incurred by medical students for physician visits, lab or x-ray studies, and prescribed medications related to needle stick, blood or body fluid exposures must be submitted to the medical student’s insurance company for payment. It is the student’s responsibility to see that this is done. If the student’s insurance company does not cover the total expense, a copy of the original bill from the health care provider and the Explanation of Benefits from the insurance company must be submitted to the Director of Medical Education Services in the Office of Medical Education and Student Affairs. Such charges declined by the insurance company for care rendered prior to the date of graduation from the School of Medicine may be paid by OMESA. Payment for any care, medical tests, or medications rendered after graduation will not be covered.

12. For medical students, all incidents should be reported within 4 days to: (1) the Executive Director of Emory Student Health Services at 404-727-7551; and (2) the Director of Medical Education Services in the OMESA at Emory University (404-727-5655). This notification must include copies of the incident report and follow-up plans.
B. **PPD Conversions**

PPD tuberculin skin tests will be performed every year (at a minimum) or at the time of exposure for medical students in their third and fourth years. Those with PPD conversions will be referred to an appropriate physician at Emory Student Health Services for follow-up. Expense of drugs, x-rays, and laboratory testing will be covered as long as protocol (stated earlier in this document) is followed.

C. **Guidelines on Students Infected with HIV/Hepatitis B/ Hepatitis C**

Emory University School of Medicine encourages any student who is infected with Human Immune Deficiency Virus (HIV), Hepatitis B virus “e” antigen positive, or Hepatitis C virus to notify the Office of the Executive Associate Dean for Medical Education and Student Affairs of his/her positive status so that the School may help to define any limitations necessary on clinical rotations and make such accommodations as may be reasonable to permit the student’s continued matriculation.

The Executive Associate Dean for Medical Education and Student Affairs, or his/her designee, will make recommendations on a case-by-case basis, utilizing the best currently available scientific knowledge and any established recommendations from the U.S. Centers for Disease Control and Prevention and other applicable governmental guidelines regarding what, if any, limitations need to be applied to clinical activity. In conducting this evaluation and making such recommendations, the Executive Associate Dean will consult with the student, the student’s personal physician and others, including faculty of the School of Medicine, as determined appropriate to assist in this individualized judgment. Within the parameters of existing law the student’s confidentiality will be maintained during this process.

Reasonable efforts to assist the student in completing the requirements for an M.D. degree will be made by the School of Medicine. In addition, the student will be offered counseling concerning the options for the future selection of a career pathway in the profession of medicine.

D. **More Specific Guidelines on Students Infected with Blood-Borne Pathogens**

1. Students should be allowed to complete the DPT degree if at all possible with an effort by all to maintain confidentiality to the degree that it is possible.

2. In such instances, the clinical Department Chairs need not be notified of the name of an individual student involved or the type of blood-borne pathogen involved. However, the Clerkship Director for the Departments of Surgery, Obstetrics/Gynecology, Emergency Medicine and any other Clerkship Directors (if indicated) will be informed of the name of the individual student so that any special assignments can be made if indicated. If the student is Hepatitis B “e”-antigen positive, the Clerkship Director will be given that data.

3. Students will be carefully counseled concerning their potential risk to patients and their risk to themselves. They will be instructed to be meticulous in the use of universal precautions and up-to-date hospital infection control techniques. They will be referred to appropriate physician caregivers for optimal follow-up and therapy.

4. The student will also be counseled carefully about future career plans based on current medical and legal data.

5. Invasive procedures considered as potential risks for Health Care Workers-to-Patient transmission by the Centers for Disease Control and Prevention will be strictly avoided by students who are Hepatitis B “e”- antigen positive. Students with other known blood-borne pathogens will be advised on a case-by-case basis. In general, because of their lack of experience, students with HIV or HCV infections will be advised like HBV-infected students. Recommended practices include double
gloving and not performing any procedures that have been previously identified as associated with a risk of provider-to-patient HBV transmission.

6. The student will be allowed to withdraw without penalty from any clinical setting that the student feels might present a risk for infectivity.

7. HIV-positive students should undergo screening for Tuberculosis every six to twelve months and receive pneumococcal vaccine, annual influenza vaccine, and other appropriate preventive immunizations.

8. The student’s condition will be re-evaluated at least annually by the Dean to determine if any additional limitations are indicated. The student’s viral load, CD4 count and clinical status as well as the regimen of anti-retroviral therapy that is being employed can be useful in assisting in any decision making by the medical school if the student will allow the Executive Associate Dean to discuss the results with his/her health care provider.

Students who fail to show a response to Hepatitis B vaccination by serologic means will be counseled to see a physician to determine their Hepatitis B antigen status and to see if they are Hepatitis B “e”-antigen positive. If they are “e”-antigen positive, they will be encouraged to report this finding to the Office of the Executive Associate Dean for OMESA and then to be followed as per protocol.
STUDENTS WITH SPECIAL NEEDS

The campus Office of Disability Services is available for students with special needs. The Office of Disability Services is located in Room 110 of the Administration Building (404-727-9877). Students with special needs have the responsibility to seek assistance and/or testing from this university office. The student also has the responsibility for presenting any letters stating special considerations to each instructor at the beginning of each course.

EMORY UNIVERSITY
Office of Disability Services
and Equal Opportunity Programs
University Administration Building
201 Dowman Drive, Suite 110
Atlanta, Georgia 30322-1065
Phone: 404-727-9877; TTY: 404-712-2049
Fax: 404-727-1126

SELF-IDENTIFICATION FORM

It is the policy of Emory University to ensure that all University goods, services, facilities, privileges, advantages, and accommodations are meaningfully accessible to qualified persons with disabilities in accordance with the Americans with Disabilities Act (ADA) of 1990, Section 504 of the Rehabilitation Act of 1973, and other pertinent federal, state, and local disability anti-discrimination laws.

Reasonable accommodations will be made on an individual basis. It is the responsibility of persons with disabilities, however, to seek available assistance and to make any needs known.

If you are an individual with a disability/chronic medical condition who may require assistance or accommodations from Emory University, please complete this form and return to:

Office of Disability Services
201 Dowman Drive, Suite 110
Atlanta, GA 30322

Once received, the Office of Disability Services will send an information packet detailing their services provided and all other pertinent information (i.e., required medical documentation, intake appointments and the menu of general accommodations available).

No disclosure of this information will be provided without consent. We guarantee confidentiality.

Please cut along this line and retain the top portion of this form for your reference.

Name: ___________________________________________ Indicate your disability category:

Address: _________________________________________ □ Sensory (i.e. Visual, Hearing, etc.)

City/State/Zip: ____________________________ □ Psychological/Emotional

Telephone: (_______) ___________________________ □ Learning

SS#: ______-____-____ or Student ID _____________ □ Chronic Medical Condition

Please mark the appropriate school:

Emory College □ Candler School of Theology □ Goizueta Business School
Oxford College □ Woodruff Scholl of Nursing □ Rollins School of Public Health
Law School □ Graduate School of Nursing □ School of Medicine
Allied Health

Enrollment date:

Fall 20__ □ Spring 20__ □ 1st Term Summer 20__ □ 2nd Term Summer 20__

Expected Graduation Year: __________________
Pursuant to federal law, the University adopted a policy on alcohol and drug abuse in the fall of 1990. This policy was reviewed in 1992, 1994, and again in 1996, in accordance with Section H, and all revisions adopted by the review committee are included. The text of the policy follows:

### Faculty, Staff, and Student Responsibilities Regarding Alcohol and Drug Abuse

Emory University is committed to the health and well being of the members of its staff, faculty, and student body. As part of this commitment, Emory University complies with and upholds all federal, state, and local laws that regulate or prohibit the possession, use, or distribution of alcohol or illicit drugs. Violations of such laws that come to the attention of University officials will be addressed within the University, or through prosecution in the courts, or both.

As a recipient of federal grants and contracts, Emory University adheres to the provisions of the Drug Free Workplace Act of 1988 and the Drug Free Schools and Communities Act Amendment of 1989. Also, as administrator of certain state-funded financial aid programs for students, Emory University adheres to Georgia's Drug Free Postsecondary Educational Act of 1990.

Accordingly, all Emory University full-time, part-time, and temporary faculty, staff, students and employees (hereinafter collectively referred to as "faculty/staff/students") are hereby notified of the following standards of conduct that Emory University will apply to all activities conducted on University-owned property and to all other University-sponsored activities.

### Standards of Conduct

1. All Emory University faculty/staff/students are prohibited by the University from unlawfully possessing, using, manufacturing, dispensing, or distributing alcohol or illegal drugs on University-owned property or at University-sponsored activities.

2. Emory University expects all of its faculty/staff/students to comply with any applicable federal, state, or local laws pertaining to the use, possession, manufacture, dispensation, or distribution of alcohol or illegal drugs.

3. Emory University expects all University-sponsored organizations to comply with any applicable federal, state, or local laws pertaining to the use, possession, manufacture, dispensation, or distribution of alcohol and illegal drugs.

### Sanctions and Penalties

1. **University Sanctions**: Any member of the Emory University faculty, staff, or student body who violates any of these standards of conduct shall be subject to corrective disciplinary actions and penalties up to and including expulsion from University academic programs, termination of employment, and referral to the appropriate federal, state, or local authorities for prosecution in the courts.

2. **Federal, State and Local Sanctions**: In addition, depending on the nature of the crime, persons convicted of violating federal and state laws prohibiting the unlawful use, possession, and distribution of illegal alcohol or drugs may face stiff sanctions such as heavy fines; incarceration for various periods of time, including life; forfeiture of assets; or suspension or loss of driver’s, business, or professional licenses.
Employee Notification of Drug-Related Convictions

1. In accordance with the mandates of the Drug Free Workplace Act of 1988 and as a condition of employment at Emory, all employees (including student employees) will:
   a. abide by the terms of this statement; and
   b. notify, as appropriate, their supervisor, vice president, administrator, dean or department head of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction. If a federal grant is involved, the Emory University Office of Sponsored Programs must be notified immediately.

   Failure to make the notification required in subparagraph (b) within the five-day time limit may result in disciplinary action.

2. Within 30 calendar days after receiving notice of a conviction, the person notified under paragraph C(1)(b) above shall consult with the appropriate human resources department at Emory University or Crawford Long Hospital of Emory University (either human resources department may contact the Office of Equal Employment Opportunity, as appropriate), and said person then shall:
   a. take appropriate personnel action against the employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or the Americans with Disabilities Act;
   b. require the employee to participate successfully, and provide evidence of such participation, in a drug-abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency.

Student Notification of Drug-Related Convictions

In accordance with the State of Georgia's Drug Free Postsecondary Education Act of 1990, any student convicted under the laws of Georgia, the United States or any other state of any felony offenses involving the manufacture, distribution, sale, possession, or use of marijuana, a controlled substance, or a dangerous drug must, within 10 calendar days of said conviction, report it in writing to the Emory University or Oxford College of Emory University Office of Financial Aid, as appropriate.

Any student who suffers such a conviction shall, as of the date of the conviction, be denied State of Georgia funds for certain types of loans, grants, or scholarships, including Georgia Higher Education Loan Program loans, student incentive grants, or tuition equalization grants.

The denial of state funds shall become effective on the first day of the term for which the student was enrolled immediately following either the date of conviction or the date on which the court accepts a plea of nolo contendere or formally allows a student to receive first offender treatment. The denial of funds shall continue through the end of said term but shall be rescinded if a conviction is subsequently overturned on appeal or through collateral relief.

Health Risks of Alcohol and Drug Abuse

The scope and impact of health risks from alcohol and drug abuse are both alarming and well documented, ranging from mood altering to life threatening, with consequences that extend beyond the individual to family, organizations, and society at large. The University therefore conducts regular programs to educate its faculty, staff, and students that the abuse of alcohol and other drugs alters behavior, distorts perception, impairs thinking, impedes judgment, and sabotages opportunity. Alcohol and drug abuse also may result in deterioration of physical health by causing or contributing to various diseases, illnesses, birth defects, and even death.
Resources for Education, Consultation, and Counseling

The University operates several programs that provide information and professional services to its faculty, staff, and students on matters related to the abuse of alcohol and drugs. These programs provide education, consultation, assessment, counseling, and referral in a professional environment that respects individual confidentiality and integrity. The University maintains the Emory Employee Assistance Program for faculty and staff; the University Counseling Center for students; and the University Health Service for faculty, staff, and students. Augmenting these formal programs, a variety of other programs and services educate and assist individuals who take the initiative to help themselves. Common to all of these programs is the ethic that personal responsibility and professional guidance are keys to success.

Distribution

This policy, and any revisions thereto, shall be distributed to all faculty, staff, and students annually. Other applicable policies that have reference to this policy are found in the Campus Life Handbook, the Faculty Handbook, the Human Resources Handbook and Policies and Procedures Manual, and the Student Conduct Code.

Review

A biennial review of this policy shall be conducted by a committee appointed by the president that shall include representatives from the following offices, programs, division and departments: Office of the President, Office of the Vice President and General Counsel, Office of Sponsored Programs, Employee Assistance Program, Human Resources Division, Division of Campus Life, Office of Financial Aid, Emory Police Department, Office of the Provost, and Office of the Vice President for Health Affairs.

Deans and directors of all schools, departments and divisions will review and interpret policies and procedures relevant to this statement.

This policy supersedes the “Emory University Statement Regarding Drug Free Workplace” of March 1989.
Clinical Education

General Information
The Director of Clinical Education (DCE), Dr. Patricia Bridges, and Assistant Director of Clinical Education (ADCE), Dr. Tami Phillips, are your clinical education advisors. In addition to working with students, they are responsible for initiating contact with the Clinical Coordinator of Clinical Education (CCCE) at each participating facility to negotiate a part or full-time affiliation. If a CCCE or other facility staff contact the school regarding establishing a new affiliation, that individual is referred to the DCE/ADCE. They are best suited to make decisions about adding sites utilizing data such as commitments currently in place; clinical instructor, CCCE, and student clinical education histories; and academic and facility policies and procedures. The DCE/ADCE also mentor and educate clinical instructors about the Emory Physical Therapy Program’s clinical education process and evaluation tools, as well as, offer the American Physical Therapy Association’s Clinical Instructor Credentialing and Education Program.

Part-Time Clinical Affiliation Site Selection
Part-time clinical sites are assigned by the clinical advisors to meet the clinical education needs of each student utilizing the individual’s “Clinical Profile” which will be completed during the first semester. Past work/volunteer experience, willingness to travel, previous travel, facility preference, and patient population may be considered. Part-time clinical affiliations occur at the end of semesters 3, 4, and 5. Students will be assigned to a facility for a 2 week block. A primary criterion for a part-time clinical site is that the staff can provide an opportunity for students to practice the process and psychomotor skills taught in the classroom during the concurrent symptom complex. The clinical facilities are located varying distances from the University campus and may require travel up to an hour and a half each way. Students are responsible for providing their own transportation and need to include this financial responsibility in their budget. Access to a car will be necessary to enable travel to clinic in a timely and efficient manner. The 2 week block does allow for the possibility of traveling/living outside the metro Atlanta area or Georgia for these affiliations. Dr. Bridges and Dr. Phillips will be seeking information from students who may be interested in this opportunity.

Full-Time Clinical Affiliation Site Selection
The full-time clinical internships begin during the spring semester of the second year and conclude at the end of the summer semester. Students must complete a 10 week internship in each of the following settings (30 weeks total): acute care, rehabilitation, and community outpatient. Each graduating class develops its own procedure for how students will go about selecting their full-time affiliations. Sites are available throughout metropolitan Atlanta, Georgia, and the United States. No one is guaranteed an affiliation in Atlanta; therefore, students should plan travel, room, and board into their budget. Full tuition is required during both the academic and clinical portions of the program.

Acquiring Additional Sites
The DCE and ADCE are responsible for determining if and when new clinical education sites are required to meet the needs of the program. Our goal is to provide an appropriate number of clinical education experiences for our students affording flexibility in full-time affiliation selection, while allowing for the possibility of cancellation by a site. Generally, facilities are added when the numbers of sites or types of experiences available are not adequate. This policy allows full utilization of sites currently in place.

In order to provide quality clinical education opportunities utilizing available staff, CCCE’s have to limit the number of students they accept per year. Once a facility schedules its quota of affiliates for the year, further requests are denied. As a result clinical education sites that reserve slots for our students expect all offered slots to be filled. Utilizing clinical education sites repetitively enhances the
communication between the facility and school, as well as, reinforces consistent use of process skills and evaluation materials.

Acquiring new clinical education sites requires negotiation of a clinical education agreement. Both parties must accept and sign the contract before initiation of a clinical education experience. Contract negotiation is a time-consuming process requiring support from the School of Medicine faculty, legal counsel, program faculty, and the administrative staff. The time frame for processing a contract can range from 2 to 6 months and in some unpredictable cases, concerns/conflicts cannot be resolved and the contracts are never signed. Therefore, few, if any, sites are added each year.

In certain instances, a student may have special needs that could be met by affiliating at a site with which the Division of Physical Therapy, Emory University does not have a current contract. The procedure for arranging for the DCE/ADCE to evaluate the site is as follows:

1) The student should contact the DCE/ADCE in writing to discuss the possibility of setting up a new clinical site and to determine if a contract is in place (multiple sites are sometimes covered under a contract that does not bear the name of a particular clinical site). In most cases, the clinical site must be a university teaching hospital, meaning the hospital or rehab center accepts physical therapy students and medical students.

2) The student should e-mail Dr. Bridges or Dr. Phillips, the name and location of the facility, the name of the CCCE, and his/her telephone number and e-mail address.

3) The DCE/ADCE will set up an appointment with the CCCE to assess the site. Facility and staff information is obtained through site visits, phone interviews, the Clinical Site Information Form (CSIF) and the Division of Physical Therapy Criteria for Site Selection Form which outlines criteria developed by our program faculty. If it is determined that the clinical site meets the Division of Physical Therapy criteria for site selection, contract negotiations will be initiated.

Evaluation of a site and contract negotiations are lengthy and extensive processes. Therefore the site will not be developed for a one time only affiliation, but will be available to Emory students for the duration of the contract (3 years). Retention of the site beyond the initial contract will be decided by the DCE/ADCE
EMORY UNIVERSITY SCHOOL OF MEDICINE
DIVISION OF PHYSICAL THERAPY
POLICY and PROCEDURE

CRIMINAL BACKGROUND CHECK AND DRUG SCREENING

All students must sign the AUTHORIZATION TO OBTAIN CRIMINAL RECORDS/ HISTORY and DRUG TESTING CONSENT documents. The signed documents will be placed in the student’s file.

Many of our affiliating facilities require a criminal background check (CBC) and/or a drug screen. Most mandate that the CBC and drug screen be performed within one month of the start of the clinical affiliation. Depending on the facility’s policy and procedure, the background check may be performed by an outside vendor. In that situation, the DCE/ADCE will provide the name(s) of a vendor(s) to administer the test. The student is under no obligation to use the suggested vendor. The results of the CBC and drug screen are confidential and may be made available only to the DCE/ADCE. However, some facilities require that the results be sent directly to them.

The Division of Physical Therapy will reimburse students for the cost of the CBC and drug screen. To obtain reimbursement print your credit card receipt, complete a W-9, and submit them to Ms. Cathy Crosby.

If the CBC or drug screen identifies a problem, the student will be notified of the results and a repeat CBC and/or drug screen will be required by the Division of Physical Therapy within five business days. Positive CBCs and drug screens are treated very seriously by the DPT Program, the School of Medicine, and the University, especially if the offense has not been previously disclosed by the student. A positive drug screen or CBC will be investigated as a possible violation of the Conduct Code and can result in expulsion from the program. If the results are confirmed, the student will be allowed to 1) have the record corrected, and/or 2) supply an explanation to the Director of the Division of Physical Therapy in writing, within five business days. The Director will have the results of the CBC/drug screen and the student’s explanation reviewed by a three-person faculty committee chosen from the members from the Academic Affairs Committee. The committee will make a recommendation to the Director of the Division of Physical Therapy regarding resolution of the problem which may include dismissal of the student from the program. The Director will then make a final determination of the student’s dismissal/enrollment status and inform the student. There is an appeals process for the student.
EMORY UNIVERSITY SCHOOL OF MEDICINE
DIVISION OF PHYSICAL THERAPY
POLICY
STUDENT ATTENDANCE/ABSENCE DURING CLINICAL AFFILIATIONS

The design of the clinical education experience promotes development, practice, and assessment of the student’s ability to provide physical therapy services in a variety of settings. One critical aspect of the professional responsibility for service provision is being present and on time. The policy presented below is consistent with expectations in an employment situation.

1. WORK WEEK: The student’s schedule will be determined by the service needs of the clinical site. For the most part, it is similar to the clinical instructor’s (CI) schedule in terms of hours/day; days of the week scheduled, etc. No assumptions should be made about working 8:00 a.m. to 5:00 p.m., Monday through Friday. The student’s workday will continue until responsibilities are met.

2. HOLIDAYS: Clinical services in many settings are provided on holidays. No assumptions should be made about having a holiday “off”. If the CI is scheduled to provide services on a holiday, the student may be scheduled to work. Student status does not allow special privileges regarding holiday work. Also, the day after a holiday (e.g., the Friday after Thanksgiving) is not a holiday.

3. ABSENCES: The ONLY PERMISSIBLE REASONS for absence are personal illness or death of a family member. If the student is ill and cannot work, or called away for funeral services, the Clinic Coordinator of Clinical Education (CCCE)/CI must be notified immediately. The time off MUST be made up and this scheduling is at the discretion of the CI. In certain instances during a full-time rotation only, if only one day is missed and the student’s clinical performance is meeting criteria, the CI may decide that a make-up day is not necessary. The student’s clinical education advisor, Patricia Bridges (Director of Clinical Education - DCE) or Tami Phillips (Assistant Director of Clinical Education - ADCE), must be advised by the student of any absence due to illness or bereavement, and the related make-up plan. The student is responsible for providing this information to their advisor within two days of the absence. Under no circumstances should the DCE/ADCE find out about absences after the clinical ends.

4. SPECIAL REQUESTS: Clinic absences should not occur except as described in Section #3. However, if there is a special circumstance, the student must submit a request in writing to the DCE or ADCE PRIOR to discussing it with the CCCE/CI. The DCE/ADCE will determine if the special request merits further consideration and may give approval to negotiate this special need with the CCCE/CI. Approval from the DCE/ADCE is only permission to discuss the request with the CCCE/CI, not approval for the proposal. The CCCE must be consulted in addition to the CI regarding special requests. Approval is at the discretion of the CCCE/CI, and if obtained, the student must communicate the result to the DCE/ADCE within two days of the approval. Time away from the clinic MUST be made up and this scheduling is at the discretion of the CI. If the special request involves a professional development activity and if only one day of clinic is missed, the CI may determine the necessity of making up the missed day if the student’s performance is meeting criteria.

5. Compliance with this policy is represented on the clinical evaluation form in the behaviors for administration competency – “Adhere to school/facility policies and procedures.”

6. Any questions about the policy and related procedures should be addressed to the DCE or ADCE.
Clinical Affiliation Contracts
The Emory University, Division of Physical Therapy maintains a current contractual agreement with each of the clinical facilities where students participate in clinical education. These contracts state the responsibilities of all parties, including the students. A generic example of a contract is included in this handbook for students to read and know the nature of their individual responsibilities. If you have questions now or at any time, see Dr. Patricia Bridges, Director of Clinical Education or Dr. Tami Phillips, Assistant Director of Clinical Education.

AFFILIATION AGREEMENT BETWEEN
EMORY UNIVERSITY SCHOOL OF MEDICINE
and
[NAME OF CLINICAL AFFILATE]

THIS ACADEMIC AFFILIATION AGREEMENT (this “Agreement”) is made and entered into as of the __ day of _____, 201_ (the “Effective Date”), by and between Emory University through its School of Medicine (“School”), and _____________ (“Facility”), whose principal address is ________________________________________.

WHEREAS, School offers a degree programs and/or other educational and training program (each, a “Department”) in: ________________________;

WHEREAS, School desires to provide students in such programs (“Students”) appropriate clinical learning experiences and Facility is willing and able to function as a clinical site for the Students;

NOW THEREFORE, School and Facility hereby agree as follows:

1. General Understandings.

1.1. The clinical education experiences to be provided hereunder shall be of such content, and cover such periods of time, as may be mutually agreed upon from time to time between School and Facility. The starting and ending dates for each experience shall be agreed upon before the program begins, but will be subject to the final approval of Facility.

1.2. The number of Students designated for participation in a clinical education experience shall be determined by mutual agreement of School and Facility, and may at any time be altered by mutual agreement. All Student participants must be acceptable to both parties, and either party may withdraw any Student from a program based upon perceived lack of competency on the part of the Student, the Student’s failure to comply with the rules and policies of Facility, or for any other reason that causes either party to reasonably believe that it is not in the best interest of the program for the Student to continue.

2. Obligations of School.

2.1. Clinical Program. School shall be responsible for the development, implementation, and operation of the clinical component of its educational programs offered and conducted at the Facility pursuant to this Agreement (“Program”). Such responsibilities of School include the following:

(a) assign to the Facility only those Students who have satisfactorily completed the prerequisites for clinical experience;

(b) provide practical instruction to the Students prior to their clinical assignments at the Facility;

(c) determine by mutual consent of the Facility and the Department the dates and times for student placement and require each Department to provide the Facility with the names of students proposed to be assigned to the Facility;

(d) acquaint Facility personnel with the overall objectives of the Department(s) and provide the appropriate educational objectives and documents for clinical experiences to Facility; and,
2.2. Facility Rules and Regulations. School shall require its Students and any faculty participating in the Program at the Facility to be subject to the Facility’s generally applicable rules and regulations as is reasonable for the purposes of this Agreement.

2.3. Student Statements. Facility and School agree that they shall refrain from disclosing the Student’s educational records except with the Student’s consent or as permitted under the Family Educational Rights and Privacy Act and all regulations thereunder. School agrees to have the Student complete the appropriate consent forms for the exchange/disclosure of educational records and medical records reference in this Agreement.

2.4. Dress Code; Identification. School shall require the Students to dress in accordance with such reasonable dress and personal appearance standards reasonably required by Facility and approved by School. School shall require Students to wear and/or display such nametags or other identification as Facility may reasonably require.

2.5. OSHA Blood Borne Pathogen Regulations: School shall ensure that, when appropriate, students are trained in compliance with OSHA Blood-Borne Pathogen Regulations.

2.6. HIPAA Privacy Regulations: School shall ensure that students are trained in compliance with basic training regarding confidentiality of protected health information under the HIPAA Privacy Regulations.

2.7. Performance of Services. If applicable, any faculty or professional staff provided by School shall be duly licensed, certified, or otherwise qualified to participate in the Program at Facility. School and all Students shall perform its and their duties and services hereunder in accordance with all relevant local, state, and federal laws and shall comply with the standards and guidelines of all applicable accrediting bodies and the bylaws, rules and regulations of Facility and any rules and regulations of School as may be in effect from time to time.

2.8. Insurance. School shall secure and maintain at all times during the term of this Agreement, at its sole expense, appropriate general and professional liability insurance coverage in amounts of at least $1,000,000 per occurrence and $3,000,000 in the annual aggregate with insurance carriers or self-insurance programs covering itself and its students and employees. In addition, School shall maintain excess coverage of at least $5,000,000 over and above the primary limits, which shall apply if the primary limits should be exhausted. Should any of the insurance policies be written on a claims-made basis, insurance requirements shall survive the expiration of this Agreement and extended coverage shall be afforded for at least two (2) years after the expiration of this Agreement. School shall make reasonable business efforts to provide written notice to Facility of any material changes in the above-referenced insurance coverage. Facility shall have a right to terminate this Agreement in the event of changes in School’s insurance that are unacceptable.

3. Responsibilities of Facility.

3.1. General Participation. Facility shall accept the Students assigned to the Program by School and provide orientation of all Students to the Facility. Facility shall provide learning opportunities for the Students, who shall be supervised by Facility personnel, to observe and assist in various aspects of professional practice. Facility shall coordinate School’s rotation and assignment schedule with its own schedule and those of other educational institutions. Facility shall at all times retain ultimate control of the Facility and responsibility for patient care.

3.2. Liaison. The Facility shall assign a staff representative as liaison between the Facility and the applicable Department within School.

3.3. Evaluation. Using the forms provided by School, the Facility shall assist School in the evaluation of each Student’s performance in the Program. School shall at all times remain solely responsible for the academic grading of Students.
3.4. **Insurance.** Facility shall secure and maintain at all times during the term of this Agreement, at its sole expense, appropriate general and professional liability insurance coverage in amounts of at least $1,000,000 per occurrence and $3,000,000 in the annual aggregate with insurance carriers or self-insurance programs covering itself and its employees. In addition, Facility shall maintain excess coverage of at least $5,000,000 over and above the primary limits, which shall apply if the primary limits should be exhausted. Should any of the insurance policies be written on a claims-made basis, insurance requirements shall survive the expiration of this Agreement and extended coverage shall be afforded for at least two (2) years after the expiration of this Agreement. Facility shall make reasonable business efforts to provide written notice to School of any material changes in the above-referenced insurance coverage. School shall have a right to terminate this Agreement in the event of changes in Facility’s insurance that are unacceptable.

3.5 **Orientation.** Facility will conduct a complete orientation for each Student with respect to the policies and procedures of Facility and shall make available to each Student a copy of applicable policies and procedures.

3.6 **Direction and Coordination.** As appropriate, Facility shall appoint a qualified Facility employee who will be responsible for directing and coordinating the experiences of the Students at the Facility.

3.7 **Protective Equipment.** Facility will provide all necessary personal protective equipment for students, while assigned to Facility in compliance with OSHA Blood-Borne Pathogen Regulations and the Nuclear Regulatory Commission, as appropriate.

3.8 **Emergency Care.** Facility shall provide emergency health care to Students who become ill or injured while at the Facility to the extent possible, including treatment immediately following exposure to bloodborne pathogens or other infectious or environmental hazards. The cost of treatment provided pursuant to this provision will be the responsibility of the Student.

3.9 **Reports of Performance.** Facility shall provide School with a performance appraisal for each Student on such forms as may be provided by School. Facility shall notify School of any unsatisfactory conduct or performance of any Student assigned to the Facility in a timely manner.

3.10 **Use of Facilities.** Facility shall permit Students to use the facilities and resources of the Facility when available, such as libraries, lounges, conference rooms, and audio-visual and other teaching equipment, consistent with the policies and procedures of the Facility. Facility shall use reasonable efforts to make conference space and classrooms available as may be necessary for teaching and planning activities in connection with clinical education experiences.

3.11 **Confidentiality:** Facility shall provide Students with specific training in Facility’s HIPAA policies upon Student’s arrival at Facility. For purposes of HIPAA, School and Facility acknowledge that Program Participants are part of Facility’s “work force”, as defined in the HIPAA Privacy Regulations at 45 C.F.R. 160.103, and as such, no Business Associate agreement is required between School and Facility.

4. **Role of Students.** Students will participate in providing, but shall not be solely responsible for, patient services or facility services rendered at the Facility as part of their clinical experiences, including the opportunity to participate in conferences and programs of interest related to their respective disciplines. The Facility and its employees and contractors have sole primary responsibility for patient care and treatment.

5. **No Compensation.** Neither party shall earn or receive any compensation from the other party in return for the performance of the duties and obligations described herein. Students shall be treated as trainees who have no expectation of receiving compensation or future employment from Facility or School.
6. **Removal of Students.** Facility may immediately remove from the premises any Student who poses an immediate threat or danger to personnel or to the quality of medical services or for unprofessional behavior. Facility may request School to withdraw or dismiss a Student from the Program at Facility when his or her clinical performance is unsatisfactory to Facility or his or her behavior, in Facility's discretion, is disruptive or detrimental to Facility and/or its patients. In such event, said Student's participation in the Program shall immediately cease; however, only School has ultimate control or discretion over any grades given to the Students.

7. **Non-Discrimination.** In the performance of this Agreement, there shall be no discrimination on the basis of race, national origin, religion, creed, sex, age, veteran status, or handicap in either the selection of Students for participation in the Program, or as to any aspect of the clinical training; provided, however, that with respect to handicap, the handicap must not be such as would, even with reasonable accommodation, in and of itself preclude the Student's effective participation in the Program.

8. **Confidentiality.** School agrees that it and the Students shall keep strictly confidential all confidential information of Facility and/or its patients and not disclose or reveal any confidential information to any third party without the express prior written consent of Facility, except as required or permitted by law.

9. **Indemnification.** Each party shall indemnify, defend and hold harmless the other party against: (i) any and all liability arising out of the indemnifying party's failure to comply with the terms of this Agreement, and any injury, loss, claims, or damages arising from the negligent operations, acts, or omissions of the indemnifying party's employees or agents relating to or arising out of their services under this Agreement; and (ii) any and all costs and expenses, including reasonable legal expenses, incurred by or on behalf of indemnified party in connection with the defense of such claims.

10. **Term and Termination.** The term of this Agreement shall commence as of the Effective Date and shall continue for a term of three (3) years unless terminated earlier as provided herein, and may be renewed for additional periods thereafter by mutual written agreement. Except as otherwise provided herein, either party may terminate this Agreement at any time without cause upon at least thirty (30) days prior written notice to the other party, provided that all Students currently enrolled or participating in the Program at the Facility at the time of such notice of termination shall be given the opportunity to continue such participation and the parties shall continue to perform under the terms hereof with regard to the Students, until the sooner of each Student's individual completion of the Program or six (6) months from the date of the notice of termination.

11. **Miscellaneous Terms.**

11.1. **Authority.** Each party represents and warrants that it has the full power and authority to enter into this Agreement, to consummate the transactions contemplated to be consummated hereby, and to perform the obligations hereunder. This Agreement has been duly executed and delivered and constitutes each party's valid and binding obligation, enforceable in accordance with its terms.

11.2. **Excluded Provider.** Each party represents and warrants to the other that it (i) is not currently excluded, debarred, or otherwise ineligible to participate in the federal health care programs as defined in 42 U.S.C. §1320a-7b(f) (the “federal health care programs”); (ii) is not convicted of a criminal offense related to the provision of health care items or services and has not been excluded, debarred or otherwise declared ineligible to participate in the federal health care programs; and, (iii) is not under investigation or otherwise aware of any circumstances that may result in it being excluded from participation in the federal health care programs. This shall be an
ongoing representation and warranty during the term of the Agreement. Either party shall immediately notify the other of any change in the status of the representation and warranty set forth in this section. Any breach of this section shall give the other party the right to terminate the Agreement immediately for cause.

11.3. **Change in Law.** In the event of any changes in applicable laws occur during the term of this Agreement which materially affect either party, such affected party may request renegotiation of the applicable terms of this Agreement by written notice to the other party. If no new agreement is reached within sixty (60) days of receipt of such notice, then either party may terminate this Agreement upon an additional thirty (30) days written notice. The parties further agree that in the event that legislation is enacted or a regulation is promulgated or a judicial or administrative decision is rendered that affects, or may affect, the legality of this Agreement or adversely affect the ability of either party to perform its obligations or receive the benefits intended hereunder, then, within fifteen (15) days following notice by either party of such event, each party will negotiate in good faith a substitute agreement to this Agreement which will carry out the original intention of the parties to the extent possible in light of such legislation, regulation, or decision.

11.4. **Severability.** Each and every provision, section, subsection, paragraph, and clause herein shall be separable from each and every other part hereof so that the invalidity of any part hereof shall not affect the validity of the remainder.

11.5. **No Waiver.** No waiver of a breach of any provision of this Agreement shall be construed to be a waiver of any breach of any other provision. No delay in acting with regard to any breach of any provision of this Agreement shall be construed to be a waiver of such breach. Every right and remedy of each of the parties shall be cumulative and either party, in its sole discretion, may exercise any and all rights or remedies stated in this Agreement or otherwise available at law or in equity.

11.6. **Judicial Interpretation.** Should any provision of this Agreement require judicial interpretation, it is agreed that the court interpreting or construing the same shall not apply a presumption that the terms hereof shall be more strictly construed against one party by reason of the rule of construction that a document is to be construed more strictly against the party who itself or through its agent prepared the same, it being agreed that the agents of both parties have participated in the preparation hereof.

11.7. **Variations of Pronouns.** All pronouns and all variations thereof shall be deemed to refer to the masculine, feminine or neuter, singular or plural, as the identity of the person or persons or entity may require.

11.8. **Notices.** All notices and other writings required or permitted to be given under the terms of this Agreement shall be hand delivered or mailed, postage prepaid by certified or registered mail, return receipt requested, to the parties, as follows:

To the School at: Emory University School of Medicine
Dean
1648 Pierce Drive, NE, Suite 410
Atlanta, GA 30322

With a copy to: Emory University Office of the General Counsel
101 Administration Building
201 Dowman Drive
Atlanta, Georgia 30322

To Facility at: ________________________________
______________________________
Attn: ___________________________
Title: ___________________________

94
or to such addresses as the parties may hereafter designate in writing.

11.9. **Assignments.** The rights and obligations provided under this Agreement are not assignable without the written consent of the non-assigning party. Any such assignment made or attempted without such required consent is void.

11.10. **Governing Law.** This Agreement shall be interpreted, construed and governed according to the laws of the State of Georgia.

11.11. **Amendments.** Amendments may be made to this Agreement only upon the mutual consent and approval in writing by both parties.

11.12. **Entire Agreement.** This Agreement, together with any schedules, exhibits, appendices, and other attachments hereto, all of which are hereby incorporated by reference and made a part of this Agreement, constitutes the entire agreement between the parties, and supersedes all proposals, oral and written, and all other communications between the parties in relation to the subject matter of this Agreement.

11.13. **Counterparts.** This Agreement may be executed by the parties on any number of separate counterparts, and all such counterparts so executed constitute one agreement binding on all the parties notwithstanding that all the parties are not signatories to the same counterpart.

11.14. **Headings.** Headings contained in this Agreement have been inserted herein only as a matter of convenience and in no way define, limit, extend or describe the scope of this Agreement or the intent of any provision hereof.

11.15. **Third Party Beneficiary.** This Agreement is solely for the benefit of the parties and their respective successors and permitted assigns, and no other person has any right, benefit, priority or interest under or because of the existence of this Agreement.

11.16. **Successors and Assigns.** All provisions of this Agreement are binding upon, inure to the benefit of and are enforceable by or against the parties and their respective heirs, executors, administrators or other legal representatives and permitted successors and assigns.

11.17. **No Joint Venture or Partnership.** The parties agree that they are independent parties contracting together, and that nothing contained herein is to be construed as making the parties joint venturers or partners.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized officers on the day and year first above written.

**FOR: SCHOOL**

By: 

__________________________

J. William Eley, M.D., M.P.H. Date

Executive Associate Dean for Medical Education and Student Affairs

**FOR: FACILITY**

By: ____________________________ Date

Name: ____________________________

Title: ____________________________
I, the undersigned Physical Therapy student, do hereby certify that I have read the general clinical education affiliation agreement developed by the Division of Physical Therapy, Emory University. I find this agreement to be acceptable and do hereby agree to the terms and conditions thereof. I hereby authorize School and Clinic to exchange the following information from my records in order to participate in clinical education experiences:

- prior education
- related education or clinical experiences
- academic and clinical performance
- health records contained in the Office of Medical Education and Student Affairs

I further certify that I have read the sections regarding the Clinical Education Site Selection Process for Part-time and Full-time Affiliations; Emory University School of Medicine, Division of Physical Therapy Policy on Criminal Background Check and Drug Screen; Emory University School of Medicine, Division of Physical Therapy Policy on Student Attendance/Absence During Clinical Affiliations; and the financial and transportation resources required to travel for clinical affiliations.

Signed this _________ day of ______________________, 20____

____________________________________
Physical Therapy Student

** Please return this signed/dated form to the file folder bearing your name, on the table next to the faculty mailboxes, in the Division of Physical Therapy, Suite 312; by July 6, 2012 at 5:00 p.m.**
Format for Individual Studies

DIRECTED STUDY GUIDE

DESCRIPTION

Directed Study provides the student with specialized learning experiences related to the student's program which are not available through formal course offerings. In that way, directed study complements course work rather than replacing or substituting for course work. The directed study should be completed in one semester the same as any other course.

Directed Study is planned, implemented and evaluated by the student and an appropriate advisor (may be physical therapy or non-physical therapy faculty).

PROCEDURE

The steps to be followed by the student in undertaking a Directed Study are as follows:

A. Prior to enrollment in the Course:

1. Identify an area of study of interest related to your program of study.
2. Determine the objectives you wish to accomplish through the study.
3. Make certain no courses are being offered through which the objectives could be accomplished.
4. Consult your faculty advisor
   a. regarding the feasibility of the study
   b. for suggestions for a Directed Study Advisor
5. Faculty advisor will make arrangements for initial contact with the potential directed study advisor in consultation with the clinical education coordinator if necessary.
6. Finalize the directed study objectives, the study plan, and the number of credits, with the approval of the directed study advisor.
7. Submit two typewritten copies of the directed study proposal, both to the directed study advisor, if that person is an in-house faculty member. If not, one copy is submitted to the directed study advisor and one copy to the faculty advisor.
8. The directed study advisor and/or the student presents the proposal to the Associate Director for review.

B. Enroll

C. Conduct the Directed Study as planned

D. Evaluation - Submit a final written report to the directed study advisor no later than one week after the end of the directed study. Use the format for FINAL WRITTEN REPORT OF DIRECTED STUDY for necessary inclusions in the report. Any products of the Directed Study should be included. All materials should be in duplicate. If the directed study advisor is not in-house faculty, one copy is submitted to the faculty advisor. The directed study advisor will be responsible for giving the final evaluation conference and grade. Also, the directed study advisor is responsible for presenting a report to the Associate Director.
OUTLINE FOR DIRECTED STUDY PROPOSAL

The following should be included in the Proposal for Directed Study:

Name of Student

Name of Advisor of Directed Study

1. Title of Directed Study

2. Credit Hours*

3. Overall Objectives
   a. sub-objectives

4. Plan for carrying out the Directed Study
   a. activities of student
   b. activities of advisor

5. Materials and/or resources needed

6. Evaluation
   a. method of evaluation
   b. criteria, if not stated in sub-objectives

7. Statement of the relationship of the Directed Study to the student's overall program of study.

*Credit Hours are determined with the following formula and should be agreed upon with the advisor according to the proposed amount of time and effort the study will require:

1 hour credit is equal to one contact hour per week with two hours outside preparation for each contact hour.
FORMAT FOR FINAL WRITTEN REPORT
OF DIRECTED STUDY

Student _______________________________ Date _______________________________

Advisor _______________________________ Title _______________________________

Credit Hours ____________

Title of Directed Study ___________________________________________________

I. Overall Objective
   a. Summary of the accomplishments achieved in the study and extent of achievement of objectives and criteria.

II. Conclusions and/or Recommendations

III. Negotiated Grade

IV. Materials or Products of the Directed Study, a copy to be provided to the Directed Study or faculty advisor, as per the Directed Study guide.
GUIDE FOR
READINGS IN PHYSICAL THERAPY

DESCRIPTION

Readings in Physical Therapy provides the student with an opportunity for in-depth review, critique and synthesis of current literature beyond readings available through formal course offerings. In that way, the Readings course contributes to development of expertise related to the student's specific program of study. Also, the Readings course is intended to complement rather than replace or serve as a substitute for existing courses. Readings should be completed in one semester just as any other course.

The student and an appropriate advisor (physical therapy or non-physical therapy faculty) plan, implement and evaluate the Readings course.

PROCEDURE

The steps to be followed by the student in undertaking Readings in Physical Therapy are as follows:

A. Prior to enrollment in the course:
   1. Identify an area of study of interest related to your program of study.
   2. Determine the objectives you wish to accomplish through the study.
   3. Make certain no courses are being offered through which the objectives could be accomplished.
   4. Consult your faculty advisor
      a. regarding the feasibility of the study
      b. for suggestions for a Readings course advisor
   5. Faculty advisor will make arrangements for initial contact with the potential Readings advisor in consultation with the clinical education coordinator if necessary.
   6. Finalize the Readings course objectives, the study plan, and the number of credits, with the approval of the Readings advisor.
   7. Submit two copies of the Readings course proposal, both to the Readings advisor, if that person is an in-house faculty member. If not, one copy is submitted to the Readings advisor and one copy to the faculty advisor.
   8. The Readings advisor and/or the student presents the proposal to the Associate Director for review.

B. Enroll

C. Conduct

D. Evaluation - Submit a final written evaluation (see outline) of the Readings course to the Readings advisor no later than one week after the completion of the course. Any products of the course should be included. All materials should be in duplicate. If the Readings advisor is not in-house faculty, one copy is submitted to the faculty advisor. The Readings advisor will be responsible for giving the final evaluation conference and grade. The report and products should be submitted to the Associate Director.
OUTLINE FOR PROPOSAL FOR READINGS IN PHYSICAL THERAPY

The following should be included in the Proposal for a Readings course:

Name of student

Name of Advisor of Readings in Physical Therapy

1. Topics of the Readings course
2. Credit Hours*
3. Overall Objective  
   a. subobjectives
4. Plan for carrying out the Readings  
   a. activities of student  
   b. activities of advisor
5. Materials and/or resources needed
6. Evaluation  
   a. method of evaluation  
   b. criteria, if not stated in subobjectives
7. Statement of the relationship of the Readings to the student's overall program of study.

*Credit hours are determined with the following formula and should be agreed upon with the advisor according to the proposed amount of the time and effort the study will require:

One hour credit is equal to one contact hour per week with two hours outside preparation for each credit hour.

FORMAT FOR FINAL WRITTEN REPORT  
OF THE READINGS IN PHYSICAL THERAPY

Student _______________________________________ Date ____________________________________

Advisor ____________________________________ Title _____________________________

Credit Hours ____________

Title of Readings ______________________________________________________________

I. Overall Objective  
   a. Summary of the accomplishments achieved in the Readings and extent of the achievement of objectives and criteria.

II. Conclusions and/or Recommendations

III. Negotiated Grade

IV. Materials or Products of the Readings study, a copy to be provided to the Readings or faculty advisor, as per the Readings guide.
Credit Hours: 3
Advisor: To Be Negotiated
Coordinator:

Course Description:
The Preceptorship is a practical learning experience that allows participation in the teaching-learning process in a formal educational setting. The student enrolling in a Preceptorship selects a course in the entry-level program in which he/she would like to assist in teaching. A list of possible courses is provided to the student. The experience may include participation in leading classroom discussion, in supervising classrooms and/or clinical laboratories, in evaluation of student performance and in preparation for classes.

Course Objective:
Given a content area of interest and of expertise, the student will participate in teaching a course in the physical therapy entry level educational program, including:

a. implementing the teaching-learning process in classroom, clinical, and/or tutorial learning experiences:
   1. according to the Criteria for the Teaching-Learning Process
   2. consistent with the objectives for each class
   3. with accuracy of content

b. evaluating student performance on written and/or practical examinations:
   1. according to specified format
   2. according to specified criteria
   3. with a pre-specified level of reliability

c. incorporating the criteria for Interpersonal Relations in all interactions with:
   1. students
   2. staff
   3. faculty

d. assisting in administrative coordination of the course including:
   1. developing, scheduling and maintaining instructional resources, such as case histories, patients, audiovisual equipment
   2. complying with the schedule for the course and for the Preceptorship
   3. observing the dress code

Texts:
Text requirements are a function of the course in which the Preceptorship is done.

Evaluation:
Weight of objectives consistent with objectives of each class.

A grade of 80-89 equals a B. A grade of 90-100 equals an A.
5. Internet and Scholarship Information
Internet:

The internet offers a world of information to you. You can access the world wide web through Emory computer to find sites relative to physical therapy for professional information and to specific disease processes for academic information. Below are web site addresses for your information:

- APTA: http://www.apta.org/
- Disability: http://info.lut.ac.uk/research/paad/
- Occupational Health: http://www.ergoweb.com/resources
- Health Sciences: http://www.med.virginia.edu/
- Financial Aid: http://www.finaid.org/

LISTSERV’s are a way for you to interact with colleagues around the world. A listserv is a discussion group organized around a topic. To become a participant, you must subscribe to the list. After you have subscribed, messages appear in your e-mail box and you may post messages to the group through the e-mail of the list’s address. If you sign up to an electronic list, you will receive postings from other people on the list. The postings offer information and pose questions. Lists which may be interesting to you include:

- BIOMECH-L: listserv@nic.surfnet.nl
- BRAIN-L: listserv@mcgill1.bitnet
- DOWN-SYN: listserv@vm1.nodak.edu
- MOBILITY: listserv@sjuvm.bitnet
- MSLIST-L: listserv@technion.ac.il.@um.tau.ac.il
- NEURO: listserv@emgmhs.cmg.edu
- PARKINSN: listserv@um.utcc.utoronto.ca
- PHYSIO: mailbase@mailbase.ac.uk
- SOREHAND: listserv@ubvm.cc.buffalo.edu
- STROKE-L: listserv@uky.edu
- TBI-SPRT: listserv@sjuvm.stjohns.edu
- NEUROMUS: neuromus@sjuvm.stjohns.edu
- Pther-L: listserv@vm.usc.ualberta.ca
- PTEDUC: pteduc-request@estel.uindy.edu
To subscribe to a list, send a message to the address listed above. Leave the subject line blank. The message you enter should read:

```
SUBSCRIBE [NAME OF LIST]
YOUR FIRST NAME     YOUR LAST NAME
```

**Scholarship and Loans Information:**

You may find scholarship information on the world wide web. The APTA site offers information. You may find independent groups offering scholarships to health care professionals with an interest in a specific diagnosis.

**Emory University:** If you have applied for and received financial aid from Emory University, then you have been assigned a specific financial counselor. That is the person you should contact first with questions about Emory related loans and scholarships.

The person who oversees the loans and scholarships of the Academic Health Professional Programs is Michael Behler and his email address is mbehler@emory.edu

The Doctor of Physical Therapy Program has a large number of graduate assistantships that are available to the DPT II and III students.

**APTA Service Center**
800/999-2782, ext 3395

**APTA Department of Education** 800/999-2782, ext 3203
[www.apta.org/education](http://www.apta.org/education)
*Click here for Links to general scholarship Web sites*

**APTA Executive Office** 800/999-2782, ext 3252
For application and nomination procedures, please visit the [Web page](http://www.apta.org) for current year’s Honors and Awards Program nomination package.

- **Mary McMillan Scholarship Award**
  To acknowledge and honor outstanding physical therapy students. An award of $1,500.00 will be granted to each physical therapist assistant education student recipient selected, and $3,000.00 to each physical therapist professional education student recipient, (including entry-level doctor of physical therapy degree (DPT) student recipients), and each post-professional masters degree student recipient selected. Nominations for this award are made by the faculty.

**APTA Department of Minority/International Affairs**
800/999-2782, ext 8560

- **Minority Scholarship Award for Academic Excellence** - *Physical Therapist Students: This is an annual award offered to minority physical therapist students by the Physical Therapy Fund, a non-profit 501(c)(3) organization supported by the American Physical Therapy Association.*
• **Foundation for Physical Therapy**
  Primarily research awards
  800/999-2782, ext 8903
  [www.apta.org/Foundation](http://www.apta.org/Foundation)

• **Mary McMillan Doctoral Scholarships**
  A $5,000 award to assist physical therapists with outstanding potential for doctoral studies who are in the first year of graduate studies toward a doctorate. The total amount of funding may vary from year to year depending on available resources. For an application, please contact the Foundation at 800/875-1378, or e-mail foundation@apta.org.

**Daughters of the American Revolution**
**Occupational and Physical Therapy Scholarships**
1776 D St NW
Administration Bldg
Washington, DC 20006
(202) 879-3292
[www.dar.org/natsociety/edout_scholar.cfm](http://www.dar.org/natsociety/edout_scholar.cfm)

The Occupational/Physical Therapy Scholarship is awarded to students who are in financial need and have been accepted or are attending an accredited school of occupational or physical therapy (including art or music therapy). Affiliation or relationship with NSDAR is not necessary to qualify for these scholarships.

**National Association of American Business Clubs (AMBUCS)**
3315 North Main St
High Point, NC 27265
[www.ambucs.com/Ascholars.htm](http://www.ambucs.com/Ascholars.htm)

Students must be accepted in an accredited program by the appropriate health therapy profession authority in physical therapy, occupational therapy, speech language pathology, and hearing audiology. Assistant programs are not eligible. AMBUCS offers scholarships to students (U.S. citizens) in their junior/senior year in a bachelor's degree program, or a graduate program leading to a master's or doctoral degree. Awards range from $500 to $1,500 annually. There is one two-year award in the amount of $6,000. Approximately $225,000 is awarded annually. The application is to be filled out online.

**American College Scholarship Program**
American College Scholarship Program
American Educational Services
419 Lentz Court
Lansing, MI 48917
(517) 371-4619

A graduate student can apply for a one-time, nonrenewable grant of $500 to $2,000.

**Health Professions Program Indian Health Service**
Attn: Grants Management Branch
12300 Twinbrook Pkwy; Suite 605
Rockville, MD 20852
(301) 443-3396
FAX: (301) 443-4815

Provides financial support to students enrolled in health professions and allied health professions programs. Applicants must be high school graduates or the equivalent and be enrolled in a full-time
study program leading to a degree in a health-related professions school within the United States. Even though non-Indian students may apply for this program, the Indian Health Care Improvement Act (PL 94-437) requires that priority for the awards be given to Indian and Native Alaskan applicants.

Hispanic Scholarship Fund
http://www.hsf.net
HSF offers different scholarship programs for students of various educational backgrounds. All applicants must be U.S. citizens or legal permanent residents of Hispanic heritage.

American Academy of Physical Therapy
888-313-AAPT or 704-399-0301
Patrice R. Dixon, P.T., CLT
2015 Crestdale Drive
Charlotte, NC
The American Academy of Physical Therapy annually awards an educational scholarship to a minority student enrolled in an accredited Physical Therapy program. The awards are $1,000. Check with them for application deadline.
Applicant must be currently enrolled in an entry-level degree PT program accredited by the American Physical Therapy Association.

Many students have been successful obtaining scholarship funds through individual institutions. If you have an idea where you would like to practice for the first two years following graduation, you can call the institution to inquire about a financial assistance program. Many places will offer two years of tuition in exchange for two or three years of employment. These offers are very generous, but not without drawbacks. First, be certain that you would be interested in living in the area in question and in that particular area of practice. Secondly, be cautious of an institution that requests more than 2.5 years employment. Remember that after beginning employment you may decide to pursue another opportunity. Don’t be tied down for too long. Also, be aware of the stipulations of pay back if you choose not to follow the agreement. Some contracts state the loan will be repaid at 20% interest!
6. Guidelines for Student and Employer Contract
GUIDELINES FOR STUDENT AND EMPLOYER CONTRACTS

These guidelines are designed to assist the student/new graduate in negotiating appropriate agreements that provide financial assistance in exchange for a promise of future employment.

1. A student's/new graduate's interests are best served by obtaining appropriate counsel prior to signing any agreement.

2. Any employment agreement should include and set forth in clear language:
   A) A statement that the agreement must not interfere with the process and planning of the student's education.
   B) Fair and reasonable terms for any repayment provisions to the employer of the student's/new graduate's education expenses.
   C) Specific conditions under which the student/new graduate may choose to leave employment without penalty (eg, change of ownership).
   D) Specific conditions under which repayment of part or all of the education-related expenses may be required (eg, personal choice).
   E) A statement that if the student's/new graduate's employment is terminated by the employer, repayment of any employer-incurred education-related expenses should not be required unless the termination is for cause (eg, poor performance).
   F) Reasonable restrictions in duration and geographic extent of any non-compete clause, if one is incorporated in the agreement.

3. The student's/new graduate's interests also are best served by:
   A) Obtaining full disclosure of ownership of the practice.
   B) Determining whether the practice is involved in any situation in which a referring practitioner can profit as a result of referring patients/clients for physical therapy.
   C) Reviewing the American Physical Therapy Association policies on opposition to referral for profit (Ethical and Legal Considerations for Clinical Education, Financial Considerations in Practice, Opposition to Physician Ownership of Physical Therapy Services, and Referral Relationships).
   D) Understanding that the student's/new graduate's educational program is not a party to the said agreement and is not bound by the terms of the agreement.
   E) Understanding potential tax obligations for deferred income that may be incurred upon graduation or during employment as a result of the employer carrying out its obligation under the agreement.
   F) Discussing the employer's policies regarding access to mentoring and regular collegial relationships and resources for professional growth and development.
   G) Reviewing other applicable Association documents including American Physical Therapy Association Considerations for Practice Opportunities and Professional Development.

*From the House of Delegates, American Physical Therapy Association. The document is presented as a resource of students.*
7. Academic Calendar for 2012-2015
TENTATIVE Academic Calendar***

June 6th, 7th, 8th 2012
June 11, 2012
July 4, 2012 (Wed)
August 13th(M)- Aug 20th (Mon)
August 21(Tu)- August 26th, 2012
August 27, 2012
September 03, 2012
November 21-25, 2012
December 03 (Mon)- 11(Tu) 2012
December 12 - January 6, 2013

Registration and Orientation
Summer semester classes begin
Independence Day Holiday
Exams
Break
Fall Semester begins
Labor Day Holiday
Thanksgiving break
Exam Week for Fall Semester
Winter Break

January 7, (M) 2013
January 21, 2013
To be determined

April 15-26, 2013
April 29- May 3rd , 2013
May 4th- 13th, 2013
May 14, 2013 (Tuesday)
May 27th , 2013
July 4, 2013 (TH)

General Medical Complex begins
Martin Luther King Holiday
Spring break

General Medical Clinical Block
Exams
Break
Musculoskeletal Rehab begins
Memorial Day Holiday
Independence Day Holiday

Musculoskel Rehab Clinical Block
Exams
Break
Neuro Rehab begins
Labor Day
Fall Break
Thanksgiving break

Neuro Rehab Clinical Block
Exams
Winter Break

July 29-Aug 9, 2013
August 12-16, 2013
August 17-20, 2013
August 21, 2013
September 2, 2013
To be determined
November 27-Dec 1,2013
Dec 2nd-Dec 13th, 2013
December 16-20, 2013
December 21 -January 05, 2014

Clinical Affiliation I
Travel Week
Clinical Affiliation □□
Travel Week
Clinical Affiliation □□□
Travel Week
Fall semester starts
Labor Day
Thanksgiving (nov 27)
Exam week
Winter Break

January 6- March 14, 2014
March 15-23, 2014
March 24-May 30, 2014
May 31-June 8, 2014
June 9-August 15, 2014
August 16-24, 2014
August 25- 2014
September 1, 2014
November 26-nov 30th, 2014
Dec 8th-Dec 12th 2014
December 13- Jan 12, 2015

January 12 - May 11, 2015
February 6 2015
April 28 –May 8th 2015
May 11, 2015

Spring semester
Degree Application Deadline
Exam period
Graduation

*** IMPORTANT: This schedule is TENTATIVE. Dates are subject to change.
# Program Events

<table>
<thead>
<tr>
<th>Month</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>August</td>
<td>Welcome Back Party</td>
</tr>
<tr>
<td></td>
<td>The DPT III students return from their long term affiliations. To</td>
</tr>
<tr>
<td></td>
<td>celebrate we have a party with all three classes and faculty</td>
</tr>
<tr>
<td></td>
<td>included! It’s a great time for the new DPT I students and DPT III</td>
</tr>
<tr>
<td></td>
<td>students to meet and for everyone to catch up with each other.</td>
</tr>
<tr>
<td>September</td>
<td>White Coat Ceremony</td>
</tr>
<tr>
<td></td>
<td>Yes, you have made it through the first semester and we will</td>
</tr>
<tr>
<td></td>
<td>celebrate by formally “Investing” you with your clinical white coat!</td>
</tr>
<tr>
<td></td>
<td>The ceremony marks the students’ transition from the study of</td>
</tr>
<tr>
<td></td>
<td>preclinical to clinical health sciences and also initiates them in</td>
</tr>
<tr>
<td></td>
<td>physical therapy ethics.</td>
</tr>
<tr>
<td></td>
<td>Service of Gratitude</td>
</tr>
<tr>
<td></td>
<td>After a semester of learning about human anatomy through</td>
</tr>
<tr>
<td></td>
<td>dissection and exploration, the first year DPT students at Emory</td>
</tr>
<tr>
<td></td>
<td>hold a Ceremony of Gratitude to honor the people who donated their</td>
</tr>
<tr>
<td></td>
<td>bodies for study. It is a simple ceremony and takes a form each</td>
</tr>
<tr>
<td></td>
<td>first year class wishes it to take. The Ceremony is meant to</td>
</tr>
<tr>
<td></td>
<td>celebrate all aspects of life and so it is always different,</td>
</tr>
<tr>
<td></td>
<td>always surprising, at times joyful and at times reflective. This</td>
</tr>
<tr>
<td></td>
<td>year, with song, poem, piano, dancing, and yes, even with</td>
</tr>
<tr>
<td></td>
<td>struggles with juggling to music and with making a yo-yo fly, the</td>
</tr>
<tr>
<td></td>
<td>students brought their talents, humor, love and their thanks to this</td>
</tr>
<tr>
<td></td>
<td>Ceremony.</td>
</tr>
<tr>
<td>October</td>
<td>South Georgia Farmworker Health Program</td>
</tr>
<tr>
<td></td>
<td>Annual DPT 5k fitness Walk/Run</td>
</tr>
<tr>
<td></td>
<td>As therapists, we often advise our clients about the need to engage</td>
</tr>
<tr>
<td></td>
<td>in regular exercises – for cardiovascular health, bone strength,</td>
</tr>
<tr>
<td></td>
<td>stress reduction, etc. We also need to be aware of and careful of</td>
</tr>
<tr>
<td></td>
<td>our own health, and not just because we are role models. We take an</td>
</tr>
<tr>
<td></td>
<td>afternoon to do a 5k run/walk in Lullwater Park, followed by lunch,</td>
</tr>
<tr>
<td></td>
<td>as a way of reminding us of the need to take care of ourselves and</td>
</tr>
<tr>
<td></td>
<td>have fun!</td>
</tr>
<tr>
<td>November</td>
<td>DPT II planning for the Foundation for PT Research Fund raising</td>
</tr>
<tr>
<td></td>
<td>events!!!!</td>
</tr>
<tr>
<td>February</td>
<td>Job Fair - Organized by DPT students</td>
</tr>
<tr>
<td></td>
<td>APTA - Combined Sections Meeting/Conference</td>
</tr>
<tr>
<td>March</td>
<td>Georgia Publix Marathon, Half Marathon and EXPO</td>
</tr>
<tr>
<td>May</td>
<td>Scientific Poster Presentations</td>
</tr>
<tr>
<td></td>
<td>Graduation</td>
</tr>
<tr>
<td>May-June</td>
<td>Special Olympics of Georgia - 1(^{st}) weekend in June</td>
</tr>
<tr>
<td></td>
<td>This event is held annually on the Emory Campus and is a wonderful</td>
</tr>
<tr>
<td></td>
<td>opportunity for all of us to volunteer or just root for these</td>
</tr>
<tr>
<td></td>
<td>athletes.</td>
</tr>
<tr>
<td>June</td>
<td>South Georgia Farmworker Health Program</td>
</tr>
</tbody>
</table>
CONSENT TO RELEASE OF EDUCATIONAL RECORDS

It is anticipated that the undersigned Student will participate in a Clinical Education Program at one or more of the Clinical Facilities listed in the Doctor of Physical Therapy Program Orientation Manual which each Student receives at the beginning of his/her enrollment in the Physical Therapy Program at Emory. Such participation in Clinical Education is part of the Student’s Physical Therapy course work at Emory University. In order to enable Emory University and the Clinical Facility(ies) to evaluate the Student for participation in the Clinical Education Program and to monitor and evaluate the Student’s participation therein, the Student hereby consents to the exchange and release of the Student’s education records by and to instructors and administrators at the Clinical Facility(ies) and Emory University who are responsible for the Clinical Education Program.

The education records that are subject to his/her consent include grade reports, transcripts, evaluations, attendance reports, test results and records and results of conduct/disciplinary proceedings/investigations.

I consent to the foregoing release/exchange of my educational records and acknowledge receipt of above-referenced manual.

------------------------------------------------------------------------------------------------------------------
Signature                                                                                                               Name (Printed or Typed)
------------------------------------------------------------------------------------------------------------------
Date                                                                                                                        Address
10. Emory Physical Therapy Alumni Association (EPTAA)
Mission Statement

The purpose of the Emory Physical Therapy Alumni Association (EPTAA) is to foster a positive, dynamic, and ongoing relationship between alumni, faculty, and students. A goal of this organization is to establish a cohesive network of Emory graduates to assist the Doctor of Physical Therapy program in recruiting, fundraising, and support. The EPTAA will provide contacts to Emory alumni, current students, and potential applicants nationwide for dissemination of information about the Emory program, physical therapy in general, and to strengthen the Emory bond before, during, and after matriculation. A strong alumni association will reinforce the attributes and benefits of attaining a high caliber education at such a prestigious university.

Objectives

1. Establish an ongoing network of alumni throughout United States that includes:
   a. Regional representatives
   b. City representatives

2. Foster relationships with current students and serve as professional contacts and mentors.

3. Assist with fundraising to strengthen scholarship fund.

4. Assist with recruiting of prospective students via phone calls, email, individual meetings, and/or social gatherings.

5. Strengthen contact between alumni across the United States.

6. Improve communication between Doctor of Physical Therapy program and alumni.

7. Improve networking between alumni and between alumni and students for potential employment opportunities.
REGIONAL CONTACTS 2011
EPTAA

Southeast

Marty Bowden, MPT ’96 Email: martybowden@comcast.net
Alumni President

Beth Davis, DPT ’03 Email: lbda22@emory.edu
11. Form Acknowledging Reading of the Program Orientation Manual
I, ________________________________ have read the contents of the Program Orientation Manual. I understand the contents of the manual. I have read and understand the policies and procedures governing grading, promotions, academic ethics, and student conduct. Also, I have read the mechanisms available to me if I have any questions related to course content, grades, and specific course, clinical or program criteria necessary to continue as a student in good standing. In addition, I have read the official regulations that pertain to me in Campus Life and the Emory University School of Medicine Student Conduct Code document.

Date: ________________________________

Students' Signature: ________________________________

Advisor’s Signature: ________________________________
12. FORM ACKNOWLEDGING UNDERSTANDING OF THE HONOR CODE
I, ___________________________________________________________ have
Read and understand my responsibility under the Honor Code.

Date:  _______________________________________________________

Student’s Signature:  ___________________________________________